

Ghana One Health Antimicrobial Resistance Multi-Party Trust Fund (AMR MPTF) Project (ID: 00124433)

Duration: 24 months (24th May 2021 to 24th May 2023)

Ghana is focusing on strengthening governance and coordination between the Tripartite and inter-government agencies in One Health. It seeks to support the integration of AMR NAP into country plans, support prudent AMU and systems to generate evidence, improve IPC and biosecurity in human, animal and environmental health sectors as well as design communication and awareness/advocacy AMR materials.

Activities include:

- Strengthening and ensuring functionality of an Inter-Ministerial Coordination Committee on AMR;
- Implementing the national M&E framework for the AMR NAP;
- Establishing surveillance systems for AMU in humans, animals, crops and the environment;
- Assessing laboratory capacity for culture and sensitivity testing and hospital-based surveillance;
- Developing national biosecurity standards to enhance AMS at farm level and building capacity on IPC/WASH for private practitioners in human health;
- Adapting the WHO AWaRe classification of antimicrobials and implementing outline strategies to optimize the prescribing, dispensing and use of antimicrobials;
- Developing multisectoral IEC materials for a targeted public education campaign;
- Scaling up ESBL E coli tricycle project in another region of Ghana.

Highlights of project so far

The Tripartite and country counterparts working in One Health, successfully applied for AMR MPTF funds to support Ghana's implementation of the NAP on AMR. The Fund provides an excellent opportunity to implement cross-cutting NAP activities that contribute to outputs and outcomes outlined under the MPTF project.

Ghana's approved MPTF project contains 32 selected activities spread among the Tripartite, responding to six outputs, 4 outcomes and 2 impacts. Implementation of activities began in July 2021 across all sectors but suffered setbacks due to COVID-19 restrictions and an outbreak of bird flu.

The Tripartite in collaboration with the AMR Secretariat (housed in the Directorate of Pharmacy in the Ministry of Health which also hosts the Country Focal Point for AMR and the Chair for the National AMR Platform) and partners formed a 15-member core working group. A 'writing' workshop to develop proposals and concept notes was held in December 2021. Eighteen concept notes and proposals for selected activities were drafted and preparation of documents and some groundwork has started for these activities in readiness for full implementation.

WHO briefed the Directorate hosting the AMR Secretariat on the project and their responsibilities to facilitate effective stakeholder engagement and ensure country ownership and understanding of the operations of the project. FAO has not been able to do the same with the Ministry of Agriculture and Fisheries yet due to the deployment of personnel to support field operations to contain an outbreak of Avian Influenza.

In the spirit of One Health, the Tripartite organizations supported the organization of the 2021 WAAW celebrations. Activities included training of 25 media professionals on effective AMR reporting, outreach to various communities and targeted groups, such as churches, mosques and market women in 33 districts within the Eastern Region of Ghana, to educate them on appropriate AMU and on AMR. Thousands of people were reached through targeted community gatherings and the use of community radio stations. The establishment of 33 Districts and a regional 16-member AMR Committee was inaugurated by the Regional Minister during WAAW 2021.

Engagement meetings (virtual and hybrid) were held in July and November with the national AMR Secretariat and the WAAW 2021 Planning Committee so that the Tripartite could update and officially communicate the operationalization of the project, the role of the Tripartite and responsible agencies and focal points.

Main challenges, impacts and solutions

Ghana's implementation suffered setbacks at the height of the COVID-19 pandemic due to governmental interventions and restrictions on movements and gatherings. As a result, the core team working on this project had to resort to virtual communication and meetings (especially off working hours). This proved a challenge for feedback from members on assigned duties. Most of implementing partners (IP) were also repurposed for COVID-19 related activities as this was government priority.

Separate outbreaks of bird flu (September through to December) and yellow fever in October 2021 (peak for bird flu) especially diverted the responsibilities of OIE/FAO colleagues, hampering collective decision making and their engagement with the AMR MPTF project.

