

# COUNTRY IMPACT



## NIGERIA

# COMMONWEALTH PARTNERSHIPS FOR ANTIMICROBIAL STEWARDSHIP (CWPAMS)

### PHASE 2, 2023-2025



Global Health  
Partnerships  
FORMERLY THET

# CwPAMS Phase 1 recap...

## PARTNERSHIPS

**19**

Partnerships were involved across Phase 1



**12**

Partnerships from CwPAMS 1

**7**

Partnerships from CwPAMS Extension



**4**

LMIC countries in CwPAMS 1

**8**

LMIC countries in CwPAMS Extension

## TRAINING

**6500**

trained healthcare workers



All CwPAMS partnerships demonstrated improved knowledge and practice of Antimicrobial Stewardship (AMS) prescribing practice



of health workers tested in CwPAMS 1, showed an increase in knowledge after training.



of health workers in CwPAMS Extension trained specifically in AMS principles, prescribing, and antimicrobial usage surveillance, showed an increase in knowledge after training.

## VOLUNTEERS

**370**

volunteers have been involved in the projects



**2164**

volunteering days provided by volunteers



of volunteers noted that their NHS institution has benefited through their participation in CwPAMS; with



stating they have increased their capacity for AMS activities in their team.

## CwPAMS Phase 2 and 2.5 at glance so far...



**20,100**

HEALTHCARE WORKERS TRAINED

**70**

INSTITUTIONS HAVE USED DATA TO IMPROVE PRESCRIBING PRACTICES



**24**

HEALTH PARTNERSHIPS ACROSS PHASE 2



## MAIN OUTCOMES

Quality antimicrobial usage data is used to inform and develop AMS interventions.

LMICs, regions, institutions, and workforce have improved structures, knowledge, and practice relating to AMS through a One Health approach, making progress against Antimicrobial Resistance (AMR) National Action Plans.

NHS institutions benefit through improved knowledge and capabilities of UK volunteers through bidirectional learning.



# Impact of CwPAMS Phase 2 in Nigeria so far...

In Nigeria, building on the efforts under Phase 1 (starting in 2022 with CwPAMS 1.5), five Health Partnerships have implemented projects during Phase 2 of CwPAMS (2023-2025). The projects strengthened AMS systems at six health facilities across the country in CwPAMS 2, expanding to 17 facilities in the 2.5 phase - including at national, regional, and district level hospitals as well as a range of community pharmacies.

This has been achieved by strengthening the capacity of staff in Infection Prevention and Control (IPC), Antimicrobial Stewardship (AMS), and microbiology techniques, carrying out Point Prevalence Surveys (PPS) to monitor antibiotic use, developing and implementing AMS Action Plans, and strengthening AMS in the management of AMR reduction. Accurate data from these initiatives, and experiences in their implementation have contributed to the National Action Plan (NAP) for AMR, with partners holding leadership positions in national committees and technical working groups. In Nigeria, CwPAMS is firmly embedded within the National Mechanism through its strategic collaboration with the Nigeria Centre for Disease Control and Prevention (NCDC). This partnership ensures full alignment with national priorities, including the effective implementation of the NAPs on AMR.

The Partnerships in Nigeria leverage the collaboration between colleagues in Nigeria and the diaspora in the UK to co-design contextually appropriate interventions and solutions to addressing AMS challenges in Nigeria and the UK.

As a result of CwPAMS activities, Health Partnerships (HPs) have worked collaboratively to ensure sustainable progress, such as adherence to AMS protocols/guidelines, hospital-institutionalised AMS Committees, AMS Champions empowered to lead AMS audits, and use of ongoing mechanisms to share evidence to inform national strategies.

