



## The political economy of AMR surveillance systems in LMICs

**Funded by the UK's Department of Health and Social Care, the Fleming Fund brings evidence and people together to advance action on the global threat of antimicrobial resistance (AMR). Using a One Health approach, the programme supports low- and middle-income countries (LMICs) to generate, share and use data for improved antimicrobial use.**

A Political Economy Analysis (PEA) was conducted by each Fleming Fund country grantee to inform a systems-thinking and sustainable approach to programme strategic decisions and adaptations. A review of 19 country cases has revealed key lessons on the sustainability of AMR surveillance systems in LMICs.

### What does sustainability mean for AMR surveillance programmes?

Sustainability is a core principle of the Fleming Fund. The PEAs describe how, in tackling sustainability, grantees are trying to find an optimal balance between a highly 'programme-focused' approach and a broader 'systems strengthening' approach. Eight thematic lessons have emerged that are relevant to programme sustainability and future programme design.



#### Lesson 1: Funding for AMR surveillance

**Funding for AMR surveillance:** Interviews with country stakeholders point to a widespread recognition that, although enhanced AMR surveillance may appear costly, it brings significant added value to system strengthening and global health security through contributions to improved laboratory services and diagnostics across sectors. Recent shifts in the geopolitical landscape mean that the plans for sustainable funding of AMR surveillance need to be revisited.

**For future programming:** Ensure budget advocacy emphasises the catalytic effects of AMR surveillance for improved diagnostics, quality of care, systems strengthening, and public health; contribute to multi-stakeholder dialogue on the changing funding landscape, and the implications for shared global health security.



#### Lesson 2: Economic analysis

**Economic analysis:** Economic and costing assessments for AMR programming can have multiple dimensions, some of which overlap with health financing and financial management themes, burden of disease analyses, pricing and costing for procurement, budget advocacy, and market shaping strategies, and value for money assessments.

**For future programming:** Aim to identify the types of economic and costing studies required for different programme purposes from the outset; build consensus on the standard protocols/tools to be used to facilitate economic/cost comparisons within and across countries over time.



#### Lesson 3: AMR governance

**AMR governance:** The sustainability of AMR governance mechanisms needs to be considered at each system level across the One Health sectors. Common sustainability challenges across in-country settings include role ambiguity across governance structures, competing priorities, and resource constraints.

**For future programming:** Combine inputs to national policy development with support for costed strategies for policy implementation at sub-national levels; support clarification of respective roles, and leverage knowledge/skills resources by promoting inclusive participation of mandated private sector and civil society representatives.



## Lesson 4: Data use for policy and practice

**Data use for policy and practice:** It is useful to distinguish the periodic use of AMR/AMU data for national policy development from the continuous use of data for enhanced practice in human and animal health. A differentiated approach helps tailor data use strategies to the needs and motivations of distinct end users. Customised digital tools can facilitate improved engagement by data users.

**For future programming:** Differentiate data use pathways for policy and practice, while continuing to monitor the sustainable production and use of quality AMR data as a circular system; aim to align digital solutions with wider digital and health information systems, as well as other data use initiatives.



## Lesson 5: Human resources

**Human resources:** Human resource availability and capacity constraints are among the main challenges identified in PEA reports. It has been observed that these challenges are generally rooted in wider health system and budgeting issues.

**For future programming:** Build on experience from the Fleming Fellowship Scheme to ensure training for individuals is linked to further professional development opportunities, institutional and systems strengthening and wider efforts to enhance the enabling environment.



## Lesson 6: Private sector engagement

**Private sector engagement:** Across One Health sectors, the range of private sector stakeholders can vary considerably by sector and system level. Moreover, mechanisms and regulatory frameworks for engagement, collaboration, sharing of infrastructure and data exchanges can be elaborate; there may also be important cross-border factors to consider.

**For future programming:** Ensure appropriate allocation of technical and financial resources for this complex but crucial aspect of AMR surveillance across One Health sectors; prioritise private sector engagement as a key focus area for monitoring, evaluation, and learning by the programme countries and regions.



## Lesson 7: One Health

**One Health:** There has been significant progress in spearheading AMR surveillance in the animal health sector. Yet, a key challenge remains how to achieve a cost-effective balance between passive surveillance in the human health sector, active surveillance in the animal health sector, and integrated surveillance across One Health sectors. In selected countries, monitoring of water sources and wastewater outlets is a key entry point for AMR surveillance in the environment sector.

**For future programming:** Customise investments in integrated One Health surveillance to the maturity of the systems context; monitor the implications of climate change; consider multi-country and cross-border approaches to leverage regional expertise and resources; optimise what is done as part of national systems and what is done through academia/research studies.



## Lesson 8: Gender and Equity

**Gender and equity:** Four key strategies for practical mainstreaming of gender and equity in AMR surveillance work have proved especially beneficial: training in the application of gender and equity concepts; promoting gender and equity principles in AMR governance; advancing collection and analysis of disaggregated AMR surveillance data; and collaborative multidisciplinary research on priority gender and equity themes.

**For future programming:** Consider WHO guidance on people-centred approaches to address gender and equity in AMR National Action Plans; continue to invest in the four key strategies for mainstreaming gender & equity in programme practice, while monitoring and consolidating gender & equity outputs to support thematic learning at scale.

Download the full Political Economy Analysis on the Fleming Fund [website](https://www.flemingfund.org).

