



REGIONAL OFFICE FOR

**World Health  
Organization**

**South-East Asia**

# **Childhood Diarrhoea Regional Situation**

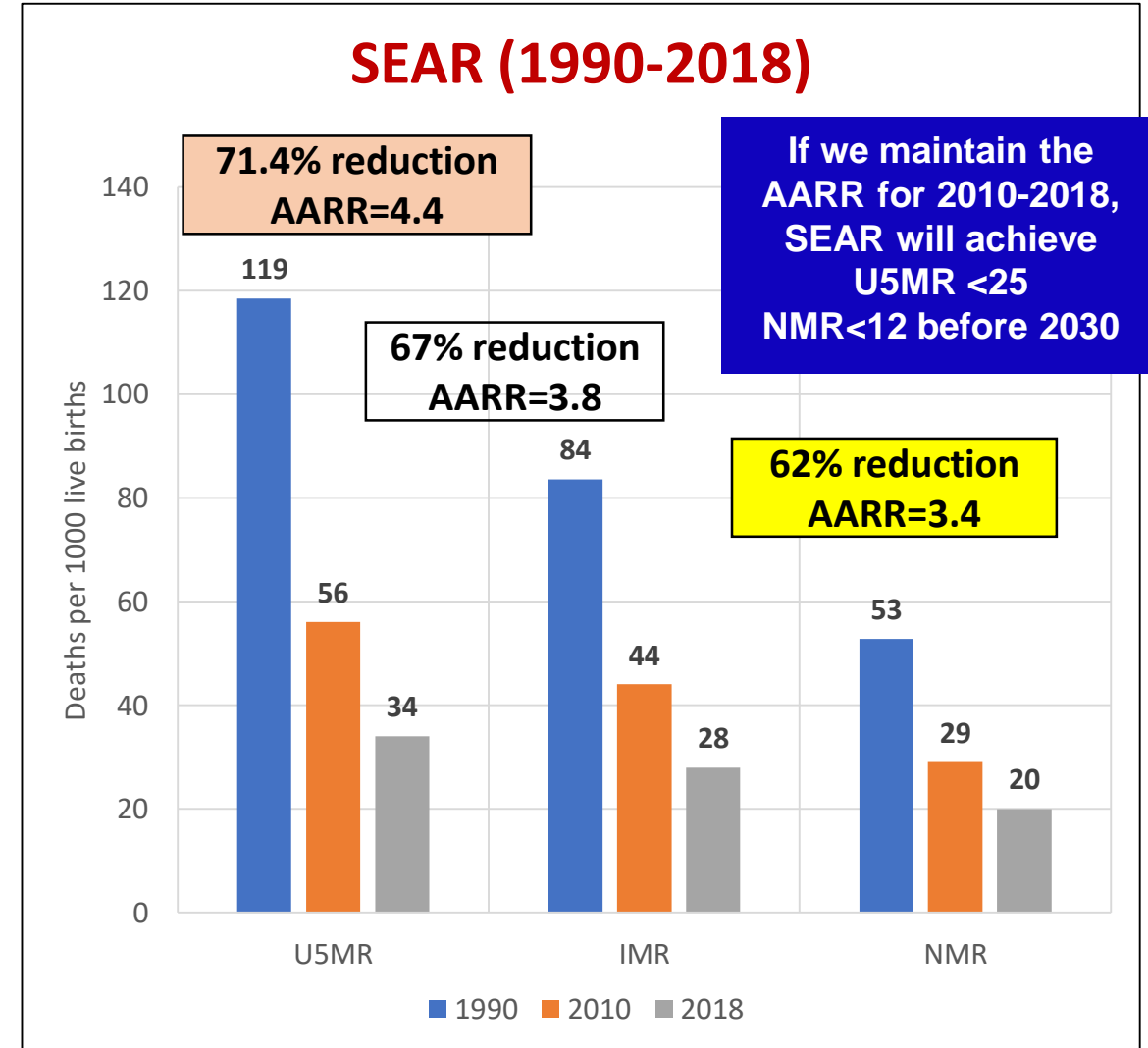
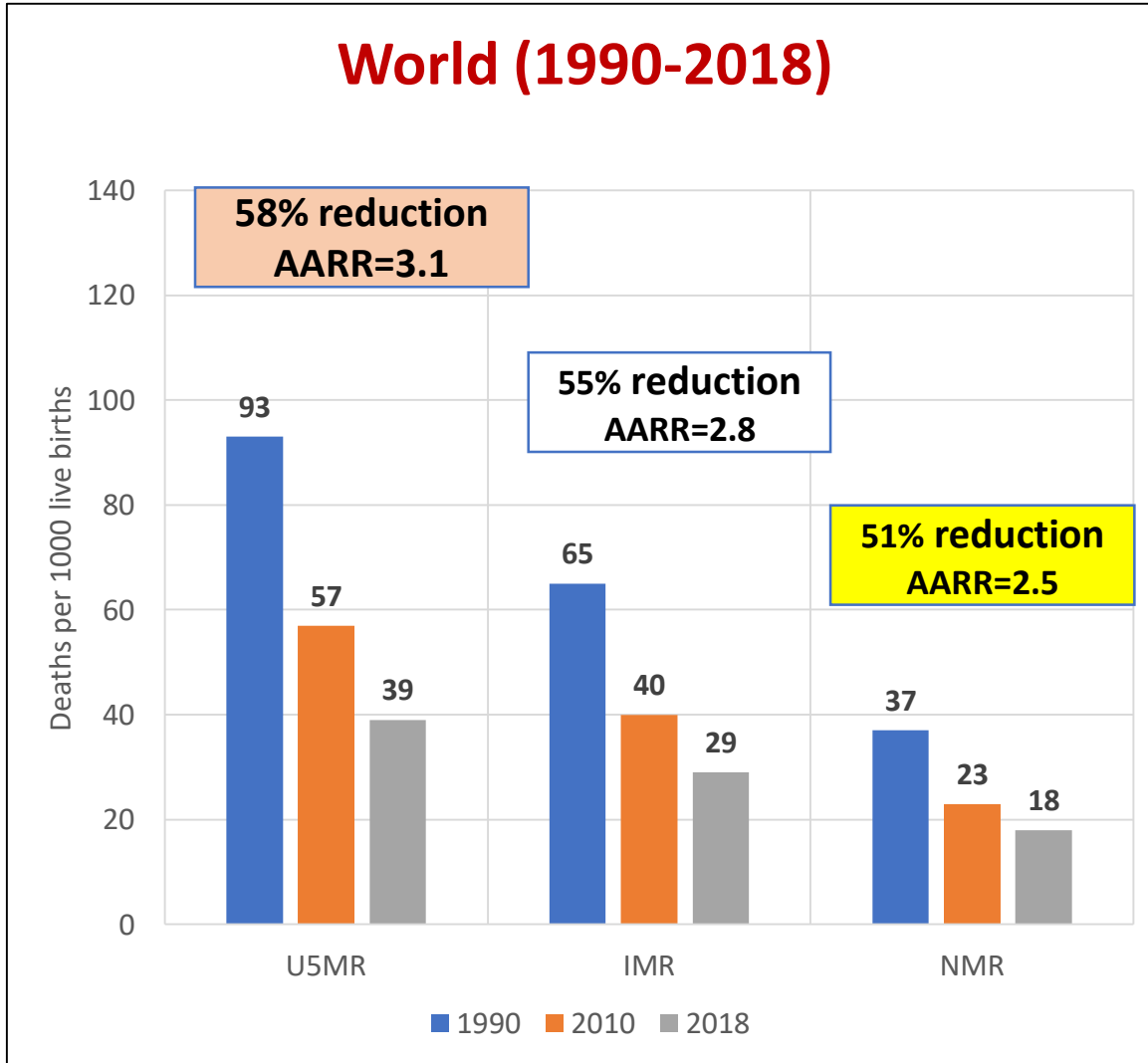
**Dr Rajesh Mehta MD**

