Introduction

AMR represents a major global threat across human, animal, plant, food, and environmental sectors. In 2019, it was estimated that almost 5 million deaths were associated with bacterial AMR, including 1.27 million deaths being directly caused by it1. Addressing AMR requires a holistic and multi-sectoral approach referred to as a One Health approach. The World Antimicrobial Awareness Week (WAAW) is an annual campaign to raise global awareness and understanding on AMR and serves as an important example of One Health collaboration.

The Food and Agriculture Organization of the United Nations (FAO), the UN Environment Programme (UNEP), the World Health Organization (WHO) and the World Organisation for Animal Health (WOAH) also known as the Quadripartite organized global consultations on the rebranding of WAAW to World AMR Awareness Week. Two meetings were held to allow for broad global participation and to accommodate different time zones. The meetings were conducted virtually on 10 May 2023 with the same agenda, process and discussion questions.

The consultations brought together participants from around the world, representing diverse AMR stakeholders from the animal, human, plant, and environmental health sectors. A total of 160 individuals participated in the consultation meetings.

Objectives of the consultation

**GENERAL OBJECTIVE**

- To share the rationale for the rebranding of World Antimicrobial Awareness Week as World AMR Awareness Week and gather inputs on issues relating to its rollout and global adoption

**SPECIFIC OBJECTIVES**

- To discuss the rebranding of World Antimicrobial Awareness Week as World AMR Awareness Week
- To discuss issues arising in relation to the rebranding
- To agree on the key steps and considerations to popularize the rebranding

---

Methodology

The meetings were opened by representatives from the Quadripartite organisations. There was a presentation introducing WAAW evolution from 2015 to present, the rationale, options, and opportunities for rebranding of WAAW. This was followed by discussions led by a professional facilitator.

Rationale for rebranding

WAAW started as World Antibiotic Awareness Week in 2015 and was then changed to World Antimicrobial Awareness Week in 2020. However, “World Antimicrobial Awareness Week” is technically incorrect since what needs awareness is antimicrobial resistance, not antimicrobials as such. This reference to resistance is not currently featured in the full form of WAAW making it inaccurate. WAAW needs to embrace the concept of resistance so that central idea is emphasised. The full form would then be “World Antimicrobial Resistance Awareness Week” which would make the term even more unwieldy than it already is. Excluding it is also problematic as it does not convey the issue adequately.

“World AMR Awareness Week” is simpler and more accurate term. “AMR” includes the term “resistance” which is vital to spark the global discourse and AMR better represents the issues the globe faces than awareness of “antimicrobials” in general. This also avoids the possibility of confusion regarding the real mandate of WAAW as the campaign needs to prioritize messaging around resistance rather than antimicrobials. Ensuring simple language and alignment of terminologies will help to increase clarity in messaging across sectors.

The re-branding has no impact on the broad acronym which remains “WAAW.” However, all expansions of this acronym will now be re-branded as “World AMR Awareness Week.”

Experience from global public health campaigns

Global awareness of other long terms such as “Human Immunodeficiency Virus infection” and “Acquired Immune Deficiency Syndrome” also faced similar problems of unwieldiness in the early days of their campaigns when the full forms of these terms were used. In the end, the full forms were replaced by their acronyms, namely “HIV” and “AIDS”. Not many people today know what AIDS or HIV expand to mean but this has had little impact on their ability to understand what the terms “HIV” and “AIDS” represent. These acronyms even cross the language barriers in most cases and serve the purpose better than their full forms when used in campaigns. The same is the case with TB – the short form serves the purpose better (e.g., World TB Day) than would be the case with the full form.

Opportunities from rebranding

WAAW has been celebrated for several years but, arguably, is yet to catch on in the imagination and lexicon of the majority of the global public. The rebranding of WAAW as World AMR Awareness Week would help in this regard so that the term AMR catches on in the public imagination and serves to highlight the associated issues. The term AMR can be popularized and socialized globally and becomes recognizable as HIV or AIDS in the long term.

Discussions

Following the presentations, participants provided relevant reflections on the rebranding focusing on 3 key questions:

1. What are the key issues/challenges that might arise in relation to the rebranding?
2. What are the key steps and considerations for its rollout and global adoption?
3. How can we popularize the term AMR and make it recognizable to the general public?

