

ReAct Africa ANNUAL REPORT 2025



Advancing Africa's Fight Against AMR

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DIRECTOR STATEMENT



As 2025 concludes, ReAct Africa has strengthened its position as a trusted civil society partner advancing equitable and action-oriented responses to antimicrobial resistance (AMR) across Africa and beyond. In a year marked by fiscal constraints and competing global health priorities, our work demonstrates how targeted, partnership-driven investments can deliver measurable results at community, national, and global levels.

Regionally and globally, ReAct Africa strengthened its policy influence through strategic convenings and partnerships. A major milestone in 2025 was the signing of a Memorandum of Understanding with the WHO Regional Office for the Eastern Mediterranean (WHO EMRO). This partnership formalises collaboration on AMR advocacy, civil society engagement, and One Health implementation, expanding ReAct Africa's regional reach and reinforcing alignment with WHO-led priorities. The MoU positions ReAct Africa to support countries in translating global commitments into context-appropriate action, particularly through community and policy engagement. The ReAct Africa - South Centre Annual AMR Regional Conference expanded participation and visibility, serving as a key platform for African civil society and policymakers to engage with global AMR stakeholders on financing, governance, and implementation challenges. These engagements ensured that African perspectives informed high-level policy discussions.

At the national level, ReAct Africa achieved tangible progress in strengthening enabling environments for AMR action. The establishment of parliamentary caucuses in Zambia on AMR created new entry points for sustained political engagement, helping embed AMR within legislative agendas related to health, agriculture, and development. These caucuses represent an important step toward improved accountability, domestic financing, and oversight of National Action Plan implementation.

Our stewardship and health systems work continued to deliver results. Through programmes such as ASPIRE in Kenya and Zambia, healthcare workers were supported through digital applications to improve antimicrobial prescribing, strengthen infection prevention and control, and integrate stewardship into routine clinical practice.

These initiatives demonstrated that practical, context-sensitive approaches can strengthen health system resilience and reduce inappropriate antimicrobial use.

Its community-level impact remained a core strength. In 2025, ReAct Africa supported the development and dissemination of faith-based organization (FBO) guides on AMR, recognising the critical role of faith networks in shaping health behaviours and reaching underserved populations. These guides enabled faith leaders and institutions to integrate AMR and One Health messages into ongoing health and community programmes, significantly extending reach and reinforcing locally trusted pathways for behaviour change. Besides we continued to engage youth and children through our ongoing leadership programmes, One Health clubs and 'Maarifa Kids' project.

None of these achievements would have been possible without the continued support of our donors and partners. Flexible funding enabled ReAct Africa to respond to emerging opportunities, strengthen local leadership, and deliver strong value for money by leveraging partnerships rather than duplicating efforts. Looking ahead, ReAct Africa will focus on scaling proven approaches, deepening policy-to-practice linkages, and strengthening regional and global partnerships. With continued donor support, we are well positioned to contribute to more equitable, coherent, and sustainable AMR responses across Africa.

Professor Mirfin Mpundu
Co-founder & Executive Director
ReAct Africa



RAN AMR GOVERNANCE AND POLICY ENGAGEMENT

In 2025, the ReAct Africa Network (RAN) strengthened antimicrobial resistance (AMR) governance and policy engagement at national, regional, and global levels. The Network contributed to advancing transparency, accountability, and meaningful civil society engagement across multiple platforms by supporting the translation of post United Nations General Assembly (UNGA) commitments on AMR into actionable reforms in the Africa region.

Sustaining Political Momentum Post-UNGA

In 2025, the ReAct Africa Network (RAN) significantly strengthened its role as a convenor, technical partner, and governance catalyst in the fight against antimicrobial resistance (AMR) across national, regional, and global platforms. A major milestone was the signing of a Memorandum of Understanding with the World Health Organization Regional Office for the Eastern Mediterranean (WHO EMRO), which formalised collaboration on supporting implementation of AMR National Action Plans (NAPs), strengthening governance and accountability mechanisms, advancing antimicrobial stewardship (AMS) and infection prevention and control (IPC), and promoting equitable access to diagnostics and antimicrobials across the region.

In parallel, RAN consolidated and expanded strategic partnerships with key intergovernmental and international organizations, including the East, Central and Southern African Health Community (ECSA-HC) and WaterAid, fostering stronger regional collaboration, inter-sectoral coordination, and harmonisation of AMR responses. Along with one of its key partners, International Centre for Antimicrobial Resistance Solutions (ICARS), ReAct Africa participated in the Hamburg Sustainability Conference, 2025 at Hamburg, Germany and co-hosted and led a high-level roundtable on “Scaling Solutions and Financing for Antimicrobial Resistance Mitigation”. It brought together global health, development, government, and private sector leaders to advance practical, sustainable AMR



action. ReAct Africa provided an African perspective on integrating AMR into broader health and development agendas and helped to shape the [Hamburg Joint Statement on AMR](#), strengthening commitments to coordinated financing, One Health implementation, and locally relevant solutions. These partnerships enabled RAN to move beyond advocacy alone and actively shape regional policy processes, financing discussions, and accountability frameworks aligned with LMIC priorities and One Health principles.

At the national level, RAN played a catalytic role in embedding AMR within parliamentary systems, most notably through the establishment of Zambia’s Parliamentary Caucus on AMR. This milestone strengthened political ownership of AMR and institutionalized a One Health approach within legislative structures. The caucus mandate includes establishing an AMR secretariat, strengthening parliamentary oversight, advancing AMR-related legislation, and advocating for dedicated budgetary allocations. By anchoring AMR within parliamentary processes, RAN helped ensure continuity, transparency, and accountability beyond individual political terms.