**Regional Adviser, Newborn-Child-Adolescent Health**

**WHO-SEARO**

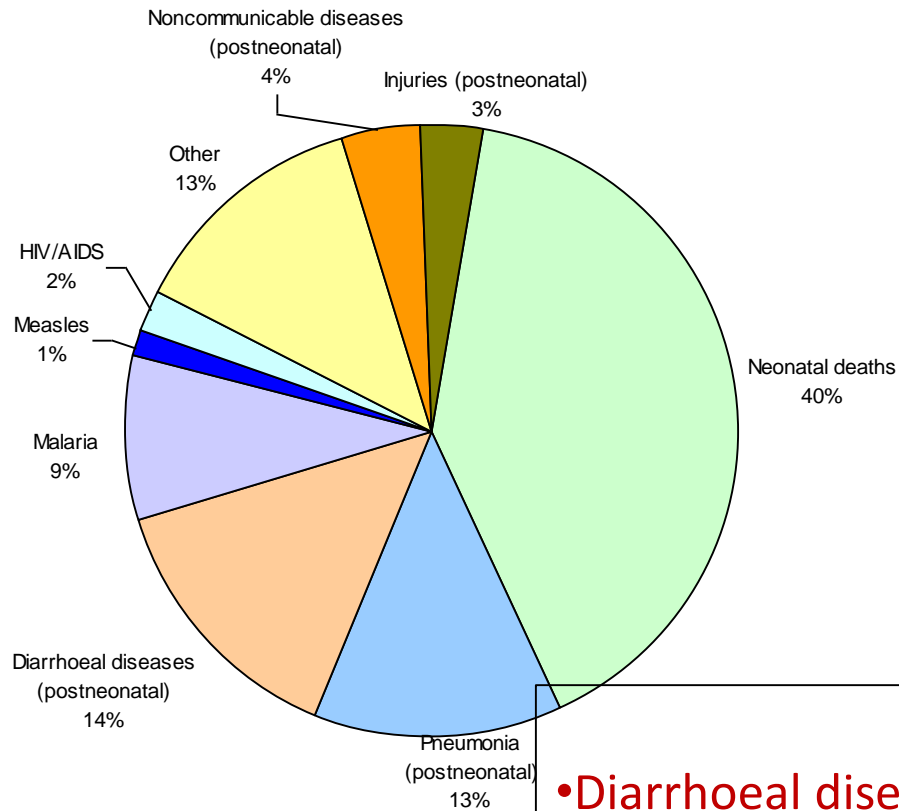
# Child mortality reduction (1990-2018)

