

DIARRHEAL DISEASE MESSAGING

PATH developed these messages for use by anyone interested in communicating the impact of diarrhea on the health and development of children and families around the world. Perhaps more importantly, it is also a guide to communicating the value of a coordinated approach to diarrheal disease control and the proven, cost effective solutions available today to save lives.

Millions of children's lives have been saved by protecting them against diarrheal disease, yet it remains the second-leading killer of children worldwide. By implementing a combination of health, safe water and sanitation solutions, we can save millions more.

BURDEN

Diarrhea is the most common cause of illness and the second-leading cause of children's deaths worldwide. Its burden is greatest in developing countries of Africa and Asia.

- Diarrhea takes the lives of more than 4,000 children each day and 1.5 million every year. It is the second-leading killer of children under age 5 worldwide after acute respiratory infections like pneumonia.
- Diarrheal disease is a global killer. Its burden is greatest in developing countries in Asia and Africa where access to safe water, sanitation and urgent medical care may be limited. Eighty percent of diarrheal deaths occur in Africa and South Asia.
- For children who survive a diarrhea episode, the impact can be lasting. Persistent diarrhea can lead to malnutrition, which is a factor in stunted growth. Research has consistently shown that if a child is malnourished or regularly ill during the first few years of life, there are consequential negative effects on future cognitive development, education, and productivity.
- Proven lifesaving interventions to prevent and treat diarrheal disease already exist and history has demonstrated that they work. Deaths of children under age 5 declined by nearly half since the 1980s, but progress has stalled, and today 1.5 million children still die from the complications of diarrhea each year. We can change this.

CHILD SURVIVAL

We can protect children from a leading global killer by addressing diarrheal disease.

- Diarrheal disease was once a leading public health priority. But over the last decade, momentum has slowed, due to declines in research and funding commitments and competing global health priorities.
- Children in the developing world, where the diarrheal disease burden is greatest, are not getting access to the simple, lifesaving prevention and treatment options they need.
- This unacceptable loss of life due to diarrheal disease can be stopped. Nine out of 10 child diarrheal disease deaths could be prevented by interventions available today. It's our job to make sure these lifesaving tools are reaching all of the children who need them most.
- To save lives, we must continue to raise awareness around diarrheal disease burden and the existence of proven prevention and treatment interventions.
- If we prioritize diarrheal disease control among a range of child health programs, we can achieve Millennium Development Goal #4, the commitment of global leaders to reduce under-five mortality by two-thirds by 2015.

SOLUTIONS

A coordinated approach that combines proven, cost effective prevention and treatment solutions is highly effective at reducing diarrheal disease – a leading global killer of children.

- We can save millions of children's lives with diarrheal disease interventions available today.
- Proven diarrheal disease prevention methods include improved safe water, sanitation, and hygiene, exclusive breastfeeding, and vaccines preventing rotavirus. When diarrhea does occur, it can be effectively treated with oral rehydration therapy (ORT)/oral rehydration solution (ORS), zinc and other micronutrients along with continued feeding.
- Interventions available today to prevent and treat diarrheal disease include:

Exclusive breastfeeding and optimal complementary feeding

Exclusive breastfeeding (no additional food and fluids) provides infants 6 months of age and younger with essential nutrients and immune factors that both protect them from diarrheal disease and speed diarrhea recovery when episodes occur. Optimal complementary feeding with continued breastfeeding for infants and young children ages 6 to 24 months is essential to ensure they are healthy, well nourished, and better able to survive an episode of diarrhea.

Rehydration

Oral rehydration solution (ORS) – a simple mixture of sugar and salt added to clean water that can be administered at home – saves lives.

A new formulation of ORS with lower sodium and glucose content makes it more efficacious than ever.

WHO recommends low-osmolarity ORS and zinc as essential treatments for acute diarrhea infections.

Zinc and other micronutrients

Zinc treatment is a simple, inexpensive, and critical new tool for treating diarrheal episodes among children in the developing world. This important micronutrient becomes depleted during diarrhea, but replenishing zinc with a 10- to 14-day course of treatment can reduce the duration and severity of diarrheal episodes and may also prevent future episodes for up to three months.

Along with low-osmolarity ORS, WHO recommends zinc for treatment of acute diarrhea infections.

Water, Sanitation and Hygiene

Diseases related to inadequate water, sanitation and hygiene are among the world's most deadly public health problems, triggering four billion cases of diarrhea annually.

Treating water with inexpensive point-of-use water quality interventions in the home can prevent episodes of diarrhea by roughly 50 percent. Simple handwashing with soap at critical times can reduce diarrhea by 45 percent.

Vaccines

Vaccines against rotavirus, the most common and lethal cause of severe diarrhea in children, are saving lives today. Vaccines are the only way to prevent rotavirus. The World Health Organization recommends rotavirus vaccines be included in all countries' national immunization programs.

The GAVI Alliance, a global health partnership that works to save lives by increasing access to vaccines, has committed to supporting rotavirus vaccine introduction in developing countries worldwide.

A number of vaccine candidates for the prevention of bacterial causes of diarrhea, including ETEC and Shigella, are moving through a series of rigorous preclinical and clinical trials to ensure their safety and efficacy..

- The global health community has the knowledge and solutions to treat and prevent many of the lethal causes of diarrhea, like rotavirus, and we must act immediately to stop needless child deaths.

RESULTS

We've seen that prevention and treatment solutions to address diarrheal disease have been successful at reducing childhood mortality.

- We have the lifesaving, cost-effective prevention and treatment interventions at hand to stop the second-leading killer of children worldwide.
- Over the last three decades, millions of children's lives have been saved by protecting them against diarrheal disease through proven methods such as ORS, optimal feeding practices, improved hygiene, better sanitation, and the availability of clean water. Today new tools, such as rotavirus vaccines and zinc treatment, offer new opportunities to re-prioritize access to diarrheal disease interventions.
- A coordinated approach that involves prevention and treatment is needed to address the multiple causes of diarrheal disease.
- With renewed commitment to saving child lives, effectively allocated resources, and plans for action by donors and country governments, we can dramatically reduce childhood deaths due to diarrheal disease.
- Several countries, including Kenya and Vietnam, have made recent progress in re-prioritizing diarrheal disease control, revising national plans to include a coordinated approach.

RESOURCE ALLOCATION

We can save children's lives by mobilizing resources and programs to protect children against diarrheal disease.

- By making diarrheal disease a public health priority and increasing awareness among the global community about the burden of diarrheal disease and the lifesaving solutions that exist today, we can save lives.
- There is a growing commitment among donors to fund child survival efforts including those that target diarrheal disease. But these commitments will only save children's lives if policymakers act and resources are allocated effectively, for proven prevention and treatment solutions.
- Now is the time to redouble our commitment to improving for the health of future generations through the Millennium Development Goals and to highlight the need for new research on the scale-up of effective, appropriate, and affordable prevention and treatment interventions to combat diarrheal disease.