What Rotarians can do to address child health ...

Dr. Francisco Songane
Director

Rotary International
Los Angeles
Breakout Session – June 17, 2008
Outline of the Presentation

- Size of the problem
- Where is it
- Causes
- Progress
- What donors doing?
- What is the challenge?
More than 10 million children die each year from preventable causes

- About 6 million children die per year worldwide, aged 1 mo to 5 yrs
- About 4 million newborn die in the first month of life (40% of all child deaths)
- 530,000 women die each year due to pregnancy-related causes

Death of a mother is intimately linked with health and survival of her children
Where do child deaths occur?
Which countries have the largest problem?

<table>
<thead>
<tr>
<th>Country</th>
<th>Number of child deaths each year</th>
</tr>
</thead>
<tbody>
<tr>
<td>India</td>
<td>2,402,000</td>
</tr>
<tr>
<td>Nigeria</td>
<td>834,000</td>
</tr>
<tr>
<td>China</td>
<td>784,000</td>
</tr>
<tr>
<td>Pakistan</td>
<td>565,000</td>
</tr>
<tr>
<td>DRC</td>
<td>484,000</td>
</tr>
<tr>
<td>Ethiopia</td>
<td>472,000</td>
</tr>
</tbody>
</table>

*These six countries account for one half of worldwide child deaths.*

*90% of child deaths occur in just 42 countries.*
# Child mortality rates and how countries rank

<table>
<thead>
<tr>
<th>Country</th>
<th>Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sierra Leone</td>
<td>316/1000 births</td>
</tr>
<tr>
<td>Niger</td>
<td>270</td>
</tr>
<tr>
<td>Angola</td>
<td>260</td>
</tr>
<tr>
<td>Afghanistan</td>
<td>257</td>
</tr>
<tr>
<td>Liberia</td>
<td>235</td>
</tr>
<tr>
<td>Mali</td>
<td>233</td>
</tr>
<tr>
<td>Somalia</td>
<td>225</td>
</tr>
<tr>
<td>Guinea Bissau</td>
<td>215</td>
</tr>
<tr>
<td>DRC Congo</td>
<td>205</td>
</tr>
<tr>
<td>Zambia</td>
<td>202</td>
</tr>
<tr>
<td>India</td>
<td>76</td>
</tr>
</tbody>
</table>

These are very high rates of child mortality, however, the populations are relatively small, with the exception of DRC Congo which has a high child death rate and also a large population.

**Message:** there is an urgent need for action in all countries, because most deaths are preventable.
The most common causes of child deaths
Source: WHO

- Pneumonia: 30%
- Other infectious: 7%
- Injuries: 5%
- Other non-communicable: 7%
- Malaria: 13%
- Measles: 6%
- HIV/AIDS: 5%
- Diarrhoea: 27%
The most common causes of newborn deaths
Source: WHO

- Pneumonia/sepsis: 25%
- Asphyxia: 23%
- Preterm: 27%
- Congenital: 8%
- Tetanus: 7%
- Other: 7%
- Diarrhoea: 3%
Child deaths have declined since the 60s – but progress needs to be accelerated

If recent trends continue, to achieve MDG.

Source: Ahmad OB, Lopez AD & Inoue M. (2000)
Further progress requires attention to the newborn

Source: Lawn et al, Lancet Series
Child deaths that could be prevented in 42 countries with 90% of deaths worldwide  

- **Prevention**
  - Breastfeeding: 1,301,000 deaths prevented
  - Insecticide treated nets: 691,000
  - Complementary feeding: 587,000
  - Zinc: 459,000
  - Clean delivery: 411,000

- **Treatment**
  - Oral rehydration therapy: 1,477,000 deaths prevented
  - Antibiotics for sepsis: 583,000
  - Antibiotics for pneumonia: 577,000
  - Anti-malarials: 467,000
About **two-thirds of child deaths** can be prevented by interventions that are available today and are feasible for implementation in low-income countries at high levels of population coverage! It is not a matter of waiting for new drugs, new technologies, new vaccines – although these can accelerate the pace of change.

The challenge is to transfer what we already know into action.
Coverage is uneven – continuum of care is missing

Figure 3: Coverage estimates for interventions across the continuum of care in the 68 priority countries (2000–06)
Transferring knowledge to action: treatment of childhood and newborn pneumonia

- Pneumonia kills more children than any other cause
- Once a child has pneumonia → prompt treatment with a full course of antibiotics saves lives
- Prompt treatment requires training health workers to diagnose and treat in the community
- an additional **US$340m** is needed annually to increase coverage of pneumonia treatment for children <5 in the countries that account for 95% of mortality (World Health Report 2005)
- South Asia and sub-Saharan Africa have lowest treatment costs: universal treatment in these regions would cost only **$200m per year** (Wardlaw et al 2006)
What are donors providing for mothers and children?

- Donor funding is increasing
  - From $4 to $7 for child health per child in recent years
  - From $7 to $12 for maternal/newborn health per live birth

- However:
  - It is still too low - only 3.3% of total aid
  - 94% delivered through projects - this may not be best approach
  - Aid is volatile and insufficient

*Aid for mothers and children needs to triple*
In summary

- 6 million child deaths, 4 million newborn deaths, and 530,000 maternal deaths every year
- South Asia and sub Saharan Africa is most affected
- Some progress, but not enough
- Solutions are available and feasible
- The challenge is to turn knowledge into action
- Countries need to allocate resources soundly
- Political leadership and drive in countries *(devise local, sustainable solutions and apply consistently)*
- There is a financing gap – donors need to do more

*Results are achievable*
Some suggestions for Rotary International ...

- Training midwives and other skilled attendants for safe delivery – *for mothers and babies!*

- Exclusive breastfeeding

- Oral rehydration therapy for diarrhoea

- Antibiotic treatment for pneumonia

- Insecticide-treated bed nets

- Sustained immunization
To ensure that children thrive, all of us have important part to play along the continuum of care. Thank you.