At the 2nd Global Forum on Childhood Pneumonia from 26 to 27 April 2023, governments, United Nations (UN) and global health agencies, foundations, non-government organizations, companies, and academic institutions came together again determined to protect all children from the leading infectious threat to their survival - pneumonia.

The Forum culminated in a Declaration with 38 commitments to accelerate declines in child pneumonia deaths and advance progress towards achievement of the child survival Sustainable Development Goal (SDG) in more than 14 countries, including Burkina Faso, Chad, Democratic Republic of Congo, Ethiopia, Guinea, India, Indonesia, Nigeria, Mali, Mozambique, Peru, Somalia, South Sudan, and Sierra Leone.

The commitments will not only help these countries regain the ground they lost during the pandemic, but will also help introduce and scale up new vaccines, diagnostic tools, and treatments, as well as reduce the leading risks for child pneumonia death - malnutrition, air pollution, and low birth weight - benefiting many countries.

The commitments are aligned with the new movement for Child Survival Action, which seeks to intensify collective efforts in the 54 countries that are not on track to achieve the child survival SDG by 2030 - less than 25 deaths among children under five for every 1,000 births.

Six months after the 2nd Global Pneumonia Forum, this report provides a self-assessment of the progress each commitment-make has made. Most have reported real progress delivering on their promises in ways that will not only reduce child pneumonia deaths, but child deaths from many other causes.

As we are at the halfway point to the SDG 2030 deadline, now is the time to seize the opportunity and ensure that our efforts are a turning point in the long journey to dramatically reduce deaths from childhood pneumonia and fulfill our promise to every child - a fifth birthday.
To assess progress in implementing the 38 commitments, commitment-makers were invited to answer a short survey in English, French, or Spanish.

Their answers are summarized below next to the commitments they made in April 2023 at the 2nd Global Forum on Childhood Pneumonia.

Their progress has been rated according to one of three measures: (1) Achieved, (2) On-track, or (3) Off-track.

A virtual Commitment Progress Roundtable was held on 13 November to mark World Pneumonia Day (12 November) by bringing together 12 commitment-makers to present their progress. The governments of Burkina Faso, Chad, Guinea, Nigeria, Somalia, and Sierra Leone, as well as UNICEF, Gavi, Save the Children, the Bill & Melinda Gates Foundation, ”la Caixa” Foundation, Save the Children (with MAP International and THINKMD), and Hewatele, all reported on their progress. The recording is available here.
Commitments are listed in alphabetical order by category of commitment-maker.

GOVERNMENTS

Burkina Faso

Burkina Faso commits to develop and implement a strategy to ensure the availability of pulse oximeters at health facilities and will accelerate construction of medical oxygen plants in hospitals. We will also improve the availability of essential drugs for the treatment of pneumonia and other respiratory conditions and continue to implement our community health strategy, covering deficit areas by recruiting more community-based health workers. The Ministry will provide strong leadership and advocacy for the mobilization of the resources necessary for the acquisition of medical technical equipment, essential drugs, oxygen production plants, and to fill the gap in the operationalization of community health in particular, and in universal health coverage in general, with the support of technical partners.

Progress: The Burkina Faso Ministry of Health and Public Hygiene reports that they are on-track to achieving their commitment citing financial support from international partners as the major driver of progress. The Ministry has already recruited 15,000 community-based health workers - national volunteers - to strengthen primary health care for sick children. The Ministry has developed a draft of their first National Plan to increase the availability of medical oxygen and technical and financial partners have provided funding for three new oxygen plants at three hospitals. The major pediatric hospital - Hospital Center University Pediatric – Charles De Gaulle - has already received an oxygen plant and this is functioning.

Democratic Republic of Congo

To rapidly accelerate the decline in child mortality and progress towards SDG 3.2, the DRC Ministry of Health will aim to reduce the number of zero-dose children by 30% in 11 provinces by 2025 in partnership with Gavi. The Ministry has decided to increase national resources to bring vaccination coverage of pentavalent, measles, and PCV vaccines to record levels. To strengthen access to pulse oximetry diagnosis and oxygen treatment, the Ministry will ensure that all applicable child health policies, guidelines and essential medication lists include pulse oximetry and oxygen and that health facilities and pediatric wards are equipped with pulse and oxygen oximeters and trained staff to diagnose and treat sick children. The Ministry will also improve access to amoxicillin dispersible tablets to treat pneumonia by publishing new national estimates of the annual need. To help fund these efforts, the ministry is requesting pulse oximetry, oxygen support, and child-friendly amoxicillin from the Global Fund under the C19RM and RSSH programs, and will continue working with the World Bank to strengthen the health system.

Progress: Since the forum, DRC received $US60 million from Gavi’s Equity Accelerator Fund to reduce the number of zero-dose children by 35% by 2025. The funding builds on the Mashako Plan 2.0 and the Kinshasa Declaration and will track vaccinations using GPS and SMS, identify zero-dose children, and vaccinate with door-to-door outreach in 11 provinces including Tshopo, Maniema, Kasai-Oriental, Mongala, Kasai, Haut Katanga, Sankuru, South Kivu, Tshuapa, Maindombe, and South Ubangi. These efforts will improve vaccine coverage rates which are too low and fell further during the pandemic, especially DTP (65%), one dose measles (55%), PCV (63%), and rotavirus (59%).

Chad

The Chad Ministry of Health will apply to Gavi in 2023 for introduction of the PCV and rotavirus vaccines in 2024. To increase access to pulse oximetry and oxygen, the Ministry will ensure all relevant child health policies, guidelines, and essential medicines lists include pulse oximetry and oxygen and that health facilities and pediatric wards are equipped with pulse oximeters and oxygen and trained staff to diagnose and treat sick children. To finance these efforts, the Ministry calls for time-limited relief from the Gavi co-financing requirement as a fragile country, and will apply for pulse oximetry, oxygen support, and child-friendly amoxicillin from The Global Fund as part of the C19RM and RSSH programs. These investments will increase the impact of the National Pneumonia Control Strategy and the Ministry invites other partners to support its full implementation.

Progress: The Chad Ministry of Health reports that they are on-track to achieve its commitment citing political and financial support from government and financial support from international partners as main drivers of progress. The Ministry has submitted its application to Gavi for dual introduction of the PCV and rotavirus vaccines in 2024 which have the potential to prevent the deaths of more than 26,000 children by 2030. The country is on track to increase the number of medical oxygen production plants initially from two to 13, with a total production capacity of 385.6 m3/hour, by 2024. Further, more than 100 technicians from 23 provinces have been trained to repair broken oxygen concentrators.

Spotlight

The Chad Ministry of Health has applied to Gavi for the dual introduction of the PCV and rotavirus vaccine in 2024, a major child survival milestone that is estimated to prevent the deaths of more than 26,000 children in Chad by 2030.
Ethiopia

Ethiopia intends to achieve SDG 3.2 by 2030 with an ambitious plan to reduce child pneumonia and other deaths by restoring PCV, pentavalent, rotavirus, and measles coverage to pre-pandemic levels of above 90%, by increasing the supply of vaccines and antibiotics through local manufacturing, and by increasing access to pulse oximetry and oxygen therapies for newborns and children. The Ministry will target additional support to the children at greatest risk of death, including the estimated 1.1 million zero-dose children, and work with partners to reach those living far from health services to address the currently very low rates of care seeking for children with pneumonia symptoms. The Ministry will ensure that COVID-19 pulse oximetry and oxygen supplies are redeployed to benefit sick children. To help finance these efforts, the Ministry will apply for pulse oximetry, oxygen support, and amoxicillin dispersible tablets from The Global Fund as part of the C19RM and RSSH programs.

Progress: The Ethiopian Ministry of Health described their commitment as mostly on-track due to financial support from international partners, but that the continued limited capacity of local manufactures to produce vaccines and antibiotics was a major challenge needing very specific types of support from the government and regional and international partners. This lack of local manufacturing capacity has also hampered efforts to increase access to pulse oximetry and oxygen therapies for newborns and children. The Ministry continues to call for more support to enable local manufacturing of these vital pneumonia-fighting vaccines, diagnostic tests and medicines (including oxygen), so they are not dependent on importing these technologies or relying on donated products. Despite these challenges the Ministry released a second National Oxygen Roadmap and a to continue the momentum.

