

# Facts and figures from **The World Health Report 2005**



**“Public health programmes need to work together so that all families have access to a continuum of care that extends from pregnancy (and even before), through childbirth, and on into childhood, instead of the often fragmented services available at present”.**

*Dr LEE Jong-wook, Director-General, WHO*

## THE GLOBAL PICTURE

- ▶ Pregnancy and childbirth and their consequences are still the leading causes of death, disease and disability among women of reproductive age in developing countries.
- ▶ Over 300 million women in the developing world suffer from short-term or long-term illness brought about by pregnancy and childbirth; 529 000 die each year.
- ▶ Maternal mortality is highest by far in Africa, where the lifetime risk of maternal death is 1 in 16, compared with 1 in 2800 in rich countries.
- ▶ More than 50% of all child deaths occur in just six countries: China, the Democratic Republic of the Congo, Ethiopia, India, Nigeria and Pakistan.
- ▶ Less than 1% of maternal deaths occur in high-income countries.
- ▶ Towards the turn of the millennium, the overall downward trend in under-five mortality rates worldwide was showing signs of slowing.
- ▶ Globally, the average number of children per woman stands at 2.69, compared with 4.97 in the early 1960s.
- ▶ Across the world, around 2.2 million women living with HIV/AIDS give birth each year.
- ▶ There are currently 136 million births per year, including 3.3 million stillbirths. Worldwide, the number of live births will peak at 137 million per year towards 2015.

## PREGNANCY

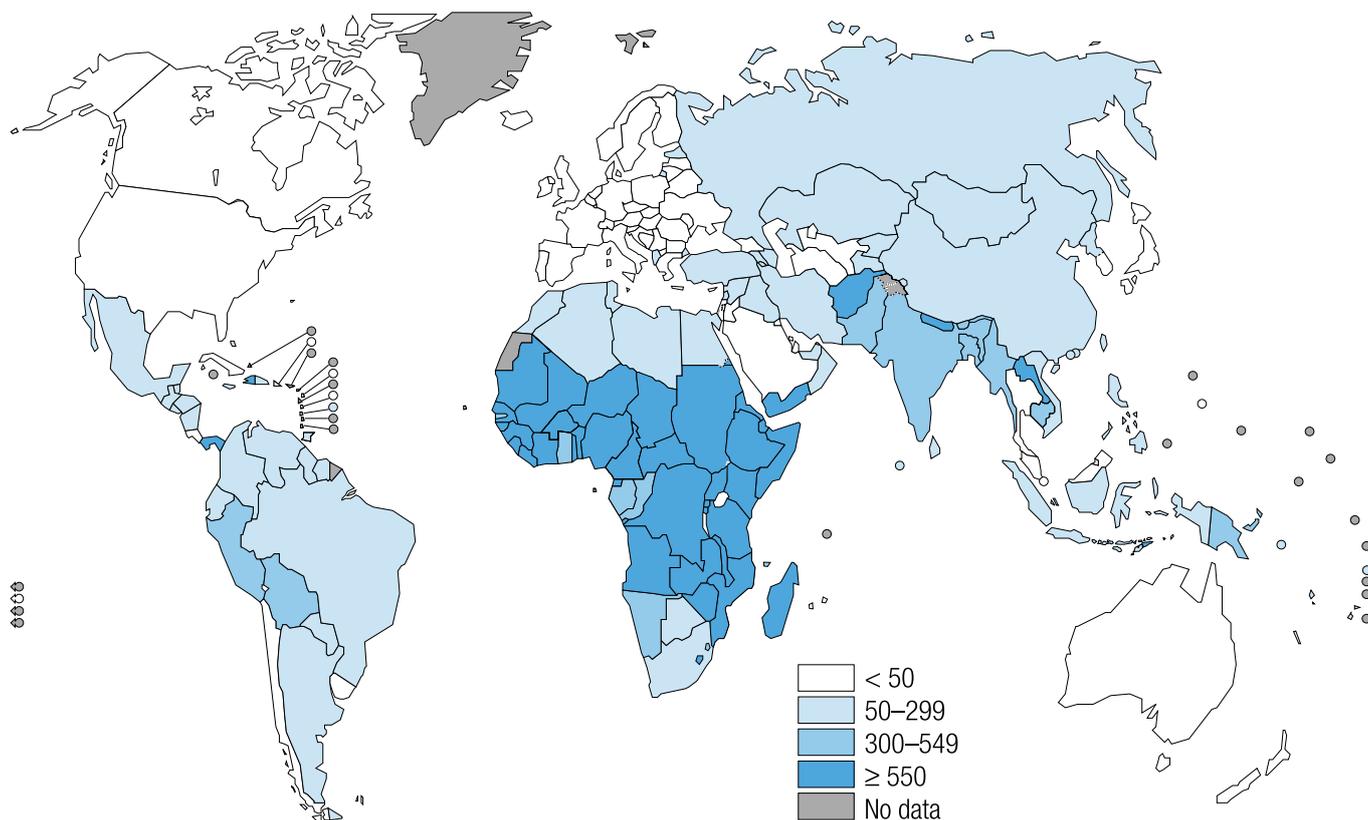
- ▶ A substantial proportion of maternal deaths – perhaps as many as one in four – occur during pregnancy.
- ▶ Each year, approximately 50 million women living in malaria-endemic countries throughout the world become pregnant. Around 10 000 of these women and 200 000 of their infants die as a result of malaria infection.
- ▶ Of the estimated 211 million pregnancies that occur every year, about 46 million end in induced abortion, of which only approximately 60% are carried out under safe conditions.
- ▶ More than 18 million induced abortions each year are performed by people lacking the necessary skills or in an environment lacking the minimal medical standards, or both.
- ▶ With 34 unsafe abortions per 1000 women, South America has the highest ratio, closely followed by eastern Africa (31 per 1000 women), western Africa (25 per 1000 women), central Africa (22 per 1000 women), and south Asia (22 per 1000 women).
- ▶ Unsafe abortion causes 68 000 deaths each year.
- ▶ It is estimated that up to 100 000 maternal deaths could be avoided each year if women who did not want children used effective contraception.