This national innovation was subsequently elevated to the continental stage through platforms such as the Africa CDC World Antimicrobial Awareness Week (WAAW) Conference, positioning Zambia’s parliamentary model as a replicable best practice for other African Union Member States. This demonstrated RAN’s ability to translate country-level governance solutions into regional learning and south-to-south exchange.

Regionally and globally, RAN amplified African and LMIC voices in high-level AMR policy spaces by contributing technical expertise to consultations, ministerial and parliamentary processes, and global initiatives. These included

shaping emerging global governance mechanisms such as the Independent Panel for Evidence against AMR (IPEA), contributing to the revision of the Global Action Plan on AMR, and engaging as co-chair and member of the WHO Civil Society Task Force on AMR. RAN also co-hosted high-level policy dialogues, convened pan-African AMR webinar series, and facilitated peer-learning platforms focused on AMR financing, governance, and NAP accountability, strengthening knowledge translation across diverse stakeholder groups.

Through sustained, multi-level engagement – as organiser, co-host, technical contributor, and strategic partner – RAN

helped translate global political commitments into actionable, accountable governance frameworks, fostered peer learning across countries and regions, and ensured that equity, One Health, and LMIC realities remained central to AMR policy discourse and implementation.

The **TABLE 1** below summarises RAN's engagements in 2025, disaggregated by national, regional, and global levels, highlighting the scope, nature, and strategic value of these contributions.



TABLE 1: ReAct Africa Policy/Governance Engagements

Category of Engagement	Number	Examples Names of Engagements
Organised by ReAct Africa	12	Parliamentary Pre-Conference Engagement (Zambia); Capacity Building Workshop for Parliamentary Clerks; Workshop for the Development of AMR Parliamentary Caucus; AMR Pan African Webinar Series covering UNGA commitments, financing, One Health, fragile settings, innovation, and accountability (6 sessions); Fleming Fund Fellows Peer-Learning Workshop; Afro specific TrACCS 2025 analysis webinar
Co-hosted by ReAct Africa	3	Hamburg Sustainability Conference AMR Roundtable (with ICARS); ECSA-HC AMR Pre-Conference Meeting (with ICARS & ECSA-HC); West Africa & Francophone Networking Dinner
Meetings with substantive technical contribution by ReAct Africa	15	TANDEM-ABX Global Consultation, Copenhagen (panel contribution); Cefiderocol Introduction Planning (Kenya); R'OHOKET Regional Workshop (presentation on ReAct's work); Gaza AMR Webinar Series (technical presentations); WHO-WIPO-WTO Trilateral Symposium (panel contribution); Continental WAAW Conference (panel contributions; presentation on ReAct's work; parliamentary engagement); ASLM Special Convention on Diagnostics 2025 (technical presentation) Trilateral WHO-WIPO-WTO Symposium (panel contribution); IPEA consultations (written and oral submissions); GAP-AMR revision consultations; OHPRA Biannual Meeting; Wellcome ID CSO CoP webinar (final session); AU Framework Review Meeting; AU Access to Countermeasures Meeting
Partnerships strengthened or formed	10	Partnership with WHO EMRO, WHO CSO Task Force on AMR (co-chair role), The South Centre, ICARS, LifeArc, ECSA-HC and Water Aid; Biomerieux collaboration; R'OHOKET consortium linkage; Fleming Initiative AMR Education platform
Knowledge products and guidance supported	5	AMR Parliamentary Caucus ToR; Regional AMR & IPC implementation guides (ECSA-HC); AMR education consensus draft (Fleming Initiative)

In conclusion, ReAct Africa engaged in more than 40 governance related engagements across national, regional, and global platforms. Its role spanned convenor, co-host, technical contributor, and governance architect, with a strong emphasis on translating political commitments into accountable, LMIC-responsive systems and embedding civil society and parliamentary leadership within AMR governance.

REACT AFRICA - SOUTH CENTRE ANNUAL AMR REGIONAL CONFERENCE



The 10th ReAct Africa and South Centre Annual Conference convened over 200 delegates from 43 countries, bringing together government representatives, regional bodies, health professionals, civil society, youth, faith groups, private sector innovators, and media. Under the theme ‘From Global to Local Action: Operationalizing AMR Commitments in Africa & Beyond’, the conference translated global and regional AMR commitments into practical, locally relevant strategies for low- and middle-income countries. Through high-level remarks, technical panels, and breakout discussions, participants shared experiences and best practices on antimicrobial stewardship, diagnostics, digital tools, and One Health approaches, while exploring the social, environmental, and economic drivers of AMR.

The conference produced concrete recommendations to strengthen Africa’s AMR response, emphasizing country-led implementation, measurable targets, sustainable domestic financing, and equity-driven interventions on the backdrop of shrinking global health financing. It showcased innovative solutions, including digital health platforms, AI-supported decision-making tools, and climate-resilient approaches to mitigate environmental AMR pathways, bridging the gap between policy commitments and actionable practices on the ground.



The conference, led by ReAct Africa, strengthened cross-sector collaboration, regional learning, and accountability, reinforcing Africa’s leadership in translating global AMR commitments into concrete national and subnational action. By strategically convening a diverse, multidisciplinary audience, ReAct Africa advanced knowledge exchange, elevated the contributions of youth and civil society, and supported the uptake of evidence-based, contextually tailored interventions to reduce AMR-related health and economic burdens across the continent.