## Examples of achievements in Nigeria so far...

- Five early-to-mid career pharmacists received fellowships under the Africa Leadership Fellowship-AMS (ALF-A) training under CwPAMS and are now active leaders within their institutions and at the national levels (CwPAMS 2).
- A further five Nigerian-based pharmacists and four UK-based pharmacists (undertaking AMS initiatives in Nigeria) have received fellowships under the UK-ALF-A fellowship programme (CwPAMS 2.5), fostering bi-directional learning and networking.
- Fully functional AMS Committees, supported by hospital management, are facilitating the implementation of improved prescribing practices and evidence-informed decision making - e.g. developing policies on antibiotic use based on Point Prevalence Survey data on both in-patients and out-patients; establishing tangible solutions to overcrowding in the hospital to limit the number of caretakers on the ward to reduce the risk of transmission.
- Three Hub sites were established and have supported seven Spoke sites to implement and deliver AMS activities appropriate to their facility through the Hub & Spoke model. There is also adoption of this in the additional two HPs. This all resulted in cascading capacity building in practice, demonstrating strong uptake, sustainability, and system-wide impact across all 17 sites.
- AMS and IPC trainings were conducted (including to community pharmacists and Community Health Workers). Training was cascaded to spoke sites, and interventions have been embedded within different areas of the health system and across multidisciplinary teams. Training has resulted in improved clinical practices with reduced inappropriate prescribing, better IPC measures, effective use of microbiology for targeted treatments, improved confidence of health workers, and improved adherence to protocols.
- Members of the HPs were recognised nationally and have contributed to National AMS activities and plans.

**CwPAMS 2 implementation has now finished and CwPAMS 2.5 is currently underway until March 2026, with five Health Partnerships working across 17 facilities.**

Across Nigeria in Phase 2 (including CwPAMS 2.5), data as of July 2025....

6807	Healthcare workers trained (e.g.: AMS, Infection Prevention and Control, Substandard and Falsified Antimicrobial Medicines)	
17	Healthcare institutions with fully operational AMS Committees	
6	AMS Action Plans developed and implemented at healthcare institutions	
6	New or revised guidelines/protocols rolled out in the healthcare institutions	
6	Institutions collecting and feeding back antimicrobial usage data through Point Prevalence Surveys	
3	Institutions reporting data specific to Substandard and Falsified Antimicrobial Medicines	
5	Antibiograms developed by healthcare institutions in Nigeria, informed by local and up-to-date surveillance/microbiology data	
399+	Volunteering days contributed by NHS staff, including Nigerian Diaspora	

## CASE STUDIES

### Spotlight on improving quality assurance & community engagement

University of Nigeria Teaching Hospital (UNTH), Nigeria & University Hospitals of Derby and Burton NHS Trust, UK & Milton Keynes University Hospital NHS Foundation Trust, UK

CwPAMS strengthened the UNTH Pharmacy Quality Control Laboratory to conduct routine quality assessments of medicines (including antibiotics), including identifying substandard and falsified medicines. This initiative continues to support the National Agency for Food and Drug Administration and Control (NAFDAC) post-market surveillance systems. Feedback is sent to medicines suppliers, reinforcing the drive for higher-quality medicines in parts of Nigeria.

The Partnership focused on grassroots community engagement to reach underserved populations. This project involved the use of local language posters and fliers to communicate AMR/IPC messaging as well as a hybrid (mix of English and Local Language) twice weekly interactive radio programme (covering nine states in Nigeria). The messaging was shared with local communities, schools (including a school for the deaf), markets, and marginalised communities. Prior to the project, these communities had not received education or awareness building on IPC/AMR/AMS. As a direct outcome of these engagements, the Partnership saw a drop in infection rates, as reported by the management of the home for individuals living with disabilities, among other successes. The radio programme also received feedback from listeners where they noted a change in their behaviour in use of antimicrobials as a result of the campaign.

## Spotlight on strengthening obstetric antibiotic stewardship

Babcock University Teaching Hospital (BUTH), Nigeria & Mid and South Essex University Hospitals NHS Foundation Trust, UK

Prior to CwPAMS, obstetric antibiotic prescribing at BUTH relied on routine practices that were not guided by local microbiology data. Broad-spectrum antibiotics were commonly used for prolonged periods, resulting in unnecessary antibiotic exposure and heightened AMR risks. Through support from CwPAMS, BUTH developed its first hospital antibiogram, enabling evidence-based prescribing. The acquisition of the Vitek 2 machine facilitated the development of the antibiogram by the hospital's Medical Microbiology Department.