Guinea

The Guinea Ministry of Health reaffirms its commitment to achieve SDG 3.2 and will rapidly accelerate declines in child mortality by finalizing its National Immunization Strategy and by integrating PCV and rotavirus vaccines into the routine schedule by 2024. The Ministry will work with PATH and other partners to complete the Gavi application. The Ministry also commits to reducing by 50% the estimated 192,000 zero-dose children in Guinea. To strengthen the capacity of health care workers to diagnose pneumonia, especially in remote areas, the Ministry will increase training and supplies of the WHO-recommended antibiotics to treat children. Special efforts will also be made to ensure that mothers understand the risks of pneumonia and can seek quality healthcare quickly for a sick child. To finance these efforts, the Ministry calls for time-limited relief from the Gavi co-financing requirement as a fragile country (OECD, 2022), and will apply for pulse oximetry, oxygen support, and child-friendly amoxicillin from The Global Fund as part of the C19RM and RSSH programs.

Progress: The Guinea Ministry of Health reports that they are on-track to achieve their commitment citing political and financial support from the government and international partners, and prioritization by the Ministry of Health. The National Directorate of Public and Private Hospitals is working on the development of oxygen therapy on the creation of neonatal units in regional hospitals and on the organization of emergencies including the development of the pre-hospital all support within the framework is desired for be able to deal with referrals from communities and health centers (primary level).
GOVERNMENTS C’T'D

India

India is on track to achieve SDG 3.2 and will continue to prevent child deaths by improving child health services and by increasing coverage of the PCV to 90% in every district by 2030 and by restoring DTP, measles and rubella vaccine coverage to pre-pandemic levels of above 90%. India will continue to strengthen newborn and paediatric care services at district and sub-district levels to treat children with pneumonia and other health conditions. The flagship Social Awareness and Actions to Neutralize Pneumonia Successfully (SAANS) campaign from November to February each year will continue to deepen its engagement with caregivers and healthcare professionals to increase community understanding of the links between child malnutrition, exposure to air pollution, and pneumonia death. All relevant child health policies, programs and guidelines (including immunization) will be implemented universally to reach each and every child to achieve the SDG agenda of survive, thrive, and transform of each child. The Ministry has already established a National Task Force to review various maternal and child health programs, which includes representatives from various divisions, development partners, domain and technical experts, academicians and representatives from professional bodies.

Progress: The Ministry of Health and Family Welfare reports that their commitment has been achieved due to political and financial support from the government, additional, dedicated staff, but they note the specific challenges of across a vast country with massive geographic and socio-economic differentials. Since the 2nd Global Pneumonia Forum, India has continued to make progress on restoring coverage of three doses of DTP 93%) and two doses of measles vaccine (90%) coverage. PCV coverage is on track to hit 90% by the end of 2023 (currently 86%). The Ministry also report that their flagship National Health Mission pneumonia awareness campaign - SAANS (Social Awareness and Actions to Neutralize Pneumonia Successfully) will begin in November with the aim of generating awareness to protect, prevent, and treat pneumonia and enhance early identification and care seeking behaviors among parents and caregivers.

Achieved

Indonesia

The pandemic didn’t stop us from ensuring the right of every child in Indonesia to survive and thrive. We even grew stronger by achieving SDG 3.2. Despite the challenges, the Indonesian Government has accelerated its nationwide introduction of PCV vaccines from 2024 to 2022. The Indonesian Government will continue to work together to reduce child deaths by driving PCV, DTP, and measles coverage rates to above 90% in every region. This commitment was stated in the Strategic Plan of the Ministry of Health 2020 – 2024 and will be released in the National Action Plan for Pneumonia and Diarrhea (NAPPD) in 2023 to Reduce Child Deaths from Pneumonia and Diarrhea. In addition to immunization, the Government of Indonesia has conducted several interventions to control the etiology and risk factors for childhood pneumonia.

On-track

Indonesia ‘c’t’d

These interventions include the promotion of exclusive breastfeeding, the reduction of low birth weight, the improvement of child nutritional status, controlling indoor pollution and improving housing, health-seeking behaviour, and health access to achieve Universal Health Coverage. We will also improve the quality and coverage of pneumonia case management in all health facilities and ensure the availability of pulse oximetry and an adequate supplies of medical oxygen in every primary healthcare center and financial sustainability for pneumonia prevention and control. Since 2022, the Indonesian government is committed to implementing Health System Reforms and is making special efforts to reach the large populations of zero-dose children. Furthermore, the Indonesian Government is committed to increasing domestic production of affordable childhood vaccines. Every child deserves a healthy, productive and happy life.

Progress: The Ministry of Health in Indonesia reports that their commitment is on track as a result of political and financial support from the central government and the additional, dedicated staff they have been able to hire to strengthen health services for children. Since the Global Forum, Indonesia has increased nationwide PCV coverage, reaching 49% of children as of 19 November, 2023. They are on track to achieve the 90% target before the SDG deadline of 2030. Additionally, in August 2023, the government began rollout of the rotavirus vaccine, which targets the leading cause of diarrhea deaths in children. Together pneumonia and diarrhea account for almost one in five child deaths in Indonesia and wide coverage of these two vaccines will save many lives. Indonesia is also committed to reducing the number of zero-dose children who have not even received one dose of the DTP vaccine, effort by implementing various initiatives, including “catch-up” immunization, where children who were previously missed with vaccines are “caught-up.”
GOVERNMENTS C’TD

Mali

To rapidly accelerate declines in child mortality and progress to SDG 3.2, the Mali Ministry of Health renews its commitment to the SDG 3.2 target and to further expansion of the rapid access to healthcare model pioneered in partnership with NGO Muso. This model has the power to halve the child mortality rate by supporting community health workers to find, treat, and refer sick children quickly, no matter the cause of their illness. The Ministry calls on Gavi and other vaccine partners to integrate the delivery of nutrition services with vaccination, including as part of the ZIP program. The Ministry will continue to expand access to pulse oximetry and ensure health policies, guidelines, and essential medicines lists include pulse oximetry and oxygen and that health facilities and pediatric wards are equipped with pulse oximeters and oxygen and trained staff to diagnose and treat sick children. To help finance these efforts, the Ministry will apply for pulse oximetry, oxygen support, and child-friendly amoxicillin from The Global Fund as part of the C19RM and RSSH programs, and work with the Global Financing Facility and the Community Health Roadmap Catalytic Fund to expand the rapid access to healthcare model.

**Results**

The Ministry will continue to expand access to pulse oximetry and ensure the use of pulse oximeters and oxygen and trained staff to diagnose and treat sick children. The trial will measure efficacy of care, cost-effectiveness of care, and equity of door-to-door proactive case detection.

**On-track**

Mozambique

The Ministry of Health will continue to increase the coverage of PCV, DTP, and measles vaccines to over 90% by 2030 to accelerate progress towards SDG 3.2. It will continue to implement actions to raise community awareness about the risk of pneumonia in children, together with other causes of child morbidity and mortality, especially malaria and HIV/AIDS.

**On-track**
GOVERNMENTS C’TD

Nigeria

As the seventh most populous nation globally with > 40 million under-five children, Nigeria is committed to reduce the under-five mortality rate, by rapidly increasing coverage of pneumococcal (PCV), measles, and diphtheria, tetanus and pertussis (DTP) vaccines to above 90% and will lead efforts to reduce number of “zero-dose” children by 30% with vaccinations, nutrition, and other interventions within ongoing initiatives. The Ministry will also increase the pneumonia care seeking rate to above the current rate of 40% by increasing community awareness. To improve survival rates for sick children, the Ministry will build capacity of frontline health workers on IMCI, strengthen access to diagnostic tools including pulse oximeters, and ensure steady supply of amoxicillin dispersible tablets to treat non-severe pneumonia at community and first level facilities. To ensure that health facilities are equipped with medical oxygen, the Ministry will revise and strengthen the National Oxygen Strategy, ensure a robust Child Survival Action Agenda forms part of Nigeria’s Third Health Sector Strategy Plan (2023-27) and support execution of the National Pneumonia Control Strategy and Implementation Plan. To finance this agenda, the Ministry will apply for pulse oximetry, oxygen support, capacity building and child-friendly amoxicillin from The Global Fund as part of the C19RM and RSSH programs, and work with the Global Financing Facility and other funders to ensure national child health priorities are adequately supported.