KEY CONFERENCE TAKEAWAYS

- Embed AMR action in country leadership and must be locally led, context-specific, and integrated within existing health systems and multisectoral coordination structures.
- Secure sustainable financing through dedicated domestic AMR budget lines and integration into national development and health security frameworks
- Set measurable targets that align with global goals and establish transparent mechanisms to track progress.
- Strengthen core One Health systems by scaling investments in antimicrobial stewardship, integrated surveillance, and infection prevention and control across human, animal, and environmental sectors
- Embed equity in AMR responses by prioritizing equitable access and inclusion, particularly for women, children, and populations affected by conflict or displacement, using gender-responsive approaches.
- Invest in people and communities by strengthening the health workforce and empowering youth, civil society, and local actors
- Leverage innovation for stewardship by tapping into digital and AI-enabled tools
- Strengthen regional and South - South collaboration for cross-country learning, enhancing regional coordination and harmonising AMR responses.

ADVANCING ANTIMICROBIAL STEWARDSHIP

For over a decade, ReAct Africa has provided technical assistance to countries and organizations, championing AMS across the region. Through capacity building, policy support, and innovative strategies, we have empowered stakeholders to implement sustainable AMS programs at the national and facility levels. From advancing NAPs to fostering community awareness and health system strengthening, our collaborative efforts have significantly enhanced AMS practices, ensuring the responsible use of antimicrobials in the region.

ASPIRE PROJECT

Antibiotic Stewardship Programme through Innovation, Research, and Education (ASPIRE) project is our flagship program, which leverages our experience in implementing stewardship initiatives in the region and aims to optimise antibiotic use in Zambia and Kenya by integrating innovative digital solutions with targeted stewardship interventions. ASPIRE focuses on empowering healthcare professionals with the knowledge and tools to implement AMS principles effectively, leading to improved patient care and a reduction in AMR. It did this by generating economic and behavioural evidence and accelerating the uptake of digital



solutions. Implemented by ReAct Africa with support from LifeArc, ASPIRE demonstrated how targeted, evidence-driven investments can translate global AMR commitments into practical, facility-level and system-wide improvements in low- and middle-income country settings. ASPIRE strengthened stewardship capacity across major referral and tertiary hospitals by training over 300 healthcare workers from multiple professional cadres in rational antibiotic use, infection prevention and control, diagnostics, and stewardship principles. Training was grounded in real-world facility data and informed by behavioural science, ensuring that improvements addressed not only knowledge gaps but also the systemic drivers of prescribing practices. Stewardship was embedded into routine clinical care through multidisciplinary ward rounds, real-time feedback to prescribers, and strengthened adherence to treatment guidelines, shifting AMS from theory to daily practice. A major achievement was the successful piloting and adoption of digital stewardship tools, including clinical decision-support applications, chatbots, and structured use review tools. These innovations enabled real-time access to treatment guidance, improved documentation of antibiotic use, supported hundreds of patient case reviews, and strengthened facility-level reporting and audit capacity (Table 2).

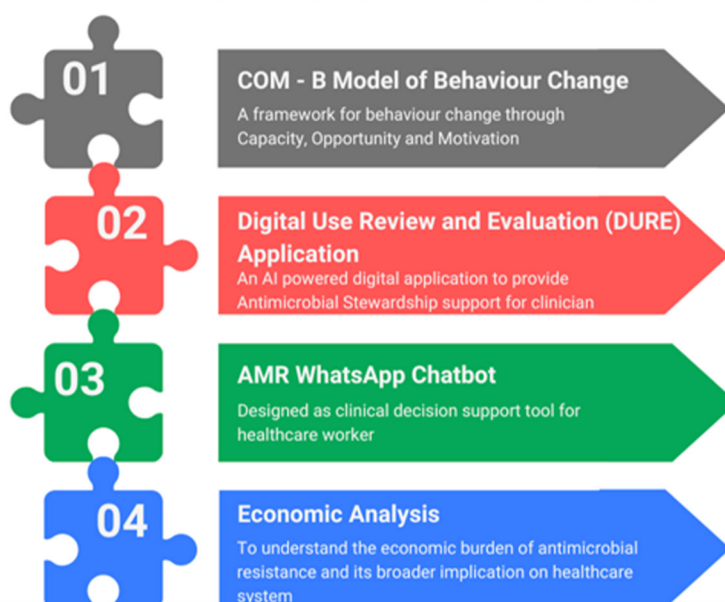
By systematically disseminating findings to hospital leadership, health authorities, and frontline providers, the project strengthened institutional ownership and the economic case for sustained AMS investment. High-level engagement and regional learning platforms reinforced national ownership and consensus around scalable, locally appropriate digital solutions.

Despite persistent systemic challenges, ASPIRE delivered measurable progress in stewardship capacity, governance, and digital readiness. The project provides a strong, replicable model for integrating behavioural science, economic evidence, and digital innovation into national AMR action, offering countries a high-impact pathway to strengthening health systems and safeguarding antibiotic effectiveness.

EVIDENCE GENERATED THROUGH BASELINE STUDIES

- Poorly functional antimicrobial stewardship programs across assessed facilities
- Over 90 percent patients received empirical antibiotic treatment despite the availability of diagnostic facilities.
- Third generation Cephalosporins are used frequently, indicating sub optimal prescription practices.
- Annual financial losses resulting from inappropriate and incorrect antibiotic use were estimated to range between USD 4,500 and USD 1,635,050.
- Limited documentation and monitoring of antibiotic use

Four main ASPIRE interventions



LifeArc Visit to Lusaka Zambia, October 2025

TABLE 2: COM-B Mapping: ASPIRE AMS Interventions.

