Request for Proposals (RFP)

Antimicrobial Stewardship in the Sub-Saharan African Region

Introduction

Antimicrobial Resistance (AMR) poses a critical and escalating public health threat in Africa, disproportionately affecting sub-Saharan Africa (SSA). In the most recent published estimates (2022) from the GRAM (Global Research on Antimicrobial Resistance) study, an estimated 1.05 million deaths were associated with bacterial AMR in the WHO African region, with 250,000 directly attributable to bacterial AMR, surpassing the estimated deaths from HIV/AIDS and malaria in the region (Murray et al. 2022)*. This high burden is compounded by prevalent poverty, a high infectious disease load, poor regulation of widespread antimicrobial usage or the use of falsified (fake) medicines, and limited diagnostic capabilities that often lead to broad-spectrum antibiotic use.

Antimicrobial Stewardship (AMS) is one of the strategic objectives of the WHO Global Action Plan on AMR, aiming to promote the appropriate use of antimicrobials to optimize patient outcomes and reduce resistance development. Despite its importance, there is insufficient data on the extent of AMS program implementation in African countries. In a systematic review published by Akpan et al (2020)**, several AMS challenges impacting the African continent were identified, including lack of specialist personnel and expertise, inadequate funding, poor infrastructure, and persistent diagnostic gaps, forcing clinicians to rely on empirical treatments. AMS work bridges beyond just human populations and includes a "One Health" approach that integrates human, animal, and environmental health into a comprehensive response. However, the focus of this Grand Challenge is on human and public health. Given this backdrop, there is a critical need to find new solutions from the continent to strengthen guidelines for prescribing antibiotics, reviewing and stopping unnecessary treatments, educating healthcare workers and patients, monitoring antibiotic use and resistance patterns, promoting vaccines to prevent infections, building public private partnerships to improve stockpiles and stores, and working together to identify and curtail the usage of falsified medicines, and much more.

* Murray CJL, Ikuta KS, Sharara F, et al. (2022). Global burden of bacterial antimicrobial resistance in 2019: a systematic analysis. The Lancet, 399(10325), 629–655. https://doi.org/10.1016/S0140-6736(21)02724-0

** Akpan MR, Isemin NU, Udoh AE, Ashiru-Oredope D. (2020). Implementation of antimicrobial stewardship programmes in African countries: a systematic literature review. Journal of Global Antimicrobial Resistance, 22, 317–324. https://doi.org/10.1016/j.jgar.2020.03.009

Background and objectives

In December of 2024, on the sidelines of the International Congress on Infectious Diseases (ICID) that was held in Cape Town, South Africa, the International Society for Infectious Diseases (ISID) and Pfizer Incorporation (Pfizer) co-hosted an Expert Roundtable on Antimicrobial Stewardship (AMS) with key AMS though-leaders from the continent of Africa. This expert roundtable was designed as a structured, multi-stakeholder engagement to gather insights from key experts on the African content in the field of AMR, infectious diseases, public health policy, academia, and pharmaceutical development. The methodology employed a qualitative approach, combining expert opinions, thematic discussions, and consensus-building techniques to identify challenges, opportunities, and actionable recommendations.

- The main objectives of the Expert Roundtable were to identify gaps and challenges in

properly deploying antibiotic therapies in Africa and AMR including regulatory and systemic challenges, challenges in patient care, the future of antibiotics R&D in Africa and to further explore on the role of small-molecule therapeutics in combating AMR.

Building on the momentum of this successful co-hosted event, a bold new opportunity is now launching to transform dialogue into concrete action, driving the development and equitable deployment of right-sized solutions to address Africa's urgent AMR challenges.

The Grand Challenge

In partnership with Pfizer, ISID invites organizations and individuals with a focus on AMR in & on the African continent to submit a grant proposal for consideration.

Proposals that align with one or more of the following strategic objectives will be prioritized and can be considered a pilot proposal for future extensive work, where applicable:

1. Strengthening AMS practices in healthcare and community settings;
2. Reinforce regulatory bodies and health systems to develop centralized AMS support structures;
3. Improving access to and rational use of new and existing antibiotics;
4. Enhancing AMR surveillance and data sharing systems;
5. Advancing diagnostic technologies to support evidence-based treatment decisions;
6. Reinforcing AMR Research and Development (R&D) and Innovation;
7. Identifying and addressing gaps in clinical practice guidelines;
8. Promoting sustainable models for antibiotic production, supply, and delivery;
9. Developing standardized metrics to evaluate the effectiveness of AMS interventions;
10. Promote co-creation models between patients and healthcare providers to raise awareness about AMR, targeting rural and underserved populations.

