

Technical Reference Team

Commodities: Oral rehydration solution, zinc, and amoxicillin

Background

The UN Commission on Life-Saving Commodities for Women and Children (the Commission) was formed in 2012 by the UN Secretary-General as part of the global Every Woman Every Child (EWEC) movement. EWEC challenges the global community to increase access to and appropriate use of essential medicines, medical devices, and health supplies that effectively address the leading preventable causes of death during pregnancy, childbirth, and childhood.

Led by a wide range of high-level leaders from around the world, the Commission developed a framework for action on Reproductive, Maternal, Newborn, and Child Health (RMNCH) products that can be applied nationally and utilized in global RMNCH initiatives. The framework outlines a priority list of 13 commodities, key barriers to access and use, and 10 cross-cutting recommendations to rapidly increase both access and use. By increasing access to and use of these 13 commodities, it is estimated that 6 million women and children can be saved by 2017.

Moving forward

To help carry forward the Commission's recommendations at the global and national levels, **Global Technical Reference Teams (TRT)** were established. One team was formed for each of the 13 commodities and 10 recommendations, and an advocacy working group is dedicated to advancing cross-cutting goals. The teams carry out their work through a variety of mechanisms, including guidance documents and tools to support countries in their efforts to implement recommendations and address global and regional bottlenecks. These teams are coordinated by a Strategy and Coordination Team hosted by the United Nations Children's Fund (UNICEF).



UNICEF

Amoxicillin is recommended by the World Health Organization for treatment of childhood pneumonia; zinc and ORS are recommended for diarrhea.

Spotlight on oral rehydration solution, zinc, and amoxicillin

Although marked progress has been made to reduce the rates of childhood deaths, more than 2 million children under the age of five still die each year from diarrhea and pneumonia. Both diseases are preventable and treatable, yet barriers to access and demand generation, as well as issues surrounding inappropriate use inhibit additional progress.

Treatment for diarrhea and pneumonia are highly effective, low-cost, and proven to save children's lives. Oral rehydration solution (ORS) and zinc, together, can prevent more than 90 percent of deaths from diarrhea. Amoxicillin dispersible tablets (amoxicillin DT), with appropriate case management, can reduce deaths from pneumonia by 36 to 42 percent.

To increase access to, demand for, and appropriate use of ORS, zinc, and amoxicillin, the TRT will:

- Increase the availability of high-quality zinc, ORS, and amoxicillin DT supply.
- Develop guidance and tools to inform the design and implementation of effective demand-generation programs at scale.
- Develop and disseminate a comprehensive advocacy package for amoxicillin DT, including new global recommendations and clinical guidance for treatment of childhood pneumonia.
- Create appropriate packaging and various options for dispensing amoxicillin DT.
- Improve diagnostics and prognostics for childhood pneumonia.

Group membership

The [Diarrhea and Pneumonia Working Group](#), led by UNICEF and the Clinton Health Access Initiative (CHAI), serves as the conveners of this group. Group partners include: Abt Associates, the Bill & Melinda Gates Foundation, FHI 360, icddr,b, John Snow Inc., Management Sciences for Health, McCann Health, Maternal and Child Health Integrated Program, Micronutrient Initiative, MDG Health Alliance, PATH, Population Services International, RESULTS, Save the Children, US Agency for International Development, UK Department for International Development, World Health Organization (WHO), and World Vision.

Progress to date

Since its inception in 2011, the working group has:

- Supported the development of comprehensive, costed national scale-up plans for zinc, ORS, and amoxicillin in 10 countries, which directly support the UNCoLSC recommendations, Global Action Plan for the Prevention and Control of Pneumonia and Diarrhea ([GAPPD](#)), and [A Promise Renewed](#).
- Helped to mobilize funding (over USD \$80 million) and new partner commitments to support implementation of national scale-up plans.
- Engaged with manufacturers to increase amoxicillin DT supply, established an external

review panel process to facilitate registration, and developed an preliminary demand forecast.

- Developed new promotional materials and tools for healthcare providers that can be adapted to multiple country contexts, free of cost.
- Consolidated evidence and existing research on consumer and provider behavior around pneumonia and diarrhea treatment.
- Developed a core set of indicators for measuring progress on diarrhea and pneumonia treatment scale-up.

Upcoming activities

During the next two years, the working group will, among other activities:

- Disseminate technical and advocacy materials with evidence to support new WHO recommendations for the use of amoxicillin to treat pneumonia.
- Consolidate and share guidance, tools, templates, and analyses on a knowledge-sharing website.
- Consolidate current data collection tools for core diarrhea and pneumonia treatment indicators.
- Support the development of country proposals outlining a package of local market-shaping interventions to support scale-up.

Available resources

The working group provides technical assistance, resource mobilization, and monitoring and evaluation support to organizations and governments working to improve access to ORS, zinc, and amoxicillin.

Available resources include:

- [Zinc supplier database](#).
- Evidence framework on consumer and provider research.
- [Health care provider kit](#) with adaptable materials.
- Core indicator list for diarrhea and pneumonia

Contact us

For more information or to request tools and technical assistance, please contact Nancy Goh, CHAI (ngoh@clintonhealthaccess.org), or Mark Young, UNICEF (myoung@unicef.org).