Reducing Child Mortality

By: Gabriela Walch, Annie Scantling, Rachel Dalke, & Haroune Mahdi
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WHAT IS CHILD MORTALITY?

- Under-five mortality rate: Probability of dying between birth and exactly five years of age expressed per 1,000 live births.
- Infant mortality rate: Probability of dying between birth and exactly one year of age expressed per 1,000 live births.
WHY IS CHILD MORTALITY IMPORTANT?

- Millions of children die every year as a result of malnutrition, poor water and sanitation, lack of infrastructure and appropriate health care.
- In 2008, more than one third of all child deaths were due to undernutrition. In that same year, there were 4.4 million deaths of children under the age of five.

- Reducing child mortality is important because it saves the lives of children therefore creating a healthier society.
CHILD MORTALITY IN THE EAST ASIAN REGION

- Countries in East Asia: China, Japan, North Korea, South Korea, Mongolia, and Taiwan
- Who is affected? It affects those individuals who live in rural areas where medical access is limited or non-existent (Mongolia and China) because a vast majority of the land is used for agricultural purposes/villages and do not have the infrastructure that a major city would normally provide.
CAUSES OF CHILD MORTALITY

• There are many causes but, across the board, poverty is the underlying issue for all of them.
• Areas of the world with more poverty have a higher mortality rate, mainly due to the lack of education and medicine.
• Malnutrition
• Another cause of this problem in East Asia happens in the perinatal period--birth asphyxia, birth trauma, and low birth weight.
• In China, girls have a 33% higher risk of dying than boys. This is caused by social norms, and even though one child policy has been lifted, the trend still continues.
• 174,000 maternal and 1.3 billion neonatal deaths every year
• approximately 1/3 of the global burden of child mortality

Picture from 2011 study:
Child Poverty in East Asia and the Pacific: Deprivations and Disparities
EFFORTS TO REDUCE CHILD MORTALITY

What does the UN propose?

- focused attention
- community support
- mobilization of resources

- our goal is reaching new heights every day

MDG4 MDG4 THE MORTALITY RATE OF CHILDREN UNDER FIVE HAS BEEN CUT BY MORE THAN HALF SINCE 1990

LET’S TAKE ACTION
TO ENSURE ALL CHILDREN LIVE LONG, HEALTHY LIVES

PRETZ 2015 TIME FOR GLOBAL ACTION FOR REDUCTION LIVES
Efforts to Reduce Child Mortality

So what have they been doing to reach their goal?

- installing health centers
- increasing the number of healthcare workers
- supplying the sick and injured with medicine and care
  - high vaccination coverage
  - easy access to clean water

- focus,
- innovation
- financing
UN DEVELOPMENT GOAL PROGRESS

As a result of the UN's progress...

• global under-five mortality rate has declined by more than half

• the number of deaths of children has declined from 12.7 million in 1990 to almost 6 million in 2015.

• the rate of reduction of under-five mortality has more than tripled globally

• Eastern Asia, Latin America and the Caribbean and Northern Africa, have already reduced the under-five mortality rate by more than two-thirds since 1990.
Continued Progress (On a Global Scale)

- Sub-Saharan Africa was the world's highest child mortality rates, and it has had the largest decline overall.
- In sub-Saharan Africa, the annual rate of reduction of under-five mortality was over five times faster during 2005–2013 than it was during 1990–1995.
- It has fallen from 179 deaths per 1,000 live births in 1990 to 86 in 2015.
CONTINUED PROGRESS

- Measles vaccination helped prevent nearly 15.6 million deaths between 2000 and 2013. The number of globally reported measles cases declined by 67% for the same period.
- About 84% of children worldwide received at least one dose of measles-containing vaccine in 2013, up from 73% in 2000.
CONTINUED PROGRESS

- Between 1990 and 2015, the worldwide neonatal mortality rate has fallen from 33 deaths to 19 deaths per 1,000 live births.
- In the recent decade, under-five mortality has been declining faster among the poorest households—-a sign of increasing equity.
- The disparities in under-five mortality by mothers education and residence are also narrowing in some countries.

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**Further improvements in child survival require concerted efforts to reduce socioeconomic disparities**

<table>
<thead>
<tr>
<th>Category</th>
<th>Ratio</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rural to urban</td>
<td>1.7</td>
</tr>
<tr>
<td>Poorest to richest households</td>
<td>1.9</td>
</tr>
<tr>
<td>Children born to mothers with no education to mothers with primary education</td>
<td>1.5</td>
</tr>
<tr>
<td>Children born to mothers with no education to mothers with secondary or higher education</td>
<td>2.8</td>
</tr>
</tbody>
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**Focusing on newborns is critical to further accelerating progress in child survival**

- 1 million deaths on the first day of life = 36% of neonatal deaths
- 2 million deaths in the first week = 73% of neonatal deaths
Continued Progress

• Every day in 2015, 16,000 children under five continue to die--mostly from preventable causes.
• Child survival must remain the focus of the post 2015 agenda.
• Sustaining this progress requires collective action.
• Strategies include targeting vulnerable children from poor households/rural areas, supporting women's education, and continuing efforts to monitor and report the inequities that are often concealed by global or national averages.

TARGET 4.A
Reduce by two thirds, between 1990 and 2015, the under-five mortality rate

Substantial progress in reducing child mortality has been made, but more children can be saved from death due to preventable causes