Progress: The Nigerian Federal Ministry of Health reports that it is on track to achieving its commitment, but that there are specific challenges with increasing coverage of the DTP, PCV, and measles vaccines following supply shortages earlier in the year. The Ministry reports DTP (3 doses) coverage at 80% and PCV (3 doses) at 75% in September 2023; higher than the 2022 WHO/UNICEF estimates but still short of the 90% target. Increasing pneumonia care seeking beyond the current 40% is also challenging. On a more positive note, the Ministry released its second National Strategy on Medical Oxygen 2022-2027 which is aligned with the National Pneumonia Control Strategy and the National IMCI Strategy. The strategy recognizes pneumonia as a leading cause of death in children under five where it is responsible for an estimated 14% of all deaths. Since the 2nd Global Pneumonia Forum, the strategy has been disseminated to all six geopolitical zones and health workers have been trained on hypoxemia management in secondary health facilities across several states. Importantly, the Ministry has included pulse oximetry as a diagnostic step in the IMCI strategy and $US1 million in unspent Global Fund monies will be used to purchase pulse oximeters and other pneumonia commodities for primary health care centers. Further, the Ministry will apply to the Global Fund in the next cycle to procure non-malaria commodities to treat children with pneumonia. The Ministry is also pleased to announce that it has initiated the process of developing its first National Child Survival Action Plan (NCSAP) for release in the first quarter of 2024; a major step forward for children and SDG achievement as Nigeria is home to 5% of the world’s children under five and 15% of all under-five deaths.

Peru

Despite having achieved SDG 3.2, the Peruvian Ministry of Health will continue to reduce child deaths by driving PCV, DTP, and measles coverage rates to above 85% in every region. The Ministry will also focus on the social determinants of poor child health, especially malnutrition and air pollution in specific sub-populations of children in the colder and more rural Andean region. The Ministry will strengthen nutrition services to these populations by increasing growth monitoring and treating wasting and anemia. The Ministry will improve the diagnosis and treatment of pneumonia in these and other populations by improving access to pulseoximetry and medical oxygen, and by ensuring that COVID-19 supplies are redeployed to newborn and child health services.

Progress: The Peru Ministry of Health reports that it is on-track to achieving its commitment, citing political support from the government, and financial support from the government and international partners as the major reasons for progress. Since the 2nd Global Pneumonia Forum, the Ministry of Health established the “Multisectoral Working Group to Address Maternal and Child Anemia,” to promote exclusive breastfeeding and timely cutting of the umbilical cord, and to provide at-risk children and pregnant women with preventive supplementation of iron and treatment of anemia. There is a new national training program for healthcare workers in the prevention and treatment of malnutrition in pregnancy and childhood and a communication strategy with multi-sectoral scope.

On-track

The Nigerian Federal Ministry of Health launched its second National Strategy on Medical Oxygen 2023-2027 to close remaining gaps in access to pulse oximetry and medical oxygen, saving lives now and preparing for the next pandemic.
GOVERNMENTS C’TD

Sierra Leone

The Sierra Leone Ministry of Health and Sanitation has released a renewed Child Survival Action Plan with 21 specific actions focused on protecting the children at greatest risk of death from pneumonia, malaria, diarrhea, and malnutrition. The Ministry will rally all of the relevant government stakeholders, national, regional, and international partners to integrate the financing and quality delivery of the highest-impact child survival interventions, including vaccination, nutrition services, and the integrated case management of sick children in the community and facilities. To strengthen the governance of child survival, the Ministry will create a new, overarching child health program and restructure the Child Survival Technical Working Group that includes several government ministries. Further, the Ministry of Health and Sanitation will ensure that all relevant child health policies, guidelines, and essential medicines lists include pulse oximetry and oxygen and that health facilities and pediatric wards are equipped with pulse oximeters and oxygen and trained staff to diagnose and treat sick children. To help finance these efforts, the Ministry will apply for pulse oximetry, oxygen support, and mobile-friendly amoxicillin from The Global Fund as part of the C19RM and RSSH programs, and work with the Global Financing Facility and other funders to invest in the renewed Child Survival Action Plan.

Progress: The Sierra Leone Ministry of Health reports that they are on track to achieve their commitment. Their Child Survival Action Plan is publicly available and the Health Minister, Austin Demby, has called on African health authorities to lead a new effort to reduce child deaths at the WHO Regional Committee for Africa meeting in September 2023. The Ministry has identified this strong political support and the additional, dedicated staff provided as the major reasons for their progress since the 2nd Global Pneumonia Forum. However, lack of financial support from government and international partners, especially for operationalizing the National Child Health Programme and the Child Survival Action Plan remain major challenges. Continued political prioritization of child survival by the Head of State, Health Minister, and Director-General of the Health Ministry will be vital to securing the financing needed. Partnerships with local civil society organizations are urgently needed to hold governments accountable to their child health commitments.

Somalia

Community screening for pneumonia will also be strengthened and severe cases will be promptly referred for appropriate treatment. Essential supplies like amoxicillin and pulse oximeters will be made readily available through the support of different partners such as the Global Fund C19RM program. With the support of UNICEF, WHO, and Save the Children, the government will apply to Gavi to introduce PCV, rotavirus, and measles-rubella vaccines into routine childhood vaccination in 2023. To realize this objective, the government requests a waiver for the co-financing of these vaccines that are critical to the reduction of the pneumonia burden in Somalia.

Progress: The Somali Ministry of Health reports that they are on track to achieve their commitment due to financial support from the government and international partners, and supportive advocacy from local organizations. The government has submitted a Gavi application for the 2024 introduction of PCV and rotavirus vaccines and has requested a waiver of the co-financing requirement in line with Gavi’s new exception for fragile and conflict-affected countries. Since the 2nd Global Forum, Somalia has completed a Community Health Strategy and Female Health Workers (FHW) are now allowed to report that more pulse oximeters and other commodities will be procured and referral systems for sick children strengthened, thanks to a generous donation from the King Salman Foundation. Further, Somalia has piloted “Family MUAC,” where caregivers can assess their child’s nutritional status using a simplified Mid-Upper Arm Circumference (MUAC) tape. The rollout of the Essential Package of Health Services (EPHS) is currently underway in several regions, in partnership with several programs - Improving Healthcare Services/Damal Caafimaad (World Bank), Better Lives for Somali Women and Children (UK Government), and Healthier Somali Women and Girls (UNFPA, UNICEF, USAID). These projects are enhancing the health and well-being of the population by providing essential packages of health services, including in the newly liberated area in Hirshabele State.
On-track

SPOTLIGHT

The Somalian Ministry of Health has applied to Gavi to introduce the PCV and rotavirus vaccines in 2024, which have the power to prevent more than 60,000 child deaths from pneumonia, meningitis, and diarrhea by 2030.

GOVERNMENTS C’T'D

South Sudan

The South Sudan Ministry of Health will apply to Gavi in 2023 for introduction of the PCV and rotavirus vaccines in 2024. The Ministry will work with many partners to operationalize the delivery of these vaccines (e.g., the BOMA Health Initiative, ZIP program), and expand successful approaches (e.g., the 2013 PCV catch-up campaign in Yida Camp Unity State with MSF). Nutrition services will be integrated with vaccine delivery, as outlined in the government’s Nutrition for Growth Commitment (Tokyo, 2021), which includes a 10% increase in the national nutrition budget. The Ministry will continue to strengthen pneumonia treatment by increasing access to pulse oximetry, oxygen, and antibiotics. To finance these efforts, the Ministry calls for time-limited relief from the Gavi co-financing requirement as a fragile country, and will apply for pulse oximetry, oxygen support, and child-friendly amoxicillin from The Global Fund as part of the C19RM and RSSH programs.