## CHILDBIRTH AND MATERNAL MORTALITY

- ▶ Maternal mortality is currently estimated to be 529 000 deaths per year, a global ratio of 400 maternal deaths per 100 000 live births.
- ▶ Between 11% and 17% of maternal deaths happen during childbirth itself and between 50% and 71% in the postpartum period.
- ▶ About 45% of postpartum maternal deaths occur during the first 24 hours, and more than two thirds during the first week.
- ▶ Maternal deaths are even more inequitably spread than newborn or child death rates. Maternal mortality rates range from 830 per 100 000 births in African countries to 24 per 100 000 births in European countries.
- ▶ Of the 20 countries with the highest maternal mortality ratios, 19 are in sub-Saharan Africa.
- ▶ The most common cause of maternal death overall is severe bleeding. Postpartum bleeding can kill even a healthy woman within two hours, if unattended. The second most frequent direct cause of death is sepsis; the third is unsafe abortion.

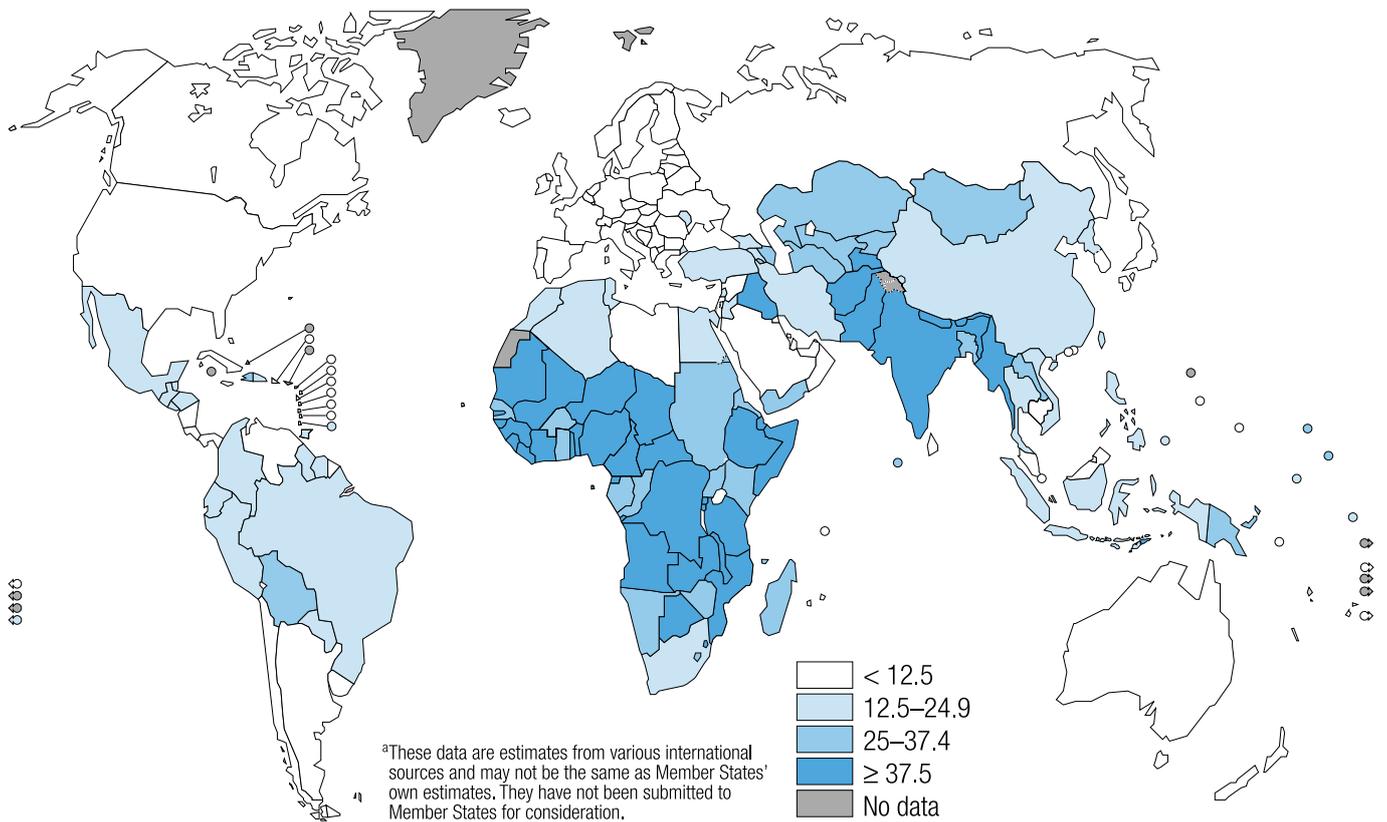
Maternal mortality ratio per 100 000 live births in 2000



## NEWBORNS

- ▶ 1 out of 5 African women loses a baby during her lifetime, compared with 1 in 125 in rich countries.
- ▶ Each year nearly 3.3 million babies are stillborn, and more than 4 million others die within 28 days of being born.
- ▶ Newborn deaths now contribute to about 40% of all deaths in children under five years of age globally, and more than half of infant mortality.
- ▶ The largest numbers of babies die in the South-East Asia Region: 1.4 million newborn deaths and a further 1.3 million stillbirths each year.
- ▶ While the actual number of deaths is highest in Asia, the rates for both neonatal deaths and stillbirths are greatest in sub-Saharan Africa. Of the 20 countries with the highest neonatal mortality rates, 16 are in this part of the world.
- ▶ It is estimated that each year over a million children who survive birth asphyxia develop problems such as cerebral palsy, learning difficulties and other disabilities.
- ▶ Nearly three quarters of all neonatal deaths could be prevented if women were adequately nourished and received appropriate care during pregnancy, childbirth and the postnatal period.

Neonatal mortality rate per 1000 live births in 2000<sup>a</sup>



## CHILD MORTALITY

▶ Unless progress is accelerated significantly, there is little hope of reducing maternal mortality by three quarters and child mortality by two thirds by the target date of 2015 – the targets set by the Millennium Declaration.

