1. **EVERY 39 SECONDS** one child dies from pneumonia, and yet pneumonia is one of the most preventable and treatable illnesses. 99% of deaths occur in low-income countries and greatly impacts the most vulnerable children.

2. **FAILURE** to provide vaccinations, diagnosis, and accessible healthcare and resources, has made pneumonia a global issue in which awareness is crucial to stop the ever-expanding gap of social inequality.

3. **PUTTING PNEUMONIA ON THE MAP.** Health can never be considered a luxury. The Global Forum on Childhood Pneumonia is an international effort to join forces to combat the leading infectious cause of death in children and to put pneumonia on the global health agenda.

4. **HEAR OUR VOICES.** Today, young people call on governments, international organizations, the private sector and civil society for renewed efforts to spread awareness of pneumonia and demand actions in the development of successful countermeasures to establish a full-scale reform to protect and prevent the continued ignorance of this health crisis.

5. **AN URGENT CRISIS.** Most deaths caused by pneumonia are driven by a lack of affordable and available medicine, and inadequate knowledge and experience in treating pneumonia. We are faced with the challenge of implementing and translating current knowledge into clinical practice. By vaccinating children, or intervening early with appropriate medication, healthcare providers can reduce the number of deaths. We believe a renewed effort by all the actors involved is necessary to combat the urgent crisis of pneumonia.

6. **CHILDREN LEFT BEHIND.** While global immunisation coverage has reached 48% for PCV3, vaccination rates have stagnated in some areas, leaving behind children unimmunized and unprotected. This is mainly due to the cost of vaccines. In 2015, 193 countries asked the World Health Organization for a resolution to lower prices and for more transparency. According to Médecins Sans Frontière’ report, “The Right Shot”, vaccinating a child in 2015 was 68 times more expensive than vaccinating a child in 2001. The pneumonia vaccine is responsible for almost half of the price increase.
7. **WE, THE YOUTH**, believe that while it is important for both the public and private sector to contribute to solving global health problems, solutions to pressing health problems should not be for-profit investments. If there are any profits to be made from providing health services, these should be reinvested to help lower prices and increase production. We trust the Advance Market Access is a good initiative, but we emphasize that the funds given to pharmaceutical companies must not exceed research and production costs. The setting of vaccine prices must be completely transparent. Furthermore, we support a move towards process patents and shorter product patent periods for medical inventions. More efforts should be devoted to ensuring access to vaccines in every country, irrespective of their economic situation. We welcome PATH and the Serum Institute of India’s recent development of a new vaccine that has the potential to decrease prices and increase the availability of pneumonia vaccines worldwide.

8. **ACCESS TO ANTIBIOTICS.** One of the most important treatments for bacterial pneumonia is antibiotics, which are not universally available. In some countries, supplies are unreliable, and access is limited. Furthermore, the price of antibiotics differs from region to region, affecting the availability of proper treatment for people in difficult socio-economic conditions. In this way, the poorest children are less likely to survive.

9. **COMMUNITY HEALTH WORKERS** often lack the diagnostic skills and resources to identify and treat pneumonia. But they are the first line of defence against pneumonia and their close contact with families can promote appropriate health-seeking behaviours in the community. Through proper training to diagnose and treat pneumonia, and on-time referral of severe cases, the number of child deaths from pneumonia can be reduced significantly. Initiatives like the integrated Community Case Management (iCCM) has proven to be effective, significantly reducing rates of treatment failure.

10. **RAISING AWARENESS.** Another aspect that should not be neglected is the importance of raising awareness. This can prove to be particularly effective in countries or areas where local communities do not have access to adequate information regarding pneumonia. This lack of knowledge often prevents families from adopting simple hygienic or nutritional habits that could prevent children falling sick. Furthermore, knowing more about pneumonia would enable them to recognize it in the early stages and treat it before it is too late. It is crucial to cooperate with key actors in the local community to have a substantial impact on childhood pneumonia.

11. **CARE-SEEKING.** Some case studies of high-burden countries affected by pneumonia have shown economic and socio-cultural constraints to care-seeking. Care-
seekers’ lack of knowledge about pneumonia not only prevents timely and appropriate diagnosis, but also helps the disease spread. Today, there is still some skepticism about vaccinations due to misinformation that we need to deconstruct in order to prevent pneumonia. Providing medical information to care-seekers would be an important step in the prevention of pneumonia.

12. WE ALL HAVE A RESPONSIBILITY. Not a single child in the world should die from a preventable and treatable disease, no matter their socioeconomic background. We all have a responsibility to act to protect future generations. The challenge that childhood pneumonia poses cannot be overcome solely by governments or international organizations. It must be based on a close cooperation between all actors, including the private sector, NGOs and civil society; and that cooperation should be encouraged at all levels.

*We, the youth, want to stress the importance of every individual getting involved and having a positive impact, irrespective of age, gender or educational level. All of us can and must play a role in the battle against pneumonia.*

If you are a youth activist or a youth organization and would like to be part of the Youth Call to Action on Childhood Pneumonia, please contact Daryl Álvarez, President of the United Nations Student Association Spain (UNSA Spain), at Presidencia@unsaspain.org.