Progress: The South Sudan Health Ministry reports that they are honoring the commitment they made at the 2nd Global Forum. Right after the forum, a national measles vaccination campaign for 2.7 million children aged 6-59 months was launched following an outbreak of measles with over 4,000 suspected cases across the country. The Ministry’s application to Gavi for introduction of PCV and rotavirus vaccines in 2024 is progressing and the Ministry has requested Gavi support for a consultant to assist with the application and request the co-financing waiver given the economic downturn and fragility in the country after four consecutive years of extreme flooding, food and livelihood insecurity, and the influx of more than 100,000 refugees and returnees into the country. During the last three years, the country has received $US2.5 million worth of medical oxygen supplies from UNDP, UNHCR, UNICEF, and WHO, including three PSA oxygen plants, more than 700 pulse oximeters, and more than 700 oxygen concentrators. The Ministry is exploring how The Global Fund can help to close remaining respiratory care gaps for children and also provide more child-friendly antibiotics as pneumonia is the leading cause of child death in South Sudan.

UN AND GLOBAL HEALTH AGENCIES

Gavi, the Vaccine Alliance (Gavi)

Gavi reaffirms its commitment to supporting countries to introduce, finance, and equitably scale up coverage of pneumonia fighting vaccines, including the Pneumococcal Conjugate Vaccine (PCV), and to work with manufacturers to support equitable and sustainable PCV supply. Between 2009 and 2021, Gavi’s supported PCV programmes reached approximately 316 million children and helped avert 940,000 deaths. Gavi’s support for PCV is one of the organization’s largest by cost and impact.

More specifically, Gavi commits to:

- Working with Alliance partners, countries, and private sector to foster sustainable, healthy markets and raise awareness on new vaccine options, so countries can make informed decisions to continue benefiting from innovations in pneumonia fighting vaccines at affordable prices offered through Gavi support.

- Working with key partners, including civil society, to build political will and strengthen countries’ prioritization of pneumonia-fighting vaccines appropriate to their contexts, to ensure the sustainable and equitable introduction and scale up of PCV as part of national routine immunisation programmes.

- In exceptional circumstances, considering annual co-financing waivers for PCV introduction, upon a country’s formal request at the time of application. In line with the recently approved Board decision and criteria on co-financing flexibilities, temporary waivers will be considered only for fragile and conflict-affected countries that have been experiencing large-scale humanitarian crises for at least 4 consecutive years, and to the extent that the crises profoundly hampers the government’s ability to meet the co-financing requirements. The annual waivers will be subject to an assessment, undertaken with relevant partners, of the exceptionality and severity of circumstances, its impact on the country’s ability to co-finance, and its capacity to efficiently launch and sustainably roll out the new vaccine programme.

SPOTLIGHT

The Somalian Ministry of Health has applied to Gavi to introduce the PCV and rotavirus vaccines in 2024, which have the power to prevent more than 60,000 child deaths from pneumonia, meningitis, and diarrhea by 2030.
**Progress:** Gavi reports that they are on-track to achieve their commitment, citing political and financial support from governments and supportive advocacy from local organizations. Since the forum, Gavi has facilitated an exchange of information on pneumonia-fighting vaccines between national government vaccine programs, vaccine manufacturers, and Gavi partners to ensure alignment across country vaccine plans, vaccine supply availability, and partner-readiness to support introduction and sustained high coverage. Gavi also contributed to the September 2023 workshop co-hosted the Mérieux Foundation, the International Vaccine Access Center (IVAC), Save the Children, and the Every Breath Counts Coalition to support the governments of Chad, Guinea, Somalia, and South Sudan to deliver on their commitment to introduce the PCV and rotavirus vaccines before 2025. The workshop brought together CSOs and technical partners to bring countries, partners, and experts together to review progress and work through application considerations to ensure appropriate prioritization of pneumonia-fighting vaccines, in addition to Rotavirus vaccines, in their country plans. Since the workshop, Gavi has received applications from the governments of Somalia and Chad to introduce PCV and rotavirus vaccines - commitments they made at the global forum.

**On-track**

**The Global Financing Facility (the GFF)**

The Global Financing Facility for Women, Children and Adolescents (the GFF) recognizes the importance of pneumonia as the leading cause of preventable childhood deaths globally. The mandate of the GFF is to ensure that women, children and adolescents in the most disadvantaged communities both survive and thrive. In this context we fully endorse the Child Survival Action initiative (CSA) and share the vision of ending preventable childhood mortality through country leadership, prioritization of primary health care, and alignment of domestic and international resources to deliver on the vision. The GFF Partnership will work with governments, local partners, civil society, the private sector, regional and global organizations to catalyze more and better financing, and support countries to prioritize and implement health system and financial reforms.

**Progress:** The GFF reports that they are on-track to achieve their commitment due to political and financial support from governments and international partners, and supportive advocacy from local organizations in the 36 countries where they currently provide support. Since the forum, the GFF has made strong progress in mobilizing new resources from government and philanthropic partners who committed $US445 million at the first pledging opportunity in the Deliver the Future campaign, co-hosted by Germany, the Netherlands, Côte d'Ivoire, and the World Bank at the World Health Summit. The Children’s Investment Fund Foundation (CIFF) and the United States joined the GFF as new investors, while existing donors the Netherlands, UK, the Bill & Melinda Gates Foundation, and Germany committed new funding. This funding adds to Japan’s new contribution for 2023 and builds on Canada’s existing commitments through 2025. Further investment towards the campaign target is expected in the months ahead. These new investments are a major contribution towards the GFF’s campaign to secure access to essential health services for 250 million women, children, and adolescents in the hardest to reach communities.

**UNICEF**

UNICEF fully endorses the Child Survival Action initiative and will provide global, regional and country leadership, and catalytic support to governments who endorse this agenda nationally, with a strong focus on West and Central Africa. We will intensify support to governments to strengthen primary health care by ensuring comprehensive integrated preventive, promotive and curative health and nutrition services, especially at the community level. We are committed to co-investing with governments and partners to build a resilient health workforce. On vaccination, our commitment strengthens our approach to equity so that every child receives all essential vaccines. UNICEF is intensifying efforts to support countries with the highest number of zero-dose children to catch-up on unvaccinated children, restore services, and boost essential immunization coverage rates of all vaccines, including pneumonia-fighting vaccines. We will build political will and provide technical support in the remaining countries preparing to introduce PCV, rotavirus and other new life-saving vaccines. All our efforts will include a comprehensive, multi-sectoral approach, with a focus on strengthening primary health care.

UNICEF’s Immunization Roadmap to 2030, the State of the World’s Children Report, and immunization recovery efforts go hand in hand with everything this forum seeks to achieve. On sustaining and scaling oxygen access, in 2023 and 2024 UNICEF will provide continued end-to-end support to governments in low- and middle-income countries to sustain and further scale oxygen systems and improve access to pulse oximetry and oxygen therapy for children.
Results

UNICEF c’d

Progress: UNICEF reports they are on track to achieve their commitment and cites financial support from international donors, additional, dedicated staff, and political advocacy and capacity building in countries as the major drivers of progress. Sustaining this progress will depend on specific staff allocations, additional resources to increase in-country support, and political stability (e.g., cessation of cross-border and/or within-state conflict). UNICEF also reports that they are co-leading efforts to support countries to accelerate Child Survival Action, in close coordination and collaboration with other partners supported by the Child Health Task Force, and are engaging across their headquarters, regional and country offices. For example, UNICEF country offices in Liberia, Nigeria, and Mali support governments in strategic priority and target setting, and in Sierra Leone to operationalize the government’s first Child Survival Action Plan.

Further, in the past six months, UNICEF has:

- launched the Community Health Delivery Partnership to further align commitment and investments in community health to professionalized community health workers as the equity arm to achieve UHC.
- implemented vaccine catch-up and recovery plans in the 20 countries with highest numbers of zero-dose children, completed vaccine coverage, equity, and gender assessments in 15 countries, and ensured the National Immunization Strategy (NIS) includes pneumonia-fighting vaccines such as PCV
- provided ongoing support to over 50 countries to increase medical oxygen access (including 140 oxygen plants), the integration of oxygen therapy in maternal, newborn and child health services, and innovation efforts to address challenges such as product redesign, energy solutions, and equipment maintenance.

