



## **CWGH Press Statement for World Pneumonia Day – 12 November 2022 – Harare, Zimbabwe**

### **Theme: Fighting Pneumonia an Agenda for Action**

Zimbabwe successfully implemented Primary Health Care since its independence in 1980. As a result, impactful programmes with a deliberate focus on maternal and child health greatly improved health indicators for mothers and children up to 2000. Slackening of this momentum was caused by several challenges; notably the structural adjustment programmes of the 1980's, the HIV and AIDS pandemic, sustained under funding for health, (*below the 15% Abuja target of government budget to health*), management and governance problems, all resulting in marked decline in health services provision. All these have since contributed to high morbidity and mortality rates especially for women and children under five.

Respiratory infections have increased and maternal and neonatal conditions remain a major driver of disability-adjusted life years, (DALYs). Globally more than 670 000 children under the age of five die of pneumonia, surpassing infectious disease and conditions such as HIV, malaria and tuberculosis annually.

The top four causes of DALYs in Zimbabwe are **respiratory infections**, HIV/AIDS, maternal & neonatal issues and cardiovascular disease. Pneumonia in Zimbabwe as in other low income countries is caused by viruses, bacteria, especially streptococcus pneumonia, fungi, and pre-existing conditions such as **malnutrition, HIV, measles, asthma, diabetes, among other underlying factors**.

The majority of pneumonias in children are both preventable and manageable. However, for a country with multiple health challenges this may not have been adequately prioritized, quantified and qualified to make meaningful interventions particularly those aimed at the household or community. Until recently the medicines policy of the country did not allow community based workers to store and dispense antibiotics, anti-virals or antifungals to treat commonly occurring pneumonias in children.

Meanwhile **environmental factors such as poor hygiene, poor water and sanitation, air pollution, (indoor and outdoor), cigarette smoke, also predispose to pneumonias in children**. The health delivery system has in the past decade been on a marked decline in health services provision and the most vulnerable remain the children and their mothers who are major users of the health system;

- Compounded by the Covid-19 pandemic, there has been reduced access and utilization of health services, with downsizing of services at most clinics, district, provincial and central hospitals, while several clinics in Harare closed for lack of staff, medicine and supplies for most of 2022.
- This imposes a heavy burden on the mothers, families and communities on managing the prevalent childhood diseases such as pneumonia.
- Using this opportunity offered by World Pneumonia Day, we wish to stimulate the investment in community health as an integral component of PHC by empowering the mothers, families and communities to identify and manage pneumonia in the home and community. Working in close liaison with their health facility staff, they should be capacitated know the effective local remedies, the harmful practices, and where to get medicines for treating simple cases to minimize complications and deaths. The mothers and caregivers working with the community health workers must know and detect the danger and warning signs and make the right actions that save lives, and make the referrals and accompaniments to the health facility.
- The week long commemoration of pneumonia awareness offers us an opportunity to identify all stakeholders for working together to quantify and begin to halt the pneumonia deaths in the under-fives in Zimbabwe, among them; Mothers and caregivers, policy makers, pediatricians, nurses, environmental health workers, nutritionists, nurse aides, health center committees and hospital advisory boards, village health workers, other community based workers, community leaders, media, traditional and spiritual healers.
- We will therefore use the World Pneumonia Day to advocate for policies and programmes that improve access to diagnosis and management of pneumonia at household and community level, and ensure continuum of care at all health facilities.
- To agree on the urgency of addressing this challenge and adopt the right strategies to prevent, diagnose and treat (deploy the right anti-microbials to community based workers) to improve access before complications and deaths due to untreated pneumonias. This means exploring community deployment of antibiotics, with insistence on rational use against a background of medicines shortages at the health facilities and the increasing challenge of anti-microbial resistance
- To utilize pneumonia detection and management at community level to strengthen Primary Health Care implementation for the attainment of Universal Health Coverage and health systems strengthening in Zimbabwe
- We therefore advocate for the identification of policies and guidelines that support the detection, diagnosis and management of pneumonia at community level, including access to the right anti-microbials, cognizant of the threat of abuse, misuse, development of anti-microbial resistance against the current high deaths from lack of access to anti-microbials especially antibiotics. There is need for quantification of the burden of pneumonia among children under five for consensus on the local interventions aimed at preventing, diagnosing and management of childhood pneumonia. We will continue to advocate for more research into preventing and managing pneumonias and aim for its elimination as a public health problem.

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