

# **Stakeholder consultative meeting on prevention and management of childhood pneumonia and diarrhoea report, 12–14 October 2021**



**World Health  
Organization**



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# Acronyms

AMR	antimicrobial resistance
ARI	acute respiratory infection
CHW	community health worker
CPAP	continuous positive airway pressure
GAPPD	Global Action Plan for the Prevention and Control of Pneumonia and Diarrhoea
icddr,b	International Centre for Diarrhoeal Disease Research, Bangladesh
IMCI	Integrated Management of Childhood Illness
LMICs	lower- and middle-income countries
MCA	Department of Maternal, Newborn, Child and Adolescent Health and Ageing
ORS	oral rehydration solution
PCV	pneumococcal conjugate vaccine
PHC	primary health care
RSV	respiratory syncytial virus
SDG	Sustainable Development Goal
TB	tuberculosis
UNICEF	United Nations Children's Fund
USAID	United States Agency for International Development
WASH	water, sanitation and hygiene
WHO	World Health Organization

# Executive summary

Under-5 child mortality has declined by nearly 60% since 1990, and the burden of childhood deaths due to diarrhoea and pneumonia has declined substantially since 2000, by 56% for pneumonia and 66% for diarrhoea. However, pneumonia and diarrhoea remain among the leading causes of under-5 mortality globally, contributing an estimated 740 000 and 380 000 annual deaths, respectively.

The World Health Organization's (WHO) Department of Maternal, Newborn, Child and Adolescent Health and Ageing (MCA) is preparing to review and update pneumonia and diarrhoea technical guidance and guidelines in 2022–23. Given the changing epidemiologic and demographic profiles of countries, an enhanced clinical understanding of prevention and management of both conditions, and the introduction of new interventions, a state-of-the-art review is overdue.

To take forward this process, WHO commissioned reviews pertaining to questions that addressed the following themes:

- *Evidence synthesis on acute respiratory infection and pneumonia in children; and*
- *Evidence synthesis on diarrhoeal diseases in children.*

As a next step, WHO MCA conducted a virtual consultative meeting of key stakeholders on three consecutive days, 12–14 October 2021. The objectives of the meeting were to:

- present the findings of the systematic reviews;
- discuss the implications of the findings for future guidelines on the prevention and management of pneumonia and diarrhoea in children 1 month–9 years of age;
- discuss the implications of the findings for strengthening programme implementation, considering an integrated approach that addresses both direct and indirect causes;
- discuss gaps in knowledge and the need for further research to strengthen programming for the prevention and management of pneumonia and diarrhoea in children 1 month–9 years of age.

The objectives of the meeting were largely met, and the outcomes were achieved. Much was learned from the reviews and the discussions on implementation issues and how to go forward. The group reached the following conclusions on actions to be taken in three major areas.

## Implementation

- Focus on high-burden countries and populations within countries;
- Conduct detailed equity analysis in target areas and identify barriers to access and coverage of different interventions;
- Support aligned and coordinated responses to protect, prevent and treat through multisectoral collaboration, building on the knowledge of other groups;
- Build on primary health care (PHC) revitalization to prioritize and enhance investments in health services for children nationally and sub-nationally;

- Coordinate with global initiatives such as Zero-Dose Children, the WASH Alliance, Scaling-up Nutrition, Accelerated Action for Pneumonia, the Global Financing Facility, GAVI the Vaccine Alliance, Every Breath Counts, the ORS/Zinc Co-pack Alliance and the Global Fund for AIDS, Tuberculosis and Malaria to support an expanded agenda for child survival;
- Build a coalition of partners to act in synergy, using various global platforms such as the Child Health Task Force.

### Guidelines

- Review and update guidelines for pneumonia case management, with a focus on risk stratification, assessment, classification/diagnosis, treatment and follow-up care by age group (under-5, 5–9 years and young adolescents);
- Review and update guidelines for diarrhoea management, with a focus on risk stratification, assessment, classification/diagnosis, treatment and follow-up care by age group (under-5, 5–9 years and young adolescents);
- Update the practice tools, such as the Integrated Management of Childhood Illness (IMCI) chart booklet, the Pocket Book, and community case management.

### Research

- Conduct basic clinical research on presentation and management of pneumonia and diarrhoea in children 5–9 years of age and young adolescents;
- Evaluate the use of technologies to improve the diagnosis and treatment of pneumonia (especially among those with malnutrition and/or post measles), including laboratory investigations, biomarkers and imaging;
- Invest in implementation (behavioural and systems) research to improve coverage and quality of care, including demand and supply issues;
- Conduct evidence analysis on risk-stratified management of pneumonia and diarrhoea, both clinical and context specific.

### Next steps

As a follow-up to the meeting, WHO, working with partners, will:

- publish the reviews and proceedings;
- initiate the process of updating the current guidelines on pneumonia and diarrhoea and

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