

Community Case Management of Sick Children (CCM)

CCM targets the conditions that cause the most child death in developing

countries. Leading causes of death among children under five years of age are pneumonia, diarrhea, malaria, and neonatal causes. Under-nutrition is estimated to be an underlying cause in 35% of all under-five deaths, even more so in those associated with severe infections.

CCM relies on evidence-based child survival interventions. A few (30 or so) interventions have been proven to save the lives of newborns and children under five, at a price that is affordable in developing countries. CCM expands the use of curative interventions while supporting prevention. Key interventions include preventative measures such as exclusive breastfeeding in the first six months of life and treatments such as antibiotics for dysentery, pneumonia and neonatal sepsis; oral rehydration therapy and zinc for diarrhea; anti-malarials for malaria; Vitamin A for measles; and Ready-to-Use Therapeutic Foods for acute severe malnutrition.

CCM brings curative health care to children in those communities that are

hardest to reach. CCM is a strategy for populations that lack continual access to curative interventions, typically, but not exclusively, poor, rural communities. Among the world's countries, mortality is considerably higher in children who live in rural areas and in the poorest households.

CCM utilizes trained, supervised community members, linked to facility-based

services, to deliver interventions. These community members can be formal Ministry of Health (MOH) outreach workers, paraprofessional Community Health Workers (CHWs), of which there are many varieties, or private sector workers, among others. CHWs may perform their duties from their homes, a community-constructed building, or government or private health facility.

CCM is consistent with practices recommended by WHO, UNICEF, and other international health agencies. WHO, UNICEF, and other international agencies have jointly called on countries to adopt and promote policies and programs that have strong community-based components to deliver interventions for diarrhea, malaria, pneumonia, newborn care, and acute severe malnutrition, while improving services at first-level health facilities.



Advancing community health worldwide.

CORE Group, Save the Children, BASICS and MCHIP, 2010. Community Case Management Essentials: Treating Common Childhood Illnesses in the Community. A Guide for Program Managers. Washington, DC.

For more information on CCM, visit www.coregroup.org