## SEAR's performance is better than the World

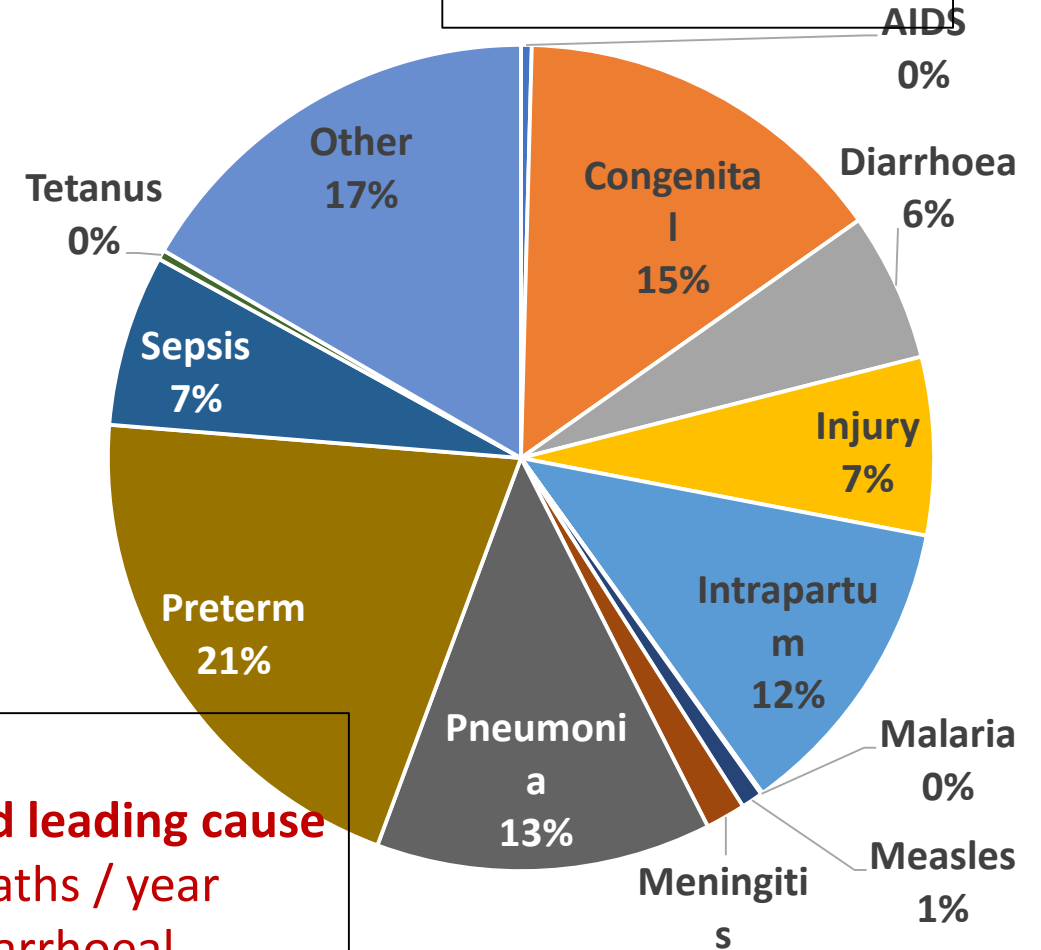


# Causes of Under-Five Mortality

2008



2018

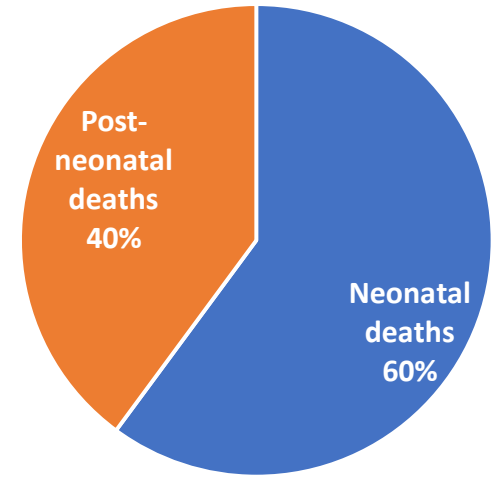
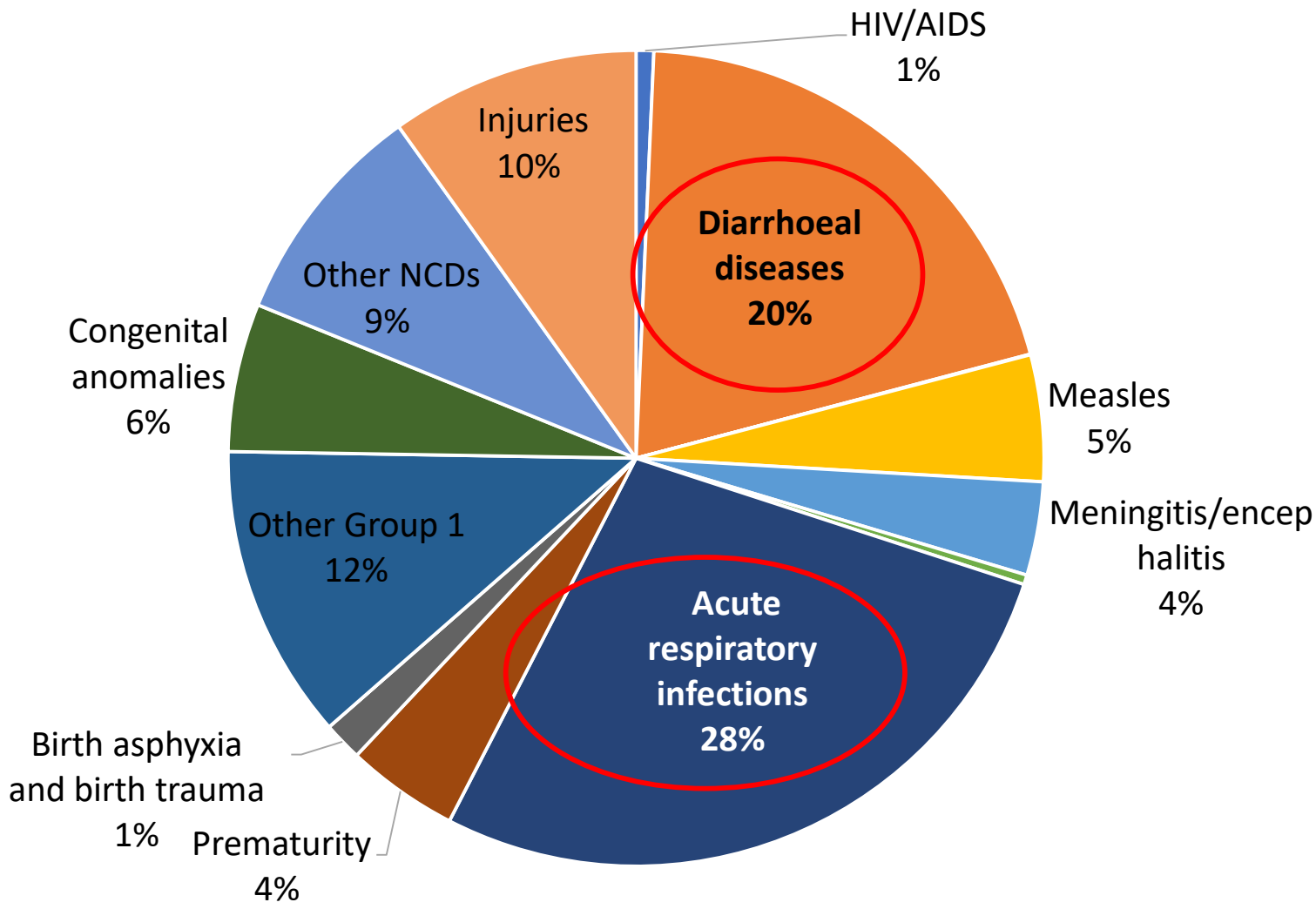


## Key facts (2017)

- Diarrhoeal disease is the **second leading cause of death** in children: 525 000 deaths / year
- 1.7 billion cases of childhood diarrhoeal disease every year.

