

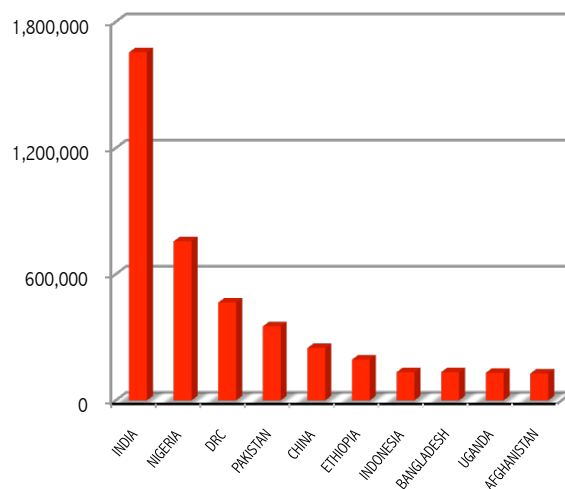
MINING COMPACT FOR CHILD HEALTH

May 2013

CHALLENGE

In 2011, 7 million children did not reach their 5 birthdays. The majority died in just 10 countries with India and Nigeria accounting for more than one third of all deaths (Fig. 1). Tragically 30% of deaths were caused by diarrhea and pneumonia, which are entirely preventable and treatable at low cost. For diarrhea, oral rehydration salts (ORS) and zinc treatment could avert over 90% of deaths at a cost of less than 50 cents per treatment. ORS prevents diarrhea-induced death from dehydration and zinc treatment lessens the severity and duration of diarrhea and provides protection against future infections that cause diarrhea and pneumonia. Zinc is such a precious commodity for child health that eradicating zinc deficiency alone could prevent the deaths of 400,000 children. But despite the lifesaving potential of zinc and ORS, most children never receive these treatments (Table 1). Demand for ORS is low and almost non-existent for zinc as the relationship between zinc and child health is not well understood by consumers or health providers in most countries. This has created a market trap limiting supply and distribution of both zinc and ORS. If demand is unlocked, billions of episodes of diarrhea would require treatment with zinc and ORS every year, triggering a supply-side response that could prevent millions of child deaths.

Fig. 1: Child deaths are concentrated in a handful of countries...



OPPORTUNITY

Mining companies are well positioned to champion greater use of zinc and ORS to treat diarrhea and prevent infections in young children. The wide geographic reach of many of the major mining companies means that they already operate in many of the countries with the highest burdens of child mortality and have a direct interest in investing in the health of local communities. Further, as mining companies are responsible for extracting the commodity that has such a strong impact on child health they are natural champions for increased access to zinc products for children. Good work is already underway with *Zinc Saves Kids*, an initiative by the International Zinc Association (IZA) and UNICEF, and the *Zinc Alliance for Child Health*, a partnership between Teck Resources, the Micronutrient Initiative, the Canadian International Development Agency (CIDA) and UNICEF.

Table 1: Country	Under 5 Pneumonia /Diarrhea Deaths	ORS coverage	Zinc coverage
India	609,000	26%	0.3%
Nigeria	241,000	26%	1%
DRC	147,000	26%	2%
Pakistan	126,000	41%	0%
Ethiopia	96,000	26%	0%
Afghanistan	79,000	30%	No data
China	64,000	No data	No data
Sudan	44,000	22%	No data
Mali	42,000	14%	No data
Angola	39,000	40%	No data

MINING COMPACT FOR CHILD HEALTH

The *Mining Compact for Child Health* seeks to build on these successful initiatives by inviting the world's leading mining companies to join forces with governments, non-government organizations and industry associations to stimulate the growth and development of sustainable markets for quality, affordable, child-friendly zinc and ORS products in countries with the greatest concentrations of under 5 child deaths.

Based on country plans developed by governments in close coordination with leading global child health organizations, a number of key activities have been identified to successfully achieve the goal of a long-term, sustainable and significant reduction in childhood deaths.

To become a partner in the *Mining Compact for Child Health*, companies are asked to commit to, and support, one or more of the following multi-stakeholder lead activities in the countries with the highest numbers of child deaths:

- Work with development partners and other stakeholders to support country-led efforts to scale up access to quality, affordable, child-friendly zinc and ORS treatments and/or zinc supplementation to prevent child diarrhea and pneumonia deaths and improve children's nutritional status and general health;
- Support sustained, large-scale behavior change campaigns to educate families about the benefits of zinc and ORS as treatments for diarrhea and zinc supplements for child health generally; and to increase demand for zinc and ORS among consumers and healthcare providers;
- Leverage existing private sector distribution channels, networks and programs, where appropriate, to increase access to zinc and ORS products for children, particularly in rural and remote areas; and
- Advocate with governments and other stakeholders for greater access to quality, affordable, child-friendly zinc and ORS products for children.

There has never been a better time to act. Achieving Millennium Development Goal 4 means we have to prevent the deaths of 4.4 million children under 5 by 2015 and accelerated action on the leading causes of child death in the countries where most deaths are concentrated is now critical. The *Mining Compact for Child Health* is part of a global push to end child diarrhea and pneumonia deaths and is consistent with the recommendations of the [UN Commission on Life-Saving Commodities for Women and Children](#), the global child survival effort led by UNICEF and the US Government, "A Promise Renewed", the [Declaration on Scaling Up Treatment of Diarrhea and Pneumonia](#), and the WHO [Integrated Global Action Plan for Pneumonia and Diarrhea](#).

Members of the Mining Compact become part of the United Nations Secretary-General's [Every Woman, Every Child](#) movement and their work is highlighted during United Nations General Assembly week and at other times throughout the year.

SECRETARIAT

For more information, please contact:

Andrew Green, International Zinc Association, agreen@zinc.org, **Leith Greenslade**, MDGHealth Alliance, leith.greenslade@mdgha.org, **Pam Bolton**, GBCHealth, pbolton@gbchealth.org, **Mark Young**, UNICEF, myoung@unicef.org, **Malia Boggs**, USAID, mboggs@usaid.gov, **Stephen Sobhani**, UN Foundation, SSobhani@Unfoundation.org

Data sources: [Committing to Child Survival: A Promise Renewed](#), Progress Report, UNICEF 2012, [Pneumonia and Diarrhea. Tackling the Deadliest Diseases for the World's Poorest Children](#), UNICEF 2012