COM-B Component	Behavioural Barrier Addressed	Key ASPIRE Interventions	Quantified Outputs
Capability (Knowledge and Skills)	Limited AMS knowledge and understanding across cadres	Multidisciplinary AMS training covering AMR, AMS, IPC, and diagnostic stewardship	Over 300 healthcare workers trained across Kenya and Zambia (multiple cadres)
Capability	Gaps in practical stewardship skills and data use	Pharmacy audit & antibiotic consumption training (DOT, DDD, surgical prophylaxis audits)	1 regional hybrid workshop; 40 participants (Kenya & Zambia)
Capability	Inconsistent practice among rotating interns	Internship-specific AMS & diagnostic stewardship protocols	Protocols developed and institutionalized in teaching hospitals
Capability	Poor documentation of prescribing decisions	Standardised antibiotic specific treatment sheets	Adopted in 2 Kenyan hospitals
Opportunity (Physical & Social Environment)	No structured time for stewardship	Weekly multidisciplinary AMS ward rounds	Weekly rounds conducted throughout 2025 in 4 referral hospitals
Opportunity	Limited access to guidance at point of care	Digital AMS tools: AMR Chatbot, DURE application	More than 200 health care workers engaged at tool launches; Ongoing use of the tools during weekly ward rounds
Opportunity	Weak institutional ownership	Appointment of AMS champions with formal terms of reference in place; AMS action plans & Gantt charts	More than 20 AMS champions appointed across facilities
Opportunity	Procurement-driven inappropriate prescribing	Medicines management cycle workshop (forecasting, procurement, inventory)	1 two-day workshop (Kenya); departmental procurement staff trained
Motivation (Beliefs & Norms)	Fear-based or habitual prescribing	Non-punitive feedback during rounds	Integrated into all major AMS trainings
Motivation	Low awareness of consequences of misuse	Presentation of local misuse, resistance, and cost data	Findings from the baseline disseminated facility-wide
Motivation	Limited professional recognition	Conference presentations and peer learning (RAN, IPNET)	Multiple national & regional presentations by facility teams
Motivation	Limited patient engagement	World Antimicrobial Awareness Week activities using chatbot & IEC materials	More than 400 patients reached in Kenya

SUPPORTING AMR NATIONAL ACTION PLAN IMPLEMENTATION

In 2025, ReAct Africa supported the development, revision, and implementation of National Action Plans (NAPs) on antimicrobial resistance (AMR) by working with governments and partners to translate policy commitments into coordinated, multisectoral action through a One Health approach.

In Zambia, ReAct Africa collaborated closely with the Zambia National Public Health Institute and the Ministry of Health, supporting the dual launch of the revised National Action Plan on AMR and Zambia's first Antimicrobial Stewardship Guidelines. This milestone strengthened national stewardship systems and advanced responsible antimicrobial use in the country. It also demonstrated the value of long-term technical partnership in advancing NAP priorities from policy to implementation. ReAct Africa supported NAP implementation in Kenya through youth engagement, policy processes, and technical planning. In collaboration with the National Antimicrobial Stewardship Interagency Committee (NASIC) Youth Committee, ReAct Africa supported the Youth-in-Action Challenge, amplifying youth-led AMR awareness and prevention activities and strengthening youth participation in NAP accountability. ReAct Africa also provided technical input into Ministry of Health planning on the early introduction of cefiderocol in selected tertiary hospitals, ensuring access was aligned with strong antimicrobial stewardship safeguards. Additionally, ReAct Africa contributed to the Smart Choice Process Workshop, supporting One Health stakeholders to prioritize actions under Kenya's AMR NAP (2023–2027), with outcomes informing the NAP mid-term review.



Launch of Zambia's National Action Plan on AMR 2.0 and Zambia's First National Stewardship Guidelines, Lusaka Zambia, June 2025

Beyond Africa, ReAct Africa partnered with WHO EMRO to support the development of AMR National Action Plans (NAPs) 2.0 in the region. In Pakistan, ReAct Africa provided technical support to the development of the AMR NAP 2024–2028, contributing to the definition of strategic priorities, governance arrangements, and a robust monitoring and evaluation framework informed by previous AMR frameworks and Joint External Evaluations. In Iraq, ReAct Africa prepared the first draft of the updated AMR NAP 2.0 and facilitated multisectoral consultations with government ministries, WHO, academia, civil society, and partners, resulting in a clear implementation roadmap and strengthened monitoring and evaluation framework.

Overall, ReAct Africa's engagement across NAP development, prioritization, and implementation strengthened national ownership and contributed to more coordinated, inclusive, and actionable AMR responses.

MOBILIZING COMMUNITIES FOR COLLECTIVE ACTION

ReAct Africa engages faith-based organizations, community leaders, farmers, youth, civil societies and the public through targeted capacity building and community-based action on antimicrobial resistance (AMR). This bottom-up approach strengthens understanding of AMR and responsible antibiotic use, integrates community voices into national action plans, and complements top-down AMR strategies to deliver more effective and sustainable outcomes.

Maarifa Kids Project

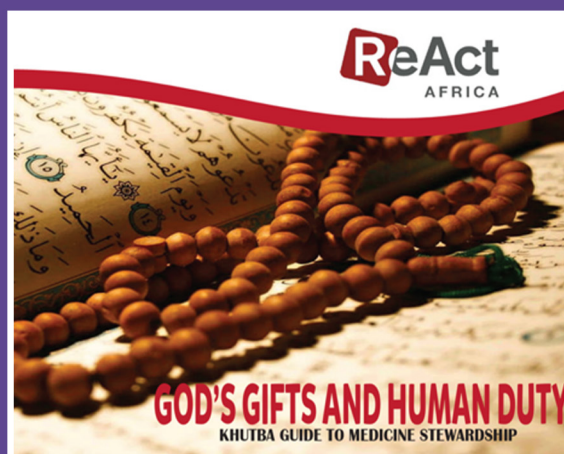
To promote effective child engagement on antimicrobial resistance (AMR), ReAct Africa developed the Maarifa Kids project, adapting the successful Alforja Educative Initiative from Latin America. Maarifa, meaning "knowledge" in Swahili, reflects the project's focus on building early understanding of antibiotics and their responsible use. The project uses a child-centred, participatory, child-to-child learning approach that positions children as agents of behaviour change within schools, families, and communities.



