Ending Preventable Child Deaths from Pneumonia and Diarrhoea by 2025

The Integrated Global Action Plan for the Prevention and Control of Pneumonia and Diarrhoea

Dr Samira Aboubaker
WHO/HQ
12 April 2013
Outline of Presentation

- Introduction
- Background
- Integrated Global Action Plan for Pneumonia and Diarrhoeal Control
- Way Forward
- Conclusion
The global burden of under-five deaths has fallen steadily since 1990

The challenge

EVERY YEAR:

- 6.9 million children die before their 5th birthday
  - 3.0 million in the first month of life
  - 2.0 million aged 1 – 12 months

These are silent tragedies that have to be prevented
Global Burden of Pneumonia and Diarrhoea in children under-five 2011

- 1.24 million pneumonia deaths
- 760,000 diarrhoea deaths
- Incidence and mortality are higher in less developed countries
- Effective interventions exist for prevention and management

35% of global under-five deaths are associated with nutrition-related factors*

Sources:
Countries with the largest burden of pneumonia and diarrhoea deaths

10 countries with largest burden of pneumonia deaths

10 countries with largest burden of diarrhoea deaths

• 62% of global pneumonia deaths

• 64% of global diarrheal deaths

Pneumonia and Diarrhoea Report 2012; 2004 global burden of disease sub analysis
Countries with the largest burden of pneumonia and diarrhoea deaths

10 highest pneumonia mortality countries are also 10 highest diarrhoea mortality countries

Afghanistan
Angola
China
Democratic Republic of the Congo
Ethiopia
India
Mali
Pakistan
Nigeria
'Sudan—precession
Coverage of core interventions remains low

Source: UNICEF's *State of the World's Children 2013*
Interventions do not reach those that need them most

Source: UNICEF’s State of the World’s Children 2013
Unprecedented commitment

Global Strategy for Women’s and Children’s Health - Every Woman Every Child

Country leadership & Implementation

Key advocacy events and catalytic initiatives in support of Every Woman Every Child

- Born too soon
- A Promise Renewed
- Family Planning Summit
- Decade of Vaccines
- Innovation Working Group
- Commission on Live-saving Commodities

Information & Accountability

- CoIA
- Independent expert Review Group
New opportunities

- New vaccines for **preventing** pneumonia and diarrhoea
  - Hib, pneumococcal conjugate vaccines
  - Rotavirus vaccines

- Improvements in **case management**
  - Low osmolarity ORS
  - Zinc supplementation
  - Short course antibiotics for non-severe pneumonia
  - Oral amoxicillin for severe pneumonia

- New evidence on other **preventive** modalities
  - Reduction of indoor air pollution
  - Hand washing
Regional consultations – coordinated approaches

**M’Bour, SENEGAL**
- Benin, Burkina Faso, Chad, DRC, Mali, Niger, Senegal
- 72 participants

**Nairobi, KENYA**
- Ethiopia, Ghana, Kenya, Malawi, Nigeria, Uganda, United Republic of Tanzania, Zambia
- 113 participants

**Dhaka, BANGLADESH**
- Bangladesh, Bhutan, DPR Korea, India, Indonesia, Maldives, Myanmar, Nepal, Sri Lanka, Thailand, Timor Leste
- 95 participants

**Kigali, RWANDA**
- Angola, Burundi, Cote d’Ivoire, Cameroun, Madagascar, Rwanda, Guinea and Togo
- 80 participants

**Khartoum, SUDAN**
- Sudan and Somalia
- 50 participants

2011-12
- SEPT
- OCT
- MAY
- JAN
- NOV
The Integrated Global Action Plan for the Prevention and Control of Pneumonia and Diarrhoea (GAPPD)
Purpose

- Provide policy framework and guidance to countries and partners for scaling up interventions in coordinated way
- Propose action steps and programme activities to move forward efficiently
- Build broad coalition of global and national policy-makers, planners, donor agencies and civil society
Vision

- Ending preventable child deaths from pneumonia and diarrhoea – 2025
Goals for 2025

For children under 5 years of age

- reduce mortality from pneumonia to fewer than 3 per 1000 live births;
- reduce mortality from diarrhoea to fewer than 1 per 1000 live births;
- reduce the incidence of severe pneumonia by 75% compared to 2010 levels;
- reduce the incidence of severe diarrhoea by 75% compared to 2010 levels;
- reduce by 40% the global number who are stunted compared to 2010 levels.
Framework for Protect, Prevent, Treat

PROTECT
Children by establishing good health practices from birth
- Exclusive breastfeeding for 6 months
- Adequate complementary feeding
- Vitamin A supplementation

PREVENT
Children becoming ill from pneumonia and diarrhoea
- Vaccines: pertussis, measles, Hib, PCV and rotavirus
- Handwashing with soap
- Safe drinking-water and sanitation
- Reduce household air pollution
- HIV prevention
- Cotrimoxazole prophylaxis for HIV-infected and exposed children

TREAT
Children who are ill from pneumonia and diarrhoea with appropriate treatment
- Improved care seeking and referral
- Case management at the health facility and community level
- Supplies: Low-osmolarity ORS, zinc, antibiotics and oxygen
- Continued feeding (including breastfeeding)

Reduce pneumonia and diarrhoea morbidity and mortality
Strategies for preventing and treating pneumonia and diarrhoea

**Diarrhoea**
- Vitamin A supplementation
- Vaccination: rotavirus
- Safe water & improved sanitation
- Low-osmolarity ORS, zinc & continued feeding

**Protect**
- Breastfeeding promotion & support
- Adequate complementary feeding

**Prevent**
- Measles vaccination
- Handwashing with soap
- Prevention of HIV

**Treat**
- Improved care seeking behaviour and referral
- Improved case management at community and health facility levels
- Continued feeding

**Pneumonia**
- Vaccination (PCV, Hib, pertussis)
- Reduced household air pollution
- Antibiotics for pneumonia
- Oxygen therapy (where indicated)

Source: Adapted PATH: Tackling the deadliest diseases for the world’s poorest children.
GAPPD: key actions

- An integrated approach to saving lives
- Engaging all sectors and actors
- Focus on country impact
- Action at Country level
  - Strengthen national leadership
  - Foster intersectoral collaboration
  - Prioritize interventions and close the equity gap
  - Increase investment in research and be open to innovations
  - Ensure accountability for results
All have a role to play

UN agencies
Govt / Policy makers
Parliamentarians
Women and children
Health care workers
Civil society
Business community
Academic / research institutions
Donors

Govt / Policy makers
Parliamentarians

Health care workers

Academic / research institutions

Civil society

Donors

Women and children

All have a role to play
Traditional integration
Towards a more comprehensive approach