

Elevating Global South Voices in the fight against Antimicrobial Resistance

Report of Impact and Lessons Learned
(2018 - 2025)



Acknowledgment

This policy brief was compiled by Dr Sherin Susan Paul N (Consultant, South Centre) under the supervision of Dr Viviana Munoz Tellez (Coordinator, Health Intellectual Property and Biodiversity Programme, South Centre). The funding for the report 'Elevating Global South Voices in the fight against Antimicrobial Resistance: The South Centre's Impact and Lessons Learned (2018 - 2025)', was kindly provided by The Fleming Fund, Department of Health and Social Care, United Kingdom.



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Elevating Global South Voices in the fight against Antimicrobial Resistance

**Report of Impact and Lessons Learned
(2018 – 2025)**



Evaluation of the initiatives implemented with financial support from the Fleming Fund, Department of Health and Social Care, United Kingdom

Forward

It is my pleasure to present the impact report 'Elevating Global South Voices in the fight against Antimicrobial Resistance: The South Centre's Impact and Lessons Learned (2018 - 2025)' which evaluated the South Centre's AMR programme which was supported by the Fleming Fund, Department of Health and Social Care, United Kingdom. This evaluation offers an important opportunity to reflect on the progress achieved, the lessons learned, and the pathways forward in advancing equitable and sustainable responses to AMR in the Global South.

Antimicrobial resistance remains one of the most pressing public health and development challenges of our time. For developing countries, the burden is compounded by structural inequities in access to medicines, diagnostics, surveillance systems, and weak health systems. The AMR Programme by South Centre was designed to respond to these realities by strengthening policy coherence, enhancing technical understanding among policymakers, and supporting evidence-informed engagement in global and national AMR processes by engaging global south civil society organisations.

With the support of the Fleming Fund, the Programme has contributed to amplifying the perspectives and priorities of low- and middle-income countries in international AMR discussions. It has supported awareness raising, capacity building, facilitated policy dialogue, and generated analytical outputs that inform more balanced and development-oriented



Dr Carlos Maria Correa
Executive Director
South Centre

approaches to AMR governance. This evaluation tries to look into the broader influence of the programme in shaping policy discourse and strengthening institutional capacities.

We are encouraged by the findings, which highlight the value of sustained technical support, strategic partnerships, and South-South collaboration in advancing AMR policy objectives. The evaluation also underscores the need for the continuity of this work that places equity, access, and development considerations that are important for global south at the centre of AMR strategies.

I extend my sincere appreciation to the Fleming Fund for its support, to our partners for their collaboration, to the team implementing the AMR programme, and to all those who contributed to this evaluation. We remain committed to advancing inclusive and development-focused AMR solutions in the years ahead.

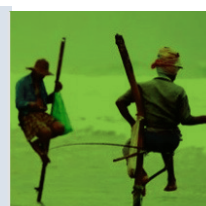
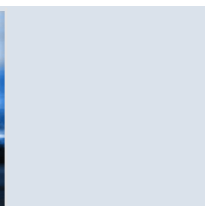
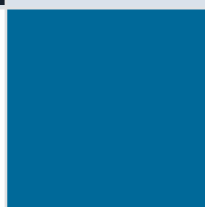


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Abbreviations



Africa CDC	Africa Centres for Disease Control and Prevention
AMR	Antimicrobial Resistance
AMS	Antimicrobial Stewardship
ARC	Antibiotic Resistance Coalition
AWaRe	Access, Watch, Reserve
CSOs	Civil Society Organisations
DAC	Development Assistance Committee
DHSC	Department of Health and Social Care
FAO	Food and Agriculture Organisation of the United Nations
GDP	Gross Domestic Product
HICs	High Income Countries
IPC	Infection Prevention and Control
IPEA	Independent Panel on Evidence for Action against AMR
KIIs	Key Informant Interviews
LMICs	Low- Middle-Income Countries
M&E	Monitoring and Evaluation
MSPP	Multi-Stakeholder Partnership Platform
NAPs	National Action Plans
OECD	Organisation for Economic Co-operation and Development
RAN-SC AARC	ReAct Africa – South Centre Annual AMR Regional Conference
SDG	Sustainable Development Goal
WAAW	World Antimicrobial Awareness Week
WASH	Water Sanitation and Hygiene
WHA	World Health Assembly
WHO	World Health Organisation
WOAH	World Organisation for Animal Health
UHC	Universal Health Coverage
UN	United Nations
UNEP	United Nations Environment Programme
UNGA	United Nations General Assembly

Executive Summary

Catalysed stronger LMIC and Global South influence in high-level AMR policy forums through strategic convenings, policy analysis, and sustained multilateral engagement.

Photo from the event organized by the South Centre and G77 at the sides of United Nations General Assembly High Level Meeting on AMR, 2024, New York.



This impact report assesses the achievements, outcomes, and added value of the South Centre’s antimicrobial resistance (AMR) programme supported by the Fleming Fund between 2018 and 2025. The programme aimed to strengthen low- and middle-income country (LMIC) engagement in global AMR governance, enhance evidence-informed policymaking, and build civil society and advocacy capacity to support effective implementation of National Action Plans (NAPs). Using the OECD-DAC evaluation criteria, the report examines programme relevance, effectiveness, coherence, and sustainability, and identifies strategic insights to inform the South Centre’s future AMR engagement. The assessment draws on a mixed-methods approach combining a survey of civil society organisations (CSOs)

supported by South Centre through small grants for World Antimicrobial Awareness Week (WAAW), key informant interviews with opinion leaders and AMR stakeholders, and analysis of the South Centre publications.

The programme was found to be quite relevant in highlighting LMIC priorities in AMR-related policy engagement. Its activities brought the binding constraints consistently identified by LMIC stakeholders, including underfunded NAPs, weak surveillance-to-action pathways, limited civil society participation, and insufficient attention to equity, access, and implementation feasibility, to the global AMR decision making platform. It was effective in playing a catalytic role in amplifying LMIC and Global South perspectives in high-level AMR policy forums through strategic convenings, policy analysis,



and sustained engagement in multilateral processes. Locally and regionally, the support provided by the South Centre to CSOs enabled locally led AMR action across diverse stakeholders, including marginalised communities. It was also effective in strengthening advocacy capacity, organisational credibility, and policy engagement among supported CSOs, particularly through flexible, trust-based support which resulted in expanding CSOs' reach and visibility. While influence on formal policy outcomes was necessarily indirect, the Centre was widely recognised as a trusted intermediary facilitating LMIC and civil society access to global decision-making spaces. Besides, the programme demonstrated strong coherence with the quadripartite-led global AMR response by complementing its engagement through strong focus on governance, financing, equity, and policy translation challenges of LMICs. Its work consistently reinforced One Health principles while linking global guidance to development realities, capacity constraints, and policy trade-offs in LMIC contexts. The sustainability is reflected in strengthened networks, accumulated policy influence, and the South Centre's continued presence in global AMR governance spaces.

Overall, the South Centre played a significant role in elevating the stake of Global South in global AMR governance which is heavily weighted towards technical and R&D-focused solutions. As the South Centre transitions beyond Fleming Fund support, the evidence points to the importance of consolidating this niche, strengthening policy-to-practice linkages, diversifying donor base, and enhancing visibility among LMIC stakeholders. By sustaining strategically sequenced engagement and deepening partnerships, the South Centre is well positioned to continue complementing the global AMR response and to support more equitable, coherent, and durable AMR outcomes in the next phase of global action.

Background

Antimicrobial resistance (AMR) is when bacteria, virus, fungus and parasite no longer respond to antimicrobials meant to eliminate them. As a result, antimicrobials like antibiotics become ineffective in treating infections, increasing the risk of disease spread, severity and deathⁱ. AMR has emerged as one of the top global public health and development threats of the 21st century. It has been estimated that by 2050, there will be an estimated 1.91 million deaths attributed to AMR and 8.22 million deaths associated with AMR, globally affecting predominantly those aged 70 years and aboveⁱⁱ, women and childrenⁱⁱⁱ. It has been found that if left unattended, the global gross domestic product (GDP) will decline by \$1.97 trillion by 2050 due to accelerated resistance^{iv}. At the individual and societal level, it leads to higher health care costs and reduced productivity. Data





From ReAct Africa - South Centre Annual AMR Regional Conference 2024, Livingstone, Zambia; Photo credits ReAct Africa



from High Income Countries (HICs) have shown that resistant infections cost approximately \$30,000 more per patient per hospital episode and the mean hospital stay can go up by a week and it nearly doubles the chances for mortality^{vi}.

Often described as a silent pandemic, it disproportionately affect low- and middle-income countries (LMICs)^{vii}. Besides battling with a high burden of infectious diseases, LMICs struggle with a host of issues unique to them that worsens the AMR. These include poor water, sanitation and hygiene (WASH) facilities, inadequate infection prevention and control (IPC) mea-

asures in healthcare facilities, weak health systems and governance and insufficient access to quality-assured affordable essential and novel antibiotics.^{viii} However these realities were historically under-represented in global priority-setting processes which was predominantly dominated by the perspectives from HICs. South Centre recognised early that the voices and priorities of LMICs were not being adequately reflected in the global AMR agenda, in part due to deep structural inequities in how global health knowledge is produced, valued, and translated into policy. These epistemic power asymmetries have historically

limited LMIC influence in shaping research funding, governance reforms, and practical solutions aligned with their realities^{ix}.

Aware of these systemic challenges - and with its mandate to support developing countries in navigating global policy processes - South Centre became an active contributor to the global AMR response. It did so by amplifying LMIC perspectives in global forums, supporting evidence-informed engagement, and ensuring that the unique epidemiological, economic, and social dimensions of AMR in the Global South were brought to the forefront of international discussions.

From ReAct Africa - South Centre Annual AMR Regional Conference 2025, Lusaka, Zambia; Photo credits ReAct Africa



Rohit Malpani
Independent Consultant



The South Centre's credibility enables Southern governments to engage with antimicrobial resistance (AMR) with a level of seriousness and trust that Northern institutions often cannot command. As a South-led institution, it brings legitimacy to issues of equity, sovereignty, and development, allowing it to reflect the priorities and realities of low-and middle-income countries in global AMR discussions."



One of the primary financial support for these activities came from the Fleming Fund [Department of Health and Social Care (DHSC), United Kingdom] which contributed towards awareness raising and capacity building of policy makers and Civil Society Organisations (CSOs) in LMICs, from 2018 to 2025. The countries which were selected for interventions were the South Centre member countries, which were also Fleming Fund priority countries - Ghana, India, Indonesia, Pakistan, Malawi, Nigeria, Sri Lanka, Sierra Leone, Tanzania, Vietnam, Uganda and Zimbabwe. Over these years, the programme supported policy-makers and CSOs across LMICs, with the overarching objective of strengthening LMIC influence in global AMR governance, supporting evidence-based national decision-making, and building advocacy capacities for more accountable and effective National Action Plan (NAP) implementation. This work took place during a period of rapidly evolving global AMR policy developments - including new multilateral governance pro-

posals, financing discussions, and intensified global attention on pandemic preparedness and the One Health agenda - making South Centre's role particularly strategic for LMICs.

As the Fleming Fund grant period comes to a close, it is essential to document the programme's achievements, lessons learned, and contributions to strengthening LMIC engagement in AMR policy processes. By capturing outcomes generated through years of collaboration, capacity building, and policy influence, it will highlight how LMIC voices were elevated in global AMR decision-making and how it has shaped the global AMR agenda. This will provide a consolidated record of the South Centre's work and its value to partner countries and other organisations both globally and regionally. Besides, it will support institutional learning within the South Centre and help guide future strategic engagements as the organisation looks beyond the Fleming Fund toward sustaining and expanding its role in global AMR governance and capacity building.



AMR Awareness Outreach by Generational Stewards for Antimicrobials (GSA) Volunteers. Photo credits: Generational Stewards for Antimicrobials

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The South Centre’s role is even more critical in the current context of diminishing global health funding and weakening multilateralism. It is critical for the South Centre to remain steadfast in this geopolitical storm and ensure that global policy work continues. It’s important not to fall behind but instead stay ahead of the curve anticipating emerging challenges whilst supporting countries, international agencies, and global processes with forward-looking, preventive strategies. This type of approach will be vital in addressing the challenges within the AMR space and ensure that people, communities and countries are not left behind.”



Strategic Framework of the Programme

The South Centre’s AMR programme is grounded in the assumption that when LMIC policymakers and civil society organisations are equipped with timely evidence, high-quality policy analysis, and targeted advocacy support, they are better positioned to influence global AMR decision-making, strengthen national AMR governance, and accelerate progress on National Action Plan (NAP) implementation. Through the delivery of activities such as technical briefings for global negotiation processes, development of policy/landscape analyses, convening of regional dialogues and webinars, strengthening CSO awareness and accountability efforts, and amplifying LMIC voices in multilateral negotiations, the programme generates outputs that enhance stakeholder knowledge, improve co-ordination, and elevate LMIC priorities in global AMR discourse. These outputs lead to short-term changes - including increased awareness, stronger evidence-informed advocacy, and improved policy coherence - and, over time, catalyse more strategic LMIC engagement in AMR negotiations, greater visibility of LMIC needs in global policy instruments, and strengthened national AMR implementation mechanisms. Ultimately, the programme contributes to a long-term impact where LMICs are empowered to shape equitable and effective AMR governance and implement stronger, more context-responsive policies to protect public health.