Proposals should be context-sensitive and demonstrate clear pathways for implementation, impact, and sustainability that include a monitoring and evaluation framework.

It is not our intent to support clinical research projects. Projects evaluating the efficacy of therapeutic or diagnostic agents will not be considered.

Eligibility

1. Geographic Scope:
   - The applicant/entity must be based in Sub-Saharan Africa, with activities conducted at the regional, sub-regional, or national level. Initiatives operating within any of these geographic scopes across the African continent are eligible. Other regions of the world will not be considered.

2. Applicant Eligibility Criteria:
   - Eligibility is limited to organizations, institutions, or individuals residing and working within the Sub- Saharan African region.
   - Eligible applicants may include academic and research institutions, intergovernmental organizations, regional economic communities, scientific associations or societies, non-governmental organizations (NGOs), and other entities with a demonstrated commitment to AMR, all based or have a strong experience and/or previous partnerships within the Sub-Saharan African region.
   - Collaboration is strongly encouraged. Preference will be given to proposals that incorporate meaningful partnerships with relevant entities such as universities,

hospitals, healthcare systems, public health institutions, or professional societies. These partners should have missions aligned with combating AMR, improving healthcare outcomes, or advancing public health goals.

- Both intra-institutional collaborations (e.g., between departments or professional disciplines) and inter-institutional partnerships (e.g., across organizations, sectors, or borders) are encouraged. All partners must have All a clearly defined and relevant role, and the lead applicant must play a central role in the design and implementation of the proposed project.

- Grass-roots, local organizations with proven track records are encouraged to apply. Initiatives targeting and uplifting vulnerable populations within the Sub-Saharan African continent will be prioritized.

Requirements

1. Date RFP Issued: August 5, 2025
2. Clinical Area: AMR
3. Specific Area of Interest for this RFP: The expectation is that proposed projects will identify and examine an AMR stewardship intervention/strategy that has the potential to:
   - Strengthening AMS practices in healthcare and community settings;
   - Reinforce regulatory bodies and health systems to develop centralized AMS support structures;
   - Improving access to and rational use of new and existing antibiotics;
   - Enhancing AMR surveillance and data sharing systems;
   - Advancing diagnostic technologies to support evidence-based treatment decisions;
   - Reinforcing AMR Research and Development (R&D) and Innovation;
   - Identifying and addressing gaps in clinical practice guidelines;
   - Promoting sustainable models for antibiotic production, supply, and delivery;
   - Developing standardized metrics to evaluate the effectiveness of AMS interventions;
   - Promote co-creation models between patients and healthcare providers to raise awareness about AMR, targeting rural and underserved populations.

Target Audience

The target audience for the AMS projects is broad and multidisciplinary, reflecting the complexity of the AMR challenge. While the aim is to ensure a coordinated, cross-sectoral approach to AMR, key stakeholders include healthcare professionals, public health authorities, policymakers, academic/research institutions, hospital/healthcare administrators, regulatory agencies, medicines authorities, community health workers, and the general public.

Expected Approximate Monetary Range of Grant Applications

- Individual projects requesting up to $100,000 US dollars will be considered. The total available budget related to this RFP is $400,000 US dollars to be shared between 4-6 recipients for a duration of 2 years.
- The amount of the grant funded for any project will depend upon the external review panel's final evaluation of the proposal and costs involved, and will be stated clearly in the approval notification.

Key Dates

- RFP release date: August 5, 2025
- Full proposal due date: October 4, 2025 (please note the deadline is 11:59 pm Eastern Time (New York, GMT -5).

- Review of Full Proposals by External Review Panel: October 2025
- Anticipated Full Proposals Notification Date: October-November 2025
- Grants distributed following execution of fully signed Letter of Agreement: December 2025
- Period of Performance: January, 2026 to December, 2027

Additional information

Successful grantees should aim to showcase the Mid-Term outcome of their projects at ISID's 21st International Congress on Infectious Diseases (ICID), scheduled to take place in Madrid, Spain from November 10th -13th, 2026. Funding dependent, End-of-term project showcase will be planned for ICID 2028.