Competing interest from implementing partners (government agencies) played a role when restrictions were partially eased in the second half of 2021, resulting in slow feedback and kick-off of activities.

These challenges delayed the implementation of activities by six months and the country Tripartite team had to devise a way to get the project started. On a positive note, the COVID-19 pandemic has significantly raised awareness of the need for IPC and WASH-related activities, which will be leveraged for project purposes.

To scale up the implementation of activities throughout 2022, the following strategies are being put in place:

- Parallel implementation of activities is being explored; identifying multiple agencies with the capacity to implement activities through the year. These agencies will be tasked with a number of activities per the indicators, supported and monitored by the tripartite focal points and AMR Secretariat.
- Assign focal points and agencies with specific capacities to activities to facilitate implementation and reporting.
- Formed a smaller unit made of key members of the core implementation group to drive the implementation process.
- While preparing for implementation, the Tripartite initiated a concept/proposal writing workshop to get most of all year one activities in a draft proposal ready mode.
- Used the opportunity of the COVID-19 pandemic to increase awareness among implementing partners and the AMR National Platform about the increasing threat of AMR to One Health.

Review of progress against log frame

Log frame outcomes

MPTF Outcome	Indicators	Assumptions – any revisions/comments?
Risks of AMR and the benefits of addressing them reflected in national budgets and in development/multi-lateral partner	Capacity improved for designing AMR related-investment plans	A clear detailing of the risks and benefits of AMR, packaged as an investment plan would trigger deployment of resources into AMR from the wider business community – Same assumptions
Evidence base/representative data on AMR/AMU improved for policy-makers and sectors implementing AMU practices	Systems for generating, analyzing and interpreting data on resistance and consumption/use patterns developed or strengthened	Need to resource selected laboratories to complete capacity to carry out culture and sensitivity to generate data. Equipment need are capital intensive and not covered in phase 1
Use of antimicrobials optimized in critical sectors	Systems for biosecurity and IPC strengthened in targeted countries	No change in assumptions but requires continuous capacity building with supportive supervision to mainstream IPC elements and biosecurity standards
Improved understanding of AMR risks and response options by targeted groups	Improved countries capacities to design targeted awareness/Behaviour Change raising initiatives	Continuous leveraging on WAAW and beyond with initiatives

Log frame outputs and associated indicators

MPTF Output	Indicators	Progress description (activities started/completed)	Indicator % met
Improved countries capacities for designing and implementing AMR related policy frameworks, investments plans and programmes	Fully functional One Health Multi-sectoral Coordination Group (MCG) established	Concept note/proposal to research economic costs and implications of AMR in One Health drafted and under review. Preparations made to roll out activity in April 2022. Public forum on Economic case for investments into AMR concept drafted and under review. This activity will kick off in 2022 once the activity above has been completed.	1-25%
	Operational plan for implementing national action plan on AMR developed or updated with associated budget consideration	Two AMR Platform meetings were held in July and November 2021 and updates on project provided. Draft concept note for a data mapping exercise to support the M&E framework and identify cost-effective (efficient) means to monitor and evaluate NAP.	1-25%