Scope of an *Impact Report*

An impact report offers a structured and evidence-based approach to capturing what has been achieved, what has changed as a result of the South Centre's engagement, and how these outcomes have strengthened AMR governance and capacity at national, regional, and global levels.

Objective

The primary objective of this impact report is to systematically document and assess the achievements, outcomes, and added value of the South Centre's AMR programme supported by the Fleming Fund from 2018 to 2025. In line with the Organisation for Economic Co-operation and Development's (OECD's) Development

Assistance Committee (DAC) evaluation criteria, the report examines the programme's relevance in addressing AMR priorities in LMICs; its effectiveness in strengthening LMIC engagement in global AMR governance, enhancing evidence-informed policymaking, and building advocacy capacities to advance the implementation of NAPs; and its coherence with broader global AMR initiatives, including the quadripartite-led response. The report further explores elements of sustainability, drawing lessons on the extent to which programme outcomes are likely to be sustained beyond the period of Fleming Fund support, and identifies strategic insights to inform the South Centre's future AMR engagement as it transitions into the next phase of its work. The report also aims to support contin-

ued collaborations and strengthen future resource mobilisation.

Intended Audience

This report is intended for a broad set of stakeholders engaged in AMR policy, governance, and implementation, including:

- Member States of the South Centre
- Policymakers and national AMR focal points, particularly in LMICs
- CSOs and civil society networks advocating on AMR
- Regional and global institutions including World Health Organisation (WHO), Food and Agriculture Organisation of the United Nations (FAO), World Organisation for Animal Health



EcoMed Nexus volunteers advancing AMR awareness through community outreach at Gombe state, Nigeria, during waaw 2025 supported by South Centre; Photo credits EcoMed Nexus Foundation.

(WOAH), United Nations Environment Programme (UNEP), Africa Centres for Disease Control and Prevention (Africa CDC) and development partners

- Current and prospective donors
- Academics, researchers, and technical agencies working on AMR
- Internal stakeholders within the South Centre, including leadership, programme staff, and strategic planning teams

Methodology

A mixed-methods approach was used to develop this impact report, combining qualitative and quantitative data sources to provide a comprehensive assessment of the programme’s achievements and contributions.

Surveys

A structured online survey questionnaire was distributed among CSOs that had received grants during World AMR Awareness Weeks (WAAW) to implement various awareness and advocacy activities. The primary purpose of the survey was to assess the effectiveness, relevance, and perceived value of this support, while generating insights to guide future engagement with CSOs in amplifying the voices of the Global South in the AMR response. The questionnaire included both quantitative items (such as Likert-scale and multiple-choice questions) to measure levels of satisfaction, reach, and perceived outcomes, as well as qualitative open-ended questions to capture nuanced reflections, challenges, and recommendations from respondents. A total of 48 CSOs were contacted,



of which 30 completed the survey. The analysis of survey results provided a comprehensive understanding of how WAAW grants supported grassroots AMR advocacy and where future support can be further strengthened.

Key Informant Interviews

Targeted key informant interviews (KIIs) were conducted with 12 individuals, including key CSO partners, opinion leaders, technical experts, and potential funding partners, to capture deeper insights into the programme’s influence on AMR governance processes and its contribution to strengthening LMIC participation in global AMR discourse. These interviews also explored challenges encountered in efforts to amplify LMIC voices, as well as lessons learned throughout programme implementation. A thematic analysis approach was applied, involving the systematic coding of interview transcripts, identification of recurring themes, and synthesis of cross-cutting insights. This enabled a structured understanding

of how stakeholders perceived the programme’s relevance, effectiveness, and added value, while also highlighting areas for future strategic focus.

Desk Review

A content analysis of the South Centre’s AMR-related outputs - including policy briefs, publications, meeting reports, briefing notes, and strategic documents - was undertaken to systematically assess the scope and nature of the programme’s work. This method enabled the identification of recurring themes, patterns of engagement, and evolution of thematic focus over time. By analysing both the substance and frequency of these outputs, the exercise provided deeper insights into how the South Centre contributed to AMR governance, where its influence was most visible, and which areas demonstrated sustained or emerging strengths. The findings from this content analysis informed the broader evaluation by offering evidence-based perspectives to support learn-

What the Evidence Shows

In this section a brief summary of various activities undertaken by the South Centre AMR programme along with the findings obtained through the survey, KIs and desk review were given

Strategic Funding Support for CSO

The South Centre provided strate-

gic, catalytic funding to CSOs for clearly defined advocacy activities and initiatives during WAAW. This was done to improve stakeholder engagement in LMIC settings and sensitize key constituencies about the need for urgent action on AMR.

Some of these activities also aimed to build capacity among key populations to understand and act on AMR. All these were

small grants up to \$2,500 in value and were selected based on an open call for expressions of interest every year.

Brief reports of these activities and initiatives were also published yearly on the South Centre website.

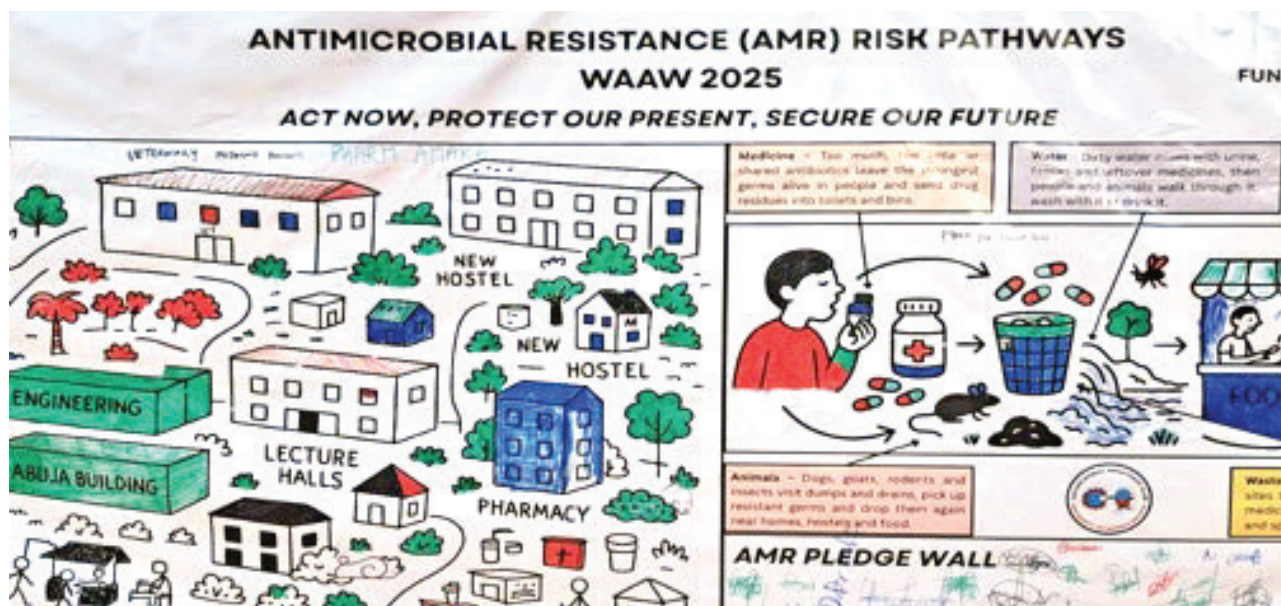
The table 1 and figure 1 provide a brief overview of WAAW grants dispersed from 2020 to 2025 and the countries that received them.

Table 1: The number of grants provided yearly

Year	Number of Grants	Number of countries covered
2020	6	6
2021	4	4
2022	14	9
2023	12	8
2024	27	12
2025	14	7

Figure 1: The countries that have received the WAAW grants





Campus AMR Awareness Rally and Outreach organised by Ducit Blue Foundation at the University of Nigeria, Nsukka; Photo credits Ducit Blue Foundation

Insights from the survey among CSOs

A survey was conducted among the recipients of the strategic funding support for CSOs, to understand the relevance and impact of such an initiative.

A total of

30

civil society organisations participated in the survey out of 48 organisations approached

Response rate of result

62.5%

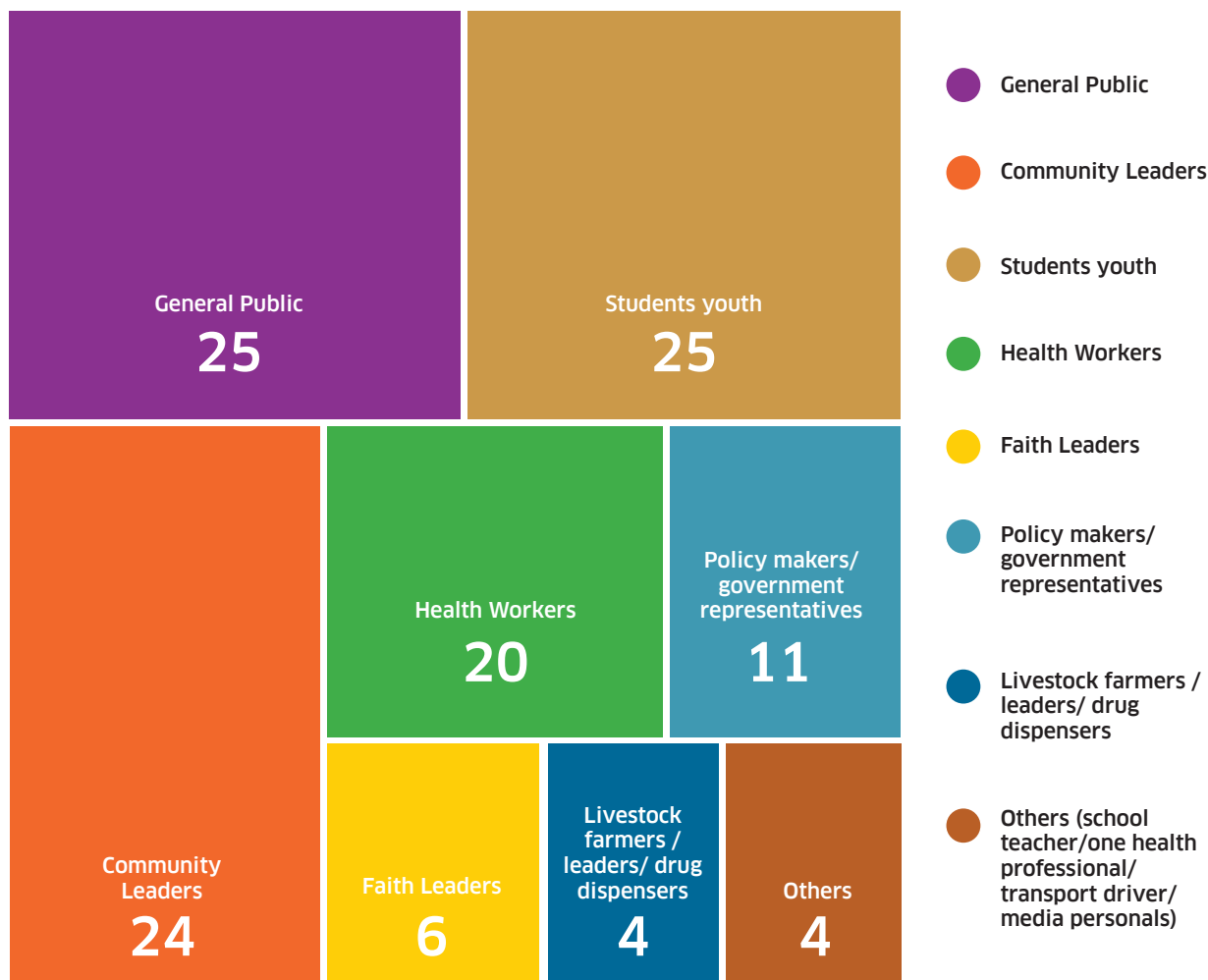
The table 2 presents the country-wise distribution of participants.

Table 2: The country-wise distribution of survey participants

Benin/ Niger	1
Burkina Faso	2
Ecuador	1
Ethiopia	1
India	2
Kenya	4
Liberia	1
Nigeria	6
Rwanda	1
Tanzania	2
Uganda	7
Zambia	1
Zimbabwe	1

The WAAW activities by the recipient CSOs were diverse and aimed at strengthening awareness, behaviour change, stewardship, and One Health action on AMR. Their primary target population is shown in figure 2

Figure 2: Target population of the WAAW activities by survey participants



A brief overview of the WAAW activities by the organisations broadly categorised under a few common themes are given below.

Strengthening Community Awareness and Behaviour Change

Nearly all organisations implemented extensive community awareness initiatives targeting schools, markets, slums, transport hubs, livestock farmers, and public gathering points. These included awareness walks, exhibitions, sports events, AMR card game tournaments, and culturally adapted communication using traditional songs, drama, and messaging in local languages. Mass

media played a central role, with a significant number of radio talk shows, television features, SMS campaigns, and coordinated social media engagement. Youth-friendly formats such as TikTok challenges, quizzes, and competitions effectively broadened outreach and engagement.

Capacity Building Across Human, Animal, and Environmental Health

A strong emphasis on capacity strengthening emerged across

activities. Organisations trained health workers, community volunteers, veterinary paraprofessionals, agricultural extension agents, students, and youth leaders on AMR, IPC, rational medicine use, and communication skills. Some programmes, including multi-phase youth fellowships and simulation-based outbreak exercises, introduced innovative methodologies that enhanced skills development and fostered long-term leadership.