Successful grantees will have the opportunity to submit the outcomes of their projects for publication in ISID's Open Access journals (IJID, IJID Regions, and IJID One Health), subject to editorial guidelines and standard peer-review approval processes.

How to Submit

IMPORTANT: Please read this section carefully since applications submitted not following these instructions will not be accepted and will be cancelled.

- Please go to www.cybergrants.com/pfizer/QI and sign in.
  - Note: there are individual portals for each grant application type. Please be sure to use the URL above.
  - First-time users should click "Create your password".
- Click the "**Start A New Quality Improvement Grant Application**" button.
- Requirements for submission:
  - Complete all required sections of the online application
  - **IMPORTANT:** Upload proposal (see Appendix) in the Proposal/Protocol field.
- In the application:
  - For the question "**Competitive Grant?**" select "**Yes**"
  - Select the following Primary Area of Interest: **Infectious Disease- Antimicrobial Stewardship-QI**
  - Select the following Competitive Grant Program Name: **2025 I&I Sub-Saharan Africa Antimicrobial Stewardship QI**

Questions:

- If you encounter any technical difficulties with the website, please click here or the "Technical Questions" link at the bottom of the page in cybergrants.
- Please click here to view "Frequently Asked Questions" regarding the Competitive Grant Program.
- If you have questions regarding this RFP, please direct them in writing to the Grant Officer, Rehab Elsaie (rehab.z.elsaie@pfizer.com) and ISID Global Program Specialist (AMR), Mohamed Sirdar (msirdar@isid.org), with the subject line "Antimicrobial Stewardship in the Sub-Saharan African Region August 2025"

Review and Approval Process

- Grant requests received in response to a specific RFP are reviewed by an expert review panel (ERP) to make final grant decisions.
- The panels are comprised of professionals from the medical community with advanced degrees and expertise in particular clinical areas, or specific needs of a geographic region/learner group, or expertise in research, continuing professional development or quality improvement.

Mechanism by which Applicants will be Notified

- All applicants will be notified via email by the dates noted above.
- Applicants may be asked for additional clarification during the review period.

Grant Agreements

- If your grant is approved, your institution will be required to enter into a written grant agreement with Pfizer.
- Please click here to view the core terms of the agreement.
- Under Pfizer's competitive grant program, modifications to grant agreements will not be reviewed unless a genuine conflict exists as between applicable law and the terms of the relevant grant agreement. Applicant is encouraged to share the core terms with counsel for approval prior to submitting an application.
- Except where prohibited by applicable law and, in any case, subject to review by Pfizer Legal, payment of grant funding may only be paid to the grantee organization.
- This RFP is supported by Pfizer International LLC and, if approved the payment will be issued by a Pfizer US based legal entity.

About Pfizer Grants

Pfizer External Research & Grants (ER&G) (formerly Global Medical Grants & Partnerships) supports the global healthcare community's independent initiatives (e.g., research, quality improvement, or education) to improve patient outcomes in areas of unmet medical need that are aligned with Pfizer's medical and/or scientific strategies.

Pfizer's ER&G competitive grant program involves a publicly posted Request for Proposal (RFP) that provides detail regarding a general area of interest, sets timelines for review and approval, and uses an expert review panel (ERP) to make final grant decisions. Organizations are invited to submit an application addressing the research gaps as outlined in the specific RFP.

For all Quality improvement (QI), the grant requester (and ultimately the grantee) is responsible for the design, implementation, and conduct of the independent initiative supported by the grant. Pfizer must not be involved in any aspect of project development, nor the conduct of the independent research program.

About QI Grants

Quality improvement (QI) projects are systematic, data-guided, sustainable activities designed to bring about immediate, positive changes in the delivery of healthcare in particular setting [1,2].

Quality improvement seeks to standardize structure and processes to reduce variation, achieve predictable results, and improve outcomes for patients, healthcare systems, and organizations. Structure includes things like technology, culture, leadership, and physical capital. Process includes knowledge capital (e.g., standard operating procedures) or human capital (e.g., education and training) [3].

QI projects systematically apply what is already known into the local practice, intended to quickly improve patient care within a specific setting. The goal of QI projects is to close a gap in performance at a specific health care system. The "performance" is a standard in health care that is not efficiently/appropriately/consistently being done [4]. For these reasons, QI focuses on translating existing knowledge into programs or practices to immediately improve the quality of services to individuals and populations within a local institution or setting [5]. The risk of participation in QI is the same as the risk of receiving standard clinical care [6] since the standard of care remains the same for all patients.

