

INFANT MORTALITY – AN INDICATOR OF LIFE QUALITY, OF LIVING STANDARD – INDICATOR OF PRIORITY OF WORLD HEALTH ORGANIZATION

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Abstract: *Infant mortality is a basic indicator of child's health and mother's; it is a key indicator of the socio-economic status and of the environment of a human community. The level and dynamics of infant mortality are a social, economic and cultural determinism. The analysis of infant mortality dynamics at world level reveals a decrease of this one in the last century and especially in the last 20 years.*

Keywords: *infant mortality, WHO indicator, evolution of infant mortality, gap between the rich and the poor*

Rezumat: *Mortalitatea infantilă reprezintă un indicator de bază al sănătății copilului și a mamei, fiind un indicator cheie al stării economico-sociale și de mediu al unei comunități umane. Nivelul și dinamica mortalității infantile au un determinism social, economic și cultural. Analiza dinamicii mortalității infantile la nivel planetar relevă o scădere a acesteia în ultimul secol și mai ales în ultimii 20 de ani.*

Cuvinte cheie: *mortalitatea infantilă, indicator de prestare a OMS, evoluția mortalității infantile, decalajul dintre bogați și săraci*

INTRODUCERE

Infant mortality represents a basic indicator of children and mothers' health, being at the same time a key indicator of the economic, social and environmental status of a certain community.

The level and the dynamics of infant mortality have a complex social, cultural, economic determinism. The quality of the health care services of the pregnant woman and of the new born, the access to these services also influence the chances of survival of the new born during its first year of life.

Internationally, the important decline of infant mortality has been registered started with the middle of XIXth century and has been brought about both by the progress made in health protection and in other domains of humans' life, such as: food, hygienization of the life environment, mass production of drugs, vaccines, population education etc.

“Thus, around 1950, Island, Norway, Sweden registered the value of the mortality index under 20%, Great Britain, France, Belgium, Netherlands, Switzerland, Austria, Check Republic – under 50%, while countries

such as Romania, Bulgaria, Poland and Russia were hardly under 100%.”

Between 1950 and 1970, the rate of infant mortality also decreased in other occidental countries under the percentage of 20%. It is the case of Denmark, Island, Ireland, England and France. In other countries such as Spain, Italy, Germany and Austria, this will happen only in the next decade. In this time, in Denmark and Sweden, the rate of infant mortality will fall under 10% in 1963, respectively in 1967.

The ex-socialist countries, less Albany, were around the value of 50% before 1970. Between 1970 and 1990, in all the West-European countries, infant mortality decreased under the value of 10%, with the exception of Portugal, which reaches this level in 1992. Until the end of the 80's, the ex RDG, Hungary, Poland, Czechoslovakia, Bulgaria were under 20%, regarding this indicator.

“After 1990, the classification of the European countries did not look differently from the previous one, although, certain aspects are worth mentioning. A new separation between the ex-communist countries stands out. Romania, Bulgaria and some of the Soviet Union countries registered a slow decrease or a serious deterioration of the infant mortality indicator, while the Central and East European countries – Hungary, Poland, Slovenia, Slovakia, but especially, the Check Republic – obviously joined the Western countries (Traian Rotariu, 2003).

In specialized literature, most of the authors believe that the social, economic and political factors “control” the level of infant mortality much more than the quality of the medical services.

According to some analysts, the strict improvement of the medical services quality may lower infant mortality with maximum 10%.

Another idea that can be found in the specialized literature that links infant mortality to the decline of the social cohesion, as a result of the gap between the rich and the poor.

“Regarding the evolution of the infant mortality at world level, R. Pressat shows that in 1967, the decrease of the infant mortality indicator between 1950-1954 and

1965 divides the European countries in 3 groups and France:

- a. North European countries (United Kingdom of Great Britain, the Low Countries, Denmark, Sweden, Finland and Norway)
- b. Central and East European countries (Czechoslovakia, East Germany, Poland, Romania, Hungary, Bulgaria and URSS)
- c. South Europe (Italy, Yugoslavia, Spain, Portugal). ("L. Vulcu – Prevenirea mortalitatii infantile prin anihilarea unor factori de risc –pag.28). A decrease with 38% of the infant mortality indicator can be observed in the North European countries, as there is a proper sanitary situation. In South and Central Europe, a much more modest level of infant mortality decrease can be observed.

Not only the physicians and the demographers are preoccupied by infant mortality, but also sociologists, psychologists, professors, legal counsellors, polytologists etc.

Demographers discovered that when infant mortality is in decrease and remains at a low level, in some decades, the size of a normal family also diminishes, as long as the parents are not afraid any more that their children will die of childhood diseases. In general, this is called Demographic Transition, regarding a low birth rate and a low death rate. Along with the discovery of penicillin and the amazing progress of modern medicine in the XXth century, the mortality rate in the world decreased between the 50's and the 60's. The increase of life expectancies is seen as a progress for humankind, bring forward other problems, as well. If people live more, world population will grow as well.