Farmer and animal-health worker trainings further rein-

forced prudent antibiotic use and biosecurity practices in the agricultural sector.

Advancing Stewardship and Health Systems Strengthening

Several organisations enacted stewardship-focused activities, including antimicrobial stewardship (AMS) committee meetings, sensitisation of clinicians, dissemination of WHO Access, Watch, Reserve (AWaRe) guidance, and point prevalence surveys. Community-based AMR surveillance committees were established in some regions, along with targeted monitoring and evaluation exercises. These efforts mark significant progress in embedding AMR prevention within health systems strengthening efforts and routine

clinical practice.

Expanding One Health and Multisector Engagement

WAAW activities reflected strong uptake of One Health principles. Many organisations conducted interventions that spanned human, animal, and environmental health - such as safe farming practice sessions, abattoir sensitisation, WASH promotion, and One Health clubs in schools. Stakeholder workshops, national dialogues, and AMR declarations strengthened multisector collaboration and allowed communities to engage directly with policymakers and technical experts.

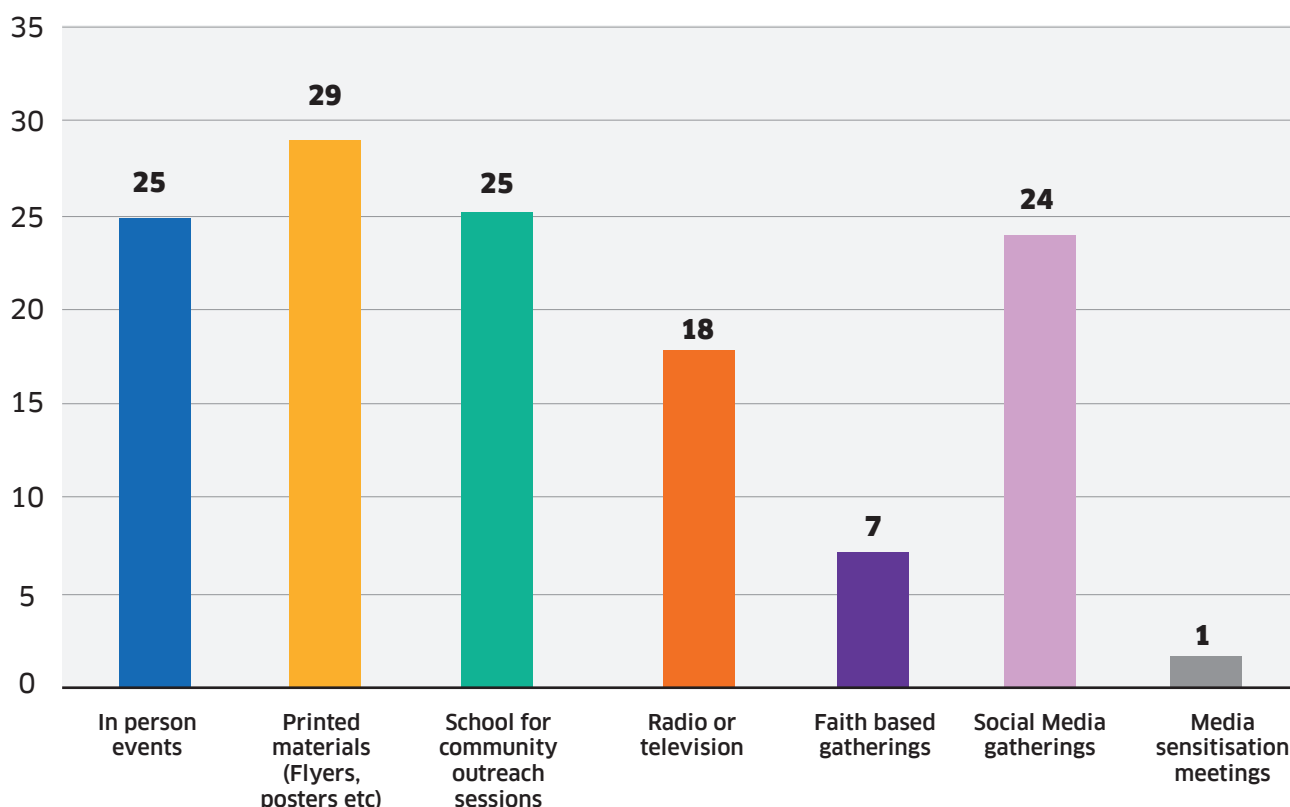
Youth Leadership and

Inclusion of Marginalised Populations

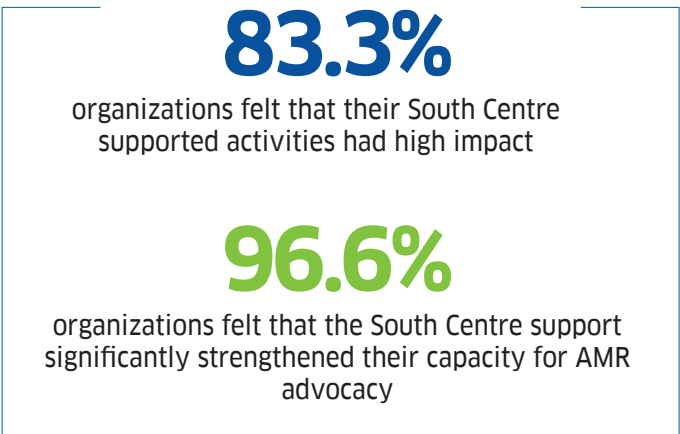
Youth acted as central drivers of WAAW campaigns, with several initiatives establishing youth AMR champions, communication squads, and One Health clubs. Activities prioritised inclusion of underserved populations such as tribal communities, indigenous groups, informal workers and unemployed youth, besides residents of urban settlements. The translation of AMR materials into over fifty local languages further improved accessibility and cultural relevance.

A collective summary of various engagement channels used by participant CSOs in WAAW projects is shown in figure 3.

Figure 3: The engagement channels used for WAAW projects



Twenty-five (83.3%) participants reported that their activities had a very high impact in increasing awareness and understanding of AMR in their communities, while the remaining (16.7%) felt the impact was moderate. When asked to assess the relevance of WAAW activities on a linear scale from 0 to 5, where 0 indicated no relevance and 5 indicated the highest relevance, 70% of participants rated the activities as 5, 26.7% rated them as 4, and the remaining 3.3% rated them as 3. All participants reported that the South Centre had helped strengthen their organisation's capacity for AMR advocacy. Of these, a vast majority (96.6%) indicated that the support had helped them significantly. They all would like to showcase the WAAW activity they undertook with the South Centre support, through a virtual activity such as a webinar. Almost all organisations, except one, collaborated with other civil society organisations, local/regional/national governments, private insti-



tutions and academic institutions to organise the WAAW activities, thereby increasing the reach and extent.

A thematic analysis of qualitative feedback from grant recipients on progress achieved through the South Centre support was done. The analysis highlights key areas of change, emerging outcomes, and early signals of sustainability and influence which is summarised below.



South Centre at United Nations General Assembly High Level Meeting on AMR, 2024, New York

Expansion of Reach and Coverage

The majority of grantees reported a clear expansion in the scale and scope of their AMR activities following the grant. Organisations extended awareness and advocacy efforts to new geographic areas and population groups. Several respondents reported substantial increases in the number of direct beneficiaries, in some cases doubling initial reach.

Strengthened Youth Engagement and Leadership

Youth mobilisation emerged as a central outcome of the grant support. Grantees established or scaled AMR clubs, trained youth ambassadors, and embedded AMR advocacy within student associations and youth-led platforms. The development of youth-friendly tools and initiatives indicates strong relevance to target populations and contributes to the sus-

tainability of AMR engagement beyond the grant period.

Institutionalisation of AMR Interventions

Several organisations reported integrating AMR activities into routine institutional practices. This included incorporating AMR into continuing medical education, pharmacy and livestock training curricula, university outreach programmes, primary

health care toolkits, and community health worker training. Such institutionalisation reflects a shift from time-bound activities toward longer-term systems strengthening and increases the likelihood of sustained impact.

Organisational Capacity Strengthening

Grant recipients consistently reported improved organisational capacity in AMR advocacy, programme implementation, and technical engagement. Capacity gains included increased confidence, development of training modules, adoption of established international toolkits, and piloting of multi-component behavioural interventions. These improvements enabled organisations to engage more strategically with communities, policymakers, media, and other stakeholders.

Visibility, Recognition, and Advocacy Credibility

Several grantees reported increased visibility and recognition at national and international levels, including awards, formal recognition by authorities, and increased media engagement. Enhanced credibility positioned organisations as trusted AMR stakeholders, improving their ability to influence public discourse and advocacy processes.

Resource Mobilisation and Programme Continuity

A notable outcome was the catalytic effect of the South Centre grant on further resource mobilisation. Multiple organisations reported securing additional funding or launching new initiatives that built directly on the initial grant-supported activities.

This indicates strong potential for sustainability and scale-up beyond the original funding period.

Engagement in Policy and Global AMR Processes

Some grantees progressed from community-level interventions to engagement in national, regional, and global AMR policy spaces. This included participation in WHO consultations, civil society task forces, working groups, and multilateral dialogues.

These developments demonstrate early contributions toward the programme's longer-term objective of strengthening LMIC representation and influence in global AMR governance. Following (table 3) are the key challenges and lessons learnt through the WAAW engagement with the South Centre.

Table 3: Challenges and lessons learnt from the South Centre WAAW engagement with CSOs

Challenges Identified

- Delays in fund disbursement, often due to international transaction processes or banking constraints, resulted in shortened planning and implementation periods.
- Limited grant size constrained scale, geographic coverage, and frequency of activities. Inflation, increased transport and material costs, and unanticipated expenses (e.g., PPE, waste disposal, logistics) further reduced implementation flexibility.
- Considering the short implementation time, some organisations faced challenges engaging multiple stakeholders simultaneously. Aligning schedules, securing media airtime, and coordinating across regions or sectors required more time and resources than initially anticipated.
- Logistical challenges were common, particularly in reaching remote, rural, or informal settlement areas, often hindered by transportation difficulties, security concerns and weather disruptions thereby affecting the reach of community engagement.
- Engaging target groups was sometimes hindered by competing priorities, including academic examinations for students, heavy clinical workloads for health workers, and livelihood responsibilities of community members. These constraints reduced participation in trainings, sensitisation activities, and data collection.
- Several organisations highlighted difficulties in communicating AMR concepts to communities with low baseline awareness, varying literacy levels, or language and cultural barriers. Significant time and effort were required to simplify messages and ensure comprehension, which limited overall coverage within the available timeframe.

Lessons Learned

- One-off awareness activities were insufficient; sustained and repeated engagement was necessary for meaningful understanding and behaviour change. Collaboration with local institutions, universities, civil society networks, health facilities, and international partners enhanced effectiveness and reduced implementation burdens. Combined efforts enabled broader reach and stronger outcomes than isolated actions.
- Interactive, peer-led, and community-based approaches - such as youth-led campaigns, school programmes, farmer engagement, public transport outreach, and community dialogues - were found to be more effective than top down messaging. Engaging local leaders, journalists, educators, and community influencers early in the process significantly improved reach, credibility, and sustainability. Media engagement, in particular, acted as a strong multiplier for AMR messaging.
- Many organisations observed that young people are highly receptive to AMR messaging and capable of driving change even with limited resources. Youth-led creativity, art, digital tools, and innovation strengthened engagement and may be contributing factor for sustainability of interventions.
- Grantees learned that sustainability cannot be an afterthought. Embedding AMR into existing systems, building local capacity, mobilising additional resources, and planning follow-up activities were essential to sustaining gains beyond WAAW.

In the survey, the participants also highlighted the key support required for better implementation of AMR awareness and advocacy activities and initiatives by CSOs. Following are a few recommendations:

Shift from One-Off Grants to Long-Term Engagement

The participants strongly recommended that the South Centre move toward longer term, multiyear, or repeat funding models, particularly for organisations with proven track records. A continued engagement beyond grant closure was seen as essential for sustaining momentum and impact.

Strengthen Capacity-Building and Mentorship Functions

Some respondents suggested that the South Centre institutionalise regular technical trainings, refresher workshops, and mentorship on advocacy, community engagement, monitoring and evaluation (M&E), resource mobilization and programme design. There was also a sug-

gestion regarding establishing a dedicated mechanism or unit to support CSO capacity strengthening.

Facilitate CSO Networking and Learning Platforms

A recurring recommendation was for the South Centre to establish and convene a structured network or community of practice for AMR-focused CSOs. It was suggested that regular virtual exchanges, regional learning sessions, and experience-sharing platforms would enable peer learning and collaboration.

Access to a library of AMR education and advocacy tools

Some participants suggested to have a library of tools which can help CSOs to effectively reach out to stakeholder groups. Guidance on adapting these tools to local contexts and languages can also be helpful.

Enhance Visibility and Recognition of CSO Contributions

Many organisations recom-



Photo from a high-level dialogue co-organised by the South Centre at the sides of Food and Agriculture Organisation (FAO) of the United Nations Conference 2025, Rome, Italy

mended that the South Centre actively showcase CSO achievements, document impact, and create recognition mechanisms such as annual AMR awards or featured case studies. It was mentioned that the visibility was seen as a motivator and a pathway to additional funding.

