

## PRESS RELEASE

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### Global child mortality continues to drop

**NEW YORK, 10 September 2009** – UNICEF today released new figures that show the rate of deaths of children under five years of age continued to decline in 2008.

The data shows a 28 per cent decline in the under-five mortality rate, from 90 deaths per 1000 live births in 1990, to 65 deaths per 1000 live births in 2008. According to these estimates, the absolute number of child deaths in 2008 declined to an estimated 8.8 million from 12.5 million in 1990, the base line year for the Millennium Development Goals (MDGs).

“Compared to 1990, 10,000 fewer children are dying every day,” said UNICEF Executive Director Ann M. Veneman. “While progress is being made, it is unacceptable that each year 8.8 million children die before their fifth birthday.”

The new estimates are the result of collection and analysis of a range of data sources by demographers and health experts from UNICEF, the World Health Organization, the World Bank and the United Nations Population Division, guided by technical advisors from a number of major academic institutions.

The data shows global under-five mortality has decreased steadily over the past two decades, and that the rate of the decline in the under-five mortality rates has increased since the 1990s. The average rate of decline from 2000 to 2008 is 2.3 per cent, compared to a 1.4 per cent average decline from 1990 to 2000.

Public health experts attribute the continuing decline to increased use of key health interventions, such as immunizations, including measles vaccinations, the use of insecticide-treated bednets to prevent malaria and Vitamin A supplementation. Where these interventions have increased, positive results have followed.

Progress has been seen in every part of the world, and even in some of the least-developed countries. A key example is Malawi, one of ten high under-five mortality countries that is now on track to meet the Millennium Development Goal (MDG) of a two-thirds reduction in under-five mortality between 1990 and 2015.

Estimates show that under-five mortality in Malawi has fallen from 225 deaths per 1000 live births in 1990, to 100 per thousand on 2008. In 2000, only 3 per cent of children under five slept under a mosquito net – a key means of preventing malaria, whereas by 2006 this had risen to 25 per cent. Malawi has focused its limited resources on improvements in health and health systems and the use of the most effective interventions, with the result that significant numbers of children’s lives have been saved.

The new data also shows that seven of the 67 high mortality countries (those with under-five mortality rates of 40 per thousand live births or higher) have consistently achieved annual rates of reduction of under-five mortality of 4.5 per cent or higher. These are Nepal, Bangladesh, Eritrea, Lao People’s Democratic Republic, Mongolia, Bolivia and Malawi.

Impressive gains have also been made in countries that are not fully on track to meet the Millennium goal. Niger, Mozambique and Ethiopia have all reduced under-five mortality by more than 100 per 1000 live births since 1990.

While progress has been made in many countries, the global rate of improvement is still insufficient to reach the MDG, and Africa and Asia combined still account for 93 per cent of all under-five deaths that occur each year in the developing world.

“A handful of countries with large populations bear a disproportionate burden of under-five deaths, with forty per cent of the world’s under-five deaths occurring in just three countries: India, Nigeria, and the Democratic Republic of Congo,” said Veneman. “Unless mortality in these countries can be significantly reduced, the MDG targets will not be met.”

In some countries, progress is slow or non-existent. In South Africa the under-five mortality rate has actually gone up since 1990. The health of the child is inextricably linked to the health of the mother and South Africa has the highest number of women living with HIV in the world. Recent commitments by the government to scale up interventions to prevent mother-to-child transmission of HIV/AIDS should help improve the situation.

The survey data incorporated in these estimates generally reflects mortality over the preceding 3 to 5 years. This means that major improvements in provision of nets for malaria prevention, of vaccines against meningitis (HiB) and of vitamin A supplementation, improved prevention of mother-to-child transmission of HIV and of pediatric HIV, and further progress on protecting against measles and tetanus may not yet be fully reflected in the data.

Progress can be accelerated even in the poorest environments, through integrated, evidence-driven, community-based health programs that focus on addressing the major causes of death - pneumonia, diarrhea, newborn disorders, malaria, HIV and under-nutrition.

The two leading causes of under-five mortality are pneumonia and diarrhea. New tools, such as vaccines against pneumococcal pneumonia and rotaviral diarrhea, could provide additional momentum.

“Achieving the Millennium Development Goal target of a two-thirds reduction in under-five mortality by 2015 will require a strong sense of urgency with targeted resources for greater progress,” said Veneman.

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### **About UNICEF**

*UNICEF is on the ground in over 150 countries and territories to help children survive and thrive, from early childhood through adolescence. The world’s largest provider of vaccines for developing countries, UNICEF supports child health and nutrition, good water and sanitation, quality basic education for all boys and girls, and the protection of children from violence, exploitation, and AIDS. UNICEF is funded entirely by the voluntary contributions of individuals, businesses, foundations and governments*

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