

#### ABOUT PSN-PACFaH:

The Pharmaceutical Society of Nigeria (PSN) is the implementing Civil Society Organization (CSO) under the "Partnership for Advocacy in Child and Family Health" (PACFaH), focusing on reducing the under-5 mortality rate and improving health outcomes for Childhood Pneumonia and Diarrhea in Nigeria (with the use of Amoxicillin dispersible tablet and Zinc/Lo-ORS co-pack as first-line treatment respectively).

The PSN-PACFaH pilot Focal States are **Kaduna, Kano** and **Lagos**.

#### CONTACT DETAILS:

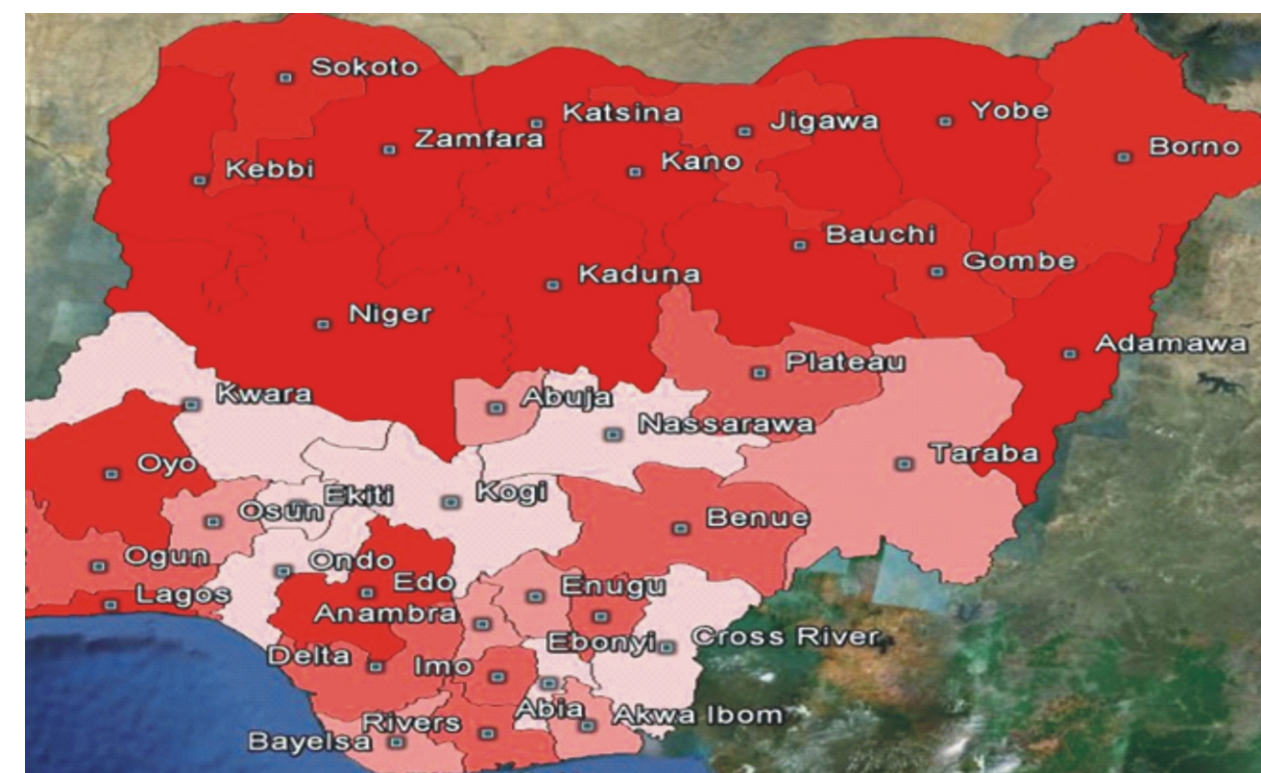
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The Partnership for Child and Family Health in Nigeria (PACFaH) Nigeria is a coalition of eight (8) leading Nigerian CSOs working to advance Government's commitment to policy implementation and domestic financing in **Nutrition, Family Planning, Childhood Killer Diseases** and **Routine Immunization** through Civil Society-led advocacy and building Champions within the Executive and Legislature.



## FACT SHEET

### SITUATION ANALYSIS OF CHILDHOOD PNEUMONIA AND DIARRHOEA



#EndPneumonia #EndDiarrhoea

#### REPORTING PARTNER



**PHARMACEUTICAL SOCIETY OF NIGERIA**

(FOUNDED 1927)

AS MEN OF HONOUR WE JOIN HANDS

MAY 2016

## 1.0 PSN-PACFaH BACKGROUND

The Partnership for Advocacy in Child and Family Health (PACFaH) Project is an innovative intervention implemented by eight leading Nigerian Civil Society Organizations (CSOs) who have adopted advocacy as a key strategy in tackling the challenges of gaps in policy, budgeting and administrative frameworks, with a view to advance Child and Family Health in Nigeria.