# Almost 0.5 million dying between 1 month and 5 years of age

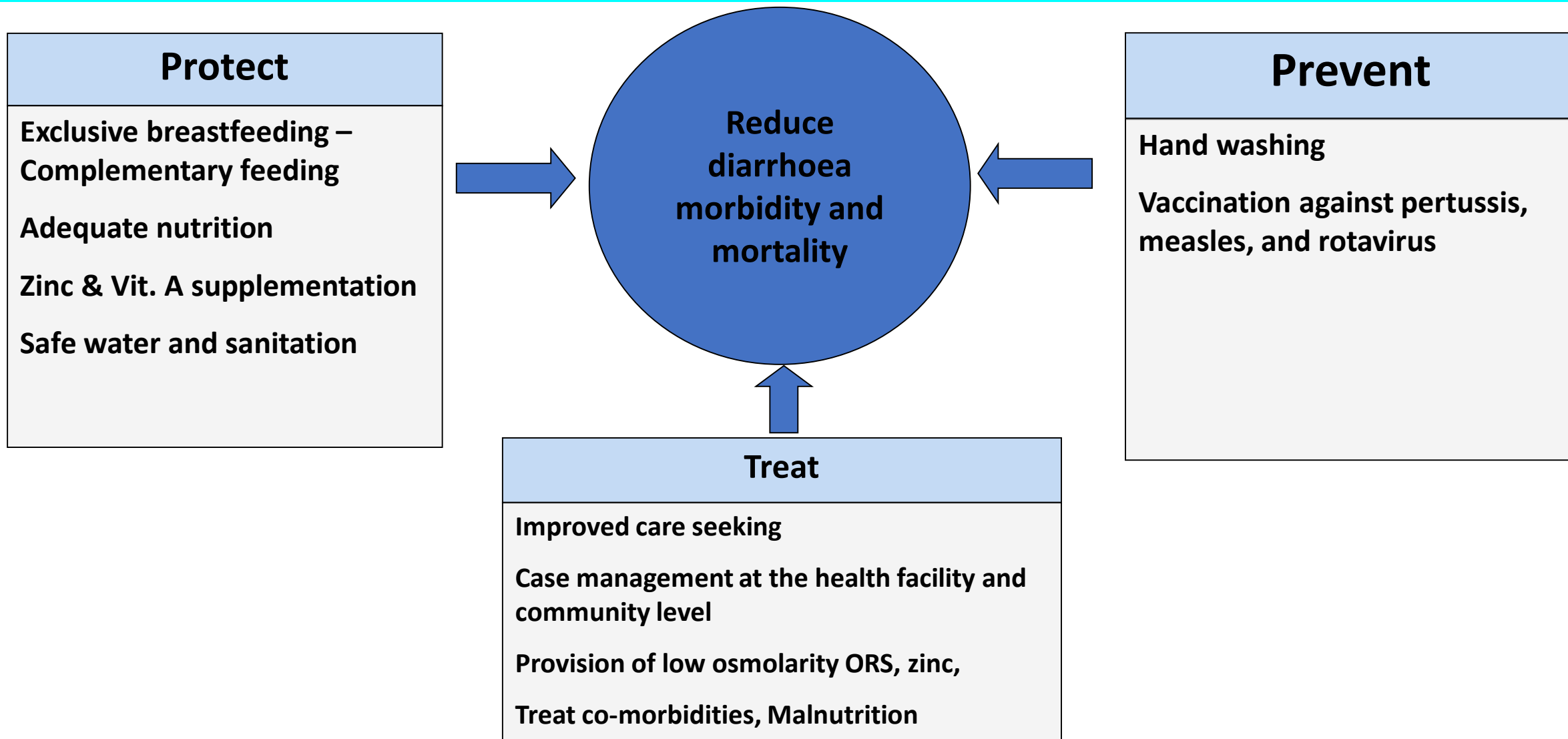
## Causes of post-neonatal deaths



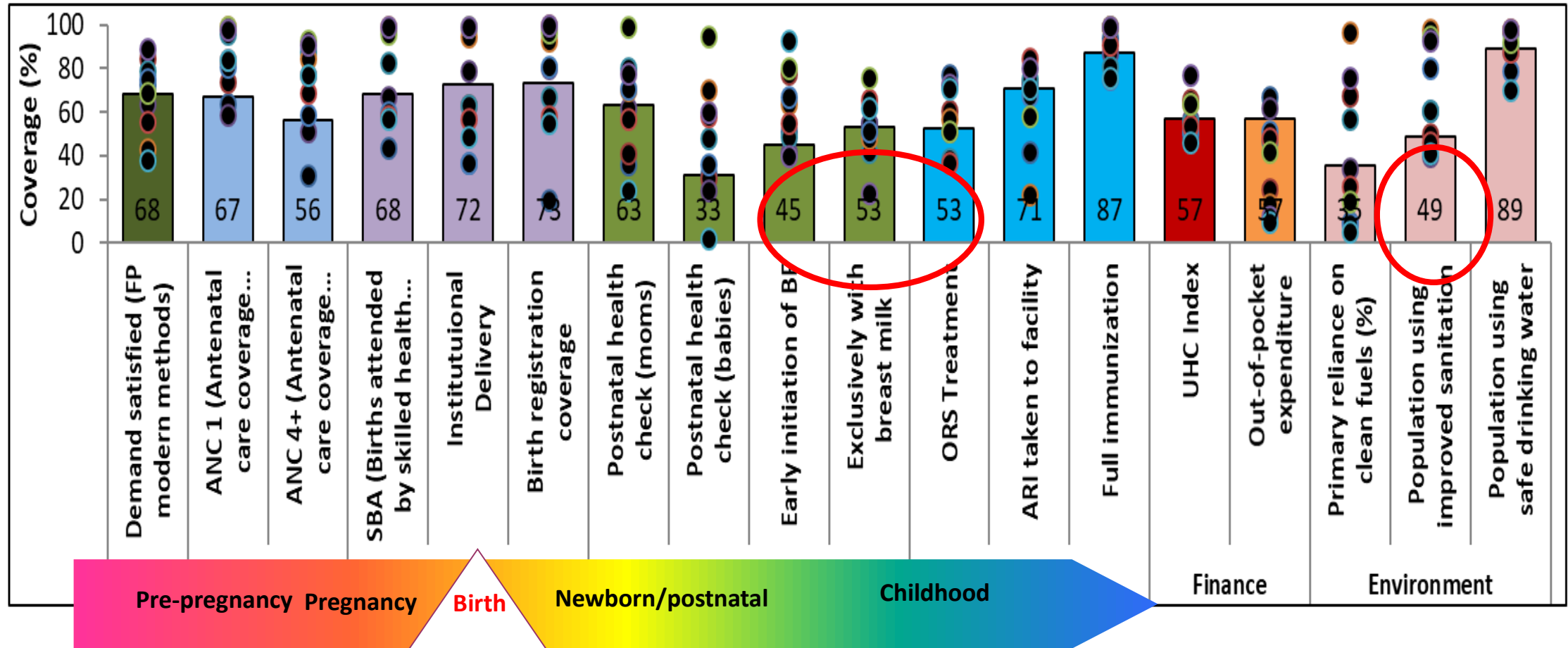
Acute respiratory infections and diarrhea are the two biggest killers...!!

