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Infant Mortality: Sub-Saharan Africa

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Infant Mortality in Sub-Saharan Africa

Infant Mortality

Infant mortality is a noncommunicable condition that can be the result of many different issues. It is measured using the infant mortality rate which refers to the number of infant deaths under one year of age per 1,000 live births. Some of the causes of infant mortality such as birth defects, sudden infant death syndrome, and premature births are primarily out of the control of health professionals and the infant's family (Lehtonen et al., 2017). However, in less developed regions like Sub-Saharan Africa (SSA), many infant deaths are caused by more preventable factors such as lack of access to basic sanitation, clean water, and adequate healthcare (Ester et al., 2011).



<http://mhealthwatch.com/gsma-sub-saharan-africa-leads-the-world-in-mobile-growth-22040/>

Because each case of infant mortality is based on unique factors, gender and race typically do not have a large effect. However, socioeconomic status plays a significant role due to the ways in which it impacts the access that infants and their families have to resources such as vaccines and other types of medical care. As a result, deaths caused by cases of infection and asphyxia are much more prevalent in the

low-income countries of SSA than in developed areas such as North America and Europe (Lehtonen et al., 2017).

Epidemiology

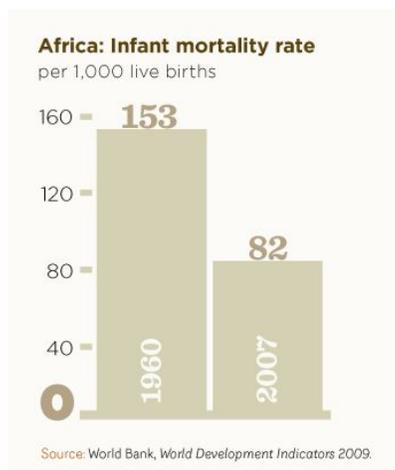
The low-income countries in the SSA region report amongst the highest incidence of infant mortality in the world with Niger reporting 81.10 deaths/1,000 live births, Somalia reporting 94.80 deaths/1,000 live births, and the Central African Republic reporting 86.30 deaths/1,000 live births (CIA, 2018). Additionally, Sub-Saharan countries such as Nigeria, Mali, Guinea-Bissau, and Chad are also included in the top ten highest infant mortality rates in the world (CIA, 2018).

When it comes to the high infant mortality rates of these SSA countries, one of the most influential social determinants of health is access to health services. A study conducted in Ethiopia showed that children who lived more than one and a half hours from a health care center, which included 90% of the children in the study, had three times the risk of death (Yemisrach et al., 2012). This also demonstrates that place and transportation play a large role in the lives of those living in this region. Because the locations where healthcare is available are so widespread, most people do not live within walking distance of such a facility and have no access to any other form of transportation which makes it difficult, if not impossible, for many new and expecting mothers to receive adequate care for themselves and their children.

Solutions

While infant mortality is still a large problem in developing regions like SSA,

there has been marked improvement over the past few years. This improvement is largely due to the Millennium Development Goals (MDGs), a series of goals created by the United Nations with the intention of improving quality of life worldwide, which were implemented in 2000 (MDG, 2016). The fourth MDG aimed to reduce the mortality of children under five by two-thirds before 2015 through methods such as nutrition education programs, community centered initiatives, wider distribution of vaccines, and improved food security (MDG, 2016). While this goal was not met, there has been large improvement. The number of under-five deaths worldwide dropped from 12.7 million in 1990 to less than 6 million in 2015, and decreased by five times as much from 2005-2013 in SSA as it had from 1990-1995 (MDG, 2016).



<http://www.un.org/en/africarenewal/vol24no2-3/half-century-of-change.html>

Although the MDGs have helped to create a significant improvement in infant mortality rates worldwide, there is still room for improvement. One important aspect of health that needs to be addressed more

effectively is access to healthcare. While it will not be an easy task, it is necessary to provide access to things such as sanitary delivery locations, clean water, and vaccines that are accessible by everyone, possibly through setting up smaller clinics in more accessible locations. While this would be a difficult and costly endeavor, it would play a big role in continuing to decrease the infant mortality rate in developing regions such as SSA.

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