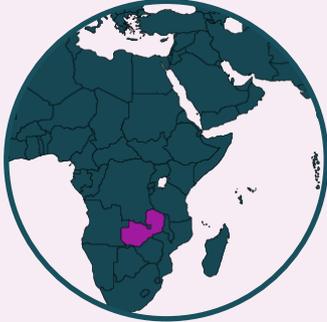


# Improving the management of urinary tract infections in Zambian women through the use of innovative community engagement approaches



## ZAMBIA



**Project sector**  
Humans



**Project partners**  
Eden University,  
School of Pharmacy

**Funding partners**  
Wellcome Trust



**Timescale**  
10 January 2022 –  
31 July 2023

## Context

Following the development of the Zambian National Action Plan (NAP) in 2017, several activities are being conducted that include antimicrobial stewardship programs, surveillance, infection prevention and control, and raising knowledge and awareness among healthcare providers. These are within the scope of an ICARS project which aims to reduce the inappropriate prescribing of antibiotics to treat bloodstream infections and urinary tract infections (UTIs).

## Problem

In Zambia, gaps remain in the landscape of antimicrobial resistance (AMR) activities about how best to address public perceptions and practices that drive AMR. This includes identifying and understanding women's antibiotic-seeking behaviour. In Zambia, research has shown that some women with UTI symptoms buy antibiotics from pharmacies that sell them without prescriptions, and only seek medical attention when they do not recover. The complexity of AMR, and the fact that misuse of antibiotics can exacerbate it, is hard for most people to comprehend as it is not a visible condition. In addition, there is little research about AMR and gender in low- and middle-income countries broadly and Zambia specifically.



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## Project Overview

Guided by the Wellcome Trust 'Responsive Dialogues on Drug Resistance Infections' framework and toolkit, this project will carry out Responsive Dialogues (RD) in three locations to identify contextually relevant solutions to mitigate AMR in the context of UTIs.

RD uses a participatory-based approach to address the gap between local realities and policies by facilitating dialogue, learning and solutions to enable change in attitudes, behaviours, policies, and practices on the use of antimicrobials.

Using the approach, stakeholders jointly examine and unpack evidence, data and messages provided by researchers and experts and produce solutions to address the issues, which will inform national policies. The project engages stakeholders, decision makers and communities affected by or working on UTI's.

## Outcomes

The main intended outcomes of this project are:

1. Improved understanding of, and engagement with antibiotics and AMR, particularly in relation to UTIs amongst the public and key stakeholders in select communities
2. Co-creation of community-informed solutions and interventions that are policy relevant
3. Record of learnings from the pilot implementation and documentation of potential best practices for using RD to inform and improve One Health-based AMR responses in Africa beyond the health sector.