The main results of the discussions are summarized below.
General reflection on the rebranding

The rationale for rebranding WAAW to technically correct and simpler language is very compelling. **AMR awareness is more appropriate than antimicrobial awareness.** Some suggested the change is a great initiative, timely and bold move. However, using acronyms has also some nested challenges. It may not fully catch public imagination. People are more familiar with antibiotic resistance or drug resistance infections than antimicrobial resistance or AMR. Hence, we need to have a clear message to describe AMR so that it could be easily understood by the public. Then stick to the acronym for few years till it gets internalized.

Key issues/challenges that might arise in relation to the rebranding

While AMR awareness is technically the correct term, we haven’t got into the point where level of awareness is comfortable enough to explain AMR to non-technical audiences. The level of awareness is still low. Communicating the acronym “AMR” to non-technical audiences and make them feel familiar with it would be challenging. TB and HIV/AIDS are widely recognizable conditions. But AMR is more complex and not so identifiable for the public. It will take time and requires more effort for AMR to become a familiar acronym. The message could be lost through using an acronym that many people don’t understand.

The translation and interpretation of AMR across different languages would be another challenge. The rebranding could shift the focus from promoting responsible and prudent use of antimicrobials to resistance. This would be like focusing on the end result (downstream problem) rather than on solutions and actions that should be taken to mitigate it.

Key steps and considerations for its rollout and global adoption

It was suggested to create content that goes with the rebranding to communicate and explain the term AMR to the wider public (what is AMR, why it matters, how does it affect their life) and make it more relatable. There was also a recommendation to the Quadripartite to develop and share awareness resources including campaign guide on how to implement and rollout the rebranding, keeping in mind country level timelines. Besides the rebranding, the other initiatives that the Quadripartite is undertaking to push on AMR awareness agenda were also explained. **The rebranding is only one important step in making WAAW better understood and AMR recognizable.**

Financing of AMR awareness is woefully neglected. The need for advocating for adequate funding to rollout the rebranding and implement WAAW campaign was emphasized. The discussion and consultation should continue at national level and engage One Health stakeholders in countries through government channels early in the rebranding process. The civil society and media should be also engaged. Involvement of the pharmaceutical industry is equally important. Integrating AMR into national commemoration days and campaigns will create broader base for AMR awareness.

The need for rapid decision and rollout of the branding was recommended so that stakeholders have adequate time to modify materials and incorporate the new branding into WAAW 2023. Timely preparation for countries and partners on the ground is important for successful implementation of the WAAW campaign.

AMR campaign during a particular week once a year is not enough to raise awareness. AMR awareness activities need to be an on-going year-round campaign. Consider running mini campaigns every 2 months, each focused on one of the GAP objectives and all culminating during WAAW when a full cycle is completed. **There was a recommendation to ensure a strong and exciting tagline or theme that accompanies the rebranding to describe the full form of AMR and grab the public imagination.** Some suggested perhaps to consider pilot testing and some focus group discussions in different countries, target groups and languages to understand how this rebranding will be perceived. Some pharmaceutical companies might take advantage of the campaign to launch/promote their new and broad-spectrum antibiotics and cautionary measure is necessary for possible pitfall.
**Popularize the term AMR and make it recognizable to the general public**

It is crucial to make AMR more accessible and understandable to the general public. Various suggestions were made to garner public imagination on AMR. These includes creating better imagery/graphics; innovative, catchy and short videos with song and other methods across multiple platforms; creating an anthem or AMR song with a catchy tune; and connecting AMR with something people are familiar with.

Impactful storytelling and personal-level AMR experiences can be a powerful way to connect with the public and make AMR more accessible and compelling. AMR stories should be shared in ways that can reach various audiences via different channels. The creation of AMR survivor’s forum was recommended for sharing AMR stories that can reach wider audiences.