Support Policy Engagement and Global Linkages

A few CSOs encouraged the South Centre to more actively facilitate links between grassroots organi-

sations and national, regional, and global AMR policy spaces. Some recommended that the support for participation in policy dialogues, consultations, and international forums would strengthen LMIC civil society influence in AMR governance. Overall, the survey results demonstrate the value of the South Centre's strategic and catalytic support in empowering locally led AMR action, particularly through trust-based funding, flexibility, and respect for contextual priorities. The findings indicate that this support strengthened

organisational capacity, expanded community reach, and enabled innovative, culturally relevant approaches to awareness, stewardship, and One Health engagement. Importantly, many organisations reported increased visibility and recognition at local, national, and, in some cases, international levels, enhancing their credibility with communities, policymakers, and partners. Altogether, these outcomes provide a strong foundation for scaling sustainable, community-centred AMR approaches in future programming.

Convening to catalyse action: ReAct Africa- South Centre Annual AMR regional conferences

The ReAct Africa - South Centre Annual AMR Regional Conference (RAN-SC AARC) illustrates the South Centre's approach to leveraging convenings as policy advocacy platforms rather than stand-alone events. The South Centre's involvement in the RAN Conference began around 2018, at a time when the conference was already established as a regional civil society convening but had limited reach and influence with regards to global AMR policy processes.

This partnership further got strengthened with the Fleming fund support, anchored on a shared objective between ReAct Africa and the South Centre to strengthen Global South voices in AMR governance, particularly in topics dominated by HIC perspectives.

From the outset, the South Centre's role was not operational, but strategic. The South Centre enabled the regional conference to transform into

a policy-facing platform capable of connecting African and LMIC experiences with global AMR debates. Over the years, with the South Centre support, the thematic focus areas of the conference evolved to reflect global AMR policy trajectories, including governance of NAP implementation, One Health coordination, financing constraints, surveillance challenges, and accountability mechanisms.

It aligned the conference deliberations with ongoing global processes - such as World Health Assembly (WHA) discussions, United Nations General Assembly (UNGA) negotiations, and broader debates on AMR financing and access - while ensuring that African and LMIC perspectives were articulated within these frames.

The South Centre provided strategic leadership in making these linkages. The themes of the RAN - SC AARC over the years is summarised in table 4.

Prof Mirfin Mpundu
*Executive Director,
ReAct Africa*



ReAct Africa deeply values the South Centre's partnership, which plays a pivotal role in the success of the ReAct Africa-South Centre Annual AMR Regional Conference. This collaboration ensures that Global South perspectives remain central to the dialogue on antimicrobial resistance and was vital in translating shared challenges into actionable pathways.



Table 4: The themes of RAN-SC AARC

Year	Conference Themes
2018	Combating antimicrobial resistance in Africa to achieve the 2030 agenda
2019	Achieving Universal Health Coverage (UHC) while addressing antimicrobial resistance
2020	What is the status of antimicrobial resistance National Action Plans in the African region?
2021	Progress achieved on the Global Action Plan on antimicrobial resistance and pandemic preparedness in the African region
2022	Africa’s response to antimicrobial resistance: Accelerating one health National Action Plans for the next 5 years
2023	Leave no one behind: Advancing one health antimicrobial resistance National Action Plan implementation in Africa
2024	Global Accountability for AMR response: Investing in priorities for Africa
2025	From Global to Local Action: Operationalising AMR Commitments in Africa & Beyond

The South Centre’s efforts also contributed to consistent participation of representatives from intergovernmental bodies such as FAO, UNEP, WHO and WOAHA, international organisations, fundings agencies, implementing agencies and regional bodies such as Africa CDC, enhancing the conference’s legitimacy and visibility as a policy engagement space. The conference output did not end with the event itself.

Through other platforms of the South Centre, including its interactions with diplomatic missions and participation in high level engagements such as UNGA high-level meetings, selected insights, thematic analyses, and reflections from the event got disseminated and taken up. Though there were structural limitations in the extent to which Global South CSOs could influence final negotiated outcomes in these high-level engagements, the partnership ensured that LMIC concerns such as prevention, equity, financing, access

and implementation feasibility, were articulated and documented within global processes.

This approach also aligned with the broader Fleming Fund objective of strengthening country ownership and policy coherence around AMR, by ensuring that surveillance, stewardship, and NAP discussions were grounded in implementation realities and equity considerations.

A key outcome of the South Centre engagement was the expansion of participation and diversity within the conference, which strengthened its function as a representative policy forum. The conference report shows a clear increase in attendance over time, with participant numbers growing from fewer than 40 in early editions to 150 (figure 4) or more participants per conference following the partnership, including during hybrid formats necessitated by COVID-19. Beyond numerical growth, the profile of participants broadened to include

policymakers, national AMR coordinating mechanism representatives, researchers, youth leaders, and a wide range of civil society organisations.

Through Fleming Fund support channelled via the South Centre, a significant proportion of sponsored participants were African Ministry-level representatives and African-based CSOs, ensuring that community-level and frontline perspectives were consistently present in policy discussions. This strengthened the conference’s credibility as a multi-stakeholder platform capable of informing both regional and global AMR agendas.

Overall, the evidence suggests that the South Centre’s leadership in RAN – SC AARC contributed to elevating the scope, participation, and reach of the conference, while simultaneously advancing the programme’s broader objective of strengthening Global South voices in AMR governance.

The conference became part of

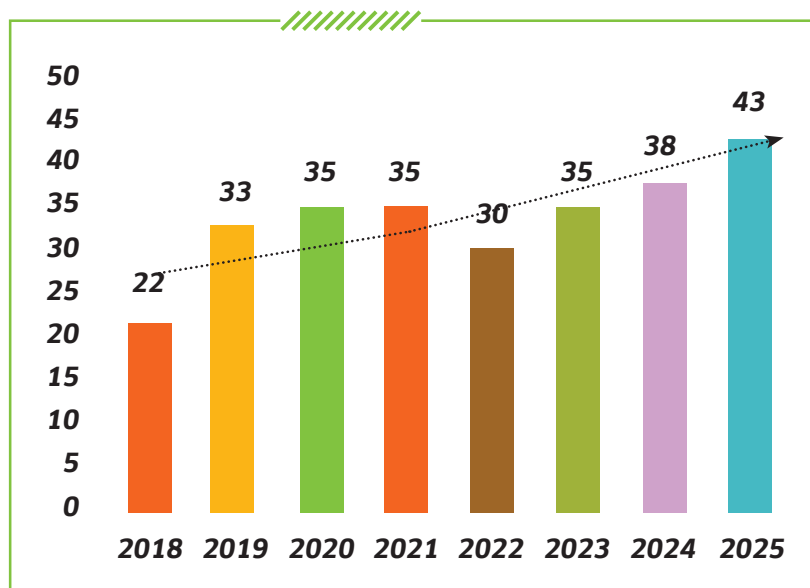
Key achievements of the ReAct Africa South Centre Annual AMR Regional Conference

- Consistently framed AMR as a multisectoral governance and development issue
- Themes evolved from awareness raising to constant challenges around NAP implementation, financing, accountability, one health integration and equity
- Reframed AMR debates from policy adoption to implementation readiness by linking systemic challenges to actionable solutions in financing, accountability, prevention, and multisectoral engagement.
- Consistent inclusion of civil society, youth, faith-based actors, and communities, positioning them as legitimate contributors to AMR governance, advocacy, and accountability - well ahead of many global forums
- Translated One Health from concept to practice by convening cross-sectoral and community actors.
- Reinforced alignment of AMR National Action Plans with global agendas including the SDGs, Universal Health Coverage, and pandemic preparedness.

a continuum of policy engagement activities that included publications, briefings, webinars, and mission-level advocacy. The partnership with ReAct Africa allowed the South Centre to anchor its global policy engagement in a credible, regionally rooted platform, reinforcing the legitimacy and relevance of its AMR work.

As one component of a wider policy engagement strategy, the conference demonstrated how targeted support to convening platforms can amplify LMIC perspectives, inform global debates, and enhance coherence between regional realities and global AMR policy processes.

Figure 4: Countries represented at RAN-SC AARC over the years



Policy advocacy to make AMR governance and interventions inclusive

As part of its Fleming Fund supported AMR programme, the South Centre has pursued a deliberate strategy of policy engagement that combines analytical work, advocacy, and strategic convening to amplify LMIC perspectives in global and regional AMR governance. Rather than focusing only on implementation or service delivery, these engagements aim to shape discourse, inform policy processes, and strengthen the participation of Global South actors in decision-making spaces that influence AMR priorities, financing, and accountability.

Enhancing inclusivity in AMR Multistakeholder Partnership Platform

South Centre joined the AMR Multi-Stakeholder Partnership Platform (MSPP), established by the Quadripartite, in June 2023. It has since played a substantively important role in strengthening the representation and influence of LMICs and CSOs within the MSPP, particularly through its close collaboration with the Antibiotic Resistance Coalition (ARC) and other partners. As an intergovernmental organisation embedded within the MSPP's in-

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Initiative*

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The South Centre is unique as an intergovernmental think tank that works closely with civil society. Together through the Antibiotic Resistance Coalition, we have been able to give voice to shared concerns of low- and middle-income countries (LMICs), helping to guide and shape global discussions. This demonstrates how civil society priorities and LMIC government concerns can move in tandem—a powerful and effective combination. The South Centre’s broad mandate across LMIC issues also allows it to strategically integrate antimicrobial resistance (AMR) into related policy areas, such as access to medicines and pandemic preparedness. The South Centre also has a clear value-added role in convening LMIC governments, as there are very few spaces where such discussions can take place in such a trusted and strategic setting.



tergovernmental cluster, the South Centre provided ARC and allied civil society actors with strategic access across multiple MSPP clusters, enabling more coordinated engagement and situational awareness in a platform characterised by diverse and often competing interests.

A key contribution of the South Centre and its partners was their joint engagement on governance and procedural issues within the MSPP. The South Centre, working closely with ARC, raised concerns about structural imbalances that disadvantaged LMICs and civil society actors relative to better-resourced groups. This included the MSPP’s initial “opt-out” endorsement approach, which risked treating silence as consent, and the dominance of financially resourced, north driven action groups shaping recommendations feeding into the 2024 UNGA Political Declaration on AMR. Through coordinated advocacy the South Centre and ARC successfully influenced procedural changes, resulting in the removal of the opt-out approach and the exclusion of recommendations focused on pharmaceutical pull incentives that were viewed as misaligned with LMIC priorities.

Advancing LMIC voices and One Health Perspectives in High-Level AMR Policy Engagements

Across a wide range of global and intergovernmental forums, South Centre has played a sustained convening and bridging role to elevate LMIC perspectives and embed a One Health framing

within high-level AMR policy debates.

One such example is the ‘Group of 77 and South Centre Convening on the Future of AMR Response in Developing Countries’, held in New York in September 2024 on the sidelines of the UNGA. Co-organised with the Permanent Mission of Uganda, the meeting brought together senior officials from health and other ministries across Africa, Asia, and Latin America to reflect on progress and persistent barriers to NAP implementation. It provided rare, structured space for LMIC policymakers to articulate shared concerns around financing gaps, surveillance-to-action challenges, and the disproportionate AMR burden faced by developing regions, ahead of the 2024 UNGA High-Level Meeting on AMR. By grounding discussions in the South Centre’s analytical work, the convening linked country experience directly to global governance debates and strengthened South - South coordination within UN processes.

In parallel, South Centre has engaged in shaping emerging global AMR governance mechanisms through sustained, evidence-based policy input. Its contributions to the upcoming Independent Panel on Evidence for Action against AMR (IPEA) highlighted the importance of equitable representation of experts from developing countries, meaningful integration of One Health perspectives, and safeguards to ensure scientific independence. Through policy briefs and targeted technical advice to Member States, the Centre amplified

LMIC concerns related to governance design and participation in expert-driven processes, complementing Quadripartite efforts by strengthening the legitimacy and inclusiveness of proposed global AMR institutions.

South Centre has also used thematic policy dialogues to operationalise One Health principles in sector-specific AMR discussions. This approach was exemplified in the high-level dialogue on industry accountability and equity in agrifood sector transformation, co-organised with FAO, the Governments of Kenya and the United Kingdom, and the AMR MSPP in July 2025. By convening ambassadors, senior officials, industry representatives, and civil society

actors, the dialogue foregrounded LMIC perspectives on antimicrobial use in food systems, financing constraints, and context-appropriate regulatory pathways, while reinforcing Quadripartite messaging on prevention, surveillance, and equity. In addition, the South Centre has maintained a visible presence in formal multilateral deliberations, including through regular statements (Box 2) to the WHA, where it has consistently advocated for AMR to remain a cross-cutting WHO priority, for timely updating of the Global Action Plan with context-specific guidance, and for mobilisation of financing commensurate with agreed global targets. These interventions have reinforced Quadri-

partite coordination while clearly articulating LMIC expectations around implementation support, prevention-focused investment, and accountability. Taken together, these examples demonstrate how the South Centre has acted as a trusted intermediary between LMIC constituencies and the Quadripartite-led global AMR architecture. Through strategic convening, policy analysis, and sustained engagement the Centre has ensured that One Health approaches are grounded in development realities and that LMIC voices meaningfully inform high-level AMR policy processes, illustrating the breadth, depth, and continuity of its global AMR engagement rather than isolated or ad hoc interventions.

