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United Arab Emirates National Action Plan on Antimicrobial Resistance (NAP-AMR) 2025-2031.

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- Abu Dhabi Public Health Center (ADPHC)
- Department of Health, Abu Dhabi (DoH)
- Dubai Health (DH)
- Dubai Health Authority (DHA)
- Dubai Municipality
- Emirates Health Services Establishment (EHS)
- Khalifa University, Abu Dhabi
- Ministry of Climate Change and Environment
- Ministry of Health and Prevention (MOHAP)
- Ministry of presidential affairs hospitals
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- Public and private clinical microbiology laboratories (see Annex 5.6)
- Public and private healthcare facilities (see Annex 5.5)
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# **Abbreviations**

ABX	Antibiotics
ADAFSA	Abu Dhabi Agriculture and Food Safety Authority
ADPHC	Abu Dhabi Public Health Centre
AMR	Antimicrobial Resistance
ASP	Antimicrobial Stewardship
СМО	Chief Medical Officer
CNS	Central Nervous System
CSSTI	Complicated Skin and Soft Tissue Infections
CVRL	Central Veterinary Reference Laboratory
DH	Dubai Health
DHA	Dubai Health Authority
DoH	Department of Health, Abu Dhabi
EDE	Emirates Drug Establishment
EHS	Emirates Health Services Establishment
GI	Gastrointestinal
IAI	Intra-Abdominal Infections
IPC	Infection Prevention and Control
LTCF	Long-Term Care Facilities
MDRO	Multidrug Resistant Organisms
MOCCAE	Ministry Of Climate Change and Environment
MOE	Ministry Of Education
МОНАР	Ministry Of Health and Prevention
NAP	National Action Plan
NRL	National Reference Lab
QCC	Quality Control Circle
RTI	Respiratory Tract Infections
STD	Sexually Transmitted Diseases
ToR	Terms of Reference
UAE	United Arab Emirates
UTI	Urinary Tract Infections
WHO	World Health Organization



## Introduction

The rise of antimicrobial resistance (AMR) is an increasingly urgent health issue that affects both human and animal populations. As the effectiveness of antimicrobial treatments continues to decline, the ability to manage common infections is being compromised. This growing resistance not only hinders routine medical care but also places complex medical procedures, such as surgeries, chemotherapy, and organ transplants, at greater risk due to increased chances of infection and reduced treatment options.

In 2024 AMR caused 1.14 million deaths worldwide and was associated with 4.71 million deaths. WHO listed AMR among top 10 threats to global public health. It is now estimated that more than 39 million people around the world could die because of antibiotic resistance over the next 25 years. In the United Nation High level meeting on Antimicrobial Resistance in its 79 assembly on 20/09/2024; Global leaders approved the critical declaration committing countries on a clear set of targets and actions aiming towards reducing estimated global mortality by 10% by 2031.

The Ministry of Health and Prevention, the Ministry of Climate Change and Environment, and the relevant local authorities in the United Arab Emirates, are committed to advancing a coordinated, sustainable, and multi-sectoral national action plan to combat antimicrobial resistance (AMR). Guided by the oversight of the UAE National AMR Committee, specialized technical subcommittees have been formed to design and implement targeted strategies across key domains, including AMR surveillance, antimicrobial stewardship, infection prevention and control, as well as the management of AMR risks within the food, animal, and environmental sectors. These coordinated initiatives are being undertaken in close partnership with other governmental bodies, academic institutions, reference laboratories,



research centers, and relevant national stakeholders to ensure an integrated and effective response.

# **Executive summary**

The United Arab Emirates (UAE) National Action Plan on Antimicrobial Resistance (NAP-AMR) 2025-2031 is a strategic, multi-sectoral initiative designed to combat the growing threat of antimicrobial resistance (AMR). The previous action plan 2019-2023 was extended to 2024, however, it had challenges such as lacking intersectoral data sharing, surveillance data collection resistance, monitoring infection control compliance and difficulty in antimicrobial stewardship enforcement. Building upon the achievements and lessons learnt from the previous 2019-2023 plan, this new action plan aims to preserve the effectiveness of antimicrobials for future generations through a comprehensive "One Health" approach, encompassing human health, animal health, agriculture, and the environment.

This plan addresses critical gaps identified in previous efforts, prioritizing key areas such as:

- Strengthening Governance: Formalizing the National AMR Committee and its subcommittees with expanded representation from all relevant sectors.
- Enhancing Awareness and Education: Implementing continuous public awareness campaigns and integrating AMR education into professional licensing, undergraduate, and school curricula.
- Reinforcing Surveillance and Research: Expanding AMR surveillance across human, animal, and environmental sectors, establishing a national AMR reference laboratory, and promoting collaborative research.



- Improving Infection Prevention and Control (IPC): Developing and implementing national IPC guidelines, mandating IPC training, and conducting Healthcare-associated infection (HAI) surveillance.
- Optimizing Antimicrobial Use: Implementing robust antimicrobial stewardship programs (ASP) in healthcare and in veterinary settings and monitoring antimicrobial consumption.
- Promoting Innovation and Investment: Encouraging the development of new diagnostics, vaccines, antimicrobials, addressing health disparities and incorporating artificial intelligence.
- One Health Approach: Strengthening surveillance and collaboration across human, animal, and environmental sectors to address the spread of AMR.