Maarifa Kids Engagement

worship settings, linking everyday health behaviours to values of stewardship, care for others, and responsibility to future generations. The guides also emphasise collective responsibility, framing AMR not only as a medical issue but as a shared ethical challenge requiring community-wide action.

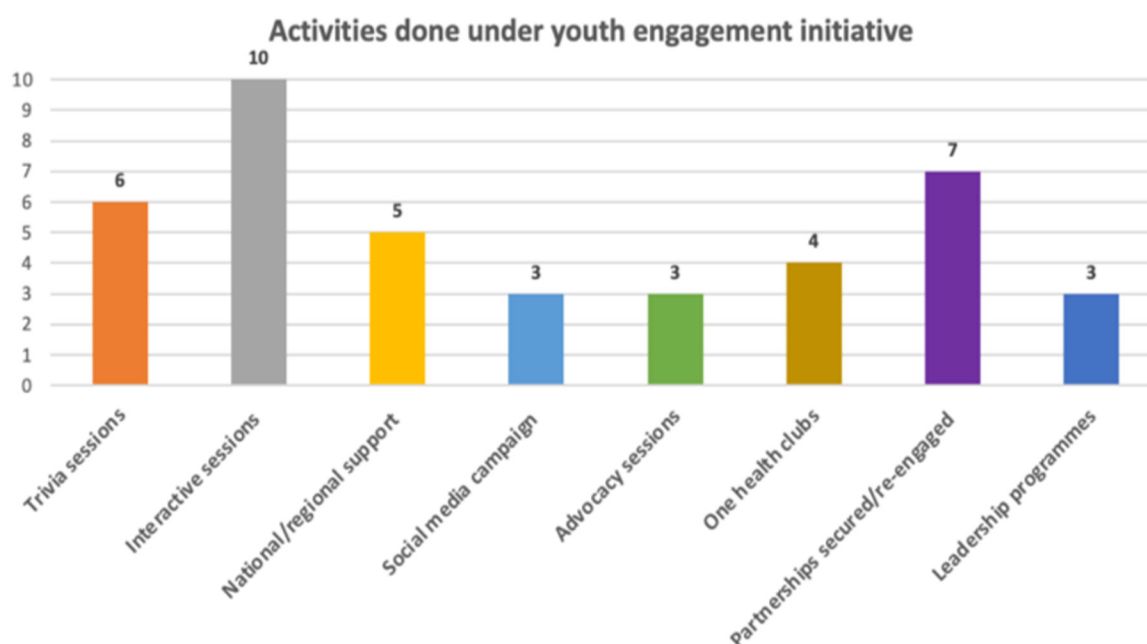
Through this initiative, ReAct Africa strengthened the role of faith leaders as trusted advocates for behaviour change and community resilience in the response to antimicrobial resistance. By embedding AMR messaging within faith spaces, the programme extended the reach of public health communication beyond formal health systems and into places of worship and daily life, reinforcing faith-based organizations as vital partners in tackling one of the most pressing global health challenges of our time.



Youth Engagement in Africa

In 2025, ReAct Africa strengthened AMR youth engagement by positioning young people as key actors in awareness, advocacy, and National Action Plan implementation across Africa. Through the AMR Leadership Programme for Tertiary Students in Africa (AMRLEP) and complementary youth platforms, ReAct Africa applied a One Health, systems-based approach to build youth leadership, technical capacity, and sustainable engagement mechanisms.

AMRLEP equipped tertiary students with knowledge on antimicrobial stewardship, infection prevention, socio-economic dimensions of AMR, and leadership and advocacy skills. Using a hybrid model of webinars, workshops, experiential learning, and co-creation, participants designed and implemented practical AMR initiatives within their institutions and communities, and actively contributed to awareness campaigns, peer learning, and World Antimicrobial Awareness Week activities.



In Kenya, Maarifa Kids was implemented in two primary schools in Busia County, reaching over 200 pupils and strengthening institutional collaboration with education and health authorities, school leadership, and teachers. An initial assessment identified a statistically significant relationship between age, grade, and AMR knowledge, informing the design of age-appropriate interventions. Teachers were trained to integrate AMR concepts into classroom learning using participatory methods, supported by locally developed educational tools such as the Interactive AMR Awareness Booklet for Primary School Children in Kenya by ReAct Africa, the Kisembo Book by Maureen Kisaakye (ReAct Africa's AMRLEP beneficiary), and Dr. Doodle.

In Zambia, the project engaged children aged 4–16 years through creative, community-based activities, including AMR Fun Fairs, clean-up campaigns, art sessions, and interactive reading events. These activities translated AMR concepts into practical behaviours related to hygiene, infection prevention, and responsible medicine use. Children demonstrated improved understanding of germs, hand hygiene, and appropriate antibiotic use, reinforcing their role as health advocates within families and communities.

Overall, Maarifa Kids demonstrated that complex AMR concepts can be effectively communicated to children through evidence-informed, age-appropriate, and participatory approaches. By empowering both teachers and children, the project contributed to sustainable improvements in antimicrobial use practices and community resilience against AMR.

Key Highlights

- Expanded to Zambia.
- In 2025 covered 245 children.
- Teachers and educational authorities trained ensuring sustainability and reach.
- Used age appropriate, grade appropriate participatory child to child learning interventions used including locally developed tools (Kisembo book and Dr Doodle)



Engagement with Faith-Based Organizations on AMR

Recognising the influential role of faith-based organizations (FBOs) in shaping values, behaviours, and collective action, ReAct Africa actively engages religious leaders and institutions as strategic partners in advancing AMR awareness and responsible health practices. Across many African contexts, faith leaders are trusted voices whose teachings influence everyday decisions related to health, care, and community responsibility. ReAct Africa's faith-based engagement seeks to harness this influence by translating scientific evidence on AMR into messages that are culturally grounded, morally compelling, and accessible at community level.

