INFANT MORTALITY

Infant mortality reflects the effect of economic and social conditions of mothers and newborns, the social environment, individual lifestyles as well as the characteristics of health systems. Some countries have low levels of infant mortality and also low levels of health expenditure, suggesting that higher spending is not necessarily a precondition to improve outcomes in this area.

Overview

In most OECD countries, infant mortality is low and there is little difference in rates. A small group of OECD and emerging countries, however, have infant mortality rates above 10 deaths per 1 000 live births. In 2010, rates among OECD countries ranged from less than three deaths per 1 000 live births in Nordic countries (Iceland, Finland, Sweden, Norway), Japan, Portugal, Slovenia and the Czech Republic, up to a high of 10 and 14 in Turkey and Mexico respectively. Infant mortality rates were also relatively high (six or more deaths per 1 000 live births) in Chile and in the United States, although the rates in the United States (and Canada) may be higher than in other countries due to a more complete registration of very premature or low birth weight babies. The average across all OECD countries was 4.3 in 2010.

Around two-thirds of the deaths that occur during the first year of life are neonatal deaths (i.e. during the first four weeks). With an increasing number of women deferring childbearing and a rise in multiple births linked with fertility treatments, the number of preterm births has tended to increase. In a number of higher-income countries, this has contributed to a levelling-off of the downward trend in infant mortality rates over the past few years. For deaths beyond a month (post neonatal mortality), there tends to be a greater range of causes – the most common being SIDS (Sudden Infant Death Syndrome), birth defects, infections and accidents.

All OECD countries have achieved remarkable progress in reducing infant mortality rates from the levels of 1970, when the average was approaching 30 deaths per 1 000 live births, to the current average of 4.3. This equates to a cumulative reduction of 85% since 1970. Portugal has seen its infant mortality rate reduced by over 7% per year on average since 1970, moving from the country with the highest rate in Europe to an infant mortality rate among the lowest in the OECD in 2010. Large reductions in infant mortality rates have also been observed in Korea and Turkey. On the other hand, the reduction in infant mortality rates has been slower in the Netherlands and the United States.

Definition

The infant mortality rate is the number of deaths of children under one year of age in a year, expressed per 1 000 live births. Neonatal mortality refers to the death of children during the first four weeks of life. Post neonatal mortality refers to deaths occurring between the second and the twelfth months of life.

Comparability

Some of the international variation in infant and neonatal mortality rates may be due to variations among countries in registering practices for premature infants. The United States and Canada, for example, are two countries which register a much higher proportion of babies weighing less than 500g. Most countries in principle have no gestational age or weight limits for mortality registration. Limits exist for Norway (where the gestational age required to be counted as a death following a live birth must exceed 12 weeks, a very low threshold) and in the Czech Republic, the Netherlands and Poland (which apply a minimum gestational age of 22 weeks and/or a weight threshold of 500g).

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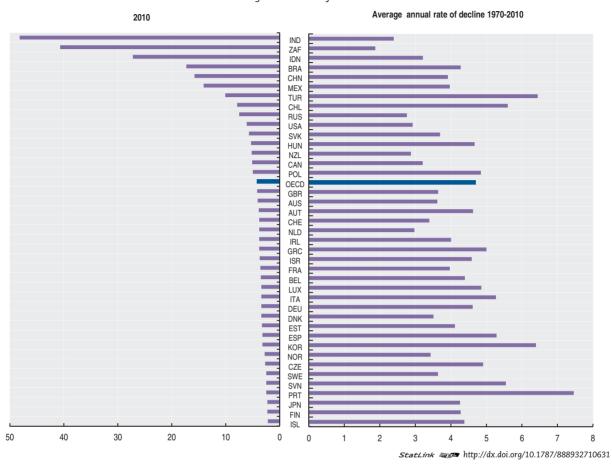
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INFANT MORTALITY

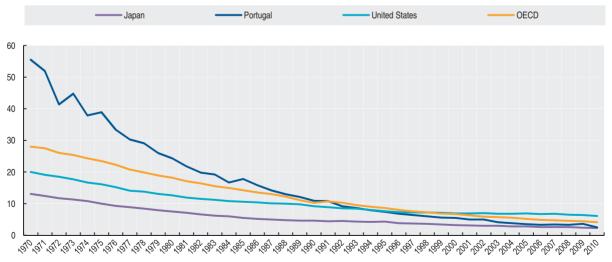
Infant mortality rates

2010 and average annual rate of decline 1970-2010



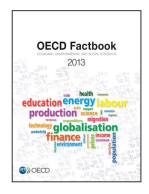
Infant mortality in selected OECD countries

Deaths per 1 000 live births



StatLink http://dx.doi.org/10.1787/888932710650

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