The plan sets clear objectives, actionable goals, and measurable indicators to ensure effective implementation and monitoring. Through collaborative efforts across various ministries, authorities, and institutions, the UAE aims to significantly reduce the impact of AMR and safeguard public health.

## Previous/current efforts in UAE

Acknowledging the importance of antimicrobial resistance and its impact, MOHAP formed the National AMR committee in 2017, consisting of members from all the concerned sectors and working towards achieving the goals of the plan. The UAE NAP AMR developed NAP AMR in 2019-2023, was based on the global action plan on AMR developed by WHO in 2015. Though its implementation was interrupted by the COVID-19 pandemic, it has achieved a great milestone.

The previous action plan has been thoroughly reviewed and analyzed, uncovering many successful efforts and initiatives that were started and completed. However, we also identified some gaps in implementation and the long-term sustainability of some activities. The 2025-2031 action plan will prioritize addressing these gaps,



advancing the achievements made and finding innovative ways to address this threat.

The mandate from The Ministry of Health and Prevention requiring all facilities in UAE to acquire international accreditation, has been instrumental in ensuring that healthcare facilities have active Infection Prevention and Control programs and implementing antimicrobial stewardship. Currently, 95% of facilities are internationally accredited. AMR surveillance has been robust, governing a large number of facilities, including hospitals, clinics and laboratories. There have been educational activities for the healthcare workers, which were mandatory in some facilities regarding antimicrobial resistance and infection prevention control, however, many other facilities have no mandatory education.

As for public education, annual awareness sessions are executed, although only around world antimicrobial awareness week.

The table below shows the scope of activities carried out and the milestone achievements in the previous term:

Domain	Milestone
Governance	
Establishment of national AMR committee with multisectoral	Δchieved
and different authorities' members	Acmeved
Subcommittees formation for infection prevention and	
control, antimicrobial stewardship, MDRO surveillance.	Achieved
Members are from different health authorities and sectors	
Establishment of AMR and IPC unit/department in MOHAP to	Initiated
oversee all activities with respect to one health approach	milialeu



Strategic plan					
Public awareness					
Implementation of annual public awareness during world	Achieved every year				
antimicrobial awareness week	since 2017 through				
	television, radio,				
	social media and				
	public area posters				
Implementation of undergraduate awareness during world	University students				
antimicrobial awareness week	were involved				
	through competition				
	for awareness				
	posters.				
Development and publication of yearlong awareness activities					
for the public through different media types.	Initiated				
Development and publication of platform for broadcasting	Partially achieved				
AMR activities	through Ministry of				
	Health and				
	Prevention platform				
Undergraduate Education					
Inclusion of educational material in undergraduate schools					
related to human health, veterinary, agriculture,	Initiated				
environmental and related health sciences	miliated				



Healthcare workers and veterinary AMR Education					
Assurance of Linkage of education for human health,					
veterinary, food agriculture and environmental factors to their	Not achieved				
license to work					
School Education					
Development and implementation of appropriate infection					
control and antimicrobial resistance education in the schools'	Achieved				
curriculum					
AMR surveillance					
Appointment of focal points for AMR data sharing in each	Achieved				
health authority	Achieved				
Development of AMR surveillance standardization, capacity	Achieved in				
building and epidemiological representation	representative data as				
	per different				
	Emirates' population				
	and bed numbers				
Evaluation of the burden of AMR surveillance	Initiated				
Establishment of a national AMR reference laboratory	Initiated				
Establishment and publication of AMR surveillance in the	Initiated				
veterinary field					
Establishment and publication of AMR surveillance in	Initiated				
agriculture and food chain					



Infection Prevention and Control						
Establishment of an IPC-related facility infrastructure as part of hospital standards mandate	Achieved					
Development of National infection prevention and control guideline/ manual	Initiated					
Capacity building for infection prevention	Achieved					
Mandating infection control education in the training required for physicians, nurses, healthcare providers, and food handler	Partially achieved					
Development of healthcare associated infection surveillance	Outcome indicators are measured.					
Development of infection control and prevention and biosafety in animal Health, agriculture, food safety and environment legislation review, implementation documentation and monitoring	Partially achieved					
Antimicrobial stewardship	Antimicrobial stewardship					
Establishment of antimicrobial consumption monitoring in human, veterinary, agriculture and food safety sectors	Initiated					
Publish an antimicrobial stewardship committee mandate for healthcare facilities including clinics	Partially achieved					
Development of national guidelines for common infections with key performance indicators and related policies to be published and disseminated	Achieved and continuous					



Execution of periodic point prevalence for antimicrobial consumption	Initiated
Performance of periodic antimicrobial stewardship self- reporting survey	Not achieved
Publishing mandate for veterinary antimicrobials to be dispensed only by prescription for animals	Achieved
Development of educational activities for linking Human Health to veterinary animal health, and agriculture	Partially achieved
Use of appropriate pesticides and alternatives to antibiotics in agriculture and animal health	Under evaluation
Ensuring food safety through the absence of antimicrobial residue from food	Not achieved
Research and sustainability	
Conduct research activities related to AMR in collaboration	Achieved and
with the universities, entities and colleges	continuous
Use of rapid diagnostics and effectiveness in treating infections and cost reduction	Not achieved