# Much of diarrhoea is preventable and treatable

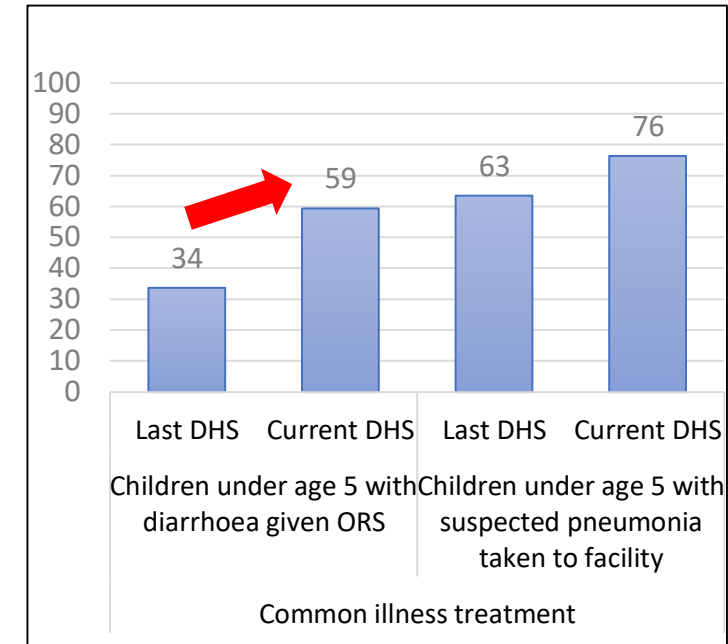
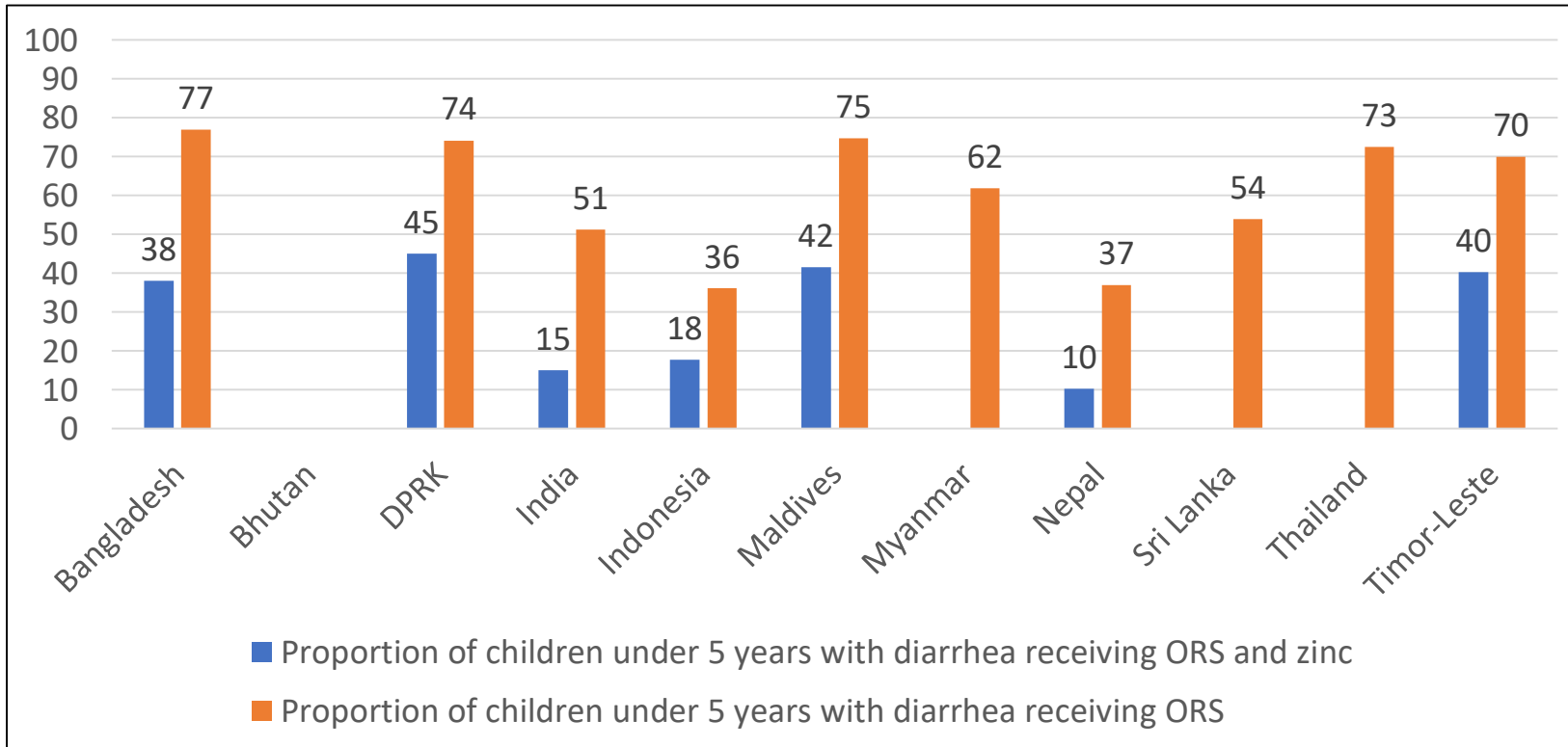
## Protect, prevent and treat