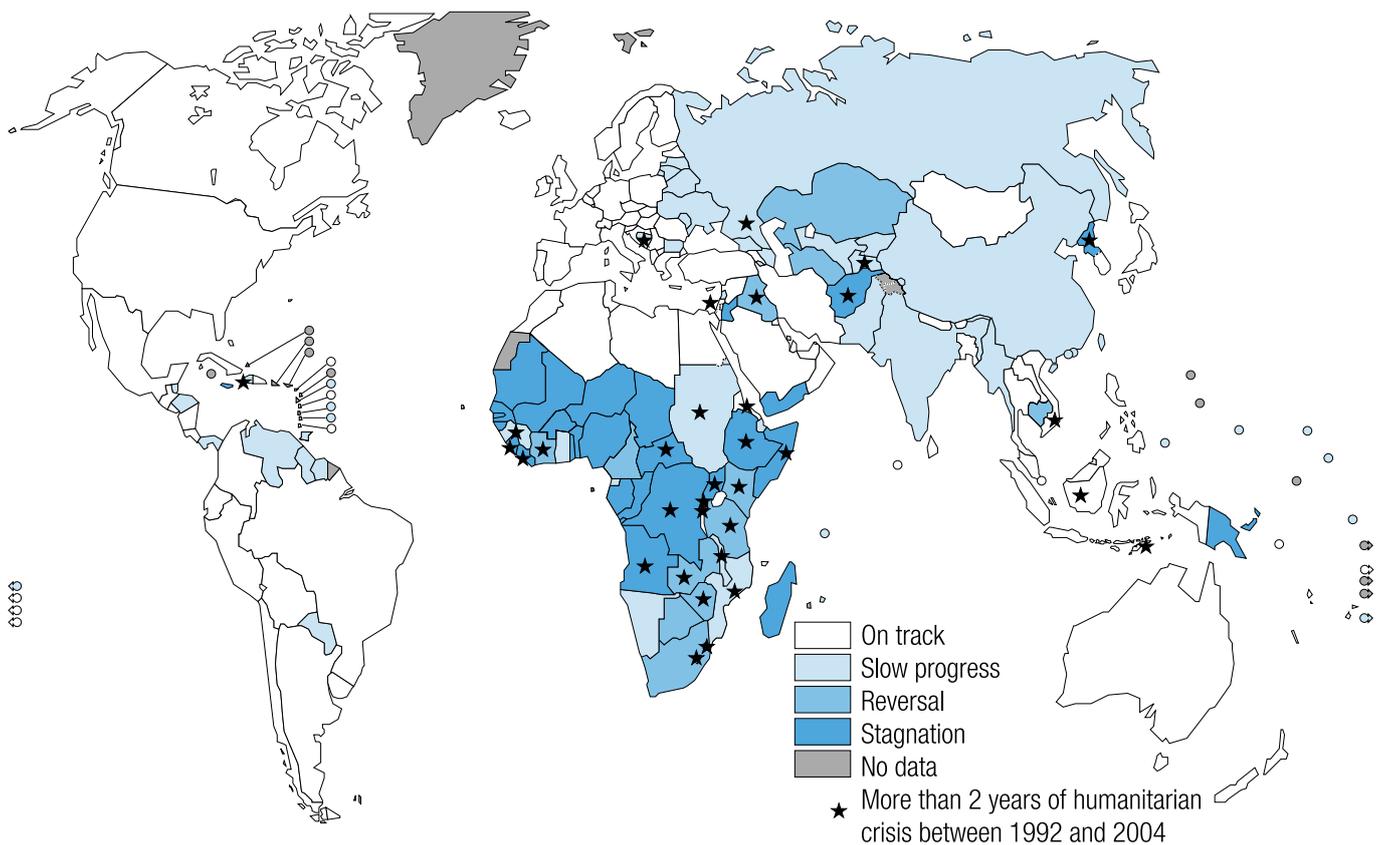
- 51 countries are showing slower progress: the number of deaths among children under five years of age is going down and the mortality rates are dropping, but not fast enough to reach one third of their 1990 level by 2015 unless they significantly accelerate progress during the coming 10 years.

- 93 countries, including most of those in the high income bracket, are “on track” to reduce their 1990 under-five mortality rates by 2015 or sooner.

- More problematic are the 29 countries where mortality rates are “stagnating” – where the number of deaths continues to grow, because modest reductions of mortality rates are too small to keep up with the increasing numbers of births.

- Finally, there are 14 “reversal” countries, where under-five mortality rates went down to an average of 111 in 1990 but have increased since.