#### About this NAP

The 2025–2031 Strategic National Action Plan establishes a comprehensive framework for authorities and ministries across the UAE to intensify efforts in combating antimicrobial resistance (AMR), building upon the achievements of the previous plan. It outlines clear objectives and actionable goals through a multisectoral approach, emphasizing a unified "One Health" strategy that encompasses human health, animal health, agriculture, and the environment. The plan prioritizes several strategic areas, including the enhancement of antimicrobial stewardship programs in both human and animal healthcare settings, systematic monitoring of antimicrobial usage across sectors, and the expansion of integrated surveillance in human, animal, and environmental domains. Furthermore, it underscores the importance of robust governance mechanisms to oversee AMR-related initiatives, and promotes interoperability and timely exchange of data across sectors to support coordinated, evidence-based decision-making.

## **Current National Action Plan:**

#### Governance:

The National AMR Committee is currently undergoing a formal restructuring process. Lead by MOHAP, the Committee will be expanded to include additional sectors, compromise of ministry of health different Health sectors in the MOHAP and MOCCAE with all sectors of food, animal, agriculture and environment representatives, ADPHC, DOH, DH, DHA, EHS, SEHA and ADAFSA, other Emirates' municipalities and related colleges and universities. Subcommittees and/or task forces will be formed when required to accelerate the implementation of the actions and related regulations.



The National Committee and subcommittees will operate under the following terms of reference:

- 1. **Task Allocation**: Assigning roles, responsibilities, and tasks to relevant authorities for the effective implementation of measures to combat antimicrobial resistance.
- 2. **Implementation Oversight**: Supervising the execution of assigned tasks, policies, regulations, and responsibilities related to antimicrobial resistance.
- 3. **Program Coordination**: Collaborating with other health programs to ensure alignment with the provisions of the International Health Regulations.
- 4. **Legislative Recommendations**: Proposing and approving legislation aimed at curbing antimicrobial resistance.
- 5. **Data Management**: Reviewing collected data and analysis on antimicrobial resistance, and disseminating relevant information to national authorities.
- 6. **International Submissions**: Securing necessary approvals for submitting data to international organizations upon request.
- Research Planning: Identifying and recommending research priorities in the field of antimicrobial resistance. Recommending AMR research fund allocation.



This national action plan is still based on the last global action plan on antimicrobial resistance by the World Health Organization 2015.

Objective 1: Improve awareness and understanding of antimicrobial resistance through effective communication, education and training. in different settings (human, animals, agriculture and environment):

Objective 2: Strengthen the knowledge and evidence base through surveillance and research

This objective aims to enable decisions to be taken based on robust surveillance.

data

Objective 3: Reduce the incidence of infection through effective sanitation, hygiene and infection prevention measures:

The aim is to reduce the need for, and unintentional exposure to, antimicrobials.

A whole-system approach to infection prevention and control (IPC) will be adopted, ensuring, improved diagnostics and treatment in different settings (humans, animals, agriculture and the environment) and improve vaccination coverage.

The objective will be achieved through public engagement and education

Objective 4: Optimize the use of antimicrobial medicines in human and animal health:

The purpose is to optimize the use of antimicrobials, by appropriate prescribing and disposal.

Aim to improve the use of antimicrobials to preserve future effectiveness.



Creating an AMR workforce – this aims to raise awareness among the workforce in human health, animal health and agriculture to improve the optimal use of antimicrobials

Clinical examples include creating clinical decision support, an appropriate system ensuring appropriate prescribing and disposal, in addition to behavioral interventions.

Objective 5: Develop UAE specific economic case for sustainable investment that takes account of the needs of the country and to increase investment in new medicines, diagnostic tools, vaccines and other interventions:

This objective includes innovation, supply and access.

It calls on the life sciences sector to prioritize the development of new approaches to diagnose and treat infections, the development of vaccines to prevent infections as well as the development of new antimicrobials.

Health disparities and health inequalities – this aims to improve the information available to identify more specific regions and populations within the UAE where the burden of AMR is greatest. This will help to target future interventions where they will have the greatest impact.

Ensure adequate investments to incorporate artificial intelligence and big data analytics in AMR and ASP.



## Objective 6: One Health approach

Strengthened surveillance – Cross-Sector Collaboration for surveillance systems to be further enhanced to collect and analyze data on resistant microorganisms from various sources, including humans, animals, agriculture, and the environment through collaboration between different public health officials' veterinarians, environmental scientists, agricultural experts, and the private sector. This aims to improve understanding of AMR through the capability to measure, predict and understand how resistant microorganisms spread across and between humans, animals, agriculture and the environment.

Capacity Building: Investing in infrastructure and training for surveillance systems is essential. This includes improving laboratory capabilities, standardizing data management systems, and the skills of personnel involved in surveillance.

# Additional objective:

# **AMR** diplomacy

- Prevention and preparedness
- Access and stewardship
- Antimicrobial use in farming
- Standards for manufacturing and waste management



# Objective- Governance and infrastructure

Domain	Activity	Timeline	Responsible Entity	Indicator	Target
Infrastructure	Develop a unit/department for AMR in MOHAP	2025	MOHAP Undersecretary office	Unit developed with clear organization structure, mission, vision and values	Well-staffed multidisciplinary unit/section (minimum 2) based on a thorough activity- based calculations, workload and analysis, Staff with expertise in infectious diseases, IPC, One Health, microbiology, and policy development.