Engaging goodwill ambassadors for AMR can be useful to advocate for AMR and increase public awareness. It was also recommended to leverage on the existing Global Leaders Group on AMR. The engagement of priority audiences and co-creation of awareness resources together can help to gather their ideas and harness their energies. Civil society organizations are close to the community and can be an important means to reach the public.
Conclusion and next steps

Overall, there was robust conversation and broad agreement on the rebranding of WAAW to World AMR Awareness Week. The rationale for rebranding is very compelling and there was enthusiastic support and commitment from the participants to this change. However, using acronyms has also some nested challenges. The level of awareness on antimicrobial resistance is still low and communicating “AMR” to the public and make them feel relevance to it would be a challenge. The participants recommended to find ways to promote a human face to AMR so that the public can understand AMR more effectively. The rebranding should go with clear messages and tag line to communicate the term AMR to the public and make it more relatable to wider audiences. The rebranding could serve as an opportunity to popularize the term AMR and make it more recognizable to the public.

It was highlighted to make a significant shift to AMR as idea and concept, rather than as a word, and get people to associate with what needs to be done to preserve the efficacy of drugs they are using. Not many people today know what AIDS or HIV expand to mean but this has had little impact on their ability to understand what the terms “HIV” and “AIDS” represent. This is the similar approach we want to do for AMR so that it is socialized globally and becomes easily recognizable over time. We don’t need the public to understand everything associated with antibiotics and antimicrobials in general as long as they can understand that AMR is something related to resistance which prevents medicines from working. That is the central idea that we want to promote, drive, and popularize through different devices.

Besides the rebranding, various initiatives that the Quadripartite is undertaking on AMR awareness agenda were discussed. The Quadripartite is systematically working together to engage the priority audiences for AMR awareness (children and youth, media, parliamentarians, and policy makers) as agreed during the global consultation meeting on AMR awareness in 2022. The Quadripartite Youth Engagement Working Group will be created soon to draw youth groups from around the world and to use and harness their energies. Quadripartite toolkits to engage these priority audiences are being created. There are also ongoing activities to engage the media (including media trainings and media fellowships), parliamentarians and policy makers. The AMR Multi-Stakeholder Partnership Platform was also launched to foster cooperation between a diverse range of stakeholders at all levels across the One Health spectrum.

The participants recommended for early announcement of the decision on rebranding so that governments and other stakeholders have adequate time to modify existing materials reflecting the rebranding. This will allow enough time for timely adaptation and dissemination of WAAW 2023 campaign materials in countries. The participants also requested the announcement of the theme for WAAW 2023 along with the direction for rebranding. The Quadripartite agencies committed to update the materials on their website (visuals, graphics, logos, text etc.) and share with all stakeholders as early as possible.
Annex:
Workshop Agenda

GLOBAL CONSULTATIONS ON REBRANDING OF WAAW TO WORLD AMR AWARENESS WEEK
Quadripartite Working Group on AMR Awareness

10 May 2023; 09:00-10:30 | 14:30 – 16:00 CEST

Facilitator: Sarah Nehrling

<table>
<thead>
<tr>
<th>1st GROUP</th>
<th>2nd GROUP</th>
<th>CONTENT</th>
<th>PRESENTER/MODERATOR</th>
</tr>
</thead>
<tbody>
<tr>
<td>09:00-09:05</td>
<td>14:30-14:35</td>
<td>Introduction</td>
<td>Sarah Nehrling, Facilitator</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Welcome and greeting from Quadripartite representative</td>
<td>Chantanee Buranathai, One Health Coordinator, WOAH</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Huyam Salih, Agricultural Officer, FAO</td>
</tr>
<tr>
<td>09:05-09:30</td>
<td>14:35-14:50</td>
<td>WAAW evolution: 2015 to present</td>
<td>Lucía Escati, WOAH</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Rebranding of WAAW to World AMR Awareness Week</td>
<td>Diriba Mosissa, WHO</td>
</tr>
<tr>
<td>09:30-10:15</td>
<td>14:50-15:45</td>
<td>Discussion on rebranding, key steps, and considerations to popularize it</td>
<td>Sarah Nehrling, Facilitator</td>
</tr>
<tr>
<td>10:15-10:25</td>
<td>15:45-15:55</td>
<td>WAAW 2023 theme</td>
<td>Yerkem Sembayeva, FAO</td>
</tr>
<tr>
<td>10:25-10:30</td>
<td>15:55-16:00</td>
<td>Next steps and meeting close</td>
<td>Thomas Joseph, WHO</td>
</tr>
</tbody>
</table>
Rebranding of WAAW to World AMR Awareness Week
Report of global consultation meetings