

# Committing to Child Survival: A Promise Renewed

## Progress Report 2013

### EXECUTIVE SUMMARY

UNICEF has committed to producing annual progress reports on child survival in support of the *Committing to Child Survival: A Promise Renewed* global movement. The reports are intended to track progress and promote accountability for global commitments made to children.

The 2013 progress report is the second report in the series. It covers:

- Trends and levels in under-five mortality over the past two decades.
- Analysis of progress towards Millennium Development Goal 4 (MDG 4).
- Causes of and interventions against child mortality.
- Highlights of national and global initiatives by governments, civil society and the private sector to accelerate progress on child survival.
- Statistical tables of child mortality and causes of under-five deaths by country and UNICEF regional classification.

This 2013 progress report is released in conjunction with the child mortality estimates of the United Nations Inter-Agency Group on Mortality Estimation.

#### KEY MESSAGES

**Despite rapid progress in reducing child deaths since 1990, the world is still failing to renew the promise of survival for its most vulnerable citizens.**

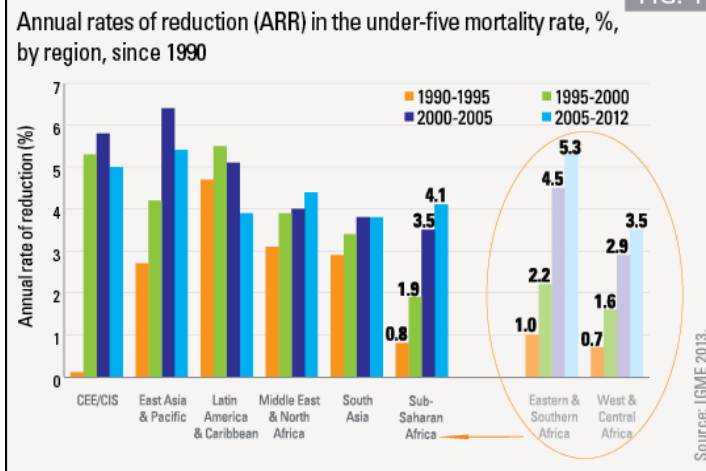
- Global progress in reducing child deaths since 1990 has been significant. The world rate of under-five mortality has roughly halved, from 90 deaths per 1,000 live births in 1990 to 48 per 1,000 in 2012. The annual number of under-five deaths has fallen from 12.6 million to 6.6 million over the same period.
- Put another way, 17,000 fewer children died each day in 2012 than did in 1990 — thanks to more effective and affordable treatments, innovative ways of delivering critical interventions to the poor and excluded, and sustained political commitment. These and other vital child

survival interventions have helped to save an estimated 90 million lives in the past 22 years.

- Encouragingly, the world is currently reducing under-five deaths faster than at any other time during the past two decades. The global annual rate of reduction has steadily accelerated since 1990–1995, when it stood at 1.2 per cent, more than tripling to 3.9 per cent in 2005–2012. Both sub-Saharan African regions — particularly Eastern and Southern Africa but also West and Central Africa — have seen a consistent acceleration in reducing under-five deaths, particularly since 2000. And all regions with the exception of West and Central Africa and sub-Saharan Africa as a whole have at least halved their rates of under-five mortality since 1990. See *Figure 4 on next page*.

**Since 1990 sub-Saharan Africa has experienced continuing acceleration in the decline of under-five mortality**

FIG. 4



- Despite these gains, child survival remains an urgent concern. In 2012, approximately 6.6 million children died before their fifth birthday, at a rate of around 18,000 per day. And the risk of dying before age 5 varies enormously according to where a child is born. In Luxembourg, the under-five mortality rate is just 2 per 1,000 live births; in Sierra Leone, it is 182 per 1,000.
- Since 1990, 216 million children have died before their fifth birthday — more than the current total population of Brazil, the world’s fifth most populous country.

**Without faster progress on reducing preventable diseases, the world will not meet its child survival goal (MDG 4) until 2028 — 13 years after the deadline — and 35 million children will die between 2015 and 2028 who would otherwise have lived had the goal been met on time.**

- To reach MDG 4 — which seeks to reduce the global under-five mortality rate by two thirds between 1990 and 2015 — the pace of reduction would need to quadruple in 2013–2015. And even if the world were to achieve MDG 4 on time, 15 million children under 5 would still die between 2013 and 2015, mostly from preventable causes. To achieve MDG 4 by 2015, an additional 3.5 million children’s lives must be saved between 2013 and 2015 above the current trend rate.
- At the current rate of reduction in under-five mortality, the world will only meet MDG 4 by 2028 — 13 years after the deadline — and 35 million more children will die between 2015 and 2028 whose lives could be saved if the