As part of this approach, ReAct Africa developed two faith-specific AMR Sermon Guides tailored for Christian and Muslim faith leaders and communities. The guides were developed with inputs from partners such as All Africa Conference of Churches (AACC), Africa Christian Health Association Platform (ACHAP), Ecumenical Pharmaceutical Network (EPN) and East Central & Southern Africa Health Community (ECSA-HC), bringing together public health expertise, theological scholarship, and community leadership. This collaborative process ensured that the content was both scientifically accurate and theologically grounded, while remaining sensitive to faith traditions and community realities.

Each guide included eight sermon outlines anchored in Biblical or Islamic teachings and informed by evidence on appropriate antibiotic use, safe medicine disposal, and the human, social, and economic consequences of antimicrobial resistance. The sermon outlines are designed to support faith leaders in addressing AMR within regular

Beyond AMRLEP, ReAct Africa supported the establishment of four functional One Health Clubs embedded within tertiary institutions and supported by academic patrons, creating sustainable platforms for youth-led advocacy, peer education, and community outreach. Youth engagement activities were implemented across Zimbabwe, Zambia, Kenya, Tanzania, and Burkina Faso through debates, hackathons, awareness walks, creative campaigns, and interactive learning approaches. The orientation sessions reached approximately 800 first-year students, embedding AMR awareness early in academic pathways, while youth-led digital campaigns reached over 13,400 people. Other key achievements include collaboration with AJARAM for their leadership programme in the franco phone regions of Africa, AAA/RAN combined intervention during WAAW on effective disposal of antibiotics and the youth side event during the RAN conference 2025. The participants of the youth side event emphasized the need to integrate youth within broader community-led AMR approaches, promoting co-creation, policy literacy, mentorship, and early involvement in decision-making processes. The discussions underscored the importance of evidence-based messaging, strengthened inter-organizational collaboration, expanded use of digital platforms, and a strategic shift toward high-impact interventions - including active youth participation in IPC and antimicrobial stewardship efforts beyond traditional awareness activities.

At regional level, strategic partnerships strengthened youth capacity and impact. Collaboration with the WHO Egypt Country Office and the Egyptian Drug Authority trained students from 19 universities, resulting in student-led AMR projects implemented during World Antimicrobial Awareness Week 2025 and community sensitisation on AMR and safe antibiotic disposal. Overall, ReAct Africa's youth engagement expanded community AMR awareness, established durable youth platforms, and empowered young leaders to contribute meaningfully to multisectoral AMR action aligned with national and regional priorities.

Key Highlights

- Nearly 800 students engaged through orientation sessions.
- 259 students enrolled for AMRLEP programme.
- 13424 individuals engaged through digital campaign.



Youth Engagement



Youth Engagement



Youth Engagement

Amplifying Community and Civil Society Voices on AMR

In 2025, ReAct Africa expanded innovative science communication to ensure antimicrobial resistance (AMR) messaging reached beyond technical and policy audiences. By amplifying alternative voices and working alongside existing civil society organizations, youth networks, and creative practitioners, ReAct Africa broadened how AMR is understood and discussed across Africa. Central to this approach was elevating lived experiences and locally driven solutions. ReAct Africa supported platforms that enabled communities, artists, and non-traditional actors to shape AMR narratives, ensuring that communication reflected social realities and inspired ownership and action. These efforts complemented technical and policy work by fostering inclusive dialogue and cross-sector collaboration. By moving beyond conventional awareness models, ReAct Africa helped position AMR as a shared societal challenge - one that requires participation from communities, civil society, and the creative sector alongside health professionals and policymakers. Collectively, these initiatives expanded public awareness, strengthened civil society engagement, and reinforced the value of inclusive, culturally grounded communication as a driver of behaviour change and collective action on AMR.

Key Initiatives

- Community-led AMR narratives amplified through **AMR Watch Magazine: Voices of the Community**
- Complex AMR science translated for public, healthcare, and policy audiences through the AMR Unplugged Podcast
- Five artists engaged to communicate AMR through visual storytelling at the ReAct Africa Annual Regional Conference



GENDER AND EQUITY

In 2025, ReAct Africa strengthened its commitment to integrating gender equality and equity into antimicrobial resistance (AMR) programming through targeted capacity building, community engagement, and knowledge-sharing initiatives. Recognising that AMR disproportionately affects women, youth, and marginalised groups due to social norms, access barriers, and decision-making dynamics, the organization adopted a people-centred approach to address these structural drivers and advance more equitable and sustainable AMR responses aligned with the Sustainable Development Goals (SDGs).

ReAct Africa integrated gender considerations across its programming using established frameworks, including the Gender Integration Continuum and the Five Domains of Gender Analysis, to move beyond gender sensitivity toward meaningful gender responsiveness. In Q1 2025, RAN supported the broader ReAct network with an approach to gender integration through a dedicated session during a policy call, strengthening internal alignment and reinforcing gender integration as a cross-cutting priority within AMR policy and advocacy efforts.

Institutional capacity strengthening was a key foundation of this work. In partnership with the Young Women's Christian Association (YWCA) Zambia, five gender-focused capacity-building sessions were conducted to enhance understanding of the intersection between AMR and gender. These sessions explored AMR through a gender lens, examined the gendered roles of women and youth in health-seeking behaviours and caregiving, discussed AMR in relation to the SDGs, and analysed how YWCA's existing programming intersected with AMR prevention and mitigation. The iterative nature of these engagements responded to the initially limited baseline knowledge on AMR and gender, while addressing the need for practical, non-technical tools to facilitate uptake.