Statement by the South Centre to the Seventy-eighth World Health Assembly

Agenda Item 15: Antimicrobial Resistance

The South Centre strongly encourages member States and the Director General to maintain antimicrobial resistance as a WHO priority, with adequate resources in headquarters and regional offices, and increased coherence as a cross cutting issue across various WHO programmes. WHO's role is critical in developing technical guidance and providing technical support to members, expanding global awareness of the AMR threat to understanding the urgency of action and investments, and in coordinating the global multisectoral response. We count on WHO to enhance support for countries to implement the enhanced AMR commitments stemming from the UN political declaration adopted in September 2024. We support the mandate for the WHO in coordination with other Quadripartite agencies to update the Global Action Plan on Antimicrobial Resistance by 2026. The updated Global Action Plan should provide clearer, context-specific guidance to help countries collectively to achieve the new quantitative targets by 2030 across human health, animal health, agri-food systems, waste management and water supply, with increased focus on infection prevention, greater private sector engagement, and tracking progress. We need global political leadership to mobilize investments for AMR response, in particular for the very modest target of achieving US\$ 100 million to support at least 60 per cent of countries to achieve funded plans by 2030. We note with concern that special voluntary contributions by countries in the area on AMR have decreased. We also welcome the inclusion of AMR in the pandemic agreement. Through enhanced and equitable collective action, we can still turn the tide on AMR.

Emiliana N. Francis | National AMR Coordinator, Ministry of Health, Tanzania



The South Centre has been a key partner in strengthening Tanzania's response to antimicrobial resistance, supporting multi-sectoral coordination across human and animal health sectors and advancing implementation of our National Action Plan on AMR. Through financial and technical assistance, Tanzania has engaged in regional and global platforms, translating high-level commitments into concrete national action—what I consider political capacity building. The South Centre has also enabled civil society outreach to pastoralist communities, faith leaders, and youth, strengthening awareness and ownership. Support for World Antimicrobial Awareness Week further advanced political dialogue on domestic financing and accountability. Tanzania values continued collaboration aligned with national AMR priorities



Insights from Key Informant Interviews

Selected civil society leaders and representatives of strategic partners were interviewed to understand the relevance and perceived impact of the South Centre's convening and policy advocacy functions related to AMR. The civil society partners, who received the South Centre support in the past, described the Centre as a facilitative partner that enabled locally driven action, rather than directing or prescribing programme content.

This approach allowed partners to align funded activities with contextual realities and organisational mandates. The opinion leaders interviewed either had direct engagement with the South Centre's AMR work - as consultants, collaborators, or partners - or were well aware of its role through global and regional AMR platforms, including WHO processes, United Nations (UN) high level meetings etc. The South Centre was widely recognised as a consistent Global South oriented actor in AMR policy spaces, particularly visible in the high level engagement plat-

forms in Geneva, Rome, New York etc. Following are some of the key themes emerged from the key informant interviews.

Collaboration and Engagement

The CSOs engaged with the South Centre consistently described the collaboration with the South Centre as constructive, respectful, and flexible. It was reported that the communication was clear and responsive, with partners able to seek clarification and negotiate timelines where needed. The interviewed CSOs found the South Centre's openness to different project models improved the recipient organizations to contextualize their interventions and increase the impact. The quality of engagement itself was seen as contributing to partner confidence and institutional maturity. Though many of the opinion leaders widely recognised the South Centre's long standing work in bringing Global South's voice in AMR policy discussions, a few respondents have noted that

many technical communities and country level implementers are not aware of the scope and extend of its AMR related work.

Influencing the landscape

Findings from the interviews suggest that the South Centre played an important role in making global AMR policy platforms, including the MSPP, more inclusive and responsive to the priorities of LMICs. Interviewees highlighted the Centre's consistent emphasis on equity, access, and implementation, which helped ensure that LMIC perspectives were not overshadowed by research, development, or commercial interests. Its selective engagement in global initiatives was reported to have strengthened credibility and trust with civil society and LMIC stakeholders.

According to respondents, the South Centre also acted as a bridge between global AMR governance processes and country-level actors. Through policy briefings, civil society strategy discussions, and

partner networks, it reportedly translated global policy developments into accessible insights for LMIC stakeholders while amplifying country-level concerns in global forums. This two-way engagement was described as a distinctive contribution that enhanced policy relevance and accountability.

The value of the South Centre's collaboration with the Antibiotic Resistance Coalition (ARC) was also emphasized by informants. This partnership was reported to have strengthened civil society coordination, created more inclusive spaces for engagement, and amplified LMIC-informed analysis within global AMR discussions. Overall, interviewees indicated that the South Centre, working with ARC and aligned actors, significantly enhanced the inclusiveness and influence of LMIC and civil society perspectives in global AMR governance.

Relevance and Contribution

Most respondents described the South Centre's contributions as highly relevant, particularly in advancing Global South perspectives in global AMR policy debates.

The Centre's policy briefs, publications, newsletters and convenings were viewed as timely and strategically framed, especially on issues such as access, financing, surveillance expectations, trade, and equity. The South Centre was valued for its ability to convene diverse stakeholders and to engage diplomats and policymakers using evidence grounded in LMIC realities.

It brought some unique perspectives to the table, especially through its excellent experience in working on international development issues and intellectual property rights.

However, several participants noted that the Centre's impact was stronger at the global level than at regional or national levels, and that its contributions were more influential in shaping discourse than in driving concrete policy change on the ground. Some respondents also observed that while the South Centre's analyses were sound, they occasionally reiterated themes already present in the AMR discourse, rather than introducing fundamentally new approaches, which could be challenging in a shrinking funding landscape.

Ms. Lebogang Lebeso
Minister (Health), Permanent Mission of South Africa, Geneva, Switzerland



South Africa has positioned AMR as a national priority, informed by direct experience of AMR-related morbidity and mortality. In a constrained global health financing environment, AMR risks being deprioritised, making the South Centre's work critically important in raising awareness among governments. Through technical briefs, research outputs, and policy analyses, the South Centre translates a highly complex issue into accessible, policy-relevant evidence—especially for ambassadors and diplomats without a health background. Its work documenting AMR's impact in developing countries, grounded in a strong Global South perspective, is particularly powerful. The South Centre's consistent engagement through briefings, accessible resources, and direct collaboration with countries helps strengthen the link between international engagement and domestic policy.



Challenges and Lessons Learned

When it comes to engaging in major global policy processes, participants have identified various challenges that limited the scope of South Centre in moving LMIC priorities forward. This included dominance of high-income country agendas, insufficient financing, limited LMIC participation due to resource and visa constraints, and a tendency to prioritise technological solutions over health system strengthening and access to healthcare. At the same time, partners consistently identified trust-based funding, flexibility, and continuity as critical strengths of the programme. These features were seen as enabling innovation, institutional credibility, and sustained engagement over time. They have reflected that many of the important lessons were around principled engagement and strategic selectivity. At the same time, a few have noted that there was scope for the Centre to engage more deeply with Global South actors beyond Geneva-based processes. They have also stressed that it was important to facilitate more structured, inclusive Global South dialogues focused on equity considerations rather than episodic consultations. According to

the respondents, the South Centre should also prioritize systemic solutions rooted in structural reform than quick fixes.

Sustainability & Future Engagement

Looking forward, partners identified a clear role for the South Centre as a convenor and strategic intermediary that can strengthen Global South representation in AMR governance and global policymaking. The respondents felt that the South Centre should continue functioning as a policy think-tank, and advocate for LMIC priorities in AMR. Respondents emphasised the need to move beyond short-term or annual grants to CSOs toward longer-term engagement models that combine funding with technical support, policy translation, and networking. The South Centre's ability to link AMR to broader development, equity, trade, and governance debates was widely viewed as its comparative advantage, but there should be a system to expand the partners' understanding of these issues too. Participants emphasised the importance of maintaining this role amid shrinking global health financing and weakening multilateralism. There was strong interest in the South Centre fa-

ilitating structured engagement and networking platforms for supported CSOs, provided these had a clear mandate and complemented existing regional and global coalitions.

The respondents also emphasized the need for the South Centre to sharpen its value proposition, prioritise areas where it has the greatest added value, and avoid overextension. Suggested improvements included longer-term strategic planning, clearer prioritisation of thematic areas, stronger regional engagement, and more systematic follow-up on policy dialogues and convenings. Looking beyond the Fleming Fund, partners prioritised the South Centre's continued support for Global South-led advocacy and convening platforms that link community experience with national, regional, and global policy processes.

The participants recommended sustaining policy-oriented convening and thought leadership, particularly on access, financing, intellectual property and LMIC representation. At the same time, several emphasised that in the current funding environment, protecting and consolidating existing gains may be as important as pursuing expansion into new areas.

Analysis of the South Centre's AMR-related Publications

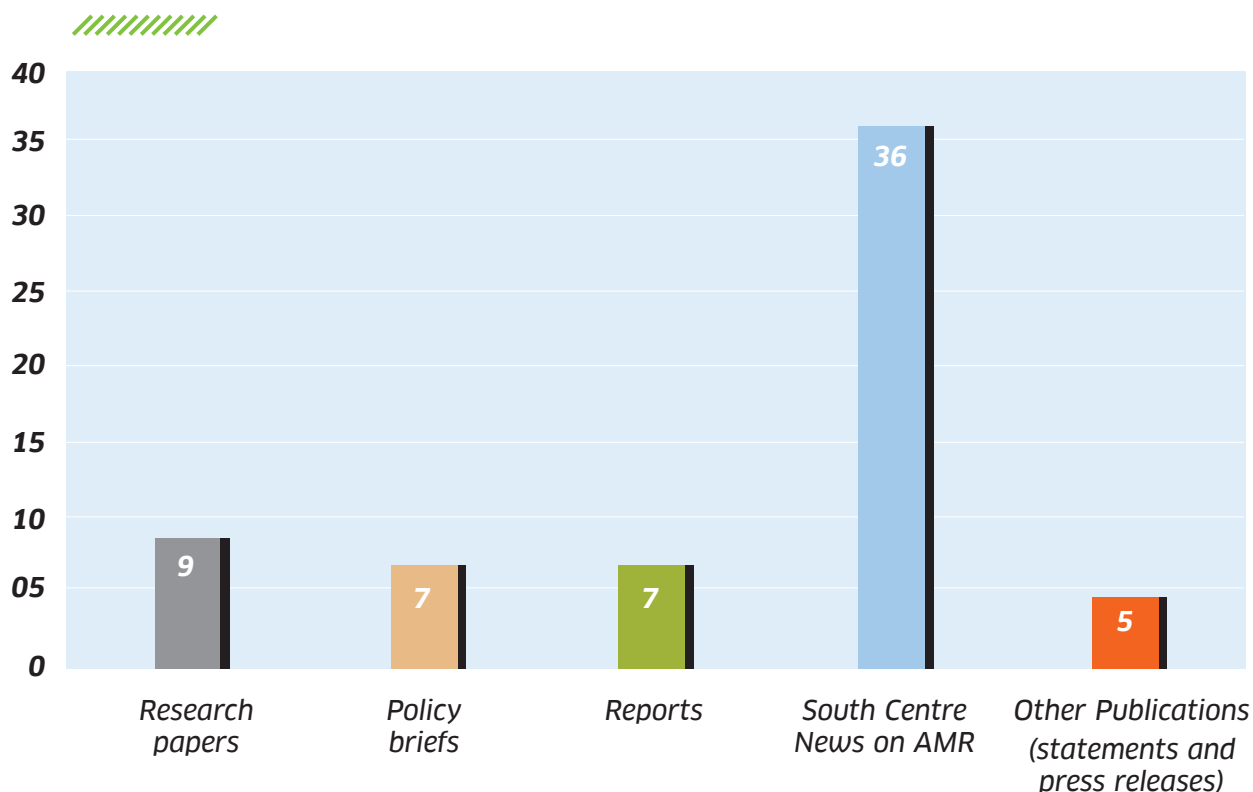
This section synthesizes the South Centre's AMR-related publications produced and disseminated as part of the portfolio of activities supported by the Fleming Fund grant.

These publications reflect the South Centre's technical expertise and influence in shaping AMR

policy frameworks. The publications span across research papers, policy briefs, peer-reviewed commentary, standalone reports/webinar outputs, and a long-running stream of AMR related news (figure 5) - all available from the South Centre website (annex 4). Its content analysis showed that

the publications articulate a distinctive value proposition, linking global AMR policy deliberations with country level realities in LMICs, the niche the South Centre constantly tried to address. Following are some of the main themes addressed through the publications.

Figure 6: Number of publications under various categories between 2020 - 2025



Civil society leadership, participation, and accountability in AMR governance

A recurring proposition in these publications is that CSOs in LMICs are not “add-ons” but core delivery and accountability actors, with ability to support community awareness, pressing for policy coherence, monitoring implementation, and sustaining political attention in multilateral processes. The Research Paper on civil society action argues that enabling factors - predictable and adequate resourcing, integration into formal governance framework, and access to evidence for the CSOs - improve the legitimacy and implementation prospects of AMR policies, including NAPs. Its suggested interventions emphasized that international organizations and governments should recognize CSOs as essential actors in the

AMR response by providing sustained financial and technical support and valuing their expertise. These were reinforced through the South Centre’s consistent AMR news coverage documenting CSO engagement around WHO governing bodies, UN processes, and other technical standard-setting interventions.