We know from the military science, that when an Army is weakly prepared and does not real logistics, it will be defeated but not before it will be slaughtered. It is the same with the population. When this has a weak training for life defence (what is called "life education") and a weak support logistics (medical institutions, the necessary logistics), we can expect disasters, such as the burst of infant mortality). The culture of supporting life (its defence), of reproduction (child protection), maternity (for its defence and affirmation) has been disintegrated in the countries that confronted with the torrent described by the infant mortality cascades. In other words, the household, the children, the mothers can no longer be protection, which means that the institution and the logistics for the protection of the population, of the rural community is no longer working.

Smelser proved that passing from the family with multiple functions to social systems with differentiate functions require the occurrence of a coordinating institution which will have to take care of children, old people and the handicapped persons. When this coordinating institution is missing or does not work properly, we will assist to a burst of mortality at the level of these particular vulnerable groups: *mothers, children, old persons, the handicap*.

Finally, let us see whether maternal mortality

registers less alarming rates. In order to make this phenomenon more comprehensible, we will mention the countries in relation to the highest maternal mortality rates.

1. 2-9/1.000: Poland, Check Republic, Hungary, Slovenia
2. 9-21/1.000: Baltic countries, Balkan countries, Ukraine, Belarus and Turkmenistan
3. 21-36/1.000 Romania, Uzbekistan
4. 36-66/1.000 Georgia, Islamic Euroasia, Moldavia, Russia

In this respect, Romania is also under the Euroasiatic level, meaning that it is still a vulnerable society, incapable of protecting its mothers. In general, a society which cannot offer protection to mothers, children and to old persons is a paralyzed society. (Source: Raport-Romania 2003, UNFPA)

What we can say as a conclusion about this studied area? The peoples of this area:

- a) cannot protect their children from the scourge of infant mortality
- b) cannot protect their mothers from the risk of maternal mortality
- c) cannot defend their incomes
- d) cannot defend their health

At world level, infant mortality rate represents one of the world priorities, being an indicator of the health status of each nation, as well as an indicator of the living standard, so a synthetic indicator.

In 2005, World Health Organization had as a motto: "to give a chance to each woman and child".

In his REPORT, the General Director of WHO showed that:

- more than 11 million of children less than 5 years old die every year; the majority of deaths are imputable only to a certain number of diseases, such as: measles.
- 4 million die during the first 28 days after birth; there are already 3,3, million of children which were born dead; 5000 women die as a result of the pregnancy and birth complications; According to MILLENNIUM DECLARATION, 93 countries with 40% of the world population were willing to reduce the indicator of infant mortality with 2/3 until 2015 (WHO), other 51 countries with 48% of the world population are in a slow progress and other 43 countries with 12% of the world population have the same infant mortality indicator, while in certain cases, it is even higher than in the previous years (inverse tendencies); the same as in the case of neonatal mortality, which in some countries is more reduced – 12%, there are other countries between 12,5-24,9%, others between 25-37,4%, in other countries – more than 37,5% and there are countries where there is no registered data. Out of the total of deaths under the age of 5, 405 occur during the first month of life; 98% of deaths occur in the developing countries.
- 3,3 million children born dead

The gap between the rich and the poor increased both within the countries and between them.

The causes of neo-natal deaths are: diarrhoea, neonatal tetanus, congenital anomalies, other neo-natal causes, asphyxia, serious infections, premature births.

Infant mortality in the world

Infant mortality in the world in			
Région	Décès d'enfants de moins d'un an		Proportion de nouveau-nés mourant avant un an (pour mille)
	Nombre (en millions)	Distribution (%)	
Asie	4,08	54	46
Afrique	3,06	40	90
Europe	0,05	1	8
Amérique latine	0,34	4	23
Amérique du Nord	0,03	0	6
Océanie	0,02	0	27
Monde	7,57	100	49

Source : Nations unies 2007, World Population Prospects, the 2006 Revision
Fiche pédagogique, INED, www.ined.fr

COUNTRIES	YEAR 2000	YEAR 2006
ROMANIA	19	14
USA	7	7
CANADA	5	5
MEXICO	32	29
BRAZIL	27	19
ARGENTINA	17	14
JAPAN	3	3
CHINA	30	20
ALGERIA	37	33
SIERRA LEONE	162	159
NIGERIA	107	99
NIGER	159	148
SENEGAL	66	60
RWANDA	110	97
ETHIOPIA	92	77
FRANCE	4	4
GERMANY	4	4
ENGLAND	6	5
ITALY	5	3
BELGIUM	5	4
NETHERLANDS	5	4
DENMARK	5	3
SWEDEN	3	3
NORWAY	4	3

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