Patterns of reduction of under-5 mortality rates, 1990–2003



## CHILD CARE

- ▶ Around 10.6 million children still die every year before reaching their fifth birthday. Almost all of these deaths occur in low-income and middle-income countries.
- ▶ Most deaths among under-fives are still attributable to just a handful of conditions and are avoidable through existing interventions. These are: acute lower respiratory infections, mostly pneumonia (19% of all deaths), diarrhoea (18%), malaria (8%), measles (4%), HIV/AIDS (3%), and neonatal conditions, mainly preterm birth, birth asphyxia, and infections (37%).
- ▶ In 1988 there were some 350 000 polio cases worldwide; by January 2005 there were only 1185 cases reported.
- ▶ Thanks to sustained efforts to promote immunization, deaths from measles decreased by 39% between 1999 and 2003; compared to levels in 1980, measles mortality has declined by 80%.
- ▶ In 1990, less than one fifth of mothers gave exclusive breastfeeding for four months; by 2002 that figure had doubled to 38%.
- ▶ Poor or delayed care-seeking contributes to up to 70% of child deaths.

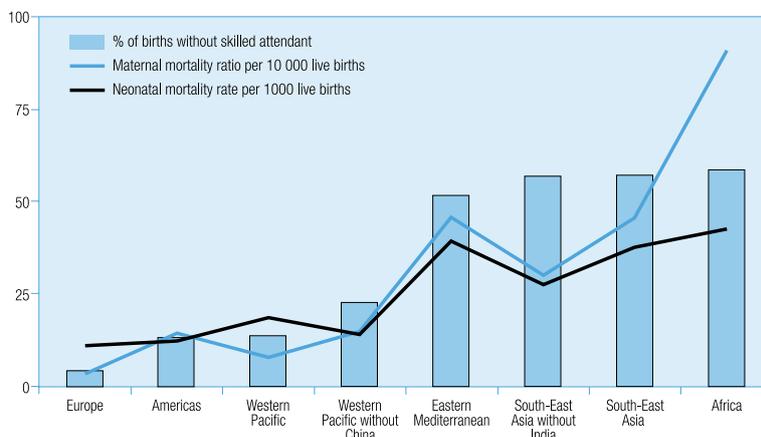
## HEALTH SYSTEM ISSUES

- ▶ In a study of 2.7 million deliveries in seven developing countries, only 32% of women who needed major life-saving intervention received it.
- ▶ Worldwide, 61.1% of births are attended by a professional who, at least in principle, has the skills to do so. However, in sub-Saharan Africa, 60% of women still give birth without a skilled attendant.

- ▶ Childbirth is an event that easily lends itself to overmedicalization. The worldwide epidemic of unnecessary caesarean sections is a typical example. While in many rich countries such unnecessary interventions carry little risk, elsewhere the potential for unintended adverse consequences for both infant and mother are real.
- ▶ In many sub-Saharan African countries, less than 25% of the needed human resources for obstetric care are available. Sustainable ways will have to be devised of offering competitive remuneration and incentive packages that can attract, motivate and retain competent and effective health workers.
- ▶ Each year, about 100 million people in the world are pushed into poverty by catastrophic payments for health care.
- ▶ In the 75 countries that account for most child mortality, US\$ 52.4 billion, in addition to current expenditure, is required to reach all children with a package of essential child health interventions within the next decade.
- ▶ For maternal and newborn care, universal access is further away. However, scenarios for scaling up services to provide a full package of first-level and back-up care to 101 million mothers and their babies in 2015 would cost in the region of US\$ 39 billion additional to current expenditure to implement.

- ▶ Projected staffing requirements for extending coverage of maternal and newborn care assumes the production in the coming 10 years of at least 334 000 additional midwives – or their equivalents – as well as the upgrading of 140 000 health professionals who are currently providing first-level maternal care and of 27 000 doctors who currently do not have the competencies to provide back-up care.

Neonatal and maternal mortality are related to the absence of a skilled birth attendant



**“Children are the future of society and their mothers are guardians of that future. Yet this year, almost 11 million children under five years of age will die from causes that are largely preventable. Among them are 4 million babies who will not survive the first month of life. On top of that 3.3 million babies will be stillborn. At the same time, about half a million women will die in pregnancy, childbirth or soon after.”**  
*The World Health Report 2005*



## World Health Organization

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