# Interventions are well-known, however, coverage remains low!



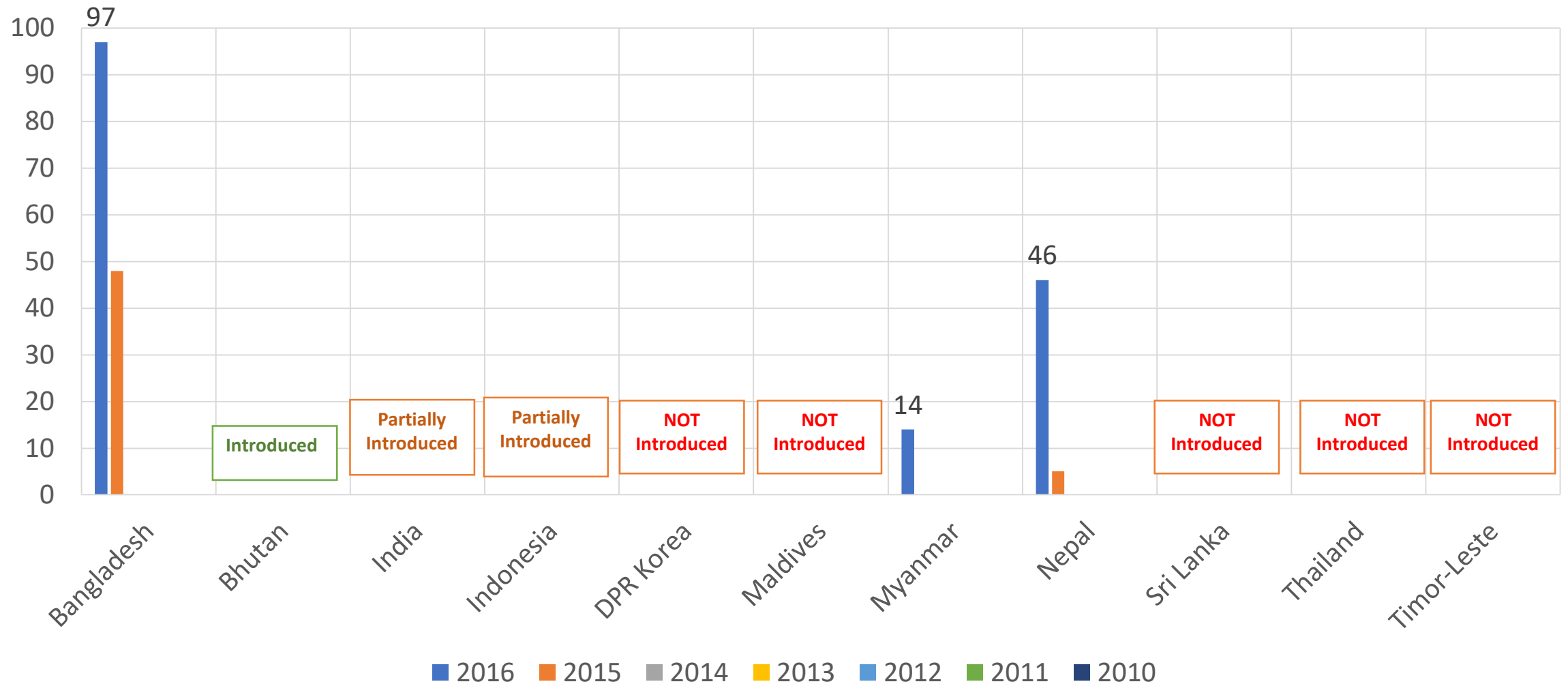
# Treatment for diarrhea: ORS and Zinc



Source: Recent DHS/MICS (Bangladesh 2014; Bhutan 2012; DPRK 2017; India 2016; Indonesia 2017; Maldives 2016-17; Myanmar 2016; Nepal 2016; Sri Lanka 2016; Thailand 2016; Timor-Leste 2016)

# Rotavirus vaccine: Completed dose coverage among one year-olds is 24% in 2018

Percentage of children who received 3 doses of PCV vaccine





# Address diarrhoea and pneumonia together

## Diarrhoea



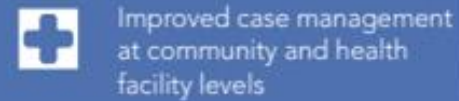
### Protect



### Prevent



### Treat

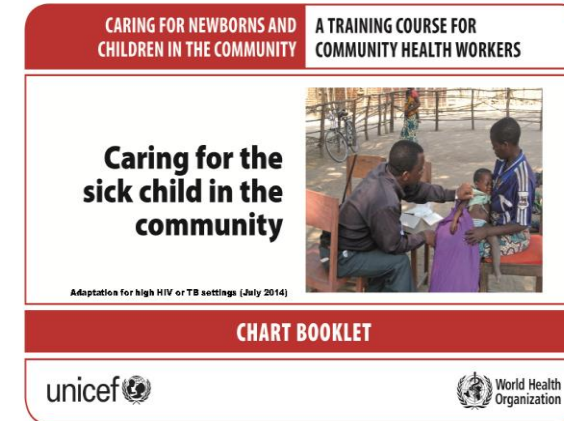
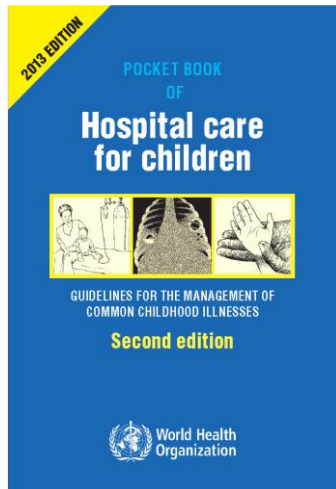


