Colombia

Country profile

For Demographic and Health Surveys, the years refer to when the Surveys were conducted. Estimates from the Surveys refer to three or five years before the Surveys.

Colombia and the world

1. Maternal mortality ratio: global, regional and country data, 2005

A maternal death is defined as the death of a woman while pregnant or within 42 days of termination of pregnancy from any cause related to the pregnancy or its management but not from accidental or incidental causes. The maternal mortality ratio is the number of maternal deaths per 100,000 live births per year. The ratio in Colombia is 130 per 100,000 births, the same as the average in Latin America and the Caribbean and lower than the global average of 400 per 100,000.

Demographic and health data

3. Total population (in thousands)\(^1\)

4.558 (2006)

2. Lifetime risk of maternal death (1 in N), 2005

The lifetime risk of maternal death is the estimated risk of an individual woman dying from pregnancy or childbirth during her adult lifetime based on maternal mortality and the fertility rate in the country. The lifetime risk of dying from pregnancy-related causes in Colombia is 1 in 290, the same as the average for Latin America and the Caribbean and lower than the global figure of 1 in 92.


A maternal death is defined as the death of a woman while pregnant or within 42 days of termination of pregnancy from any cause related to the pregnancy or its management but not from accidental or incidental causes. The most frequent causes of maternal deaths in Latin America and the Caribbean (for 1997–2002) were haemorrhage (uncontrolled bleeding), hypertensive disorders (high blood pressure) and obstructed labour. There are no country-specific data for Colombia.


5. Total fertility

The total fertility is the average number of children that would be born to a woman over her lifetime. The total fertility rate can be separated into the births that were planned (wanted total fertility rate) and those that were unintended (unwanted total fertility rate). In Colombia, a survey conducted in 2005 indicated a total fertility rate of 2.4 per woman.

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6. Proportions of births by urban versus rural location
Among the women interviewed in a survey conducted in 2005, about 31% of births occurred in rural areas.¹
The total number of births (in thousands): 893 (2005)²

7. Perinatal mortality rate
Perinatal mortality refers to deaths of fetuses in the womb and of newborn babies early after delivery. It includes (1) the death of a fetus in the womb after 22 weeks of gestation and during childbirth and (2) the death of a live-born child within the first seven days of life. The perinatal mortality rate reflects the availability and quality of both maternal and newborn health care. In Colombia, a survey conducted in 2005 indicated a rate of approximately 17 per 1000 pregnancies. The rate was higher in rural than in urban areas.

8. Adolescent pregnancy rate by age for girls 15–19 years old
Adolescent pregnancy is pregnancy in an adolescent girl (girls 10–19 years old). The adolescent pregnancy rate indicates the proportion of adolescent girls who become pregnant among all girls in the same age group in a given year. In Colombia, according to surveys conducted in 2005, women aged 19 had the highest proportion of adolescent pregnancy.

9. Adolescent pregnancy rate by urban versus rural location
In Colombia, surveys conducted in 1995 and 2005 showed that adolescent pregnancy increased slightly in urban areas and decreased slightly in rural areas.

10. Adolescent pregnancy by subregion
Adolescent pregnancy rates vary between different parts of Colombia, with the lowest overall rates in the Atlantic, and the highest in Bogota. Adolescent pregnancy rates can vary for many reasons including cultural norms, socioeconomic deprivation, and education, access to sexual health information and contraceptive services and supplies.
11. Unmet need for family planning, 2004–2005

The unmet need for family planning is the proportion of all women who are at risk of pregnancy and who want to space or limit their childbearing but are not using contraceptives.


12. Family planning: modern contraceptive use by age group

Modern contraceptive methods include oral and injectable hormones, intrauterine devices, diaphragms, hormonal implants, female and male sterilization, spermicides and condoms. The prevalence of contraceptive use has generally increased in all age groups over time, especially among people 45–49 years old, although the rate remains low.

13. Contraceptive use by urban versus rural location

In Colombia, according to a survey conducted in 1995, 59% of currently married women reported using modern contraceptive methods: 63% in urban areas and 52% in rural areas.

14. Contraceptive use by subregion

The number of women using modern contraception increased in all regions of Colombia between 1986 and 1995. According to the survey conducted in 1995, modern contraceptive use was reported to be highest in Bogotá (64.6%).

15. Antenatal care

Antenatal care visits (ANC) include all visits made by pregnant women for reasons relating to pregnancy. According to a survey conducted in 2005, approximately 95% of women received ANC for their latest pregnancy that ended in a live birth. Of the pregnancies that ended in live births, approximately 83% were given ANC by a skilled provider at least once.

16. Utilization of skilled birth attendants

A skilled birth attendant is an accredited health professional – such as a midwife, doctor or nurse – who has been educated and trained to proficiency in the skills needed to manage normal (uncomplicated) pregnancies, childbirth and the immediate postnatal period, and in the identification, management and referral of complications among women and newborns. All women should have access to skilled care during pregnancy and at delivery to ensure that complications are detected and managed. According to a survey conducted in 2005, about 91% of childbirths were assisted by a skilled birth attendant: 97% in urban areas and 77% in rural areas. Many women living in rural areas continue to deliver without skilled attendants, as rates were higher in urban areas.
17. Utilization of skilled birth attendants by wealth quintile

Whether a woman delivers with the assistance of a skilled attendant is highly influenced by how rich she is. In a survey conducted in 2005, 99.3% of women in the highest wealth quintile had a skilled attendant present at birth versus 72.0% of women in the lowest wealth quintile.