Key publications:

- [How Civil Society Action can Contribute to Combating Anti-microbial Resistance \(Research Paper 126, 2020\)](#)
- [South Centre News on AMR \(series page\)](#)

These publications have laid the foundation for strengthening civil society engagement in the global AMR response. It projects civil society support as being catalytic in enabling Global South civil

society and research institutions to participate meaningfully and make informed decisions in national planning and global accountability moments. Besides, these publications complements the quadripartite’s multi-stakeholder approach and the political declaration of the UN General Assembly High-Level Meeting on AMR 2024, by ensuring that implementation constraints and lived realities are represented in policy cycles, not only in technical guidance.

National Action Plans: implementation gaps, financing constraints, and monitoring frameworks

South Centre publications have consistently highlighted a persistent “implementation gap” in the execution of AMR NAPs across LMICs, noting that while formal adoption of NAPs is now widespread, effective delivery has lagged behind political

commitments. Its analyses point to chronic underfunding, weak intersectoral coordination across human, animal, and environmental sectors, and limited M&E capacity as key structural constraints undermining implementation. Several publications observe that AMR NAPs frequently operate in parallel to broader health-system planning, public financial management, and sectoral budget processes, resulting in plans that lack institutional ownership and predictable resourcing. A distinctive contribution of the South Centre's work is its explicit focus on financing as a binding constraint - rather than a secondary consideration - and its attention to practical, context-appropriate M&E approaches that can link surveillance data to stewardship actions, policy adjustment, and accountability mechanisms, thereby supporting the transition of NAPs from strategic documents into operational instruments.

Key publications:

- [Considerations for the Effective Implementation of National Action Plans on AMR \(Policy Brief 53, 2020\)](#)
- [SC Report – AMR NAPs & Health Financing, April 2025](#)
- [Webinar: Advancing NAPs on AMR amidst Health Financing Challenges \(20 March 2025\)](#)
- [Capacity Building Workshop on M&E Frameworks in AMR NAPs \(28 March 2025\)](#)
- [Leveraging the AMR Declarations of 2024 to Reduce the Burden of Drug-Resistant Infections \(Policy Brief 137, 2025\)](#)

The 2024 UN political declaration calls for accelerated country action and stronger accountability, but many LMICs require sustained policy support to

align NAPs with fiscal space, primary health care priorities, and service-delivery realities. The foundational work and publications of the South Centre provides LMICs the much needed energy and insights to convert global commitments into implementable roadmaps, including feasible indicators and financing pathways, strengthening coherence with WHO's revised Global Action Plan objectives.

Stewardship beyond human health: livestock, food systems, and aquaculture

South Centre publications on antimicrobial use in food-producing animals and aquaculture frame misuse as a structural outcome of food system dynamics rather than a purely technical or behavioural issue, highlighting the role of economic incentives, export pressures, biosecurity gaps, and fragmented regulation. Drawing on country- and sector-specific analyses, the publications show that reductions in antimicrobial use are unlikely without complementary investments in animal husbandry and its extension services, vaccination, and biosecurity, alongside clear regulatory distinctions between therapeutic, prophylactic, and growth-promoting use. Studies on livestock and aquaculture further caution that stringent AMR-related standards, if implemented without adequate technical and financial support, risk shifting compliance costs onto LMIC producers and undermining livelihoods and market access. A central contribution of this body of work is the identification of practical, context-sensitive policy levers - such as aligned food safety standards, coordinated governance across agriculture and trade, and market incentives for compliant producers - that embed AMS within broader One Health, food security, and devel-

opment objectives.

Key publications:

- [Antimicrobial Resistance: Optimizing Antimicrobial Use in Food-Producing Animals \(Research Paper 201, 2024\)](#)
- [Reducing the Unnecessary Use of Antimicrobials in Animal Farming \(Policy Brief 114, 2022\)](#)
- [Constraints to and Prospects for Sustainable Livestock Sector Practices in Argentina with Emphasis on Antimicrobial Usage \(Research Paper 202, 2024\)](#)
- [AMR in Aquaculture: Enhancing Indian Shrimp Exports through Sustainable Practices and Reduced Antimicrobial Usage \(Research Paper 209, 2024\)](#)

South Centre's publications on AMR in non-human sectors operationalises the One Health approach by offering policy-relevant analysis for agriculture and aquaculture - sectors central to LMIC economies and trade. These publications leverage the South Centre's rich background of working on issues related to systemic transformation in LMIC settings. Its continued support would help bridge technical guidance from the Quadripartite organizations with regulatory realities and producer incentives, advancing One Health implementation without undermining livelihoods or food security.

Surveillance, stewardship integration, and data-to-action pathways

South Centre publications consistently emphasize that AMR surveillance, while essential, is insufficient on its own unless it

is deliberately linked to AMS, IPC, diagnostics, and health-system financing decisions. The publications highlight that in many LMICs, surveillance data remain underutilized due to fragmented information systems, limited laboratory capacity, workforce constraints, and weak institutional linkages between data producers and policy or regulatory actors. Insights from WAAW reports and convenings point to the need for stronger “data-to-action” pathways, including integration of AMR indicators into routine health information systems, closer alignment between laboratory networks and stewardship or IPC programmes, and incorporation of surveillance outputs into NAP planning and budgeting cycles. The South Centre has also published the GUIDE framework to simplify and optimize the process of antibiotic prescribing in healthcare facilities. Such practical publications have tremendous value in increasing the uptake of stewardship interventions and help with having a structured approach to appropriate use of antimicrobials, especially in LMICs.

Key publications:

- Participation of South Centre Member Countries in the WHO GLASS: Progress and Gaps in AMR Surveillance and Stewardship Efforts (Research Paper 227, 20 November 2025) <https://www.southcentre.int/research-paper-227-20-november-2025/#more-25152>
- [Report on Antimicrobial Stewardship and AMR Surveillance: Insights from the South Centre WAAW 2024 Webinar \(Feb 2025\)](#)
- [The South Centre | SC Guide Framework for Evidence-based Antibiotic Prescribing, November 2025](#)

Such publications strengthens the AMR-related programmes by developing implementation lessons, convening practitioners, and tying surveillance to stewardship and health-system decision-making - helping ensure that surveillance investments improve outcomes rather than creating stand-alone reporting pipelines. The stewardship-linked products from South Centre are also important in complementing the guidance available from WHO, including the AWaRe categorization and the AWaRe antibiotic book.

Pandemic lessons: resilient stewardship, IPC, and diagnostics

South Centre policy work on the intersection between COVID-19 and AMR shows that health system shocks can significantly intensify inappropriate antimicrobial use and disrupt stewardship programmes, particularly through widespread empirical prescribing amid diagnostic uncertainty and the reallocation of resources away from routine AMS, IPC, and AMR surveillance activities. The publications document how limited diagnostic capacity, emergency-driven clinical decision-making, and fragmented preparedness frameworks contributed to increased antimicrobial consumption during the Covid19 pandemic. Drawing on these lessons, the analyses argue that antimicrobial stewardship must be embedded within pandemic preparedness and response architectures, alongside strengthened IPC, sustained laboratory and diagnostic capacity, and protected financing for stewardship functions. A key takeaway is the need to institutionalize One Health coordination during crises to prevent erosion of AMR gains, reinforcing

that future emergency preparedness strategies must explicitly integrate AMR considerations to ensure resilience and continuity of stewardship efforts.

Key publications:

- [Examining antimicrobial resistance in the light of the COVID-19 pandemic \(Policy Brief 82, 2020\)](#)
- [Lessons from COVID-19: Strengthening Antimicrobial Stewardship Prior and During Pandemics \(Policy Brief 136, 2025\)](#)

Post-pandemic recovery and preparedness agendas provide a strategic entry point for AMR integration. The South Centre’s continued analysis and strategic publications can help countries translate pandemic lessons into durable AMS, IPC, and diagnostics investments - aligning with the Global Action Plan objective on optimizing antimicrobial use and strengthening surveillance and infection prevention. Such foundational work also provides guidance to countries to mainstream AMR into pandemic preparedness initiatives, especially when applying for multilateral support through instruments like the Pandemic Fund.

Access, innovation, and equitable R&D: moving beyond ‘last mile’ framing

The South Centre publications consistently frame AMR as a dual challenge of stewardship and access, highlighting that many LMICs face both inappropriate antimicrobial overuse and inadequate access to quality-assured antibiotics. A few analyses argue that sustainable access cannot be treated as a simple distribution issue, but requires fit-for-purpose products, resilient supply chains, strong

regulatory and quality assurance systems, predictable financing, and strengthened health systems. This body of work links AMR to broader access-to-health debates and critiques the limitations of market-driven R&D models, emphasizing the nature of AMR as a systemic failure. The South Centre publications further stresses the need for increased investment in health system strengthening and preventive measures such as IPC, WASH, vaccination, and diagnostics, alongside adherence to globally agreed R&D principles of affordability, effectiveness, efficiency, and equity, to ensure integrated and sustainable AMR responses.

The publications are aligned with the 2024 UNGA political declaration on AMR which emphasizes equitable access and innovation alongside stewardship. The South Centre's intergovernmental mandate and presence in Geneva position it to track and translate these commitments into policy options relevant to LMIC negotiating priorities (equitable financing, access, and sustainable innovation models), complementing quadripartite technical leadership with development-oriented policy analysis.

South Centre's long-running AMR coverage systematically tracks major multilateral processes - including WHA resolutions, UN high level meetings and G20 deliberations, while analysing their implications for developing countries. The publications have successfully informed key stake-

Key publications:

- [Achieving sustainable access to antibiotics is more than just a last mile challenge \(Nat Rev Microbiol, 2024\)](#)
- [When Medicines Don't Work Anymore \(Book, 2018\)](#)



Photo from South Centre side event at G20 2024, Rio de Janeiro, Brazil

holder groups that global political declarations and technical commitments risk outpacing the financing, institutional support, and accountability mechanisms needed for effective implementation in LMICs, particularly for NAPs and One Health coordination. Recent work situates AMR governance within broader debates on global public goods and equitable multilateralism, emphasizing the need for inclusive

participation, coherence across sectors, and governance arrangements that match ambition with resources.

Collectively, this body of work underscores the South Centre's role in linking global AMR governance frameworks - such as the Global Action Plan on AMR, the Quadripartite Joint Secretariat, Global Leaders Group and the MSPP - to country-level realities and equity considerations.

From Evidence to Action

This section assesses the achievements, outcomes, and added value of the South Centre's AMR programme supported by the Fleming Fund between 2018 and 2025, drawing on the desk review, survey findings, key informant interviews, and analysis of AMR publications. In line with the OECD-DAC evaluation criteria, the analysis considers relevance, effectiveness and coherence of the programme. It also points to a strong and credible foundation for the South Centre's engagement in AMR, while also revealing clear opportunities to sharpen its strategic positioning, deepen impact, and enhance sustainability in a constrained global health financing environment.

Relevance: Alignment with LMIC Priorities and AMR Needs

The findings demonstrate a high degree of relevance of the South Centre's AMR programme to the priorities and constraints faced by LMICs. As shown in the survey there was a near-universal agreement among supported CSOs that programme activities, particularly WAAW support, were highly relevant to community needs. Activities were consistently tailored to local social and cultural contexts, reaching diverse populations including youth, farmers, health workers, informal workers, and marginalised communities. This helped to increase the visibility of AMR among the public and policy circles and contributed to mobilization of stakeholders. At the global level, the South Centre's analytical and convening

work addressed issues repeatedly identified as binding constraints in LMIC AMR responses: underfunded NAPs, weak links between surveillance and action, limited One Health coordination, and inequities in access to antibiotics and global decision-making. The programme's emphasis on financing, governance, access, and implementation feasibility reflects a strong alignment with LMIC priorities, complementing the technical focus of the quadripartite agencies and filling a critical policy gap.

Effectiveness: Strengthening Capacity, Voice, and Policy Engagement

The programme was effective in strengthening LMIC engagement in AMR advocacy and governance, though outcomes were often indirect and catalytic rather than immediately measurable. At community and national levels, CSO grantees reported clear outcomes in expanded reach, strengthened organisational capacity, increased credibility and visibility, and institutionalisation of AMR activities within health, education, and agricultural systems. The youth engagement emerged as a particularly strong outcome, with multiple organisations establishing AMR clubs, youth ambassador programmes, and creative digital campaigns that are likely to sustain engagement beyond the grant period.

At the global and regional level, key informant interviews consistently highlighted the South Centre's effectiveness in amplifying LMIC perspectives within

high-level AMR policy spaces. Through strategic convenings such as the RAN-SC AARC, engagement in the AMR MSPP, and participation in UN and WHO processes, the Centre strengthened the visibility and legitimacy of Global South concerns related to equity, financing, access, and implementation feasibility. While respondents acknowledged that power asymmetries in global governance limited the extent to which these inputs translated into concrete policy shifts, the South Centre was widely described as a trusted intermediary and facilitator, enabling CSOs and LMIC representatives to access spaces that would otherwise be difficult to penetrate.

Coherence: Complementarity with Global AMR Architecture

The programme demonstrated strong coherence with broader global AMR initiatives, particularly the quadripartite-led AMR response. Rather than duplicating technical guidance, the South Centre's work complemented quadripartite efforts by focusing on governance, policy translation, and equity dimensions in LMICs. Its publications and dialogues consistently reinforced One Health principles while highlighting the practical and political challenges of implementation in LMIC contexts such as food system incentives, trade pressures, and fiscal constraints. The South Centre was able to leverage its core strengths and institutional expertise to shape the global AMR response, while being a meaningful ally to intergovernmental organizations and LMIC governments. Its en-

agements with mechanisms such as the MSPP and proposed IPEA on AMR further illustrate coherence in practice. The South Centre worked within existing structures to improve inclusivity, accountability, and representation, rather than advancing parallel or competing processes. This alignment enhanced the legitimacy of global AMR governance discussions while ensuring that LMIC perspectives were not marginalised.