Provide recommendations for mandates and legislations for the ministries to improve AMR	Ongoing	MOHAP & MOCCAE—through the units that would be developed	NA	
Facility audits to include infrastructure and AMR elements for licensing and relicensing	Partially achieved	MOHAP, DHA, DoH and other authorities	Percentage of licenses issued that had AMR elements audited	More than 95%



# Objective 1 - To improve awareness and understanding of antimicrobial resistance through effective communication, education and training:

Domain	Activity	Timeline	Responsible Entity	Indicator	Target
AMR Education for licensing and relicensing of health-related professions in human health, veterinary, food, agriculture and environment sectors	<ul> <li>Integrate IPC/AMR education into orientation programs and annual competencies and on yearly basis, in all facilities. Develop digital modules with completion tracking. Follow example of EHS to mandate such requirement, on a national level.</li> <li>Logistics to be discussed with MOHAP licensing body again.</li> <li>Communicate with different health authorities on the process of implementing such a requisite</li> </ul>	2027	MOHAP MOCCAE and all related emirate/local agencies and organizations	Percentage of authorities mandating AMR education for licensing	100% compliance  All authorities



• Sulfor	ontact MOCCAE for related orkers in their field arvey to check basic information or HCWs hk IPC/AMR education to ensing software systems				
for po	op curricula for AMR and IPC estgraduate and specialty ams in humans and veterinary	2028	MOHAP MOE	% of post graduate courses that have introduced AMR curricula	Increase by 10% yearly
and A	op educational courses for IPC SP and/or accredited ssional certificates for human professionals	2028	МОНАР	% of facilities that are enrolled in this course	Increase by 10% yearly



Proposal for	Develop educational courses or use accredited professional certification for IPC and ASP for veterinary professionals	2028	MOCCAE and all related emirate/local agencies and organizations	% of facilities that are enrolled in this course	Increase by 10% yearly
Proposal for  MOE to  include IPC&  AMR  education in  the  undergraduate  universities for  health related  and veterinary  colleges	<ul> <li>Define the core components of educational material that should be included in different university curricula</li> <li>Central committee to approve the developed curricula</li> <li>MOHAP to address MOE</li> <li>Create a survey to check if this information is included in curricula</li> </ul>	2028	MOHAP MOE	Percentage of specialties that have IPC & AMR education	Increase by 5% yearly



AMR awareness education in schools	Develop a KPI or a process to measure implementation	2028	MOHAP MOE	Percentage of schools that have AMR education in their curriculum	Increase by 10% yearly
Public awareness	<ul> <li>Hotels, Malls and hospital waiting areas</li> <li>Preparation of media material for:         <ul> <li>TV/radio spots</li> <li>Phone waiting time entertainment</li> <li>SMS messages</li> <li>Pop up advertisement on social media</li> </ul> </li> <li>Employ the Infectious disease society and microbiology society to collaborate on this under EMA for reaching the public with</li> </ul>	2026 and ongoing	МОНАР	Twice a year	Improve awareness by 5%



	pre/post surveys) to measure the effectiveness of awareness interventions  Conduct survey with new components for public awareness and compare with previous survey results	2025	МОНАР	Every 3 years	Improve awareness by 10%
Public awareness	AMR messages in municipalities and farmers' centers yearly activities	2026	MOCCAE and all related emirate/local agencies and organizations	Twice a year	Improve awareness by 5% of farms and centers receiving education



# Objective 2- To strengthen the knowledge and evidence base through surveillance and research

Objective	Activity	Timeline	Responsible Entity	Indicator	Target
Infrastructure organization	<ul> <li>Review of ToR and modify members list of the national surveillance subcommittee</li> <li>Nominate Members from animal health</li> <li>Nominate Members from Dubai municipality</li> <li>All health sectors to nominate a lab as reference lab.</li> <li>MOHAP will nominate focal point</li> </ul>	2025	MOHAP & All health authorities  MOCCAE and all related emirate/local agencies and organizations	New decree with updated ToR and members every 2 years	Updated decree every 2 years
Promote self- governance And capacity building	<ul> <li>Resend the surveillance reporting mandate to all authorities</li> </ul>	Ongoing	MOHAP and all health authorities	Number of facilities joining	5% increase yearly in number of facilities joining



<ul> <li>Define AMR surveillance         guidelines for human, animal,         agriculture and environment</li> <li>Develop AMR surveillance         laboratory requirements audit         checklist to be circulated to         licensing departments.</li> <li>Ensure all labs are accredited         ISO/CAP</li> <li>Ensure microbiology quality         control</li> <li>Periodic training for         microbiologists at laboratories</li> </ul>	MOCCAE and all related emirate/local agencies and organizations	Number of WHONET workshops conducted and the use of the software	4 sessions per year
		WHONET	
		workshops	4 sessions per year
ISO/CAP	agencies and	conducted and the	
Ensure microbiology quality	organizations	use of the	
control		software	
Periodic training for		331113113	
microbiologists at laboratories			
Develop Regional reference			
laboratory terms of reference			
guide			
Build reporting capacity for labs			
through periodic WHONET			
training			



