



# EVERY BREATH COUNTS

## WASTING AND CHILD PNEUMONIA SCORECARD

### MAIN FINDINGS

Wasting contributed to 55% (367,800) of all child pneumonia deaths in 2019, making it the leading risk factor for child pneumonia death by a very wide margin

66% (244,300) of wasting-related pneumonia deaths are among children aged 28 days to one year and 33% (123,500) are among children aged one to four years

40 low- and middle-income countries (LMICs) are home to 90% (337,500) of all wasting-related pneumonia deaths, 28 in Africa, 10 in Asia, one in the Middle East, and one in Latin America

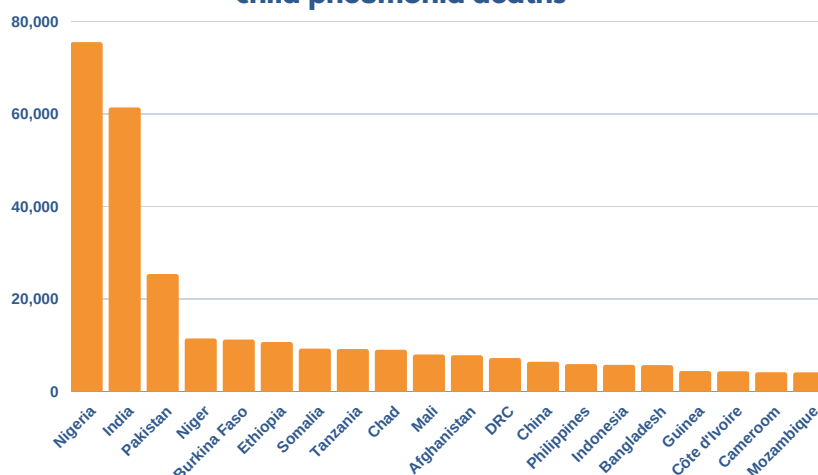
In 14 countries wasting contributes to more than 60% of child pneumonia deaths, including 10 in Africa, three in Asia, and one in the Middle East

Since 2010, wasting-related child pneumonia deaths have declined by 38%, slower than stunting-related pneumonia deaths (-43%) and underweight-related pneumonia deaths (-46%)

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### 20 countries with the largest numbers of wasting-related child pneumonia deaths



Source: Global Burden of Disease 2019

Wasting is the major risk factor for child death from pneumonia and contributed to an estimated 367,800 (55%) deaths in 2019, according to the Global Burden of Disease.

Wasting-related child pneumonia deaths are concentrated among children aged one month to one year. Evidence suggests wasting often begins much earlier in the womb and in the month after birth.

Wasting-related pneumonia deaths are concentrated in 40 low- and middle-income countries (LMICs), including in 14 Sub-Saharan African countries where more than 60% of child pneumonia deaths are attributable to wasting.

It is critical that these 40 governments introduce policies and programs to identify and reduce the numbers of wasted children and deaths, and integrate wasting prevention, diagnosis, and treatment with pneumonia, especially vaccination.

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## CALL TO ACTION

Governments should:

1. Set a national target to reduce the percentage of children under five who are wasted to <3% by 2030

2. Introduce new measures to achieve the target including by:

1. Assessing all pregnant women at risk of a low birth weight (LBW) baby and supplementing pregnancy diets and diets of LBW babies in the first months of life (if necessary)

2. Integrating the provision of wasting prevention, diagnosis, treatment, and referral (if necessary) at the point of vaccination, including by testing all children with the Mid-upper arm Circumference (MUAC) prior to vaccination

3. Increasing local manufacturing and availability of quality, affordable therapeutic foods to treat child wasting

3. Publish progress to the wasting target as part of national pneumonia control strategies using the latest data on local burden of disease

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Photo by UNICEF

## WASTING AND HEALTH GOALS, TARGETS, AND INDICATORS

### Sustainable Development Goals 2030



2.2.2 End all forms of malnutrition, including by achieving the internationally agreed target on wasting in children (0-4 years)



3.2.1 Reduce number of neonatal (0-28 days) deaths to at least 12 per 1,000 births and the child (0-4 years) deaths to at least 25 per 1,000 births