Opportunities for South Centre in the AMR space

The findings from the survey, key informant interviews, and desk review point to a strong and credible foundation for the South Centre's engagement in AMR, while also revealing clear opportunities to sharpen its strategic positioning, deepen impact, and enhance sustainability in a constrained global health financing environment (figure 6).

The South Centre's comparative advantage lies not in duplicating technical implementation or surveillance activities, but in strengthening the policy, governance, and equity conditions that determine whether such investments translate into sustained change - particularly in LMICs.

Positioning as a Global South Policy Intermediary

The analysis highlights a strong opportunity for the South Centre to consolidate its role as a trusted policy intermediary linking community-level experience, civil society action, and multilateral AMR governance. Its intergovernmental status, credibility, and trust-based engagement model are enabling factors that allow Global South per-

Professor Dame Sally Davies UK Special Envoy on Antimicrobial Resistance



Antimicrobial resistance remains one of the defining global health and development challenges of our time, with its impacts falling heaviest on low- and middle-income countries (LMICs). Placing their priorities, development realities, and expertise at the heart of our efforts is essential to shaping an effective, sustainable response to AMR. This impact report demonstrates the South Centre's vital role in elevating those perspectives and ensuring that global commitments are grounded in real-world needs, equity, and feasibility. Their partnership with civil society, support for country-level action, and leadership in global policy forums have strengthened the foundation for a more inclusive and accountable AMR agenda. But this is no moment for complacency. We must build on what has been achieved to date and sustain long-term engagement with LMIC partners, ensuring that global governance structures reflect the priorities of the Global South. The Fleming Fund, a UK aid program, has partnered with the South Centre since 2018, and I applaud South Centre for its steadfast leadership. I urge all partners—governments, donors, and multilateral bodies—to step up with renewed commitment. Together, we can turn evidence into action and secure a healthier, fairer future for all.

spectives to access global policy spaces that are often difficult for civil society actors to enter independently. This positions the South Centre to systematically translate grassroots evidence, country-level implementation challenges, and CSO insights into policy-relevant inputs for global negotiations, standard-setting processes, and accountability mechanisms.

Leveraging Catalytic Grant-Based Support to CSOs

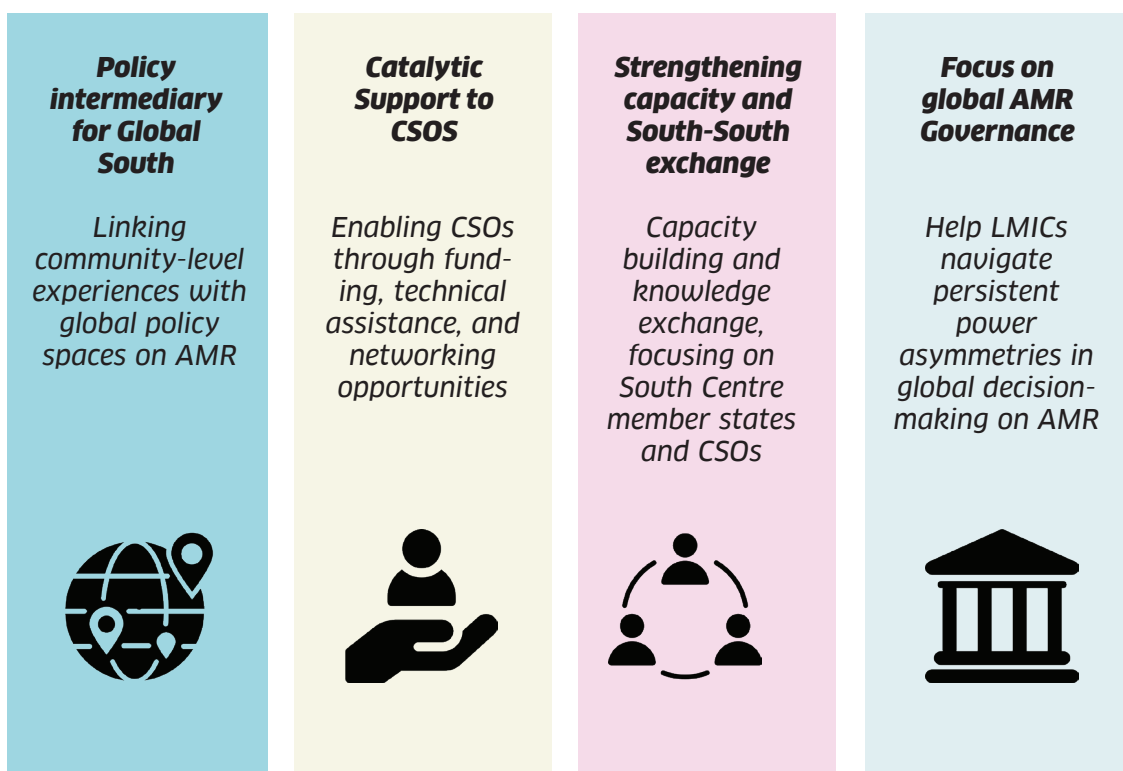
The Fleming Fund supported small grants, particularly those linked to WAAW, demonstrated a clear catalytic effect. These grants enabled organisations to

expand geographic and population reach, strengthen youth leadership, improve institutional credibility, and begin embedding AMR activities within existing health, education, and community systems. The evidence shows that even modest, flexible funding can generate significant outcomes when aligned with locally driven priorities and delivered through trusted partnerships. This creates an opportunity for the South Centre to further leverage such catalytic support as a strategic entry point for longer-term influence. However, such funding support should be complemented by technical assistance and networking opportunities, for optimal impact.

Figure 6: The South Centre's opportunities in the AMR space

Opportunities for South Centre in the AMR space

Priorities and strategies to consolidate the achievements from the Fleming Fund grant



Strengthening Capacity, Learning, and South-South Exchange

Another opportunity lies in strengthening the South Centre's role in capacity building and knowledge exchange. Establishing light but intentional learning platforms - such as thematic exchanges, or regional dialogues - without duplicating the existing ones provided by others, could significantly amplify the impact of existing investments and strengthen South - South collaboration. Member states of the South Centre and CSOs interested in AMR can be the primary targets for such capacity building exercises.

Sustaining Relevance in Global AMR Governance

South Centre's sustained engagement in high-level AMR processes through convenings in Geneva, New York, Rome, and other multilateral settings positions it well to contribute to ongoing debates on access, financing, equity, and AMR as a global public good. As countries move to operationalise the 2024 UN Political Declaration on AMR, there is increasing demand for institutions that can help LMICs navigate implementation trade-offs, resource constraints, and persistent power asymmetries in global decision-making. A distinctive strength of the South

Centre lies in its ability to articulate and elevate Global South concerns within these processes, ensuring that perspectives grounded in country realities inform global policy discussions. While much of the global AMR agenda continues to concentrate on research and development pathways, fewer actors focus consistently on the governance, financing, and equity dimensions that shape implementation outcomes in LMICs. The Centre's existing portfolio, inter-governmental mandate, and credibility therefore provide a strong foundation to respond to this demand and will also complement the R&D-focused efforts within the global AMR ecosystem.

The Way Forward for the South Centre’s AMR Engagement

Looking beyond the Fleming Fund, the evidence points to a continued need for Global South-oriented policy analysis, convening, and advocacy in the AMR space - especially as multilateralism weakens and global health financing contracts. The South Centre is well positioned to play a stabilising role by maintaining institutional memory, sustaining networks, and linking AMR to broader debates on development, trade, equity, and global public goods.

Strategic Consolidation and Protection of Comparative Advantage

The way forward for the South Centre lies in consolidation rather than expansion. As expectations around AMR governance and implementation continue to grow, there is a risk of overextension that could dilute the Centre’s comparative advantage. To mitigate this, the South Centre should sharpen its value proposition by prioritising areas where it has demonstrated clear added value - namely policy analysis, convening, and Global South advocacy on access and innovation, financing and implementation of National Action Plans, surveillance-to-action pathways, and civil society participation. The strategic selectivity will be critical to maintaining focus, coherence, and credibility in a constrained funding environment.

From One-Off Grants to Sustained Engagement and Learning

Evidence from civil society partners indicates that short-term, one-off grants, while catalytic, limit continuity, learning, and sustainability. A key strategic direction

is therefore to transition toward longer-term or phased engagement models that combine modest financial support with technical accompaniment and structured follow-up. This approach would reduce the risk of fragmented engagement and enable partners to move beyond awareness-raising toward institutionalisation and policy influence, while remaining consistent with the South Centre’s facilitative, non-directive engagement model.

Deepening Regional Engagement Without Overstretch

The analysis indicates that many LMIC stakeholders, particularly technical communities and country-level implementers, are not fully aware of the scope and intent of the South Centre’s AMR work. Modest, well-targeted capacity-building and knowledge exchange activities, such as thematic dialogues or implementation focused policy exchanges, can serve not only to facilitate discussion but also to increase the visibility and accessibility of the Centre’s policy work.

This can be done in partnerships with trusted institutions and CSO partners which will translate global debates into context-relevant insights and showcase emerging lessons to country level stakeholders.

Through this the South Centre can strengthen its presence beyond global policy circles, enhance recognition of its unique role, and improve the practical uptake of policy-oriented analysis at national and subnational levels. This approach would strengthen relevance and resonance while avoiding the risks associated with direct implementation or institutional overreach.

Resource mobilization for sustainability of initiatives

The organization should be able to diversify its donor base to ensure sustainability of activities initiated through Fleming Fund support. This can happen through a clear value proposition developed based on the AMR-related work done over the last 8 years and the unique capabilities of the organization. The South Centre can project the impact of its work through the value proposition and/or capability statement. This should also be accompanied by a mapping of possible donors who may be interested in supporting the organization on AMR. A strategic outreach should also be made to member states of the South Centre to explore funding opportunities on AMR.

In conclusion, by continuing to position AMR within broader debates on development, trade, equity, and global public goods, the South Centre is well placed to strengthen its strategic relevance and institutional resilience in the next phase of the global AMR response. This framing enables the Centre to address AMR not only as a technical challenge, but as a systemic development issue shaped by governance, financing, and power dynamics, which will remain critical as countries move from commitments to implementation of the 2024 UN Political Declaration on AMR.

By sustaining and sharpening this approach, the South Centre can continue to complement the quadripartite-led global AMR response - supporting more equitable, coherent, and durable outcomes - even in an increasingly constrained and uncertain global environment.

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Annex

1. Survey Questionnaire: Feedback on South Centre’s AMR Programme

This survey seeks your feedback on the South Centre’s support to civil society organizations (CSOs) through small grants provided for World Antimicrobial Awareness Week (WAAW). Your insights will help us understand the effectiveness of this initiative, document its impact, and guide future support for CSOs in amplifying the voices of the Global South in the AMR response. Your responses will be kept confidential and used only for the purpose of the South Centre’s impact report.

Section 1: General Information

1. Name of organisation: -----
2. Country (where the organisation is based: -----
3. Year(s) in which you received support from the South Centre: (mark all that is relevant)
a. 2020, b.2021, c.2022, d. 2023, e. 2024, f.2025
4. Briefly describe the main WAAW activity(ies) your organization implemented with the South Centre’s support. (Open text, maximum 100 words)

Section 2: Reach and Engagement

6. Primary target audiences reached: (Select all that apply)
 - General public
 - Students/youth
 - Health workers
 - Community leaders
 - Faith leaders
 - Policymakers/government representatives
 - Other (please specify): -----
7. Which communication or engagement channels did you use? (Select all that apply)
 - In-person events
 - Radio or television
 - Social media campaigns
 - Printed materials (flyers, posters, etc.)
 - School or community outreach sessions
 - Faith-based gatherings
 - Other: -----

Section 3: Effectiveness and Impact

9. In your opinion, to what extent did your activities increase awareness and understanding of AMR in your community?

- Very high impact
- Moderate impact
- Limited impact
- Not sure

10. Please share one or two specific outcomes or successes from your WAAW activities supported by the South Centre. (maximum 50 words)

11. How did your organization measure or assess the effectiveness of your activities (e.g., feedback, participation, media coverage)? (maximum 50 words)

Section 4: Relevance and Collaboration

12. On a linear scale of 0 to 5, how will you rate the relevance of WAAW activities to your organization's ongoing work and priorities? Scale 0 - not relevant, 5 - highly relevant

13. Did the support from the South Centre help strengthen your organization's capacity in AMR advocacy or community engagement?

- Yes, significantly
- Somewhat
- Not much
- Not at all

14. Did you collaborate with other CSOs, government institutions, or networks during WAAW?

- Yes No
- If yes, please specify the partners: -----

Section 5: Lessons Learned and Challenges

15. What were the main challenges faced during the planning or implementation of your WAAW activities? - specific to the South Centre supported activities (maximum 50 words)

16. What key lessons did your organization learn from implementing WAAW activities? (maximum 50 words)

17. What kind of support would help your organization better implement AMR awareness and advocacy activities in the future? (maximum 50 words)

18. What recommendations would you give to strengthen the South Centre's role in supporting CSOs on AMR in the future? (maximum 50 words)

19. Would you like to participate in a virtual activity (webinar) to showcase the WAAW campaign that you undertook with the South Centre's support?

