

**EMBARGOED UNTIL 00:01 GMT, WEDNESDAY 29 JANUARY**

## **9 million children could die in a decade unless world acts on pneumonia, leading agencies warn**

*Malnutrition, air pollution and lack of access to vaccines and antibiotics among the drivers of preventable deaths from pneumonia—which last year killed a child every 39 seconds*

**BARCELONA, 29 January 2020** — Boosting efforts to fight pneumonia could avert nearly 9 million child deaths from pneumonia and other major diseases, a new analysis has found ahead of the first ever global forum on childhood pneumonia in Barcelona (January 29-31).

According to a modelling by Johns Hopkins University, scaling up pneumonia treatment and prevention services can save the lives of 3.2 million children under the age of five. It would also create ‘a ripple effect’ that would prevent 5.7 million extra child deaths from other major childhood diseases at the same time, underscoring the need for integrated health services.

Pneumonia is caused by bacteria, viruses or fungi, and leaves children fighting for breath as their lungs fill with pus and fluid. It is the biggest single killer of children, claiming the lives of 800,000 children last year, or 1 child every 39 seconds. Although some types of pneumonia can be prevented with vaccines and can be easily treated with low-cost antibiotics if properly diagnosed, tens of millions of children are still unvaccinated – and one in three children with symptoms do not receive essential medical care.

Child deaths from pneumonia are concentrated in the world’s poorest countries and it is the most deprived and marginalised children who suffer the most. Forecasts show 6.3 million children under the age of five could die from pneumonia between 2020 and 2030, on current trends. Over the next decade, deaths are likely to be highest in Nigeria (1.4 million), India (880,000), the Democratic Republic of Congo (350,000) and Ethiopia (280,000).

Health interventions aimed at improving nutrition, providing antibiotics and increasing vaccine coverage, boosting breastfeeding rates – key measures that reduce the risk of children dying from pneumonia – would also prevent millions of child deaths from diseases like diarrhoea (2.1 million), sepsis (1.3 million), and measles (280,000).

**Kevin Watkins, Chief Executive of Save the Children, said:**

*“The number of lives that could be saved is potentially far higher as the modelling did not take account of factors like availability of medical oxygen, or action to reduce levels of air pollution, a major risk factor for pneumonia.”*

*“These results show what is possible. It would be morally indefensible to stand and allow millions of children continue to die for want of vaccines, affordable antibiotics and routine oxygen treatment.”*

**Henrietta Fore, Executive Director of UNICEF, said:**

*“If we are serious about saving the lives of children, we have to get serious about fighting pneumonia. As the current coronavirus outbreak shows, this means improving timely detection and prevention. It means making the right diagnosis and prescribing the right treatment. It also means*

*addressing the major causes of pneumonia deaths like malnutrition, lack of access to vaccines and antibiotics, and tackling the more difficult challenge of air pollution.”*

Outdoor air pollution contributes to 17.5 per cent – or nearly one in five – pneumonia deaths among children under five worldwide, according to a study by the Institute for Health Metrics and Evaluation (IHME-GBD). Household pollution from the indoor use of solid cooking fuels contributes to an additional 195,000 (29.4 per cent) deaths.

Ninety-one per cent of the world’s population is breathing outdoor air that exceeds WHO standards. The scale of the air pollution challenge could potentially undermine the impact of scaling up pneumonia-related interventions.

Other causes of pneumonia deaths include malnutrition, and lack of access to vaccines and antibiotics. According to the Johns Hopkins modelling, of the total 8.9 million deaths from all causes that could be averted over the next decade, 3.9 million would be the result of greater efforts to reduce levels of malnutrition alone.

**Dr Seth Berkley, CEO of Gavi, the Vaccine Alliance, said:**

*“Pneumococcal pneumonia is an easily preventable, often treatable disease – no parent should go through the agony of losing their child to this disease. Over the past decade we have made progress in boosting the number of children receiving lifesaving pneumococcal vaccine and it is vital that we keep up these efforts to protect the next generation against this deadly disease. Gavi’s donor pledging conference in June will offer the international community the chance to help us do so.”*

**Quique Bassat, Research Professor at the Barcelona Institute for Global Health (ISGlobal) and Chair of the Global Forum on Childhood Pneumonia said:**

*“The disease that kills most children in the world cannot be neglected any longer in terms of its scarce global research funding. Research and innovation need to drive policy change, and lead the way for further decreases in pneumonia-attributable mortality.”*

**Leith Greenslade, Co-ordinator of the Every Breath Counts Coalition, said:**

*“This analysis shows that collective action to protect children from pneumonia could really boost national efforts to achieve the SDG for child survival. Governments and international development agencies must act urgently to protect the most vulnerable children from malnutrition and exposure to air pollution, and ensure that they receive pneumonia-fighting vaccines and speedy diagnosis, child-friendly antibiotics and oxygen if they become sick. If they don’t, 9 million children’s lives are at stake.”*

On January 29-31, the nine leading health and children’s organisations – ISGlobal, Save the Children, UNICEF, Every Breath Counts, “la Caixa” Foundation, the Bill & Melinda Gates Foundation, USAID, Unitaid and Gavi, the Vaccine Alliance – are hosting world leaders at the [Global Forum on Childhood Pneumonia](#) in Barcelona, the first international forum on childhood pneumonia.

Among the announcements to be made at the forum include a more affordable, PCV vaccine from the Serum Institute of India and political commitments from governments in high-burden countries to develop national strategies to reduce pneumonia deaths.

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Content and case studies available [here](#). Photos, broll and the analysis can be [downloaded here](#). For more resources on pneumonia, [click here](#).

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#### Notes to editors:

- For more information about the modelling results see the full brief: *Tackling pneumonia could avert almost 9 million child deaths this decade*. The brief contains data for 30 low- and middle-income countries.
- **Johns Hopkins University's Lives Saved Tool (LiST)** is designed to estimate lives saved from maternal and child health interventions. Rather than providing a simple linear projection, it estimates what the profile of child pneumonia deaths in 2030 will look like according to population risk factors such as malnutrition, vaccination rates and health care seeking. For this analysis, two projections have been performed: (1) 'business as usual' projections where the rates of progress against key risk factors for pneumonia continue to rise at their historical trends until 2030; (2) a 'scale-up' scenario where 19 health and nutrition interventions with a direct impact on reducing child pneumonia deaths, such as vaccination or access to antibiotics, achieve 100% coverage by 2030.
- Pneumonia initiatives to be announced at the forum include:
  - National government commitments to accelerate vaccination coverage by supporting Gavi's 2020 replenishment, ensuring more equitable vaccination coverage and vaccine affordability.
  - A new more affordable [PCV vaccine](#) from the Serum Institute of India.
  - The Nigerian Pneumonia Control Strategy, presented by the Nigerian Minister of Health, which aims to achieve the target of three child pneumonia deaths per 1,000 births by 2030.
  - \$US43 million Unitaid investment to improve access to pulse oximetry and related diagnostic tools in nine countries in partnership with PATH, the Swiss Tropical and Public Health Institute, ALIMA, the Institut National de la Santé et de la Recherche Médicale (INSERM) and Solthis and Terre des Hommes.
  - A new [WHO-UNICEF oxygen device manual](#) for oxygen therapy which provides support to health staff and programme experts on the selection, procurement, use and maintenance of essential products for delivering oxygen