## Pneumonia



# Management Strategy: Integrated and Continuum

- **Integrated approach:** Protect, prevent and treat diarrhoea
  - **Community level:** Community Case Management by trained community health workers
  - **First level care:** IMCI
  - **Referral care** at hospitals



## Multi-sectoral approach: Water, sanitation

- Complete Assessment
- Treatment: ORS & Zinc + Continue feeding + When to Return
- Prevention: Nutrition counseling, WASH, Vaccine



# SEAR: Community-based Case Management

## Authorization of most peripheral CHW in SEAR:

- **Diarrhea** management:
  - ORS and Zinc: Bangladesh, DPR Korea, India, Myanmar, Nepal, Timor Leste
  - ORS **not** Zinc: Bhutan and Indonesia
- **Pneumonia** management (antibiotics use): BAN, IND, NEP
- **Management of both Diarrhea and Pneumonia:** BAN, IND, NEP

**Training:** IMCI based training in most countries

WHO-UNICEF CHW package is available

# SEAR: Facility Based Management

- **First level:**

- IMCI/IMNCI is being implemented in all member states except Thailand
- Scale:
  - Maldives, Nepal and Timor: 100% districts
  - Bangladesh, India, Myanmar: 50 -75% districts
  - Bhutan, DPR Korea: < 50% districts

- **Referral level:** All member states

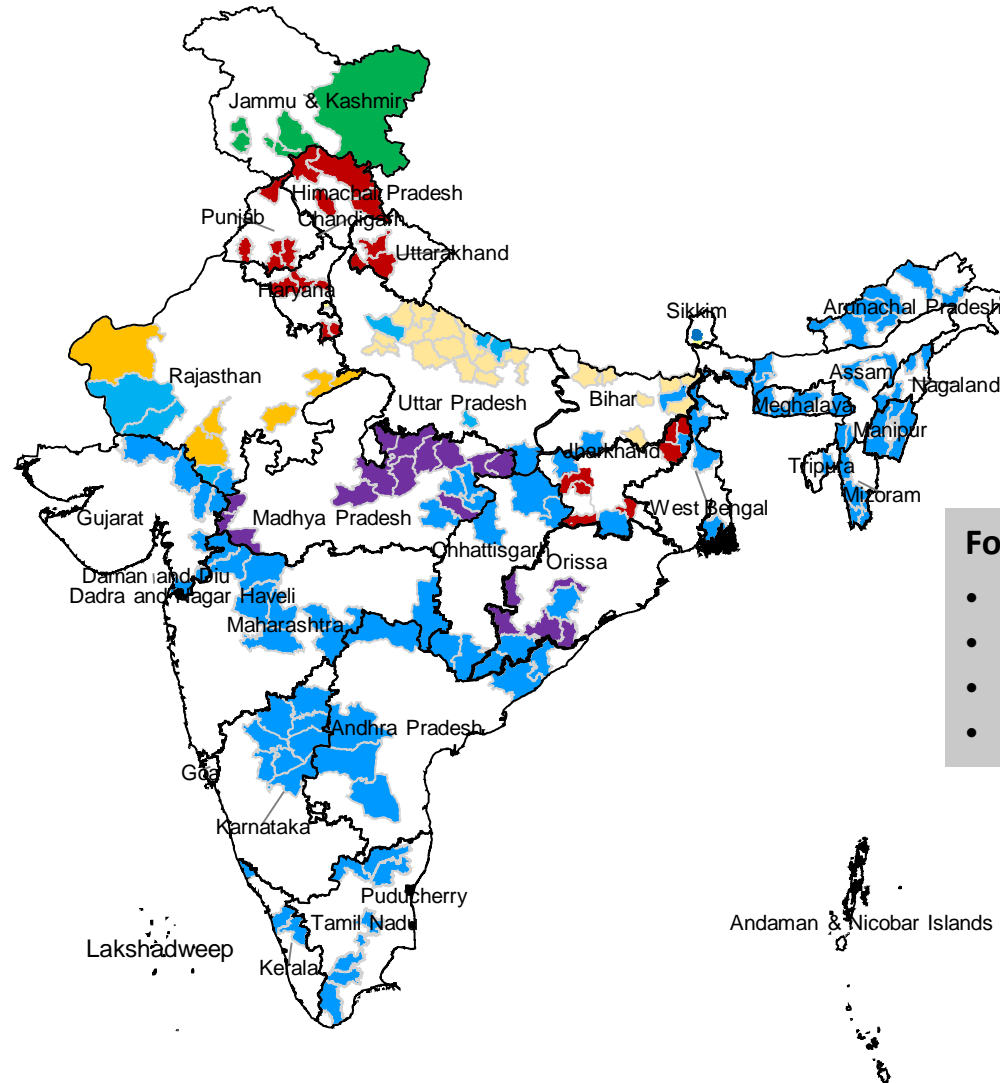
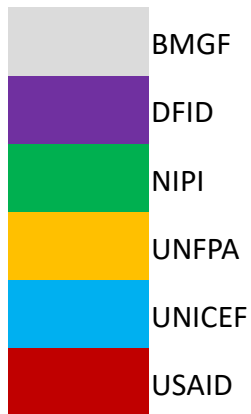
- WHO Pocket book is the basis
- Challenges: Scale and quality of care

# Addressing health system constraints

- **Is healthcare infrastructure adequate?:** First level and Referral health facilities and Transport; Community services
- **Health workforce:** Numbers, Distribution, Skill-Mix and Competencies, Motivation, Supportive Supervision
- **Essential supplies**
- **Suboptimal quality of care**
- **Poor measurement and monitoring (Health Information System) – Accountability**
- **Engagement with Community:** Demand and utilization of services and accountability

# India: Strategy focuses on High Priority Districts

184 High Priority Districts (HPDs) across 29 States



**Integrated approach:** Protect, prevent and treat diarrhoea

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**Focus on :**

- Rural and Urban Poor
- Tribal & Minority groups
- Hard to Reach Areas
- Girl Child