		Concept note for monitoring implementation of the AMR NAP in Ghana every six months drafted.	
Improved countries capacities for mainstreaming and for costing AMR as well as changes in practices to minimize AMR	National Action Plan on AMR (NAP) with the estimation of the costs of implementation of the NAP by year have been established or reviewed.	Zero draft of NAP mainstreaming guidelines available, to be reviewed and finalized.	1-25%
	Assessment of investment needs, existing resource finance and funding gaps for implementing National Action Plan conducted with the involvement of all relevant sectors	Draft concept note prepared for conducting assessment of barriers, bottlenecks, and gaps to inform effective mainstreaming and implementation of AMR NAP activities in the relevant sectors.	1-25%
Systems for generating, analysing and interpreting data on resistance and consumption/use patterns developed or strengthened	Percentage of targeted laboratories with capacity to perform antimicrobial susceptibility testing and bacterial isolation and identification according to international standards.	Draft concept note for assessing current capacity of laboratories for conducting culture and sensitivity testing; and capacity for hospital-based surveillance developed and under review. Three regional veterinary laboratories selected. Laboratories have been assessed using FAO ATCLASS, and gaps have been identified.	26 – 50%
	National surveillance system for AMR supported in human health, animal health, plant health, food and environment.	<ul style="list-style-type: none"> - Concept notes developed and being reviewed for: - Technical Workshop Series on generation, analysis, interpretation and use of quality resistance and consumption data (AMU/AMC/AMR data quality). - Supporting the ESBL integrated surveillance protocol in 1 region of Ghana. (Met with focal points to begin action on this activity.) - Developing indicators for monitoring AMU/AMR across all affected sectors. - Developing monitoring tools for AMU in terrestrial animals and aquaculture. - Monitoring AMU in health facilities. - Facilitating collection and review of sales data on antimicrobials for animal use. 	1-25%
Systems for biosecurity and IPC strengthened in targeted countries	National plans developed or reviewed to ensure good production practices	Concept note developed and being reviewed for developing national biosecurity and IPC standards to enhance antimicrobial stewardship at farm level.	1-25%
	Implementation and/or scale up minimum requirements for infection prevention for food production, in accordance with international standards	Not yet started	0%

	National IPC programme supported in line with IPC core components	Focal point and agency to handle this activity identified, proposal being prepared.	1 – 25%
	Stakeholder (e.g. health workers veterinarians, farmers,) training for the scaled-up implementation of national IPC programme/ interventions	Activities for this indicator have not started yet and are dependent on the outcome of activity on national plans	0%
Systems for optimized use strengthened in critical sectors	Guidelines for responsible and prudent use of antimicrobials based on international standards are developed or revised.	Concept note developed and being reviewed for adapting the WHO classification list of Antimicrobials to Ghana and ensuring optimized prescribing and dispensing based on Laboratory results.	1 – 25%
Improved countries capacities to design targeted awareness/ Behaviour Change raising initiatives	Delivery of nationwide AMR campaign targeting priority stakeholder groups based on stakeholder analysis and targeted messaging within sectors	Activities for this indicator have not yet started.	0%
	Number and list of communications strategies developed or implemented to support improved capability for communication and behaviour change initiatives on AMR.	Running the annual WAAW, including extensive public education on AMU/AMR, was done in 2021.	26-50%

Risk matrix – no changes

Risk description	Risk Category: Contextual Programmatic Institutional	Worst case consequence for the project	Risk Score		Mitigating action	Action owner
			Impact	Likelihood		
Risk to effective implementation due to COVID-19 related restrictions to movement and person to person contact	Contextual	Delays and slow pace of implementation of activities on the ground	High	Medium	Convert some activities to virtual and or hybrid meetings. Re-prioritise or front load activities that can be done remotely with little meetings first	Project coordinator in consultation with the Tripartite focal points.
Risk to smooth implementation due to political/focal point changes	Institutional	Delays and reduce implementation pace due to changes in key high-level government roles	High	Medium	Debrief of new officers about the AMR MPTF project and continuation of work. Use of Tripartite relations and national AMR platform.	Project coordinator AMR Secretariat/AMR focal persons and AMR Platform Chair
Risk due to administrative 'bottle necks'	Institutional	Delays and reduce implementation pace; affect overall project timeline	Medium	High	Front loading of key activities likely to be impacted by this risk. Use focal persons to drive these activities.	Project coordinator Technical/Core implementing group
Delay in fund release and reporting	Programmatic /Institutional	Delayed implementation of the project activities	Medium	Low	Continuous follow up and identification of focal points/responsible agency/Tripartite. Employ parallel implementation strategies.	Project coordinator and activity focal person