Epidemiologic al representation of the surveillance labs	•	Legislation to report all WHO critical organisms to central lab/ in case of outbreak Self-reporting Survey on AMR lab requirements includes: Questions about crucial microbiological techniques, Results of external quality control, Type of accreditation, Availability of staff trained for WHONET	2028	MOHAP and all health authorities	Create reporting portal, number of surveys submitted	Survey every 3 years
Surveillance informative beyond reporting to GLASS	•	D	2028	MOHAP and all health authorities	Percentage of facilities reporting as per the standard of MOHAP	10% increase yearly



	Patient days/ tertiary Vs primary care Surveillance report of invasive organisms for benchmarking with EARS-Net or other international surveillance systems	Percentage reporting no growth from total Percentage of	10% increase yearly
•	through insurance reimburessment especially for larger or more specialized hospitals	facilities reporting rapid diagnostic results	10% increase yearly



Surveillance of AMR burden in Human health	•	Surveillance of invasive infections Surveillance of HAI caused by MDROs thorough mandate from MOHAP All UAE priority pathogens to be actively archived and shared with respective academic committee membership for expanded national AMR research	2028	MOHAP and all health authorities	Percentage of facilities reporting	10% increase yearly
Establish AMR	•	Develop AMR surveillance guidelines in animal	2029	MOCCAE, related colleges and all related emirate/local agencies and organizations	Document developed	Document published
surveillance in Veterinary field	•	Develop/Improve reporting of the current compilation of data based on sick animal cultures to include the total number of organisms,	2029	MOCCAE and all related emirate/local agencies and organizations	Percentage of facilities reporting	5% increase yearly



•	type of animal, time frame, and geographic distribution.  Select Surveillance of priority organisms, sites to be included, results to be included according to lab, method of stratification of the data.  Store and share all major pathogens long term for research Develop baseline carriage surveillance in the healthy animals				
	Collaborate with MOCCAE, ADAFSA, QCC and other muncipalities for priority organisms.  Expanding ADAFSA experience to ther Emirates long term Storage and sharing of all major pathogens for research	2029	MOCCAE and all related emirate/local agencies and organizations	Percentage of facilities reporting,	5% increase yearly



	<del>-</del>				
Establish AMR	Identify what is being tested in		MOCCAE and all		
surveillance in	terms of resistant organisms and	2028	related	Percentage of	
food	antimicrobial residue in food	2020	emirate/local	facilities reporting	5% increase yearly
	Identify the gaps.		agencies and	racintles reporting	
			organizations		
	Review international laws		MOCCAE and all		
	regarding AMR in food	2028	related	Percentage of	
		2020	emirate/local		5% increase yearly
			agencies and	facilities reporting	
			organizations		
Collaboration	Whole genome sequencing of		МОНАР, МОССАЕ	Percentage of	
with	UAE priority organisms or		and all related	outbreaks with	
universities for	outbreaks to define AMR	2029	emirate/local	whole genome	5% increase yearly
research areas	epidemiology		agencies and		
100001011 01000	One health study		organizations	sequencing study	
			МОНАР, МОССАЕ	Percentage of	
	List the priority organism for one		and all related	sites collaborating	
	health (human, animal, food and	2029	emirate/local	in the data	5% increase yearly
	environment) surveillance		agencies and		
			organizations	collection	



	Terms of reference for NRL			Number of	
	labs to be reviewed		MOHAP and all	authorities with	
	Create a guideline for National	2026	health authorities	reference	All health authorities
	reference lab per health			laboratories	
Establish	authority and the requiremens		MOCCAE and all		
	for the AMR surveillance		related		
national AMR	reporting labs.	2029	emirate/local	percentage of	5% increase yearly
surveillance	Develop National reference lab		agencies and	sites covered by	
reference	for animal health		organizations	each authority	
laboratory in	Provide technical support and			Percentage of	
	training for the laboratories on	2027	MOHAP	sites that are	5% increase yearly
	reporting of AMR to the national	2027	MOHAP		370 Increase yearry
	surveillance system			trained	
	Capacity building for molecular			Percentage of	
	epidemiology for national AMR	2028	MOHAP and all	sites that report	5% increase yearly
	surveillance, human sector		authorities	molecular data	
	Capacity building for high-quality		MOCCAE	Sentinel sites to	
	microbiological data for animal and	2029	ADASFA	be chosen for	5% increase yearly
	environment		CVRL	surveillance in	



Human health and animal			Municipalities Universities/ colleges and all related emirate/local agencies and organizations	animal and environmental factors	
health	Continuing the process of capacity building and complete WHONET training forthe selected labs	Ongoing	МОНАР	Percentage of facilities trained	Increase by 5% yearly
	Develop specific location on MOHAP website for AMR research links, needs and publication	2028	МОНАР	Link creation process completion	Link created



# Objective 3- To reduce the incidence of infection through effective sanitation, hygiene and infection prevention measures

