

World Pneumonia Day 2014

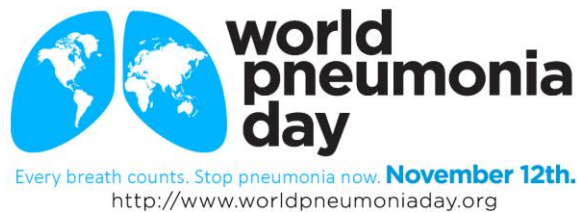
Theme: Universal access for pneumonia prevention and care Key Messages

Below are the World Pneumonia Day 2014 key messages. For message consistency, these messages are the central content that should be used in all communications about WPD 2014 to increase their global repetition and strengthen their impact.

The set of key messages is designed to be used as a list of which members of the Coalition against Child Pneumonia can pick and choose to integrate them in their press releases, speeches, news items, tweets, facts and figures for social media, etc.

Members of the Coalition can integrate more specific information into the key messages in their own communication outputs.

- **Pneumonia is the #1 infectious killer of children under age 5 globally:** Every year nearly 1 million children die of pneumonia worldwide, about 15 percent of total deaths for children under age 5 – of which 2 percent are newborns. The decline in pneumonia deaths has been slower than other diseases. We must scale up our efforts if we are to meet the global challenge to end these preventable child deaths by the year 2030.
- **Poor and rural communities are most affected:** Pneumonia affects children and families everywhere but almost all deaths from pneumonia occur in poor or rural communities. Pneumonia is most prevalent in sub-Saharan Africa and South Asia, of which India, Nigeria, Pakistan, DRC and Ethiopia account for 50 percent of total deaths.
- **Close the access gap by reaching all children with existing interventions:** Evidence shows children are dying from pneumonia because existing effective interventions outlined in the Global Action Plan for the Prevention and Control of Pneumonia and Diarrhoea (GAPPD) are not readily available for all. Proper nutrition, vaccinations, hand-washing with soap, low-emission cookstoves and exclusive breastfeeding for newborns, can help protect children and prevent pneumonia. For children and newborns who fall sick with pneumonia, early access to effective, appropriate, affordable antibiotics and oxygen therapy can be lifesaving. If more widely accessed and properly used, these existing interventions could protect and save the lives of hundreds of thousands of children and newborns.
- **Better access to integrated quality care can drastically reduce child mortality:** Prompt and correct treatment of pneumonia and diarrhoea, which account for 25 percent of all child deaths globally, can drastically reduce child mortality. The determinants of these diseases are often the same, meaning the same interventions can help to address both diseases, such as exclusive breast feeding, proper nutrition, HIV prevention and measles vaccination. Further integrating quality care of childhood illnesses in community and health facilities can increase access to appropriate prevention and treatment services for children.



- **Access to better equipment for the detection of pneumonia aids better quality care:** Many children die because healthcare providers do not have the equipment needed to easily detect signs of pneumonia. The world must continue to invest in the development and consistent use of improved methods for the detection of mild and severe pneumonia infection. Prioritising the introduction and use of these tools will aid appropriate diagnosis and inform treatment, helping reduce child pneumonia deaths and prevent antimicrobial resistance.
- **Momentum of MDG4 must be sustained:** The world has made substantial achievements in child survival, the number of under age 5 deaths worldwide has declined by nearly 50 percent (12.7 million deaths in 1990 to 6.3 million in 2013). Yet, Millennium Development Goal 4, which calls for reducing the under age 5 mortality rate by two thirds between 1990 and 2015, is still out of reach for many countries. The momentum and political commitment must be sustained to achieve continued reductions in child mortality and reduce deaths from pneumonia and other infectious diseases.
- **Strengthened commitment to ending preventable child deaths in the Post-2015 Agenda:** Ending preventable deaths of newborns and children under age 5 by 2030 and achieving Universal Health Coverage are part of the current Sustainable Development Goals. Universal Health Coverage is key to increasing access to prevention and quality care services for pneumonia. Coverage of and access to pneumonia treatment in children could also be an effective indicator to track progress on health in the Post-2015 Agenda. However there is an on-going need for better quality data on health indicators.
- **Call to Action:** In recognition of the 6th annual World Pneumonia Day on November 12, 2014, we call for an urgent end to the number of preventable child deaths worldwide by reaching every child with interventions that prevent and treat pneumonia and other childhood diseases. To achieve this, we call on:
 - o Governments: to prioritise interventions for the prevention and treatment of pneumonia to reduce overall child morbidity and mortality due to pneumonia, especially in high burden areas where known gaps in access exist.
 - o Non-governmental organisations: to recognise the importance of pneumonia in contributing to child morbidity and mortality, as well as to prioritise and provide support for interventions accordingly.
 - o Donors: to commit funds to the prevention and treatment of pneumonia, for the development of new tools and effective implementation of proven solutions.
 - o Academia: to continue investing in sociocultural research on knowledge, attitudes, cultural practices and health seeking behaviours, the most equitable and cost-effective delivery strategies, as well as new solutions for prevention, diagnosis and treatment of pneumonia.
 - o Public: to encourage their governments to increase investments in pneumonia interventions for populations most affected.