Following the capacity-building phase, ReAct Africa supported YWCA in translating knowledge into action at the community level. AMR awareness was embedded within existing



gender and community outreach platforms rather than delivered as a standalone intervention. Community engagement activities focused on contextual discussions around antibiotic access, use, and misuse within households, with particular emphasis on women's roles as primary caregivers and health decision-makers. Youth engagement initiatives further revealed important gendered vulnerabilities linked to AMR. Limited access to accurate sexual and reproductive health information contributed to antibiotic misuse for contraception or abortion purposes, while inadequate hygiene education and poor WASH infrastructure among young mothers increased childhood diarrhoeal disease and unnecessary antibiotic use. Engaging men alongside women created space to address harmful masculinity norms, including delayed care-seeking, self-medication, and behaviours associated with increased infection risk. These insights reinforced the importance of inclusive, gender-transformative dialogue in addressing AMR drivers.

Beyond community implementation, ReAct Africa contributed to regional and global conversations on gender-responsive AMR programming. The organization delivered a presentation on gender integration within its AMR work at the Global South Leadership (GSL) side meeting during the RAN Conference and participated in a GSL-hosted webinar series on integrating gender into community engagement. These platforms facilitated knowledge exchange and positioned gender-responsive AMR as a critical component of broader continental and global AMR efforts.

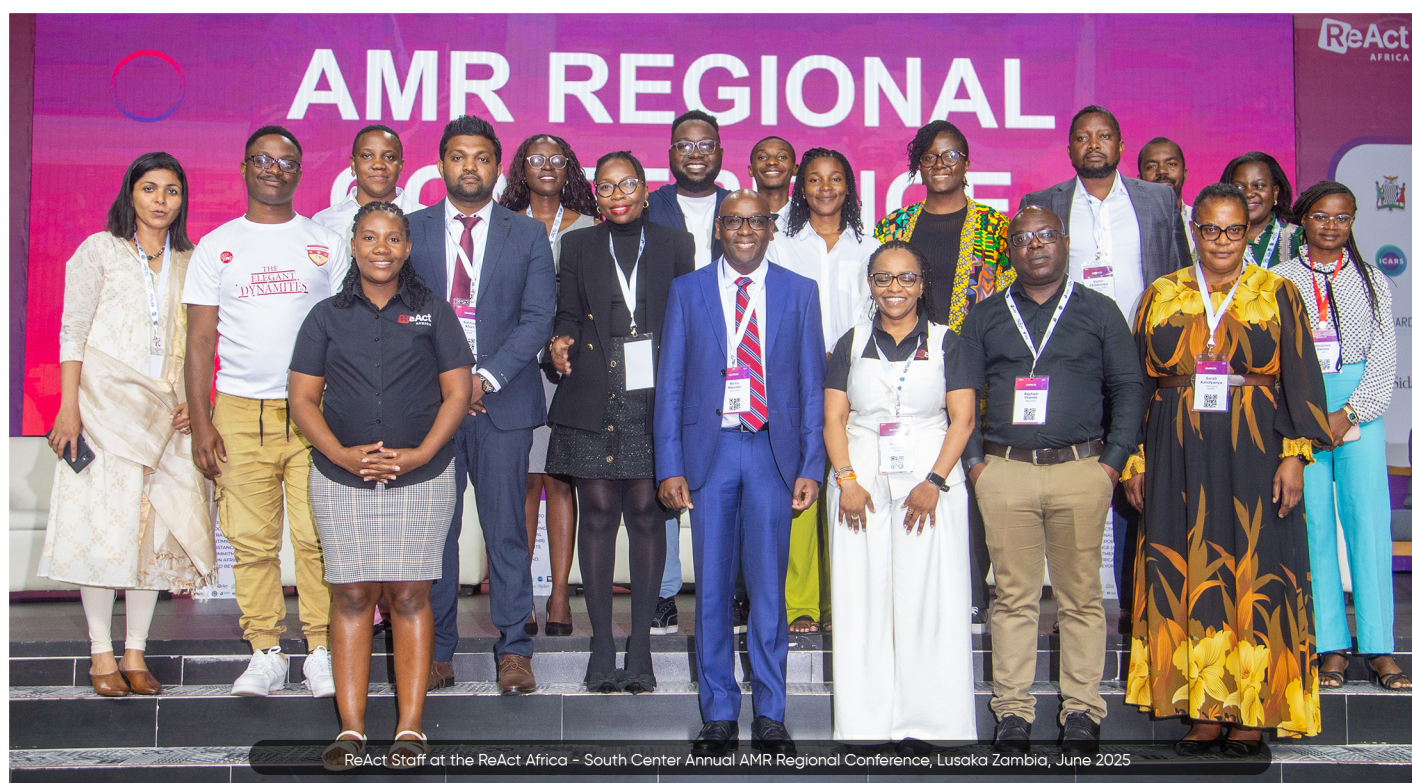
Despite challenges such as resource constraints, entrenched social norms, and the need for simplified tools, important lessons emerged: embedding gender integration within trusted community structures, sustaining adaptive capacity building, partnering with women-led organizations, and using practical language significantly enhance impact and ownership. Overall, the 2025 activities marked meaningful progress toward institutionalizing gender-responsive and equity-driven approaches within ReAct Africa's AMR programme, laying the groundwork for deeper systemic integration in the years ahead.