Objective	Activity	Timeline	Responsible Entity	Indicator	Target
Establish /adopt national IPC guidelines	Develop IPC program on national level and publish on MOHAP website to be circulated to all authorities for dissemination	2026	МОНАР	Document published	A document
Infrastructure	Facility audits to include infrastructure and AMR elements for licensing and relicensing	2027	МОНАР	Mandate with all representatives issued	A document
Capacity building for the personnel in charge of IPC at	Minimum requirement for IPC staffing for secondary and tertiary healthcare facilities is 1 IPC for every 100 beds; however, the IPC program shall be staffed according to hospital size, type of care, population cared	2025	MOHAP and all authorities	Mandate with all representatives issued	A document



hospital/emirat	for, complexity, level of risk and				
e/national	scope of services.				
levels	Mandate that professionals working as IPC physicians or practitioners have certain qualification/training in each facility	2027	МОНАР	Mandate with all representatives issued	A document
	Mandate pre-employment basic IPC training for all staff as part of orientation and annually thereafter	2026	MOHAP and all authorities	Mandate with all representatives issued	A document
	Explore the possibility of diploma/master's degrees in universities	2029	MOHAP and universities	Discussion with universities	Initiating a course
IPC in long term care facilities (LTCF)	Prepare or adopt national IPC guidelines for LTCF	2028	MOHAP and all authorities	Inclusion of checklist related to IPC in LTCF in the licensing and relicensing	Inclusion of the check list



	WHO self-reporting survey to develop and mandate to all facilities to submit periodically	2026	MOHAP and all authorities	requirements of these facilities % facility participated in the survey	Increase facilities involved by 10% per survey
Conduct surveillance of	Mandate to authorities to submit all the data requested related to IPC KPIs to be submitted from each facility regularly.  Possible reinforcement with penalties	2026	MOHAP and all authorities	% of facilities that participate in data collection	Increase number of facilities by 5-10% yearly
HAI	Mandate to authorities to submit all the data requested related to MDRO HAI from all facilities regularly.	2028	MOHAP and all authorities	% of facilities that participate in data collection	Increase number of facilities by 5-10% yearly
	Mandate to submit Hand hygiene data by all facilities and reinforcement through respected authority	2027	MOHAP and all authorities	% of facilities that participate in data collection	Increase number of facilities by 5-10% yearly



IPC research national research agenda	Letters to universities to find opportunities for research in IPC in facilities Conduct local study on clinical impact of HAI /AMR	2027	MOHAP Health authorities Colleges and universities	Number of studies per year	1 study every year
Biosafety & Biosecurity laws in the	Ensure all elements of IPC are covered in the mandates and regulations related to biosafety in veterinary, agriculture, environment and food safety fields	2027	MOCCAE and all related emirate/local agencies and organizations	Number of regulations reviewed	>50% of regulations reviewed
veterinary world, agriculture and food safety	Develop national infection control program/ policies in animal health and husbandry. With monitoring tool for implementation	2027	MOCCAE and all related emirate/local agencies and organizations	Number of facilities participate in the monitoring tools	Increase number of facilities by 5% yearly



Objective 4- To optimize the use of antimicrobial medicines in human and in animal health								
Objective	Activity	Timeline	Responsible Entity	Indicator	Target			
Infrastructure organization	<ul> <li>Update TOR and modify         members list of the national ASP         subcommittee</li> <li>Members from animal health         (add-hock)</li> <li>Members from public health         awareness (add-hock)</li> </ul>	2026	МОНАР	New decree with updated ToR and members every 2 years	Decree updated every 2 years			
	Establish the role of Emirati Drug Establishment (EDE) in ASP	2026	MOHAP EDE	EDE role in AMR agreed	Publish EDE role			
	Develop a committee for animal health and agriculture	2027	MOCAE and all related emirate/local agencies and organizations	Decree issued	Decree issued			



Antimicrobial dispensing in Human health	<ul> <li>Report monitoring system for antimicrobials dispensed without prescreption in animal health</li> <li>(e.g. random sampling, pharmacy audit, etc.)</li> </ul>	2027	MOHAP and all authorities	Mark the level of the current practice	Report received by MOHAP
	Monitor dispense without prescription process	2028	MOHAP and all authorities	% of antimicrobials dispensed without prescription out of the prescriptions reviewed	In less than 20% and to reduce by 5% annually
Antimicrobial dispensing in Animal health	Develop a monitoring system for antimicrobials dispensed without prescreption in animal health (e.g. random sampling pharmacy audit, etc.)	2027	MOCCAE and all related emirate/local agencies and organizations	Monitoring system for antimicrobials dispensed without	Mark the level of the current practice



	<ul> <li>Pilot the dispense without prescription monitoring process</li> <li>ASP mandate in pipeline</li> </ul>	2028	MOCCAE and all related emirate/local agencies and organizations	prescription is developed % of antimicrobials dispensed without prescription out of the prescriptions reviewed Mandate	Reduce by 5% annually The document
Promote self- governance	All JCI accredited hospitals should have ASP	2027	MOHAP and health authorities	developed and published	developed and published
	Survey for ASP core component  Implementation will be sent out to all facilities to be repeated after 2-3 years	2027	MOHAP and health authorities	A survey conducted every 3 years	%facilities participating to increase by 10% each time.