Unitaid

Unitaid will maintain the momentum on improving access to medical oxygen by co-chairing the new Global Oxygen Alliance (GO₂AL), which will continue to coordinate the efforts of global health agencies, regional health bodies, and national governments to ensure sustainable and equitable access to high quality medical oxygen in low- and middle-income countries, especially for newborns and children. GO₂AL will focus on investment consolidation and sustainability - translating current investments into lives saved, robust country roadmaps and planning, impactful procurement, supply and market shaping, advocacy, and demand generation. The Alliance will work with many partners to increase access to medical oxygen to strengthen health systems now and to prepare for a future pandemic where large quantities of medical oxygen are again urgently needed. GO₂AL will be the largest global platform where governments, donors, industry, civil society, and the academic community can join forces to increase access to medical oxygen. The Alliance will work closely with related initiatives, including The Lancet Global Health Commission on Medical Oxygen Security, the World Bank Pandemic Fund, and more.

Achieved

SPOTLIGHT

The Global Oxygen Alliance (GO₂AL) was officially launched by chairs Unitaid, The Global Fund, the Africa CDC, and PAHO at the World Health Assembly in May 2023 with it’s Strategy: executive summary announced during the UN General Assembly in September.
**World Health Organization (WHO)**

WHO commits to generate evidence, drive forward innovation, and enhance programme operationalization through the development of guidelines and policy, and provision of strategy optimization, training, data monitoring and insights to strengthen the prevention and management of pneumonia. WHO will support Member States to translate this state-of-the-art evidence into national policies, norms and tools and build capacities for implementation, as part of health system strengthening and primary health care.

**Progress:** The WHO reports that they are on-track to achieve their commitment, citing financial support from international partners, additional, dedicated staff, and supportive advocacy from local organizations as the driving forces for progress. With respect to childhood pneumonia, the WHO is currently developing new Guidelines for the Management of Pneumonia and Diarrhoea in children 2 months to 9 years of age. A Guideline Development Group (GDG) will make recommendations by the end of 2023, including on the use of pulse oximetry, and these will be reflected in updates to the WHO Integrated Community Case Management (iCCM), Integrated Management of Childhood Illness (IMCI), and the Pocket Book of Hospital Care for Children. Further, since the 2nd Global Pneumonia Forum, WHO Member States adopted a milestone Increasing Access to Medical Oxygen Resolution which will accelerate access to pulse oximetry, oxygen and related therapies to save lives now and prepare for the next respiratory pandemic. WHO is planning a meeting of all Member States in 2024 to facilitate implementation of the oxygen resolution. The WHO is also working with Member States to ensure that the Child Survival Action agenda, which was launched at the forum, is included in the Accelerating Progress Towards the Maternal, Newborn, and Child Health SDG Targets Resolution at the World Health Assembly in 2024.

**DONOR GOVERNMENTS**

**Government of Spain**

Spain reiterates its firm commitment to continue working to advance the reduction of preventable child mortality, to strengthen partnerships, and renew commitments to promote new measures that will promote the next wave of progress in child survival. All of our global health efforts are focused on strengthening health systems, with a One Health approach aimed at providing a robust model for prevention, preparedness and response to health threats. Our country joins global efforts to strengthen global and local capacities to recover the levels of childhood immunization that have saved millions of lives in recent decades. We will continue to work hand in hand with the 7 Ministries and health systems of the Spanish Cooperation partner countries, while at the same time we will strengthen strategic support to multilateral initiatives such as Gavi that combine the efforts of the international community in immunization with the active involvement of UNICEF and the Bill & Melinda Gates Foundation, the development of the EU Latin America and Caribbean Health initiative for the transfer of knowledge and the strengthening of health systems as a whole through Spanish Cooperation, with support for initiatives that combat misinformation about vaccines and contribute to raising public awareness, with special interest in increasing Universal Health Coverage in child vaccination.

**USAID**

USAID envisions “A world where all women, newborns and children survive, are healthy, and are able to develop and reach their full potential, contributing to the development of their communities and countries.” A renewed effort for child survival action is needed to accelerate progress to reach the 2030 Sustainable Development Goal targets for reductions in child mortality. Addressing gaps in pneumonia prevention and care is central to this effort. USAID is proud to have recently launched Preventing Child and Maternal Deaths: A Framework for Action in a Changing World. Continuing our long-standing commitment to promoting maternal and child survival, health, and well-being, USAID supports country-led programs to measurably improve health outcomes for women and children through an intensified focus on coverage, quality, and equity. To reinvigorate momentum and accelerate progress on child survival, USAID’s work will:

**Results**

**Mr Antón Leis García, Spanish Government, Madrid, 2023**

**Government of Spain c’td**

**Progress:** The Spanish Government reports that they are on track to achieve their commitment. In the last six months since the 2nd Global Forum, the Government has hosted Gavi’s Mid-Term Review High-Level Conference and announced 170 million euros to facilitate immunization on a global scale, including 95 million euros to Gavi, the Vaccine Alliance to vaccinate children and adolescents in eligible low- and middle-income countries, and 75 million euros to the Coalition for Pandemic Preparedness Innovations (CEPI) to accelerate the development of vaccines that target the likely causes of future pandemics to facilitate equitable access to these vaccines by all citizens. Spain is the 12th-largest global health donor in the world and spent a total of US$596 million in health aid in 2021. The Spanish Government is on track to release a new Global Health Strategy in 2024, focusing on individuals’ right to health and ensuring medical access for vulnerable populations. The new strategy will include an action plan for international development cooperation and an appeal for global UHC in collaboration with the WHO. Global health is expected to remain a top priority sector for Spain’s development leadership.
Results

USAID c’td

1. Anchor our response in primary health care systems to optimize health outcomes
2. Reach the hardest-to-reach mothers and children
3. Catalyze country commitment and mutual accountability
4. Invest in the health workforce as the foundation of health systems
5. Identify bottlenecks and tailor solutions through locally-led development
6. Generate and use data, evidence, and learning for decision-making.

Progress: USAID reports that their commitment is on-track as the agency continues to support multiple partners’ global and country efforts to accelerate the Child Survival Action agenda, emphasizing country-led prioritization, strengthening country commitment and mutual accountability, as well as promoting locally-led development. With continued support from USAID and others, Gavi is vaccinating millions of children each year, including with the pneumococcal and rotavirus vaccines. USAID is also supporting countries to reach zero-dose children by providing resources for conducting root-cause analysis of human resource and governance challenges driving zero-dose, and capacitating district managers, community focal points, and others to improve microplanning, quantify resource needs, and strengthen service delivery. USAID Missions support the delivery of millions of treatments for children with pneumonia and diarrhea. USAID’s signature initiative, Primary Impact, and the new Community Health Delivery Partnership, a country-led strategy to support integration of community health workers into national health plans, are continuing to strengthen primary healthcare in ways that will reduce child mortality. Last year, USAID programs supported more than 5 million treatments for children with pneumonia worldwide.

BMGF c’td

Progress: In 2023, the Bill & Melinda Gates Foundation has disbursed $US185 million dollars to date to support the prevention of pneumonia, meningitis, and neonatal sepsis, which includes $US30 million in new investments that have been awarded in the last six months. This $US30 million reflects our progress towards the commitment we made in April to award an additional $US200 million in the coming 18 months. It includes investments in the development of RSV monoclonal antibodies and maternal immunization platforms, which we hope will lead to a diversified set of tools for protecting young infants from pneumonia. The Bill & Melinda Gates Foundation is on track to award the remaining $US170 million over the coming 12 months, as we committed at the 2nd Global Forum on Childhood Pneumonia. We continue our engagement and support to Gavi, the Vaccine Alliance in its ongoing work to expand access to vaccines, and have put technical assistance in place to support countries with their Gavi applications for pneumococcal conjugate vaccine (PCV) and other lifesaving vaccines.

On-track

SPOTLIGHT

In the last six months, the Bill & Melinda Gates Foundation has awarded $US30 million in vaccine investments to fight pneumonia, meningitis, and neonatal sepsis and is on track to award the remaining $US170 million in the next year.