In contrast, research projects use a systematic approach to discover something that is unknown. Research projects add new knowledge to what was previously unknown in literature through testing of a hypothesis or a scientific question [4]. Research aims to generate knowledge with broad applications, often through controlled studies. The subjects may or may not benefit directly from the knowledge gained. Research studies aim to evaluate an innovation, study something new, or analyze a process not yet rigorously studied [6].

References

1. Baily MA, et al., Hastings Cent Rep, 2006.
2. Lynn J, et al., Ann Intern Med, 2007.
3. Centers for Medicare & Medicaid Services, Page Last Modified: 09/10/2024.
4. Jackson C, Research Quality Manager, Office of Research and Scholarship University of Maryland, Baltimore School of Nursing.
5. Columbia University Institutional Review Board Guidance for the Classification of Quality Improvement Activities Versus Research with human Subjects, 2023.
6. Newhouse et al., J Nurs Adm, 2006.ibliography of relevant references.

Appendix

IMPORTANT: RFP Submission Requirements

Applications will be accepted via the online portal listed in the How to Submit section. Project Proposals/Protocols should be single-spaced using Calibri 12-point font and 1-inch margins. Note there is a 15-page limit exclusive of references. When uploading your Full Proposal please ensure it addresses the following sections:

Goals and Objectives

- Briefly state the overall goal of the project. Also describe how this goal aligns with the focus of the RFP and the goals of the applicant organization(s).
- List the overall objectives you plan to meet with your project both in terms of learning and expected outcomes. Objectives should describe the target population as well as the outcomes you expect to achieve as a result of conducting the project.

Assessment of Need for the Project

- Please include a quantitative baseline data summary, initial metrics (e.g., quality measures), or a project starting point (please cite data on gap analyses or relevant patient-level data that informs the stated objectives) in your target area. Describe the source and method used to collect the data. Describe how the data was analyzed to determine that a gap existed. If a full analysis has not yet been conducted, please include a description of your plan to obtain this information.

Target Audience

- Describe the primary audience(s) targeted for this project. Also indicate whom you believe will directly benefit from the project outcomes. Describe the overall population size as well as the size of your sample population.

Project Design and Methods

- Describe the planned project and the way it addresses the established need.
- If your methods include educational activities, please describe succinctly the topic(s) and format of those activities.

Innovation

- Explain what measures you have taken to assure that this project idea is original and does not duplicate other projects or materials already developed.
- Describe how this project builds upon existing work, pilot projects, or ongoing projects developed either by your institution or other institutions related to this project.

Evaluation and Outcomes

- In terms of the metrics used for the needs assessment, describe how you will determine if the practice gap was addressed for the target group. Describe how you expect to collect and analyze the data.

- Quantify the amount of change expected from this project in terms of your target audience.
- Describe how the project outcomes will be broadly disseminated.

Anticipated Project Timeline

- Provide an anticipated timeline for your project including project start/end dates.

Additional Information

- If there is any additional information you feel Pfizer should be aware of concerning the importance of this project, please summarize here.

Organization Detail

- Describe the attributes of the institutions / organizations / associations that will support and facilitate the execution of the project and the leadership of the proposed project. Articulate the specific role of each partner in the proposed project.

Budget Detail

- The budget amount requested must be in U.S. dollars (USD).
- While estimating your budget please keep the following items in mind:
  - General organizational running costs such as legal fees, insurance, heating, and lighting etc. should be included in an Institutional Overhead (if required). These costs are not specific to a grant request and therefore, should not appear as line items in budgets. However, costs that are specific to the study (e.g., some countries require insurance to be taken out on a per-study basis for clinical research) would be acceptable to be included as line items.
  - The inclusion of these costs cannot cause the amount requested to exceed the budget limit set forth in the RFP.
  - Pfizer does not provide funding for capital purchases (infrastructure expenses such as equipment, purchases of software or software licenses, technology or bricks and mortar). Equipment hire/leasing is acceptable and may be included in project budget.
  - It should be noted that grants awarded cannot be used to purchase Pfizer therapeutic agents (prescription or non-prescription).
- Pfizer maintains a company-wide, maximum allowed overhead rate of 28% for independent studies and projects. Please click here for details.