

1. Increase spending on health.

In the global scale every year 4.1 trillion USD is spent on health. 80% of that amount is spent in the OECD countries where lives only 18% of world's population

. OECD countries spend a larger share of their gross domestic product on health, spending on average more than 11%, compared with 4.7% for countries in WHO's African and South-East Asia regions. (WHO)

It has been estimated that annual per capita total health expenditures of less than \$45 are insufficient to ensure access to a very basic set of needed services. Of the 68 priority countries, 21 had annual per capita health expenditures below this amount ([Countdown Report 2008](#)).

2. Concentrate more on the poorest and most disadvantaged groups of society

Worldwide, the under-five mortality rate was 107 in the poorest 60 percent households from 1998-2006, as compared to 67 in the richest 40 percent (DefInfo)

Region-wise, mortality in children under age five is now concentrated in sub-Saharan Africa (almost 50 per cent) and South Asia (30 per cent)

Reducing both types of inequity – between regions and within countries – is crucial for achieving the health-related Millennium Development Goals.([Countdown Report 2008](#))

3. Increase aid and make it more predictable

Aid for newborn and child health and nutrition has increased in most priority countries, but has decreased in others. Health programmes in majority of countries are still grossly underfunded and more needs to be done.

4. Improve access to basic health care and put greater emphasis on prevention.

Progress has been attributed to a combination of improved routine immunization coverage and the provision of a second opportunity for immunization. Such opportunities are critical for children who get left out in the initial round of measles vaccinations. They are also important in ensuring universal protection in communities.

Efforts need to be sustained and, where necessary, strengthened, if progress is to continue. Measles vaccine, at less than \$1 per child, is one of the most cost-effective health initiatives currently available.

([UN MDG Report 2009](#))

Further improvements need to be done with supplementation of vitamin A, despite significant

achievements in this area. Also, all newborns and their mothers must have guaranteed access to postnatal care soon after delivery.

5. Special focus on treatment of pneumonia and diarrhoea as well as on the problem of malnutrition

Together, pneumonia and diarrhoea account for over a third of all under-five deaths, yet coverage rates for the use of antibiotics and oral rehydration therapy (ORS) are low. In the case of pneumonia, governments have been slow to adopt a policy authorizing and training community health workers to identify and manage uncomplicated cases. To date, only 18 of the 68 priority countries have empowered community health workers to act.

Governments need to accelerate nutrition action in most of the developing countries. The average level of exclusive breastfeeding for infants remains unacceptably low at 28%. At least 20% of children are moderately or severely underweight in almost half of the 68 priority countries ([Countdown Report 2008](#)).