The PACFaH Project focuses on four issue areas: **Childhood Killer Diseases- Pneumonia and Diarrhoea; Routine Immunization; Nutrition and Family Planning.**

The Pharmaceutical Society of Nigeria (PSN) is the implementing CSO in the PACFaH Project, focusing on supporting and encouraging the Government to reduce the under-5 Mortality rate and improving health outcomes for **Childhood Pneumonia and Diarrhoea in Nigeria.**

PSN is specifically advocating for the following:

- The adoption and use of Amoxicillin dispersible tablet and Zinc-Low Osmolarity Oral Rehydration Salt (Zinc-LO-ORS) co-pack as First-Line Treatment for Childhood Pneumonia and Diarrhoea respectively. This is in line with the revised WHO/UNICEF Treatment Guidelines;
- The creation of specific dedicated budget lines for the procurement of Amoxicillin DT and Zinc/LO-ORS as<sup>2</sup> recommended by the new guidelines;
- Timely release and improved efficient use of allocated funds for the procurement of Amoxicillin DT and Zinc/LO-ORS for the management of Childhood Pneumonia and Diarrhoea.

## 2.0 RESEARCH FINDINGS: NATIONAL

Figure one: National Childhood Pneumonia and Diarrhoea Profile

### National Pneumonia & Diarrhoea Profile

From the Most Recent Nigerian Demographic Health Survey (NDHS 2013):

- **Nigeria National Annual Live-Birth Figure is 7,028,000 (Seven Million, Twenty-Eight Thousand);**
- **Of the Live-Birth Figure, 854,000 Die Before Their Fifth (5<sup>th</sup>) Birthday;**
- **For Every 1,000 Live-Births, 128 Die Before the Fifth (5<sup>th</sup>) Birthday;**
- **One in Every Eight Children in Nigeria Die Before Their Fifth (5<sup>th</sup>) Birthday;**
- **Pneumonia and Diarrhoea Accounts for 14% and 9% Respectively of the U-5 Mortality Rate;**

Source: NDHS 2013

WHO (2014): Revised WHO Classification and Treatment of Childhood Pneumonia at Health Facilities Evidence Summaries, page 17 and UNICEF: Committing to Child Survival: A promise renewed-Progress Report 2013 (Available at: [http://www.unicef.org/publications/index\\_70354.html](http://www.unicef.org/publications/index_70354.html))

Amoxicillin Dispersible Tablet (Amoxicillin DT) and Low Osmolarity Oral Rehydration Salt/Zinc (LO-ORS/Zn)

From the most recent Nigerian Demographic Health Survey (NDHS 2013) the **National** annual live-birth figure is **7,028,000**; of which **854,000** die before their fifth (5<sup>th</sup>) birthday. The NDHS 2013 further explain that for every **1,000** live-birth, **128** of them will die before they mark their fifth (5<sup>th</sup>) birthday. This translates to **one in every eight Children in Nigeria dying before they are aged five.** Pneumonia and Diarrhoea account for **14% and 9%** of the foregoing U-5 Mortality rate (figures) respectively.

The major reason for these preventable deaths is **POOR ACCESS TO HEALTHCARE, PARTICULARLY IN RURAL AREAS.** This situation can be effectively addressed by ensuring the following:

- Availability of recommended Essential Drugs (Amoxicillin DT and Zn-LO-ORS) for treating these Childhood Killer Diseases (Pneumonia and Diarrhoea);
- Improved Healthcare seeking behaviour and appropriate referral;

PSN-PACFaH specific Advocacy requests to key Stakeholders at the **National level** are:

1. The key stakeholders should support the adoption and listing of Amoxicillin DT as the First Line Drug for the management of Childhood Pneumonia in the National Standard Treatment Guidelines and the National Essential Medicines List;
2. They should encourage the Public to use Zinc-LO-ORS Co-pack as the first line drug in the management of

Childhood Diarrhoea;

3. As key stakeholders, they should also engage the **Federal Ministry of Health and relevant Agencies** to create a **specific budget line** for the procurement of these Essential Drugs (Amoxicillin DT and Zn-LO-ORS) that have been shown to reduce Pneumonia and Diarrhoea Deaths Globally and Nationally;
4. They should also encourage the **Federal Government and Health related MDAs** to ensure timely release and judicious use of funds allocated for the procurement of these Essential Medicines as captured in the budget.

We are optimistic that the implementation of these Advocacy requests will drastically reduce the unfavourable Childhood Mortality from preventable Pneumonia and Diarrhoea in **Nigeria.**

**For more information, please contact:**

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