Legislation of ASP to be a requirement in licensing standards of hospitals	<ul> <li>Propose protected time for strewardship activity</li> <li>Propose the possiblity of a mandatory digital course for ASP fundamental to all physicians and pharmacist.</li> </ul>	2028	MOHAP and all authorities	Mandate to include protected time in job description of clinical pharmacist and all ASP committee members Mandate to include ASP training	Circular issued
	<ul> <li>Related guidelines are established and disseminated</li> <li>Older guidelines reviewed and updated if required</li> </ul>	Ongoing	MOHAP and all authorities	Number of guidelines per year	2 guidelines per year



ASP in outpatient	<ul> <li>Survey on Antibiotic consumption         (Augmentin, Azithromycin,         ceftriaxone) distributed awaiting         replay</li> <li>National antibiotic consumption</li> </ul>			Consumption calculation, increase number of facilities	Increase by 5% every year
clinics	committee will monitor Abx consumption			reporting	
	<ul> <li>Involve community pharmacies in data collection</li> <li>Antibiotic prescription platform proposal</li> </ul>	2029	MOHAP and all authorities	% of private pharmacy groups involved	Increase by 5% every year
	Evedience of enforcement oft he law of antibiotic dispensing	2026	MOHAP and all authorities	% of private pharmacy groups involved Reports on violations	Increase by 5% every year
	Develop unified electronic     prescription linked to platform for	2029	MOHAP and all authorities	% of facilities linked to the platform	Increase by 5% every year



	dispensing under MOHAP and authorities  • Link of antibiotic prescription to insurance.Link insurance approval of antibiotic to national guidelines	2027	MOHAP and all authorities	% of antimicrobial prescriptions that are linked	Increase by 5% yearly
ASP in hospitals	<ul> <li>Surgical prophylaxis</li> <li>UTI, IAI and CSSTI</li> <li>Pediatrics RTI and UTI</li> <li>RTI adults</li> <li>Sepsis</li> <li>CNS Infections</li> <li>GI infections</li> <li>Endocarditis</li> <li>Gynecological infections and STDs</li> <li>Bone and joints infection</li> <li>New guidelines roll out decided by ASP subcommittee for adults and pediatrics</li> </ul>	ongoing	MOHAP and all authorities	number of guidelines published	% achieved from plan



	National guidelines for use and implementation of rapid diagnostics	2026	ASP subcommittee task force	Guideline Developed	Guidelines published
	Encourage use of rapid diagnostics in facilities with either high specialization or with high use of antibiotics	2025 and ongoing	MOHAP and all authorities	% of large facilities use rapid diagnostics	Increase by 5% yearly
Antimicrobial consumption in Human health	Conduct point prevalence in a representative sample and compare to previous PP	Periodica Ily every 3-4 years	MOHAP and all authorities	% Of facilities participating. Reduction in HAI, reserve antimicrobial use reduction	5 % change every time
	Circular mandating antimicrobial consumption data Submission yearly	2026	MOHAP, MOCCAE and all authorities	Number of facilities submitting data	Increase by 5% yearly



Surveillance of  ABX use in  humans and	Meeting with CMO's and authority proposal and a forum during WAAW 2026	2026	MOHAP and all authorities	70% attendance	Meeting executed
animals	Develop list of ASP focal point at hospitals	2026	MOHAP and all authorities	Number of facilities submitting	Increase by 5% yearly
	Monitoring Abx consumption through E-claim	2027	MOHAP and all authorities	Number of antimicrobials/dia gnoses monitored	Increase by 5% yearly
National follow up on	Survey based on international recommendations for Implementing ASP	2025 every 3-4 years	MOHAP and all authorities	number of facilities submitting survey	Increase by 5% yearly
antimicrobial stewardship activities and results	Develop a framework to increase capability of different laboratory investigations in animal health, such as antimicrobial susceptibility testing	2029	MOCCAE and all Animal/food/agricul ture/environment authorities	Framework developed and needs identified	Achieve 50% of need and increase by 5% annually



National circular for antimicrobial residue in food, animal feed and the environment	Mandate to monitor antimicrobials residue	2027	MOCCAE and all related emirate/local agencies and organizations	Number of facilities submitting survey	Increase by 5% yearly
	Sharing experience between facilities and creating an award for best project proposal.	2026	ASP subcommittee	Number of facilities involved	Increase by 5% yearly
AMS annual event for sharing experience	Develop a system to improve the dispensing of antimicrobials from private pharmacies. In humans	2026	MOHAP and all authorities	Dispensing antimicrobials without prescription monitoring system	Increase by 5% yearly



	Develop a system to improve the monitoring and dispensing of antimicrobials from pharmacies in veterinary medicine and farming	2027	MOCCAE and all related emirate/local agencies and organizations	% facilities audited	Increase by 5% yearly
Animal health guidelines	Develop guidelines with monitoring tool for specific infectious diseases in different animal categories	2028	MOCCAE and all related emirate/local agencies and organizations	Number of guidelines	1-2 per year



Objective 5- To develop the economic case for sustainable investment						
Objective	Activity	Timeline	Responsible Entity	Indicator	Target	
Improve visibility of the work of the	Create the AMR section as part of MOHAP website and MOCCAE					
committee and provide a platform for broadcasting all the	website as a platform for networking and dissemination of all information and activities related to AMR	2027	MOHAP & MOCCAE	Section created and data uploaded	Data updates periodically	
activities of the different axes of the AMR NAP	Develop AMR dashboard on human and animal level	2031		AMR dashboard developed	Dashboard created and updated regularly	
Enhance safe disposal of antimicrobial agents	Initiate program for safe disposal of antimicrobial agents in community thought Safe Disposal initiatives	2028	MOHAP & health authorities MOCCAE and all related emirate/local agencies and organizations	Program developed with facilities and public involvement	% facilities involved	