FOUNDATIONS

Bill & Melinda Gates Foundation (BMGF)

The Bill & Melinda Gates Foundation remains steadfast in our commitment to preventing pneumonia through investments in the research and development of new and improved pneumonia-preventing vaccines, helping to ensure vaccines are accessible and affordable, and supporting the delivery of those vaccines in low- and middle-income countries. These include Pneumococcal Conjugate Vaccines (PCV) and Respiratory Syncytial Virus (RSV) vaccines. We’re proud to support Gavi, the Vaccine Alliance in its ongoing work to expand access to vaccines and will support technical assistance for countries to fulfill their commitments to introduce PCV. We are also committed to building and strengthening partnerships with non-governmental organizations, countries and the private sector to end preventable deaths from childhood pneumonia. Finally, we are excited to announce over the next 18 months we will award an additional $US200 million in grant funding to support the development and delivery of vaccines to prevent pneumonia, meningitis, and neonatal sepsis.
On-track Achieved

**SPOTLIGHT**

In September 2023 more than 80 stakeholders assembled at a workshop in N'Djamena Chad to troubleshoot barriers to introducing PCV and rotavirus vaccines in Chad, Guinea, South Sudan, and Somalia, supported by the Méérieux Foundation, IVAC, Save the Children, and Every Breath Counts.

“la Caixa Foundation”

The Foundation will continue to support Gavi to prevent pneumonia with PCV vaccination, especially in Mozambique and Ethiopia, and mobilize support from Private Banking customers, employees of CaixaBank Group, individuals, and Spanish companies as part of the Business Alliance for Child Vaccination. Funds raised will continue to be matched by the Bill & Melinda Gates Foundation through the Gavi Matching Fund Initiative, quadrupling the impact. From 2019 to 2021 “la Caixa” Foundation and the Matching Fund annually sponsored 100% of the disbursements of Pneumo-Mozambique programs and 44% of the Pneumo-Ethiopia programs in 2021. Further, the Foundation will continue to include the fight against pneumonia as a priority in global health programs, supporting vulnerable countries in Africa, Asia, and Latin America. We will also include pneumonia in our annual call for projects as well as in any other calls we may promote in the countries where we implement programs.

**Progress: “la Caixa” Foundation reports that they are on-track to achieve their commitment, citing the strong support of their senior leadership for global health, including the fight against pneumonia and the other major diseases responsible for most of the deaths of children, as the major reason for their progress. The Foundation has recently developed a new Global Health Strategy which prioritizes the fights against childhood pneumonia, as well as other leading killers, and commits the foundation to continued leadership in increasing access to vaccination, better diagnostics, and effective treatments in their countries of focus. The “la Caixa” Foundation remains open to exploring new initiatives and strategies that can accelerate achievement of the Sustainable Development Goal for child survival by 2030.**

**Mérieux Foundation, Save the Children, International Vaccine Access Center (IVAC), and Every Breath Counts**

To enable Somalia, South Sudan, Chad, and Guinea to secure the support they need to submit their PCV applications to Gavi in 2023, the Méérieux Foundation and partners will bring together national, regional, and international stakeholders to troubleshoot remaining barriers and explore solutions to PCV introduction and scale-up in a three-day PCV Workshop in N’Djamena, Chad in September 2023. The workshop will enable the four health ministries to present their plans for PCV introduction, address costs and sources of financing, vaccine infrastructure and healthcare workforce capacity, vaccine-related public health messaging and vaccine safety monitoring, caregiver attitudes and behaviors, and other relevant issues related to successful PCV introduction and sustainable high coverage. This is part of collaborative cross-sectoral effort to respond to the capacity gaps and limitations faced by these countries for the introduction of this life saving vaccine and create opportunities for partners to gain a deeper understanding of systemic challenges in these countries and tailor strategies which are more responsive and sustainable. While focused on PCV, this workshop will have a positive influence on the general strengthening of the immunization systems in these countries.

**Progress: The partners report that this commitment has been achieved with the successful conclusion of the Introducing PCV and Rotavirus Vaccines Workshop in N’Djamena, Chad from 13 to 15 September. The workshop brought together more than 80 vaccine stakeholders from across Chad, Guinea, South Sudan, and Somalia and their regional and international partners to troubleshoot barriers to introducing the PCV and rotavirus vaccine in the four countries before 2025. These four countries are among the last Gavi-eligible countries to introduce these lifesaving vaccines on the African continent. The workshop presented new estimates of the number of childhood cases of pneumonia, meningitis, and diarrhea averted (2.6 million), child lives saved (60,000), and treatment costs averted ($US670 million) with PCV and rotavirus vaccines over a five year period. The subsequent submission of PCV and rotavirus vaccine introduction applications to Gavi from the governments of Somalia and Chad is testimony to the value of the workshop. Guinea and South Sudan are on track to apply in the first quarter of 2024. The agenda, photographs, and video from the workshop can be found here. The partners highlighted the power of collective action and deep enaggement and support to Ministries of Health and their national partnership (e.g., NITAGs) as a key ingredient for success.**

HRH Infanta Cristina of Spain, “la Caixa” Foundation, Madrid, 2023

Mérieux Foundation et al c’t’d
Results

NON-GOVERNMENT ORGANIZATIONS

Clinton Health Access Initiative (CHAI)

CHAI through support from our generous donors will continue to work to bring the price of oxygen down and also increase access to oxygen services for severe pediatric pneumonia patients by prioritizing pediatric and maternal and child health wards in health facilities for medical piping, oxygen supply, oxygen delivery equipment, and training. We aim to sustainably support Ministries of Health to increase access to medical oxygen in ~1,600 facilities across the 25 countries where we work including Democratic Republic of Congo, Ethiopia, India, Indonesia, Mozambique, Nigeria, and Sierra Leone.

Progress: CHAI reports that their commitment is on-track and cites political support from the governments in the 25 countries where they have access to medical oxygen programs, financial support from governments and international partners, and the additional, dedicated staff they have been able to engage due to this support.

To date, 78 health facilities across nine countries have upgraded medical oxygen infrastructure and equipment (e.g., power supply, piping network, cylinder manifold, filling ramps, functional PSAs, and bulk liquid oxygen tanks), with 1,442 facilities across 14 countries in progress. This support will enable these health facilities to treat an additional 250,000 patients each month. Further, 14 countries have updated clinical guidelines, performance management systems, and/or overall guidelines and protocols to improve oxygen supply and delivery, with eight more underway. And 18 countries have run biomedical engineer/technician trainings for the maintenance and repair of oxygen equipment, with five more in progress. In Ethiopia alone, CHAI has supported master training of 43 clinicians from all regions, who in turn trained 330 more clinicians. CHAI continues to support countries who are working on their second National Oxygen Roadmaps - Ethiopia, Nigeria, and Uganda - taking into account the lessons learned from COVID-19.

PATH

In the next three years, PATH will support increased access to medical oxygen in Burkina Faso, the Democratic Republic of the Congo (DRC), India, and Indonesia, as part of the $US22.5 million investment from the Bill & Melinda Gates Foundation and The ELMA Foundation to build strong and sustainable systems for oxygen and respiratory care access across ten countries. Further, over the next 15 months and with funding from Unitaid, PATH’s Tools for Integrated Management of Childhood Illness (TIMCI) project will partner with the Open Oximetry project at the University of California San Francisco Hypoxia Lab and Center for Health Equity in Surgery and Anesthesia to improve the safety and precision of pulse oximeters in all populations, as these devices have been found to be less accurate in people with darker skin tone.

Progress: PATH reports that their commitment is on track due to political support from the governments of Burkina Faso, DRC, India, and Indonesia, the additional, dedicated staff courtesy of donor support, and the supportive advocacy environment at the global level (i.e. WHO Oxygen Resolution, Global Oxygen Alliance). Since the 2nd Global Pneumonia Forum, PATH has supported efforts in Burkina Faso to develop their first National Oxygen Roadmap which is on track for release by the end of 2023. PATH also supported the DRC to integrate oxygen therapy into the training curricula of medical students and the first course occurred at the Protestant University of Congo with a class of 140 students in June.