- Yes No

20. Any progress in your AMR work since you received the grant from the South Centre?

- Yes No

21. If yes, please describe briefly (maximum 100 words): -----



Chisokone Market Outreach by Alliance Against Antimicrobial Antipathy - Ndola, Zambia; Photo credits Alliance Against Antimicrobial Antipathy

2. Key Informant Interview guide

Introduction (for all interviewees)

- Thank you for agreeing to take part in this interview. We are conducting an impact assessment of the South Centre's AMR programme supported by the Fleming Fund (2018-2025).
- The purpose is to capture key achievements, outcomes, challenges, and lessons learned, particularly in advancing the voices and priorities of the Global South in the AMR agenda.
- Your views and responses will be kept confidential and will only be used for analysis and reporting purposes.
- The interview will take about 30-45 minutes.
- Do you have any questions?

For Partners

Brief introduction pleasantries

Ask about priority areas of work of the partner organization- awareness, advocacy, governance, education, access, stewardship,

surveillance, lab strengthening?

How were they associated with the AMR-related work of South Centre (roles/responsibilities duration)

Collaboration and Engagement

1. How would you describe your experience collaborating with the South Centre on AMR activities?
2. In what ways did South Centre support your advocacy, capacity building, or technical engagement?

Programme Outcomes and Impact

3. What changes have you observed in your organization's or network's ability to influence AMR policy and practice due to South Centre's support?
4. Did the programme help sustain CSO voices from LMICs in global or regional AMR platforms?
5. Did the CSO voices from the global south influence the outcomes of the UN General Assembly High-Level meeting 2024, the Global Action Plan

update etc? Were the LMIC interests sufficiently included?

Challenges and Lessons Learned

6. What barriers did you face in working with the South Centre on AMR advocacy, and how was it addressed?
7. Are there lessons or good practices from this partnership that should be retained going forward?

Sustainability & Future Engagement

8. How do you see the role of the South Centre in future AMR-related advocacy and governance?
9. What suggestions would you give to ensure sustainability of CSO and LMIC voices in the AMR agenda, through the South Centre.

For opinion leaders

Brief introduction pleasantries

Ask if they were associated with the AMR-related work of South

Centre or aware of South Centre's work

Relevance and Contribution

1. How relevant and useful were the South Centre's contributions to advance the AMR agenda globally, regionally and nationally?
2. Can you share examples of how the South Centre's engagement influenced policy processes in your country or at global fora?

Impact

3. To what extent did the South Centre strengthen the representation of LMIC concerns in global AMR governance?
4. Did the programme help the global AMR community access evidence, networks, or technical support otherwise unavailable?

Challenges and Lessons

5. Are the LMIC interests and voices adequately represented in global policy processes like Global Action Plan update?
6. What challenges remain in ensuring LMIC priorities are reflected in the global AMR agenda?
7. What lessons can be drawn from the South Centre's approach to support the global policy community working or interested in AMR?

Sustainability and Future Outlook

8. What role should the South Centre play in the post-Fleming Fund period to continue supporting LMIC governments and CSO voices on AMR?
9. In your opinion, what should be

the unique value proposition of South Centre in the global AMR landscape?

10. Are there specific areas where sustained or enhanced collaboration would add the most value?

Closing Questions (for all groups)

- Looking back, what is the single most important contribution of the South Centre's AMR programme?
- If you could suggest one priority activity which should be sustained by South Centre after Fleming Fund support ends, what would it be?
- Do you have any other comments, reflections, or recommendations?



EcoMed Nexus volunteers advancing AMR awareness through community outreach. Photo by EcoMed Nexus Foundation

3. List of selected AMR publications from the South Centre 2020–2025

Research papers

1. How Civil Society Action can Contribute to Combating Antimicrobial Resistance (Research Paper 126, December 2020). By Mirza Alas Portillo <https://www.southcentre.int/research-paper-126-december-2020/>
2. Malaria and Dengue: Understanding two infectious diseases affecting developing countries and their link to climate change (Research Paper 133, August 2021) By Mirza Alas <https://www.southcentre.int/research-paper-133-august-2021/>
3. Antimicrobial Resistance: Optimizing Antimicrobial Use in Food-Producing Animals (Research Paper 201, 27 June 2024) By Viviana Munoz Tellez <https://www.southcentre.int/research-paper-201-27-june-2024/>
4. Constraints to and Prospects for Sustainable Livestock Sector Practices in Argentina with Emphasis on Antimicrobial Usage (Research Paper 202, 28 June 2024) By David Oseguera Montiel <https://www.southcentre.int/research-paper-202-28-june-2024/>
5. Catalyzing Policy Action to Address Antimicrobial Resistance: Next Steps for Global Governance, (Research Paper 208, 10 September 2024) By Anthony D. So <https://www.southcentre.int/research-paper-208-10-september-2024/>
6. AMR in Aquaculture: Enhancing Indian Shrimp Exports through Sustainable Practices and Reduced Antimicrobial Usage (Research Paper 209, 25 September 2024) By Robin Paul <https://www.southcentre.int/research-paper-209-25-september-2024/>
7. Participation of South Centre Member Countries in the WHO GLASS: Progress and Gaps in AMR Surveillance and Stewardship Efforts (Research Paper 227, 20 November 2025) By Dr. Rasha Abdelsalam Elshenawy <https://www.southcentre.int/research-paper-227-20-november-2025/#more-25152>
8. Community Based Surveillance for AMR Monitoring: Significance, Requirements and Feasibility in LMICS (Research Paper 223, 22 July 2025) By Afreenish Amir <https://www.southcentre.int/research-paper-223-22-july-2025/#more-24787>
9. Designing an Independent Panel on Evidence for Action on Antimicrobial Resistance: Lessons from Selected Bodies in Global Health, Climate Change and Biodiversity (Research Paper 222, 16 July 2025) By Viviana Munoz Tellez and Francesca Chiara <https://www.southcentre.int/research-paper-222-16-july-2025/#more-24749>

Policy briefs

1. Examining antimicrobial resistance in the light of the COVID-19 pandemic (Policy Brief 82, July 2020). By Mirfin Mpundu, Caline Mattar and Mirza Alas <https://www.southcentre.int/policy-brief-82-july-2020/>
2. Strengthening WHO for Future Health Emergencies while Battling COVID-19: Major Outcomes of the 2021 World Health Assembly (Policy Brief 106, November 2021) By Nirmalya Syam and Mirza Alas <https://www.southcentre.int/policy-brief-106-november-2021/>
3. Advancing Global Response to Antimicrobial Resistance: Examining Current Global Initiatives (Policy Brief 111, 13 May 2022) By Mirza Alas <https://www.southcentre.int/policy-brief-111-13-may-2022/>
4. Reducing the Unnecessary Use of Antimicrobials in Animal Farming (Policy Brief 114, 19 October 2022) By Viviana Muñoz Tellez <https://www.southcentre.int/policy-brief-114-19-october-2022/>
5. Lessons from COVID-19: Strengthening Antimicrobial Stewardship Prior and During Pandemics (Policy Brief 136, 25 February 2025) By Dr Rasha Abdelsalam Elshenawy <https://www.southcentre.int/policy-brief-136-25-february-2025/>
6. Leveraging the Antimicrobial Resistance Declarations of 2024 to Reduce the Burden of Drug-Resistant Infections (Policy Brief 149, 14 March 2025) By Afreenish Amir & Viviana Munoz Tellez <https://www.southcentre.int/policy-brief-137-14-march-2025/>
7. Independent Panel on Evidence for Action against Antimicrobial Resistance (IPEA): Reflections on the Foundational Documents (Policy Brief 137, 5 December 2025) By Dr. Viviana Munoz Tellez <https://www.southcentre.int/policy-brief-149-5-december-2025/#more-25210>

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3. Unifying Efforts against Antimicrobial Resistance: Supporting Collective Efforts During WAAW 2024 (South Centre Report, March 2025). By Francesca Chiara <https://www.southcentre.int/south-centre-report-march-2025/>
4. Webinar on Advancing National Action Plans on AMR amidst Health Financing Challenges, 20 March <https://www.southcentre.int/sc-webinar-amr-naps-20-march-2025/>
5. Capacity Building Workshop on Monitoring and Evaluation Frameworks in National Action Plans on AMR, 28 March <https://www.southcentre.int/sc-workshop-me-frameworks-in-amr-naps-28-march-2025/>
6. SC Report - AMR NAPS & Health Financing, April 2025 Advancing National Action Plans on Antimicrobial Resistance amidst Health Financing Challenges. By Afreenish Amir <https://www.southcentre.int/sc-report-amr-naps-health-financing-april-2025/>
7. Webinar on Implementing Evidence-based Antimicrobial Prescribing to Combat AMR and Strengthen Global Stewardship - The GUIDE Framework in Action, 17 November 2025 <https://www.southcentre.int/sc-webinar-guidance-on-antimicrobial-stewardship-17-november-2025/>

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2. Food safety standards undergo revisions to protect consumers from antimicrobial resistance (SOUTH CENTRE NEWS ON AMR No. 37, 18 March 2020). By Mirza Alas
3. WHO/UNICEF webinar training on WASH for health care facilities (SOUTH CENTRE NEWS ON AMR No. 38, 8 April 2020).
4. Call to nominate experts from developing countries to shape global policies on antimicrobial resistance (SOUTH CENTRE NEWS ON AMR No. 39, 3 June 2020).
5. Feedback Needed on the Model for an Independent Panel on Evidence for Action Against Antimicrobial Resistance (SOUTH CENTRE NEWS ON AMR No. 40, 10 June 2020).
6. WHO recommends measures to improve antimicrobial use during the COVID-19 pandemic (SOUTH CENTRE NEWS ON AMR No. 41, 2 July 2020). By Viviana Muñoz Tellez
7. Civil Society press for actions on Antimicrobial Resistance (SOUTH CENTRE NEWS ON AMR No. 42, 15 July 2020).
8. Announcing a New Policy Brief from the South Centre: Examining antimicrobial resistance in the light of the COVID-19 pandemic (SOUTH CENTRE NEWS ON AMR No. 43, 16 July 2020).
9. Global Leaders Group on Antimicrobial Resistance Calls for Nominations from Civil Society and Private Sector (SOUTH CENTRE NEWS ON AMR No. 44, 12 August 2020).
10. Tackling antimalarial drug resistance: New WHO report (SOUTH CENTRE NEWS ON AMR No. 45, 20 November 2020).
11. Global Leaders Group on Antimicrobial Resistance announced during World Antimicrobial Awareness Week (SOUTH CENTRE NEWS ON AMR No. 46, 27 November 2020). By Mirza Alas
12. South Centre Supported Civil Society Awareness Campaigns During World Antimicrobial Awareness Week (WAAW) 2020 (SOUTH CENTRE NEWS ON AMR No. 47, 2 February 2021). By Mirza Alas

13. Advancing the One Health response to Antimicrobial Resistance 2020 (SOUTH CENTRE NEWS ON AMR No. 48, 19 February 2021). By Mirza Alas
14. ReAct Africa and South Centre bring together African civil society organizations to advance actions on antimicrobial resistance (AMR)(SOUTH CENTRE NEWS ON AMR No. 49, 20 April 2021) By Mirza Alas
15. Highlights of the UN High-Level Dialogue on Tackling AMR (SOUTH CENTRE NEWS ON AMR No. 50, 22 June 2021) By Mirza Alas
16. The Declaration of the G20 Health Ministers addresses Antimicrobial Resistance (SOUTH CENTRE NEWS ON AMR No. 51, 16 September 2021) By Viviana Muñoz Tellez
17. Progress and challenges on the implementation of Antimicrobial Resistance (AMR) National Action Plans (NAPs) in the African region (SOUTH CENTRE NEWS ON AMR No. 52, 22 December 2021) By Mirza Alas
18. New Data on the Global Burden of Antimicrobial Resistance (SOUTH CENTRE NEWS ON AMR No. 53, 20 January 2022) By Viviana Muñoz Tellez
19. South Centre Supports Civil Society Advocacy Efforts on Antimicrobial Resistance (SOUTH CENTRE NEWS ON AMR No. 54, 16 March 2022) By Mirza Alas
20. High-level discussion on new opportunities for global action to address the silent pandemic of AMR (SOUTH CENTRE NEWS ON AMR No. 55, 13 July 2022) By Mirza Alas
21. Increasing Awareness of Antimicrobial Resistance (AMR) by Supporting Community Actions (SOUTH CENTRE NEWS ON AMR No. 56, 5 May 2023) By Mirza Alas
22. G20 Health Ministers Emphasise Action on Antimicrobial Resistance (SOUTH CENTRE NEWS ON AMR No. 57, 22 August 2023) By Viviana Munoz Tellez
23. South Centre Calls for Applications for Financial Support for Civil Society Advocacy during World AMR Awareness Week (WAAW) 2023 (SOUTH CENTRE NEWS ON AMR No. 58, 20 September 2023)
24. South Centre supports Africa's efforts to fight Antimicrobial Resistance (South Centre News on AMR No. 59, 18 October 2023) By Mirza Alas
25. UN Member States agree on modalities for the High-Level Meeting on Antimicrobial Resistance on 26 September 2024 (South Centre News on AMR No. 60, 5 March 2024) By Viviana Munoz
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