Objective 6- One Health approach						
Objective	Activity	Timeline	Responsible Entity	Indicator	Target	
Create Comprehensiv e one health committee with National Action Plan for combatting AMR	Appoint different members from MOOCAE, ADAFSA and municipalities representing all emirates and representatives from veterinary, plant food and environment fields, in addition to universities and some human health representation	2026	MOCCAE/ MOHAP	Circular/ decree  published meeting  minutes	Published decree/ circular Minimum 2 per year	
Data sharing and epidemiologica I analysis	Create data sharing platform/ guideline for One Health AMR analysis	2029	MOCCAE/ MOHAP  and all related  emirate/local  agencies and  organizations	Circular/ decree	Published decree/ circular	



	Directive to ensure all pathogens are stored for genomic analysis studies with university committee partners				
Awareness for	Organize the AMR awareness committee to target different sectors	2028	MOHAP/ all health authorities, MOCCAE and all related emirate/local agencies and organizations	Committee created	Committee created with ToR
farmers, veterinary, food and environment	Present a detailed report about the applied biosafety laws that are applied in UAE in veterinary, agriculture, environment and food safety fields and theidentified gaps if any	2026	MOCCAE/ ADAFSA and municipalities and all related emirate/local agencies and organizations	% facilities audited for Laws implementation	Increase number of facilities by 5% yearly
	To review the laws related to antimicrobial use in animals that are available in UAE laws	2027	MOCCAE/ ADAFSA, municipalities and all related	perform situation analysis of the legislations and	% of KPI targets achieved



		emirate/local agencies and organizations	control of Antibiotic use in veterinary/ food/ agriculture world	
			and develop KPIs to improve gaps	
Review the list of pesticides accepted in the country and check what agents are being used	2027	MOCCAE/ ADAFSA, municipalities and all related emirate/local agencies and organizations	Facilities audit for list of pesticides used	Increase number of facilities by 5% yearly
Present the results of antimicrobial residue in food to ASP committee	2028	MOCCAE/ ADAFSA, municipalities and all related emirate/local	Random sampling for antibiotics residue	Increase number of items by 5% yearly



Establish inter- ministerial communicatio n regarding AMR and IPC	Incorporate IPC in one health approach	2029	agencies and organizations  MOCCAE/ ADAFSA and municipalities/ All related emirate/local agencies and organizations/ MOHAP	advice	
One health research	Initiate research for resistance pattern among different areas, like human, animal, agriculture and environment with universities	2028	MOHAP /MOCCAE/ ADAFSA / municipalities/ Universities / All related emirate/local agencies and organizations	A study initiated	Study completed and data analyzed



Objective- AMR diplomacy						
Objective	Activity	Timeline	Responsible Entity	Indicator	Target	
	Foster collaboration among GCC			Number of		
Regional &	member states to develop unified			participants		
international	strategies, share expertise, and	Ongoing	MOHAP	Involved in	1-2 per year	
	implement joint initiatives aimed at	Origoning	WOTAL		1 2 poi you	
collaboration	combating antimicrobial resistance			guidelines and		
	(AMR).			research		



## References:

- National Strategy and Action Plan for Combatting Antimicrobial Resistance (NAP-AMR) | Ministry of Health and Prevention - UAE -2019-2024
- Global burden of bacterial antimicrobial resistance 1990–2021: a systematic analysis with forecasts to 2050, GBD 2021 Antimicrobial Resistance Collaborators, Lancet 2024; 404: 1199–226 Published Online September 16, 2024 https://doi.org/10.1016/ S0140-6736(24)01867-1
- Confronting antimicrobial resistance 2024 to 2029, UK 5-year action plan for antimicrobial resistance 2024 to 2029, Updated 8 May 2024
- Kingdom of Saudi Arabia: Second antimicrobial resistance action plan 2022-2025, 5 October 2023
- 5. Global burden of bacterial antimicrobial resistance 1990-2021: a systematic analysis with forecasts to 20250, GBD 2021 antimicrobial resistance collaborators, volume 404, issue 10459, P 119901226, September 28, 2024
- 6. https://www.who.int/teams/surveillance-prevention-control-AMR/nap-amr-implementation-handbook?utm\_source=chatgpt.com
- 7. https://leap.unep.org/en/countries/ae/national-legislation/national-strategy-and-action-plan-combating-antimicrobial?utm\_source=chatgpt.com
- 8. https://openknowledge.fao.org/items/d919cbe3-77d0-4116-a543-6d4b179e7a09?utm\_source=chatgpt.com
- 9. https://www.thelancet.com/journals/langlo/article/PIIS2214-109X%2823%2900019-0/fulltext?utm\_source=chatgpt.com
- 10.https://new.amrcountryprogress.org/country/united-arab-emirates/



- 11.https://www.who.int/teams/surveillance-prevention-control-AMR/national-action-plan-monitoring-evaluation/library-of-national-action-plans
- 12.https://www.ecdc.europa.eu/en/publications-data/directory-guidance-prevention-and-control/antimicrobial-resistance-strategies
- 13.https://www.cdc.gov/antimicrobial-resistance/programs/AR-actions-events.html