WAY FORWARD: FROM MOMENTUM TO LASTING IMPACT

As ReAct Africa concludes 2025, the organization stands at a critical inflection point – one defined by credibility earned, partnerships strengthened, and tangible contributions to advancing antimicrobial resistance (AMR) action across Africa and beyond. In a global health landscape marked by competing priorities, constrained financing, and widening inequities, ReAct Africa has demonstrated resilience in keeping AMR visible, relevant, and firmly anchored in evidence, equity, and One Health principles.

Looking ahead, ReAct Africa's strategic focus will centre on deepening impact while strengthening institutional sustainability. This will require consolidating its role as a trusted implementation partner – supporting countries to move from AMR policies to practice through stewardship, infection prevention and control, surveillance, and community-level action – while continuing to serve as a strong African voice in regional and global AMR spaces. By translating African evidence and lived realities into policy-relevant insights, ReAct Africa will further shape agendas, influence decision-making, and amplify Global South leadership in AMR governance. The organization will invest in learning, innovation, and partnerships – across governments, academia, civil society, youth, and faith-based actors – to ensure AMR action is embedded not only in institutions, but also in communities and everyday practice.

Ultimately, ReAct Africa's path forward is guided by a long-term vision: reducing the burden of AMR in Africa by strengthening equitable, evidence-driven, and sustained action across systems, sectors, and societies. By remaining ambitious about long-term change while realistic about short-term delivery, ReAct Africa will continue to turn commitments into action, evidence into impact, and collaboration into transformation – working steadily toward a future where no one lives in fear of untreatable infections.



ReAct Staff at the ReAct Africa – South Center Annual AMR Regional Conference, Lusaka Zambia, June 2025

LINK TO REACT AFRICA 2025 KNOWLEDGE PRODUCTS AND REPORTS

STATEMENTS CO-SIGNED BY REACT AFRICA

Hamburg Sustainability Statement on AMR

<https://icars-global.org/wp-content/uploads/2025/06/Hamburg-Joint-Statement-on-AMR.pdf>

WEBINARS

Strengthening global action against AMR from commitments to implementation

<https://youtu.be/61XpiAXzoWU?si=0Hz4qffzRT6ghPKJ>

Strengthening One Health approaches

https://youtu.be/eBoqT3Cx2_c?si=00B31_JYV-5o4hp8

Innovations and technology in combating AMR

<https://youtu.be/nfaZ4ZuNosk?si=TMilOnIDZcFtGlpW>

Financing AMR interventions: From pledges to resources

https://youtu.be/g6QBnI94G38?si=qaOU4G3_ZCrzewpr

What it will take to deliver on UNGA and Jeddah?

<https://youtu.be/F9BqFCKFJIE?si=oP0FIWDbbhc18hPr>

Strengthening M&E capacity for effective implementation of AMR NAPs in Africa

https://www.youtube.com/live/a_CEk3dpfkg?si=DuSrQzkFzov7Fjfl

JOURNAL PUBLICATIONS (AUTHORED/CO – AUTHORED)

Bridging AMR knowledge gaps and improving policy implementation: a perspective on the role of community engagement in Africa Published in Frontiers of Public Health – Traice Muraya and Raphael Chanda

<https://www.frontiersin.org/journals/public-health/articles/10.3389/fpubh.2025.1668830/full>

Reimagining Antimicrobial Resistance financing for Africa amid global funding crises published in Speaking of Medicine and Health

PLOS Global Public Health Blogs. – Sherin Paul and Mirfin Mpundu

<https://speakingofmedicine.plos.org/2025/06/05/reimagining-antimicrobial-resistance-amr-financing-for-africa-amid-global-funding-crises/>

Antibiotic Resistance Profiles in Gram-negative Bacteria Causing Bloodstream and Urinary Tract Infections in Paediatric and Adult Patients in Ndola District, Zambia, 2020-2021 – Kaunda Yamba, Raphael Chanda, Mirfin Mpundu

<https://www.sciencedirect.com/science/article/pii/S2590088925000265>

NEWSLETTERS

Quarter 1: <https://www.reactgroup.org/wp-content/uploads/2025/04/Q1-Newsletter-25.pdf>

Quarter 2: <https://www.reactgroup.org/wp-content/uploads/2025/07/Q2-Newsletter-25-2.pdf>

Quarter 3: <https://www.reactgroup.org/wp-content/uploads/2025/10/ReAct-Africa-Q3-Newsletter-25.pdf>

PODCASTS

AMR and Environment Health – Prof Luther King

<https://youtu.be/xuziNd6K2y4?si=MB2DHCbfSm7AuB9t>

AMR in Animal Health – Dr Chikwanda Chileshe

<https://youtu.be/KXV8E6tcNzQ?si=sCuiS3iOxcvHW57H>

IPC, WASH and AMR – Dr Himabala

<https://youtu.be/0xThoxH2BWs?si=Pqun2imC6iZCiD0c>

AMR financing – Prof Mirfin Mpundu

<https://youtu.be/DQbC-cOKCZU?si=WKUA0tYjvhaGmYpA>

REPORTS/GUIDES/MAGAZINES

ReAct Africa Annual Report 2024

<https://www.reactgroup.org/wp-content/uploads/2025/02/Annual-Report-2024.pdf>

RAN-SC AARC 2025 Summary Report

<https://www.reactgroup.org/wp-content/uploads/2025/06/AARC-2025-Summary-Report.pdf>

AMR sermon guide – God's Gifts and Human Duty

Bible guide- <https://www.reactgroup.org/wp-content/uploads/2026/01/CHRISTIAN-GUIDE.pdf>

Khutba guide - <https://www.reactgroup.org/wp-content/uploads/2026/01/KHUTBA-GUIDE-FINAL.pdf>

AMR Watch Magazine

https://www.reactgroup.org/wp-content/uploads/2025/09/AMR-WATCH-MAGAZINE_44MB.pdf

ReAct Africa Innovation Hub Vision Wall



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