### Global Nutrition Targets 2030



Reduce % of children under five years suffering from wasting to <3%



Reduce % of children born with low birth weight (<2,500 grams/5.5 pounds) by 30%

## DEFINITIONS

### WASTING

Wasting is low weight-for-height. It often indicates recent and severe weight loss, although it can also persist for a long time. It usually occurs when a person has not had food of adequate quality and quantity and/or they have had frequent or prolonged illnesses. Wasting in children is associated with a higher risk of death if not treated properly

### PNEUMONIA

Global Burden of Disease uses clinician-diagnosed pneumonia or bronchiolitis as the case definition for Lower Respiratory Infection (LRI) with major causes *Streptococcus pneumoniae*, *Haemophilus influenzae* type b, respiratory syncytial virus (RSV) and influenza

### LOW BIRTH WEIGHT

Low birth weight is a weight of less than 2,500 grams irrespective of the gestational age. Low birth weight may be subdivided into very low birth weight (less than 1,500 grams) and extremely low birth weight (less than 1,000 grams). For live births, birth weight should ideally be measured within the first hour of life before significant postnatal weight loss occurs

### READY-TO-USE THERAPEUTIC FOOD (RUTF)

A nutrient-dense food containing added minerals and vitamins that are excellent sources of protein and energy used to treat acute malnutrition in children. Typically, RUTFs are made from peanut-based paste, oil, sugar and powdered milk, with added vitamins and minerals. Before RUTFs were invented, families would need to bring their children to hospitals and stay there until their child recovered. Now, under the supervision of community health workers, families can safely and effectively treat children at home with RUTFs

# WASTING AND CHILD PNEUMONIA SCORECARD

COUNTRY	NUMBER WASTING-RELATED CHILD PNEUMONIA DEATHS	% CHILD PNEUMONIA DEATHS ATTRIBUTABLE TO WASTING	% DECLINE IN WASTING-RELATED PNEUMONIA DEATHS (2010-2019)	% CHILDREN WASTED (2030 TARGET <3%)
NIGERIA	75,500	58%	-18%	6.5%
INDIA	61,400	48%	-53%	17.3%
PAKISTAN	25,400	54%	-21%	7.1%
NIGER	11,400	66%	9%	9.8%
BURKINA FASO	11,200	68%	23%	8.1%
ETHIOPIA	10,700	54%	-49%	7.2%
SOMALIA	9,200	65%	-13%	14.3%
TANZANIA	9,200	54%	-35%	3.5%
CHAD	9,000	66%	-3%	13.9%
MALI	8,000	68%	12%	9.3%
AFGHANISTAN	7,800	57%	-28%	5.1%
DRC	7,200	51%	-59%	6.4%
CHINA	6,400	43%	-57%	1.9%
PHILIPPINES	5,900	61%	-26%	5.6%
INDONESIA	5,700	64%	-53%	10.2%
BANGLADESH	5,700	46%	-63%	9.8%
GUINEA	4,400	60%	-14%	9.2%
CÔTE D'IVOIRE	4,300	49%	-33%	6.1%
CAMEROON	4,100	53%	-32%	4.3%
MOZAMBIQUE	4,100	56%	-33%	4.4%
UGANDA	3,500	51%	-37%	3.5%
SOUTH SUDAN	3,500	65%	-35%	22.7%
MYANMAR	3,500	53%	-61%	6.7%
BENIN	3,200	62%	-17%	5%
EGYPT	3,200	51%	-48%	9.5%
MADAGASCAR	3,000	53%	-39%	6.4%
PAPUA NEW GUINEA	3,000	62%	-7%	14.1%
KENYA	2,900	45%	-44%	4.2%
SIERRA LEONE	2,800	67%	-32%	5.4%
ANGOLA	2,700	48%	-58%	4.9%
SOUTH AFRICA	2,300	57%	-39%	3.4%
ZIMBABWE	2,200	47%	-9%	2.9%
SUDAN	2,000	69%	-56%	16.3%
GHANA	2,000	56%	-31%	6.8%
MALAWI	2,000	48%	-42%	0.6%
YEMEN	1,900	67%	-43%	16.4%
ZAMBIA	1,900	53%	-48%	4.2%
CAMBODIA	1,800	54%	-46%	9.7%
CAR	1,800	55%	-28%	6.5%
HAITI	1,500	48%	-23%	3.7%

These 40 countries are home to 90% of all wasting-related child pneumonia according to the [Global Burden of Disease, 2019](#)