![Graph showing percentage of births by skilled attendant by wealth quintile.]


19. Place of delivery

Delivery in a health facility can reduce maternal and neonatal death and morbidity. A survey conducted in 2005 showed that 92.0% of pregnant women gave birth in a health facility and 7.8% of women gave birth at home, with the associated risks.

![Graph showing percentage of births by place of delivery.]


20. Caesarean section rates by urban versus rural location

Caesarean section is a surgical procedure in which incisions are made through a woman’s abdomen and womb to deliver her baby. It is performed whenever abnormal conditions complicate vaginal delivery, threatening the life and health of the mother and/or the baby. According to a survey conducted in 2005, 26.7% of births were delivered by caesarean section in Colombia: 16.3% in rural areas and 31.5% in urban areas.

![Graph showing percentage of births by caesarean section by urban and rural areas.]


21. Caesarean section by subregion

Caesarean section rates also vary between subregions in Colombia. According to a survey conducted in 2005, the caesarean section rates varied from 31% in the Atlàntica subregion to 21% in the Central subregion.

![Graph showing percentage of births by caesarean section by subregion.]


22. Low birth weight

Babies weighing less than 2500 g at birth are considered to have low birth weight. According to a survey conducted in 2005, of those babies who were weighed at birth, approximately 6% were reported to weigh less than 2500 g (2.5 kg). Low-birth-weight babies often face severe short- and long-term health consequences and tend to have higher mortality and morbidity. The proportion of babies who were of low birth weight was higher in urban than in rural areas.

![Graph showing percentage of babies weighing less than 2500 g.]

23. Anaemia in pregnancy

Anaemia refers to abnormally low levels (less than 110 g/l) of haemoglobin (iron-containing oxygen proteins) in the blood. Severe anaemia is an important contributing factor to maternal deaths due to haemorrhage during childbirth. There are no country-specific data for Colombia.

24. Prevention of mother-to-child transmission of HIV

Antiretroviral drugs help to prevent the transmission of HIV from the mother to the child among pregnant women living with HIV. There are no country-specific data for Colombia.

25. Equity – gap in coverage of four major interventions by wealth quintile

Coverage of four key interventions (family planning, maternal and newborn care, immunization and treatment of childhood illness) often varies by wealth quintiles. A coverage gap usually exists between the goal of universal coverage of everyone (universal coverage) in these four intervention areas and actual coverage. Where the gap is larger, it means that there is less adequate coverage. The opposite indicates better coverage. In many countries, the coverage gap is highest for the poorest and is lowest for the richer members of society (wealthiest quintile). Achieving equity requires improving coverage levels in the poorest quintiles. There are no country-specific data for Colombia.

26. Reproductive health

Maternal health  Yes

27. Financial flow

(per capita total expenditure on health at average exchange rate in US dollars) 2005

28. Human resources

The work of at least 23 health workers (doctors, nurses or midwives) per 10,000 population is estimated to be necessary to support the delivery of the basic interventions required to achieve the Millennium Development Goals related to health. Globally, 57 countries have been identified with critical shortages below this minimum. These countries have a severe crisis in human resources for health. Of these 57 countries, 36 are in sub-Saharan Africa. Colombia, with about 19 health workers (as defined above) per 10,000 population, is one of the countries facing this crisis daily, with mothers and children lacking access to proper maternal and child care, HIV/TB and malaria care, and sexual and reproductive health information and services, including skilled birth attendants.

The shortage is exacerbated by staff losses due to migration (in search of a better life) of skilled staff to high-income countries, leaving behind already impoverished health services and systems.

Increasing the human resources around the world and establishing a balance between the services needed and the personnel available and their distribution, are key elements of a well-functioning health system and critical requirements for achieving Millennium Development Goals.

29. Ratification of treaties and support of international consensus

<table>
<thead>
<tr>
<th>Treaty (or Conference)</th>
<th>Status</th>
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<tbody>
<tr>
<td>Convention on the Elimination of All Forms of Discrimination against Women</td>
<td>Yes</td>
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<tr>
<td>Convention on the Rights of the Child</td>
<td>Yes</td>
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<tr>
<td>International Covenant on Economic, Social and Cultural Rights</td>
<td>Yes</td>
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<tr>
<td>International Conference on Population and Development</td>
<td>Yes</td>
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<tr>
<td>Fourth World Conference on Women</td>
<td>Yes</td>
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Sources:

30. Other determinants of health: water, sanitation, communication and road networks

<table>
<thead>
<tr>
<th>Indicator (WHO)</th>
<th>Value</th>
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<tbody>
<tr>
<td>Fixed-line and mobile phone subscribers (per 100 population)</td>
<td>83 (2006)</td>
</tr>
<tr>
<td>Internet users (per 100 population)</td>
<td>15 (2006)</td>
</tr>
<tr>
<td>Roads paved (% of total roads)</td>
<td>Unknown</td>
</tr>
<tr>
<td>Improved water source (% of population with access)</td>
<td>93 (2006)</td>
</tr>
<tr>
<td>Improved sanitation facilities (% of urban population with access)</td>
<td>85% (2006)</td>
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For further information, contact:

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