Integrated Global Action Plan for the Prevention & Control of Pneumonia and Diarrhoea   
Implementation in [*country name*]

**What is the scale of the problem?**

In [*country name*], too many children are still dying from pneumonia and diarrhoea. Globally, these diseases are the leading causes of child mortality, responsible for nearly one-third of deaths in children under age five, claiming more than two million lives each year. With improved access to lifesaving prevention and treatment solutions, and an integrated approach to fighting these diseases, countless lives can be saved.

Photo Credit

Without better coordination of key interventions and higher and more equitable coverage, an estimated 1.2 million children under-five will continue to die from pneumonia and 760,000 from diarrhoea every year.

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Due to the impact of these diseases, the global Millennium Development Goal (MDG) to reduce child mortality by two-thirds is still out of reach for many of the poorest countries of the world. Despite substantial progress, this goal (MDG 4) can only be achieved through an intensified and integrated effort to reduce pneumonia and diarrhoea deaths in the most vulnerable communities.

**Why are children still dying from pneumonia and diarrhoea in [*country name*]?**

In spite of the significant toll on human life and the simplicity and cost-effectiveness of interventions, relatively few global resources are dedicated to tackling diarrhoea and pneumonia. The public health investment in the control of childhood pneumonia and diarrhoea is not proportionate with the magnitude of these problems in terms of their global burden of disease and as major causes of death in children.

Evidence from the [Countdown to the Millennium Development Goals Report 2012](http://www.countdown2015mnch.org/reports-and-articles/2012-report) shows that children are dying from these preventable diseases because proven interventions are not provided equitably across all communities. For example:

* Only 37 percent of infants less than 6 months of age are exclusively breastfed.
* About 55 percent of caregivers reported seeking appropriate care for suspected pneumonia and proper antibiotic treatment was given for about 39 percent of cases.
* Thirty three percent of children with diarrhoea received oral rehydration therapy and continued feeding.

*[If possible, add national diarrhoea and pneumonia mortality numbers; check data from national sources (for example,* [*Demographic and Health Surveys*](http://www.measuredhs.com/)*), external sources (*[*Countdown to 2015*](ttp://www.countdown2015mnch.org/)*,* [*A Promise Renewed Dashboard*](http://www.apromiserenewed.org/Dashboard.html)*).*

In [*country name*], we can use this action plan to set our national priorities and put the focus on these two leading killers of children.

**Progress to date on international and national commitments on child survival**

For the very first time, there is a global plan to simultaneously take on the two leading killers of children: pneumonia and diarrhoea.

The *Integrated Global Action Plan for the Prevention and Control of Pneumonia and Diarrhoea (GAPPD),* released by the World Health Organization and United Nations Children’s Fund, provides the latest strategies and evidence needed to reduce child deaths and illnesses. The plan’s integrated approach will be far more effective and efficient than single disease-focused approaches because many of the solutions needed to fight pneumonia and diarrhoea are complementary.

The GAPPD outlines the crucial elements needed to address diarrhoea and pneumonia: nutrition; vaccines; access to safe water, sanitation, and better household air quality; and effective treatment with integrated case management that includes oral rehydration solution and zinc for diarrhoea and amoxicillin and oxygen for pneumonia.

The GAPPD is a resource for coordinating and integrating efforts to improve the impact of current programming. In addition the GAPPD is aligned to and builds on a range of other initiatives related to child health including:

* The United Nations (UN) Global Strategy for Women’s and Children’s Health
* The UN Commission on Life-Saving Commodities
* The Promised Renewed/Call to Action
* The Global Vaccine Action Plan;
* The UN International Decade for Action ‘Water for Life’ and Sustainable Sanitation.

The GAPPD provides a roadmap for implementation of these efforts.

Coordinating the approach to fighting diarrhoea and pneumonia will be far more effective and efficient, and provide better services to communities, families and children. In [*country name*] we can save countless lives by improving access to nutrition, vaccines, health, and WASH interventions and using an integrated approach to fighting these diseases.

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**[Organization name] calls on the Government of [*country name]* to:**

* Prioritise the fight against pneumonia and diarrhoea, recognising that implementing the recommendations of the GAPPD is essential to saving children’s lives and achieving MDG 4.
* Focus on reaching the poorest and most vulnerable children and families to maximise health impact and improve equity.
* Engage stakeholders from affected communities, civil society, the private sector, donor agencies, and multilateral institutions in the planning, implementation and monitoring of the recommendations of the GAPPD. Assess how [*country’s name*] national efforts compare to the guidance in the GAPPD.
* Identify the most effective programmes and where additional efforts are needed, and how to best coordinate efforts across ministries, sectors, and partners.
* *Add and/or delete “asks” as required. Consider what is strategically relevant and necessary in your country.*

**Headline/Case study**

Use this space to highlight relevant work of your government officials, or of the national working group focused on child health. You may also focus on specific areas of need which are strategically relevant in your country.