The AMS Committee used this data to review and update the Obstetrics and Gynaecology (O&G) empirical antibiotic guidelines. Furthermore, the HP improved laboratory capacity, enhanced collaboration across clinical teams at the hospital, and completed a formal review session between O&G and AMS to revise guidelines. This project resulted in improved data-driven evidence-based prescribing, enhanced patient care, reduced AMR risk, and a strengthened stewardship culture at the hospital. The AMS-O&G guideline revision is a major step toward safer maternal healthcare and rational antibiotic use, demonstrating the value of the CwPAMS partnership and the power of local data in transforming clinical practice.

## Spotlight on AMS awareness

University of Calabar Teaching Hospital, Calabar, Cross River State, Nigeria & Faculty of Public Health, UK

The Partnership successfully increased AMS awareness within the healthcare community. When the project began in 2023, the lead consultant approached a professor to discuss launching an AMS project. The professor was sceptical, stating that such a project would fail because healthcare workers themselves were among the primary contributors to drug misuse. Despite this discouragement, the consultant remained committed to the vision and moved forward with the programme. Through the CwPAMS 2 training sessions, targeted at healthcare professionals, there was a notable reduction in AMR of about 20% particularly in internal medicine and surgical departments. The impact of the programme is now evident: surgeons are actively seeking guidance on patient treatment, and there has been a marked increase in the use of the microbiology laboratory. This shift reflects a growing trust in evidence-based practices and a deeper understanding of AMS principles among healthcare providers.

## Spotlight on strengthening prescribing practices

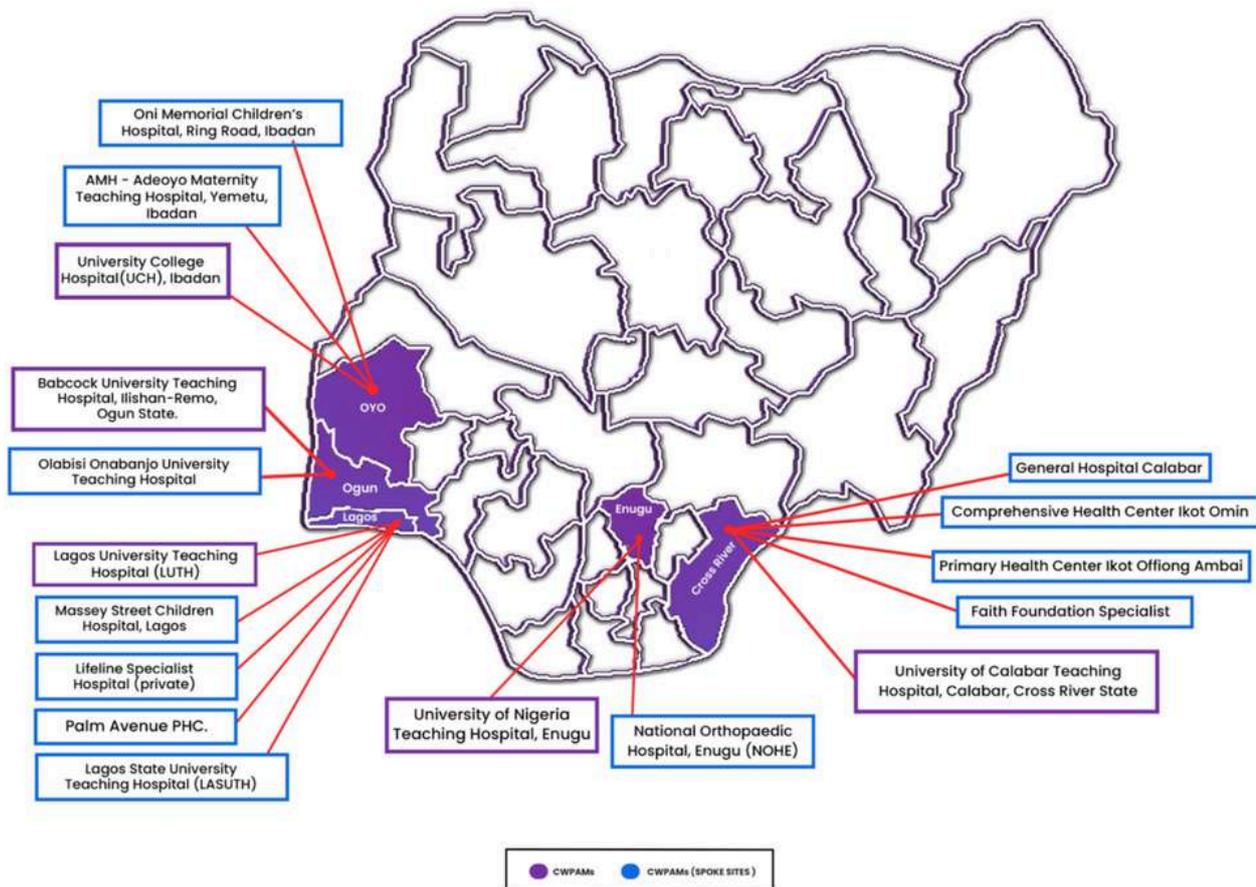
University College Hospital (UCH), Ibadan, Nigeria & Sheffield Teaching Hospitals NHS Foundation Trust, UK

