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HEALTH PROMOTION AND RESPONSIBLE ANTIBIOTIC USE: POPULATION EVIDENCE FROM MOLDOVA

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Introduction

Antimicrobial resistance (AMR) is driven not only by prescribing patterns and health-system factors, but also by what people know, believe and do in everyday life. In this context, health promotion plays a central role in improving antibiotic use, discouraging self-medication and strengthening understanding of the links between human, animal and environmental health.

Aim of the study

To assess knowledge, attitudes and practices related to antimicrobial resistance and antibiotic use in the general population of the Republic of Moldova, with emphasis on the implications for health promotion and individual responsibility.

Material and methods

A questionnaire-based assessment of the general population was conducted among 2013 respondents using structured items on knowledge, attitudes and practices regarding antibiotic use and AMR. Descriptive analysis was used to summarize the proportion of desirable responses across the three domains and to identify the main gaps relevant for communication, prevention and behaviour-change strategies.

Results

The findings showed a low overall level of knowledge (30.9%) and correct practices (31.3%), while attitudes were moderately favorable (48.1%). Important misconceptions persisted: only 10.1% correctly recognized that antimicrobials are not effective against viruses, 24.5% knew that antibiotic therapy should not be stopped early when symptoms improve, and only 20.3% were aware of campaigns promoting prudent antimicrobial use. Awareness of environmental and One Health dimensions was also limited, including surface waters as a potential reservoir of resistant microorganisms (17.2%) and the role of wastewater in AMR dissemination (23.7%). At the same time, some positive attitudes were observed: 60.5% supported the prescription requirement for antibiotics, 55.3% trusted physicians' decisions on antibiotic prescribing, and 70.6% recognized hand hygiene as a measure that reduces infection spread.

Conclusion

The study highlights a substantial gap between public perceptions and responsible antibiotic-related behaviour. The results support the need for targeted health promotion interventions that go beyond information delivery alone and actively strengthen individual responsibility, risk perception and practical decision-making. In the Republic of Moldova, AMR communication should place stronger emphasis on viral versus bacterial infections, adherence to prescribed treatment, the risks of self-medication and the broader One Health context. Strengthening these dimensions is essential for preventing avoidable antibiotic misuse and reducing the long-term public health burden of AMR.

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