PATH c’t’d

PATH is accelerating its work to to raise awareness of, and galvanize action to address, inaccurate pulse oximeters readings in patients with darker skin tones. PATH is working to ensure that minimal skin tone performance requirements are included in key regulatory and pulse oximetry procurement guidelines used by country governments and international agencies. PATH has reached to UN and other partners to collect a list of pulse oximeter brands purchased by these agencies to ensure they are being independently tested by the Open Oximetry Project at the Hypoxia Lab at the University of California, Sand Francisco (UCSF). UCSF is testing devices that are being procured by leading global health agencies to gather more insights into performance problems, and working closely with regulatory agencies to share data to help improve standards and guidelines that promote devices that work accurately on all patients. PATH continues to support advocacy to ensure that equitable access to medical oxygen and pulse oximetry is a public health priority at national and global levels, including during Digital Health Week, World Pneumonia Day, and by supporting a special oxygen side event hosted by the Global Oxygen Alliance at the 3rd Conference on Public Health in Africa (CPHIA) in Zambia in November 2023.

Save the Children

Save the Children and MAP International will provide 200,000 treatments of 250mg amoxicillin dispersible tablets (20 tabs per child) and oral rehydration solution (4 sachets per child) to treat children in Somalia diagnosed with pneumonia and/or diarrhea. This intentional gift-in-kind will be channeled to Save the Children’s Integrated Community Case Management (ICCM) of Childhood Illnesses Programme, which will provide MAP donated medicines at no cost. This programme works with a network of 326 Community Health Workers (CHWs) and has a strong focus on women and education. CHWs work with communities - particularly mothers and other caregivers of children - to seek care and promote optimum Infant and Young Child Feeding (IYCF) practices, hand washing and other good hygiene practices, and the benefits of immunization. The CHWs are trained to diagnose and treat pneumonia, diarrhea, and malaria and refer children with danger signs for immediate referral to a health facility.
To further improve the diagnosis and treatment of child pneumonia and other common childhood diseases, Save the Children has partnered with THINKMD to provide a digital tool based on WHO’s IMCI guidelines that, via machine learning, improves the accuracy of clinical assessments. Finally, Save the Children fully supports the Child Survival Action initiative and will work at the country, regional and global levels with partners in this renewed effort to intensify commitment and expand strategic priority investments in child survival, particularly in countries and sub-populations where children are most vulnerable and denied a healthy start in life.

**Progress:** Save the Children, MAP International, and THINKMD report that their commitments are on track due to political support from governments, financial support from international partners, and the strong collaboration between country and global teams in Save the Children.

Save the Children and MAP International are on track to increase the availability of lifesaving antibiotics and oral rehydration solution (ORS) to treat children with pneumonia and diarrhea in Somalia. MAP International is providing Amoxicillin 250mg in dispersible tablet form and ORS sachets and prenatal tablets for pregnant women via a network of Community Health Workers trained in the Integrated Community Case Management of Childhood Illnesses (iCCM) as part of the Somalia Government’s Global Malnutrition Initiative and the Bureau for Humanitarian Assistance arm of Save the Children. The initial pilot is planned for a six-month period to ensure proper and sustainable distribution and generate learning to expand this partnership further. MAP International and Save the Children are in the final stages of planning and the medicines are expected to roll out in the next two to three months.

Save the Children and THINKMD are working with the Ministry of Public Health, Population, and Social Affairs in Niger to introduce an “electronic consultation register” in 125 primary health facilities spread across nine districts in the regions of Maradi, Tillabéri, and Zinder. THINKMD’s electronic consultation register is a diagnostic support system developed to facilitate the Integrated Management of Neonatal and Childhood Illnesses (IMNCI), which will be adapted to Niger’s national guidelines to help improve the clinical care of children under five. USAID Kulawa will organize the training of health workers and provide one tablet to each facility. Consultations can be conducted offline and once connected to the internet, consultation data will be fed into the national District Health Information Software 2 (DHIS2) system. Health facilities will be selected based on availability of staff trained in IMNCI and where pulse oximeters are in use. THINKMD experts will provide technical expertise and monitoring in collaboration with Health Ministry officials. Periodic meetings will be organized to reflect on how best to reinforce implementation. Save the Children is also actively exploring the introduction of the THINKMD platform with the Ministries of Health in both Sierra Leone and Zambia in 2024 with funding from a foundation partner.

**COMPANIES**

**Air Liquide**

Air Liquide will continue to share its know-how in the design and operation of suitable oxygen solutions to develop reliable, affordable, and sustainable access to oxygen for populations living in low- and middle-income countries. Our Access Oxygen™ program is an oxygen-servicing solution including equipment (concentrators, cylinders, pulse oximeters, consumables), maintenance, and training currently reaching more than 220 primary health care facilities and serving a population of 1.8 million people across Senegal, South Africa, and Kenya.

Air Liquide is considering further projects in Mali, Philippines, Argentina, Togo, Benin, Gabon, Cameroon, Côte d’Ivoire, Malawi, and Burundi and is looking for local entrepreneurs who wish to benefit from support to provide oxygen as a service and financial partners who wish to support these local entrepreneurs setting up their projects.

**Progress:** Air Liquide reports that they are on-track to achieve their commitment to expand their flagship Access Oxygen™ program, but that there are a lot of challenges. Lack of financial support from international partners and governments, and lack of political prioritization of medical oxygen access at the country level remain major obstacles to progress. Partnerships with local civil society organizations to hold governments accountable to their promises would also accelerate progress. The company also called for better cooperation and collaboration across medical oxygen stakeholders - governments, international partners, civil society organizations, and private companies. Ultimately, Air Liquide said that ensuring that governments have sustainable financing to pay for the medical oxygen their health systems need is the key to success.
Hewatele will increase its medical oxygen production tenfold in Kenya and Eastern Africa through the construction of a 20 tonnes per day liquid oxygen plant and Pressure Swing Absorption (PSA) facilities. This is expected to enable Hewatele to boost production of medical oxygen by at least 20 tons per day and reduce the cost to rural and urban healthcare customers by up to 30%. To finance this expansion, Hewatele has secured a $US10 million loan from the United States International Development Finance Corporation (pending signing of legal agreement), and is seeking additional investment from the Soros Economic Development Fund, Finnish Fund for Industrial Cooperation, UBS Optimus Foundation and Grand Challenges Canada. This project will have a significant developmental impact on Kenya’s healthcare sector. According to Kenya’s Ministry of Health, demand for oxygen has increased significantly since the pandemic, from 410 tons per month to 880 tons per month. As a result, Kenyan hospitals frequently experience unpredictable deliveries, higher prices, and expensive transportation costs for medical oxygen. Due to these factors, medicinal oxygen is typically eight to ten times more expensive in sub-Saharan Africa than it is in Europe and North America.

**Progress: **Hewatele reports that they are on-track to achieve their commitment to expand their operations to produce an additional 20 tonnes per day of medical oxygen to serve health facilities across east Africa. Since the forum, Hewatele has secured a $US4 million investment from the Soros Economic Development Fund (SEDF), the impact investment arm of the Open Society Foundations. Hewatele will use the debt and equity funds to finance the building of a liquid oxygen manufacturing facility outside Nairobi, together with regional distribution capacity, while also doubling its existing capacity at hospital-based sites to produce and distribute medical oxygen using pressurized gas cylinders. Finnfund, a Finnish government development agency, and UBS Optimus Foundation, will also take stakes in Hewatele, which has already secured a $US10 million loan from the US International Development Finance Corporation and a $US1.1 million loan from Grand Challenges Canada. Hewatele cites this financial support from international partners, as well as additional, dedicated staff as the key drivers of this strong progress.

Masimo is committed to providing unprecedented support to large-scale pulse oximetry scale-up* and will provide at no cost: 1) onsite training and 2) upgraded 2-year device protection warranties that cover user-related damage issues. *All Global Health entities committing to 5,000 units and greater for a single site are eligible.