# India's Intensified Diarrhoea Control Fortnight (IDCF): Campaign Launched in 2014

..with the objective to kick-start diarrhoea control efforts

WEEK 1	COMMON ACTIVITIES FOR WEEK WISE THEME	WEEK 2
1. ORS distribution & counselling - home visits by ASHA	1. Capacity building for IDCF implementation	1. Breastfeeding initiation immediately or within 1 hour
2. Establishment of ORS-Zinc Corners	2. Intensive Awareness generation	2. IYCF demonstration and counselling sites
3. Hand washing demonstration and practice in schools	3. Multisectoral involvement – AWCs, Schools PRI, etc.	3. Medical management of under nourished children at health facility

**IDCF 2019**  
**Intensified Diarrhoea Control Fortnight**  
**28 May to 8 June 2019**


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*OPERATIONAL GUIDELINES*

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**Ministry of Health & Family Welfare,**  
**Government of India**

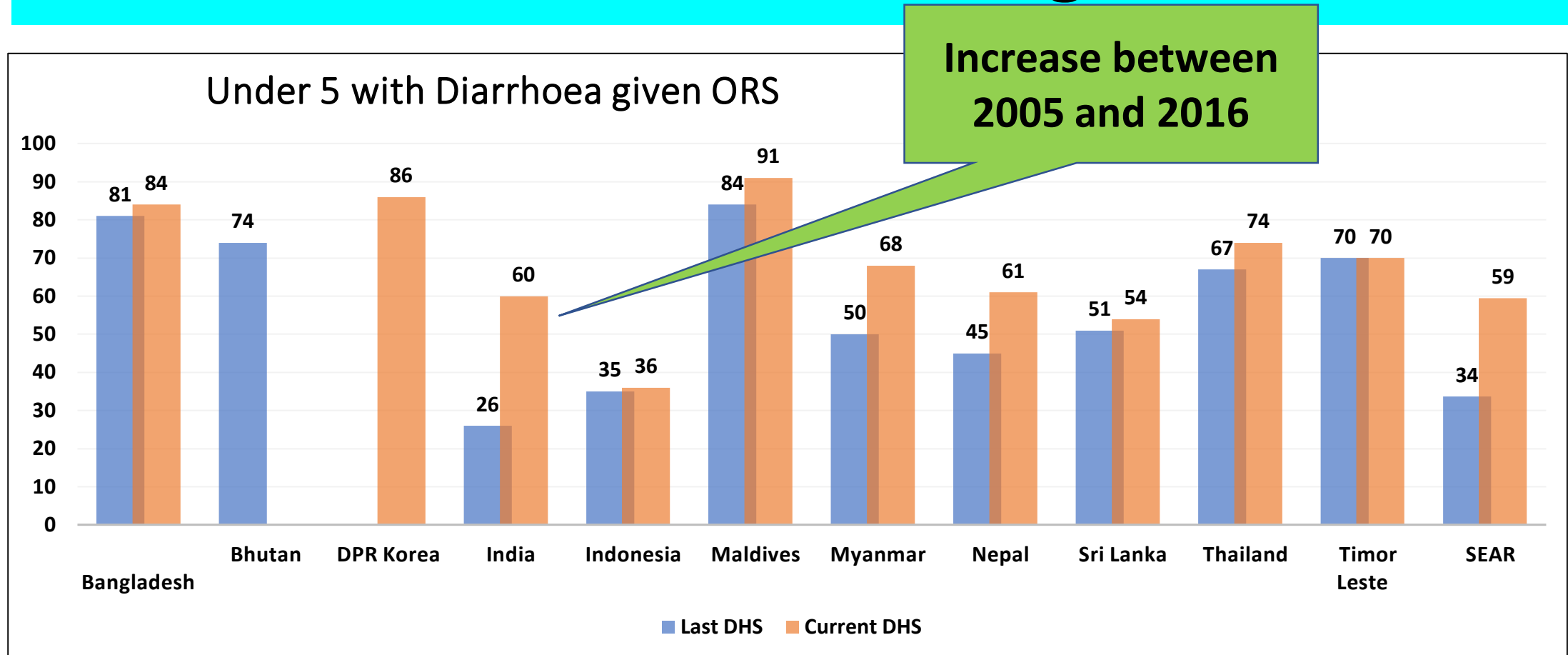
*Intensification of efforts towards "zero" childhood deaths due to Diarrhoea across all States & UTs of India*



4/3/2019



# Increase in Coverages



Source: Bangladesh DHS 2014 and 2017, Bhutan MICS 2010 and 2016, DPRK MICS 2016, India NFHS 3 and 4 (2015-2016), Indonesia DHS 2012 and 2017, Maldives 2011 and 2017, Myanmar 2011 and 2016, Nepal DHS 2014 AND 2016, Sri Lanka DHS 2017, Thailand MICS 2010 and 2016, Timor Leste DHS 2010 and 2016.  
SEAR- Annual Births (2015-2020) from WPP, 2017 revision weighted coverage for last round of DHS compared with current.

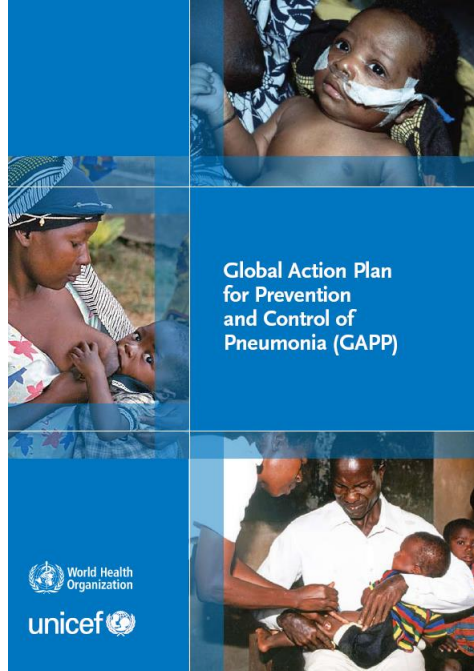


# Should we aim for Zero Mortality from Diarrhoea

Improving  
Newborn  
and  
Child Health  
A Strategic Framework (2018-2022)



World Health Organization  
South-East Asia



- Protect
- Prevent
- Treat



# Thank You