The Partnership established the first Antimicrobial Stewardship programme at Oni Memorial Children's Hospital (OMCH), Ibadan. This is the only children's hospital in the state. Using a hub-and-spoke model, UCH provided mentorship, training, and technical guidance. Despite the absence of an on-site paediatrician, OMCH formed a multidisciplinary AMS Committee and conducted a baseline assessment to identify gaps in antimicrobial use. A Global Point Prevalence Survey generated the hospital's first comprehensive antibiotic-use data. Key findings included high use of Watch-group antibiotics (67.9% in inpatients; 50% in outpatients), absence of culture testing for hospitalised children, incomplete prescription documentation, and 40% non-compliance with guidelines in outpatient clinics. Guided by these findings, OMCH implemented key AMS interventions: a "Culture First" policy, mandatory stop/review dates for all prescriptions, and 48–72-hour antibiotic reviews, to name a few changes. These actions have improved clinical decision-making and strengthened the quality of paediatric care.

The OMCH experience demonstrates that data-driven, context-appropriate AMS programmes are feasible in resource-limited hospitals. With strong leadership and supportive partnerships, such initiatives can support efforts to address AMR in Nigeria.

# ANTIMICROBIAL STEWARDSHIP PROJECT SITES IN NIGERIA

● COMMONWEALTH PARTNERSHIP FOR ANTIMICROBIAL STEWARDSHIP (CWPAMS 2.5)



## Spotlight on AMS Committees

Lagos University Teaching Hospital (LUTH), Nigeria & UK Faculty of Public Health, UK

As a result of efforts by the multidisciplinary members of the AMS Committee at LUTH, the hospital became the first institution in Africa to receive the British Society for Antimicrobial Chemotherapy (BSAC) Global Antimicrobial Stewardship Accreditation Scheme (GAMSAS) accreditation, marking a significant milestone in antimicrobial stewardship. The AMS Committee led the facilitation of AMS activities across the project, ensured the review of PPS data by the range of specialities before the data was used to inform practice, and revised the LUTH antibiotic policy/guidelines based on evidence from the project. The updated policy was disseminated formally launched by the Chief Medical Director of the hospital. The policy was informed by the partnership's PPS findings, national and international recommendations and the Africa CDC antibiotic guidelines. Based on the learning from CwPAMS 2, the Partnership has expanded to five implementation sites in CwPAMS 2.5.

As a result of CwPAMS activities, health practitioners have applied knowledge gained from training and leadership skills resulting in improved clinical practices, changes in prescribing behaviours, improved confidence of health workers and recognition of pharmacists and their skill set as part of the core multidisciplinary team for AMS, and increased evidence-based decision making at health facilities.



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To find out more about our current CwPAMS Health Partnerships working in Nigeria please use the QR codes below.



Babcock University Teaching Hospital (BUTH), Nigeria & Mid and South Essex University Hospitals NHS Foundation Trust, UK



University of Nigeria Teaching Hospital (UNTH), Nigeria & University Hospitals of Derby and Burton NHS Trust, UK



University of Calabar Teaching Hospital, Calabar, Cross River State, Nigeria & Faculty of Public Health, UK



University College Hospital (UCH), Ibadan, Nigeria & Sheffield Teaching Hospitals NHS Foundation Trust, UK



Lagos University Teaching Hospital (LUTH) & UK Faculty of Public Health



CwPAMS AMS Toolkit



A blog by Dr Titilola Banjoko - Global Health Partnerships Trustee - reflecting on the CwPAMS programme in Nigeria



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