**Progress: **Masimo reports that they are on track to achieving their commitment to expand access to the Rad-G pulse oximeter with new levels of functionality (hemoglobin screening, reusable neonatal wrap), and support (training, QR codes, warranties). The integration of hemoglobin is planned for commercial release in late 2024, subject to regulatory approval and a prototype reusable neonatal wrap is complete and currently being tested. Rad-G training materials have been developed and QR codes have already been integrated into Rad-G design. With respect to support for large scale procurement, existing contracts with procurement agencies have been amended to reflect the upgraded warranty and in person support for procuring more than 5,000 units in a single order.

**SPOTLIGHT**

Hewatele secures a $US4 million investment from the Soros Economic Development Fund (SEDF) to finance the building of a liquid oxygen and PSA plant manufacturing facility outside Nairobi, Kenya.
Masimo is integrating the measurement of hemoglobin into the Rad-G pulse oximeter for commercial release in late 2024, subject to regulatory approval and conducting internal tests on a new reusable neonatal probe.
COMPANIES C’TD

Serum Institute of India c’td

Progress: The Serum Institute of India reports that they are on-track to achieve wider access to its PCV vaccine - PNEUMOSIL® - among the countries that have already introduced a PCV and are exploring switching to a more affordable option, and the countries that will introduce the PCV in the coming years. The company reports that governments are very supportive of a more affordable and comparable quality PCV - especially in low- and middle-income countries where PCVs are among the most expensive childhood vaccines.

ACADEMIC INSTITUTIONS AND SOCIETIES

The Australasian Society for Infectious Diseases (ASID)

ASID pledges to contribute to the prevention and treatment of childhood pneumonia worldwide by advocating for the need for free universal health care for all children; equitable access and uptake of preventative health services including affordable vaccines (including pneumococcal conjugate vaccine, other routine vaccines, and RSV vaccine when it becomes available) and nutrition services, and WASH; and quality health care including access to affordable essential medicines and oxygen; and research into better prevention, treatment and care. We will ensure that educational and mentoring opportunities for the next generation of researchers on childhood pneumonia in the global context are provided for ASID members and trainees.

Progress: ASID reports they are on track to achieve their commitment due to supportive advocacy from their members - a diverse group of infectious diseases physicians, clinical microbiologists, scientists, public health physicians, academics and policy makers, advancing the prevention and treatment of infectious diseases in Australasian and global communities.

Since the forum, ASID has supported WSPID’s Call to Action: Ensuring Fair Prices for All Vaccines for All Countries with Limited Resources, and also released a public statement. Their Annual Scientific Meeting in New Zealand in 2024 will include a session on the UK’s two-dose PCV schedule to ensure ASID members are educated, have mentoring opportunities, and understand the global context of childhood pneumonia.

ISGlobal c’td

We will be part of the scientific vanguard that brings the next generation of vaccines, diagnostics, and treatments for childhood pneumonia to the world, and we are committed to open research, guiding the efforts of new evidence-based policy recommendations. Our commitment is to do this by joining forces with the friends, colleagues, and allies present at this forum, with whom we share one of the noblest aspirations of our time.

Progress: ISGlobal reports that they are on-track to achieve their commitment citing additional, dedicated staff, sustained media interest in the subject, and the successful implementation of new pneumonia research projects in Mozambique as major reasons. They have also attracted new funding for a multi-African country project - the Enhancing children’s lives with biomarkers for risk stratification and Triage (ECHiLBriST) - a 5-year project, funded by Horizon Europe Research and Innovation Program, to develop and validate a rapid test for early recognition and improved management of febrile children at risk of severe diseases, including pneumonia. ISGlobal will continue to sustain its efforts to attract new projects and funds for pneumonia research.

ISGlobal

ISGlobal stands firmly in the trenches of science to end the silent emergency of child pneumonia deaths. In a world that has faced the terrible reality of a pneumonia pandemic, we find the disproportion between the magnitude of this challenge for children and the resources invested in it unacceptable. That is why we are committed to continuing research into the root causes of childhood pneumonia in low- and middle-income countries, and to ensuring that our research identifies more effective prevention and treatment strategies.

ISGlobal’s new Enhancing children’s lives with biomarkers for risk stratification and Triage project will develop and validate a rapid test for early recognition and improved management of febrile children at risk of severe diseases, including pneumonia.
ACADEMIC INSTITUTIONS/SOCIETIES C’TD

International Union Against Tuberculosis and Lung Disease

The International Union is creating the first Childhood Pneumonia Working Group under the leadership of the Adult and Child Lung Health Section to strengthen pneumonia research capacity building and child pneumonia advocacy. More information about the group is available at https://theunion.org/childhood-pneumonia.

Progress: The leaders of the new Childhood Pneumonia Working Group at the International Union Against Tuberculosis and Lung Disease report that they are on track to establish and grow the group thanks to the efforts of committed volunteers from all across the world. The group hosted their first meeting at The Union World Conference on Lung Health in Paris on 15 November 2023 and are planning a robust set of activities including a major discussion on childhood pneumonia at the 2024 Union Conference.

Murdoch Children’s Research Institute (MCRI)

The Centre of Research Excellence for Pneumococcal Disease Control in the Asia-Pacific will address outstanding research gaps for PCV use in the Asia-Pacific region and increase the support it provides to governments in the region to help them translate research findings into immunization policy. The Centre’s research will focus on PCV product selection, reduced-dose PCV schedules, the monitoring of disease control following vaccine introduction and schedule changes, and understanding pneumococcal serotype replacement following vaccine introduction. The Centre will prioritize capacity building of next generation researchers to use this data to inform immunisation decision making and mobilize a network of partners and emerging leaders through training opportunities and collaboration. This network will advocate for equitable access to vaccines (PCV and RSV), including lower vaccine prices.

Progress: The MCRI reports that they are on track to achieve their commitment, citing financial support from the Australian government and supportive advocacy from local organizations as the driving forces. Since the forum, the Centre of Research Excellence has established an Asia-Pacific Vaccine Research Network with Australian government support. This group has already endorsed the WSPID Call to Action for fairer vaccine prices (see WSPID commitment), and presented and discussed evidence for two-dose PCV schedules at a number of infectious disease conferences including, the Latin American Society of Pediatric Infectious Diseases, the UK Meningitis Research Foundation, the ISPPD, and WSPID.

MCRI has attracted additional funding for the network to conduct training and modeling for reduced dose schedules in three low- and middle-income countries, to analyze which economies benefit most from increases in PCV coverage, and have submitted ~30 abstracts to the International Society of Pneumonia & Pneumococcal Diseases (ISPPD-13), 17 to 20 March 2024, in South Africa.

World Society of Pediatric Infectious Diseases (WSPID)

WSPID will strengthen its contribution to the prevention and treatment of childhood pneumonia by advocating for: (a) the need for universal health care for all children, (b) increased access to quality preventative health services including affordable pneumonia-fighting vaccines (e.g., PCV, pertussis, Hib, and measles) and nutrition services, (c) improvements in the quality of child health care including essential medicines such as oxygen, rapid access to diagnosis and treatment with antibiotics as part of strong primary health care systems, and by fighting antimicrobial resistance to maintain equitable access to effective antibiotics.

Progress: WSPID reports that they are on-track to achieve their commitment, citing supportive advocacy from its network of member organizations across the world as the main reason for progress. Notable since the forum is the first-of-its-kind Call to Action: Ensuring Fair Prices for All Vaccines for All Countries with Limited Resources, with a special focus on lifesaving vaccines for children. The new campaign will be launched at the WSPID conference in South Africa in November 2023 alongside a Comment in The Lancet Global Health. Governments and international organizations from across the world are invited to sign the Call to Action here.

The World Society of Pediatric Infectious Diseases (WSPID) launched a Call to Action for fairer vaccine prices so all countries can afford to vaccinate their children. Sign on here!
This Progress Report was prepared for the Organizing Committee of the 2nd Global Forum on Childhood Pneumonia, which includes (in alphabetical order), the Bill & Melinda Gates Foundation, the Child Health Taskforce, the Clinton Health Access Initiative (CHAI), the Every Breath Counts Coalition, Gavi, the Vaccine Alliance, ISGlobal, "la Caixa" Foundation, PATH, Save the Children, UNICEF, Unitaid, and USAID.

We thank the members of these organizations for their commitment to child survival and for their unprecedented levels of collaboration in the long struggle to reduce child deaths from pneumonia and other causes.