Goal 4. Reduce child mortality

4.1. Introduction

Target 4.A of MDG 4 reads: Reduce by two-thirds, between 1990 and 2015, the under-five mortality rate.

Monitoring of this Goal consists of three indicators which in a great extent address the degree of social development, in particular children. It shows the level a given society has and exerts the most fundamental human right to life and health (Jiménez et al., 2007).

<table>
<thead>
<tr>
<th>Type of indicator</th>
<th>N</th>
<th>Indicators name</th>
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<tbody>
<tr>
<td>Meta 4.A. Reduce by two-thirds, between 1990 and 2015, the under-five mortality rate</td>
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<tr>
<td>Oficial 4.1</td>
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<td>Under-five mortality rate</td>
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<td>Oficial 4.2</td>
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<td>Infant mortality rate</td>
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<td>Oficial 4.3</td>
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<td>Proportion of 1 year-olds immunized against measles</td>
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4.2. Progress Evaluation on MDG 4 in Latin America and the Caribbean

Mortality rate for children under-five (Indicator 4.1) is considered by UNICEF as the basic indicator to determine the degree of progress a country has in the areas of social and economic development, and it refers to the number of children who die before reaching five years old, as per 1,000 children born alive.

The Latin American and the Caribbean region holds the most reduced rate for under-five mortality in the developing regions of the world with 27 deaths every 1,000 children born alive. However the region is very distant from developed countries rates which is 6 deaths per 1,000 children born alive.

Regardless of the progress experienced by the region in terms of children health and the positive situation observed in countries such as Cuba and Chile that have adopted successful basic health programs, should the pace of reduction observed in the countries since 1990 continues, 13 of the countries show insufficient progress in order to reach the Goal agreed upon by the countries at the Summit of the Millennium. Haiti, Guyana, and Bolivia have mortality rates for children under-five greater than 50%, where progress is very slow and children survival is very weak, a situation that largely affects the most vulnerable population of children. It should also be mentioned the critical situation lived by Trinidad and Tobago showing negative annual progress rates, that is, children under-five currently have less possibilities of reaching five years old.

Births under inadequate conditions, parasitic and communicable diseases, and diarrheic diseases seem to be causing, at a great extent, death to children under-five. Other factors contributing to this situation is the lack of fresh water and appropriate sanitation (www.unicef.org).
Infant mortality rate (Indicator 4.2) reflects the probability of death between birth and one year-old, and it is expressed by each 1,000 children born alive. This indicator represents mortality rate in children as a whole and there is more historical information available from a large number of countries for comparison purposes (ECLAC, 2008).

The Latin America and Caribbean region shows remarkable progress in terms of infant mortality rate for the period of 1990 – 2006. This period amounts to two-thirds of the time set to reach the Millennium Development Goals. However, should the present pace of reduction continues, the Goal will not be reached by 2015. Mortality rate was reduced for this age group in a rather significant manner, thus increasing life expectancy.

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upon birth. In 2007 the infant mortality rate for this region was the lowest in the developing world and such decrease was lower when compared with the rest of the regions. Hence, their relatively outstanding position in the world context (ECLAC, 2008³).

Achievements in this area are due to the combination of multiple processes such as progress made in high impact, low cost primary care-massive inoculation programs, oral re-hydration therapy, breast feeding and health checks conducted on healthy children- along with sustained socio-economic and demographic changes, increase in coverage of basic services, especially safe drinking water and sanitation, increase of the education level of the population, and decrease in fertility (Jiménez et al., 2007⁴). Nevertheless, the regional average for infant mortality indicates major differences from country to country. While in a group of three countries these levels were under 10%, the indices of the remaining 11 were greater than the regional average amounting to 22 by 1,000 (CEPAL, 2008⁵).

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⁴ Jiménez, Maren et al (December 2007), op. cit.
⁵ United Nations (2008), op. cit.
Like the previous indicator, it is possible to observe the unfavorable situation affecting countries like Haiti, Bolivia, Guyana, and Trinidad and Tobago.

The fight against measles plays an essential role in reducing infant mortality and is a significant part comprising MDG 4 while also contributes considerably to MDGs 5 and 6. Measles is a viral, infectious, eruptive disease, extremely contagious which is mainly communicated through air-borne droplets of saliva that contact the mucosa of the respiratory pathway. There is not any specific treatment for measles and the only way to prevent being infected with the disease is the anti-measles vaccine.
In the “Initiative against measles”\(^6\) a goal of 90% coverage against measles by 2010 was proposed. The Latin American and the Caribbean region not only has reached that goal with a 93% vaccination coverage against measles in 2006, but the coverage at the region is even better than in any other region, even exceeding developed countries (www.unicef.org).

Two-thirds of the countries in the region have already achieved 90% coverage against measles. Efforts made by Ecuador, Peru, and Bolivia are remarkable as they have reached a high increment in the percentage of children under-one year inoculated against measles and have also made progress -since 1990, with annual average rates of 2.3, 2.2, and 1.8 percentage points respectively.

Nevertheless, there still are 10 countries where significant improvement will be needed in the level of coverage of vaccination against measles as to reach the Goal by 2010. These are Venezuela, Bolivia, Haiti, Surinam, Jamaica, Paraguay, Colombia, Bahamas, Trinidad and Tobago and Costa Rica.

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\(^6\) The Initiative against measles is a long term commitment to control and reduce the number of deaths produced by measles worldwide and is conducted by the US Red Cross, United Nations Funds, Centre for Disease Control and Prevention (CDC), the World Health Organization (WHO), and the United Nations Children's Fund (UNICEF).