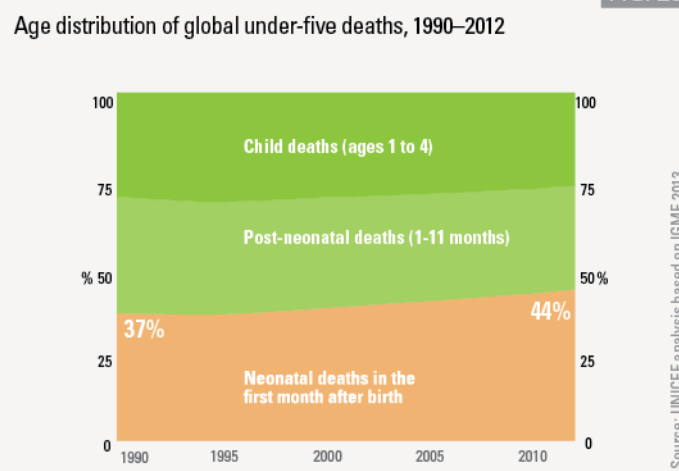
goal were met on time in 2015 and that trend continued. Only two regions — East Asia and Pacific, and Latin America and Caribbean — are currently on track to meet the 2015 deadline for MDG 4.

**Of the 6.6 million under-five deaths in 2012, most were from preventable causes such as pneumonia, diarrhoea or malaria; around 44 per cent of deaths in children under 5 occurred during the neonatal period.**

- Even though there have been strong advances in fighting childhood diseases, pneumonia and diarrhoea remain leading causes of death among children under 5, killing almost 5,000 children under 5 every day. The distribution of these diseases is highly concentrated, with three quarters of global pneumonia and diarrhoea deaths occurring in just 15 countries.
- Malaria remains a significant cause of child death, killing 1,200 children under 5 every day. It remains strongly concentrated in sub-Saharan Africa, where it accounts for 14 per cent of child deaths, despite major gains in life-saving interventions in recent years.
- Despite declining rates globally, neonatal deaths are growing as a share of global under-five deaths amid faster progress in reducing mortality in the post-neonatal period. Most neonatal deaths are preventable. *See Figure 23.*

**Despite declining rates, neonatal deaths are growing as a share of global under-five deaths, amid faster progress in reducing mortality in the post-neonatal period**

FIG. 23



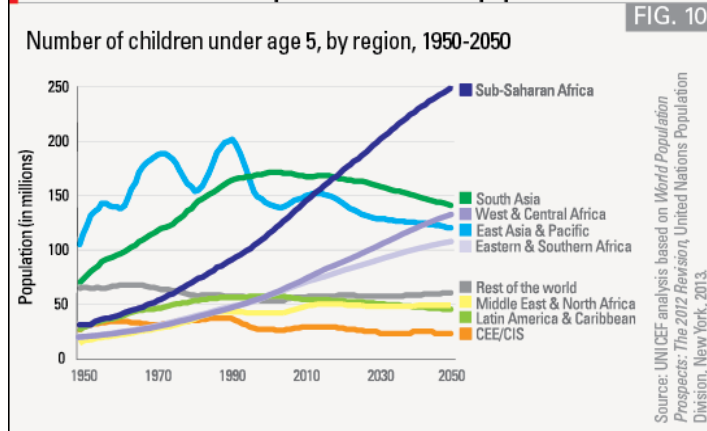
**Accelerating progress in child survival urgently requires greater attention to ending preventable child deaths in sub-Saharan Africa and South Asia, which together account for 4 out of 5 under-five deaths globally.**

- South Asia has made strong progress on reducing preventable child deaths, more than halving its number of deaths among children under 5 since 1990. But nearly one in every three under-five deaths still takes place in this region, and it has not seen a major acceleration in the rate of reduction.
- Sub-Saharan Africa faces a unique and urgent challenge in accelerating progress. By mid-century it will be the region with the single biggest population of under-fives, accounting for 37 per cent of the global total and close to 40 per cent of all live births. And it is the region with least progress on under-five mortality to date. *See Figure 10.*

**West and Central Africa in particular requires a special focus for child survival, as it is lagging behind all other regions, including Eastern and Southern Africa, and has seen virtually no reduction in its annual number of child deaths since 1990.**

- Within sub-Saharan Africa, there is beginning to be a divergence in child survival trends between Eastern and Southern Africa, and West and Central Africa. This has important implications for strategies, priorities, resources and leadership in the global drive to end preventable child deaths.
- Eastern and Southern Africa has managed to reduce its under-five mortality rate by 53 per cent since 1990 — and in the past seven years has been among the best performing regions in the world, reducing under-five mortality at an annual rate of 5.3 per cent in 2005–2012. But it still has high rates of mortality, with 1 in every 13 children dying before the age of 5.
- In contrast, West and Central Africa has seen a drop of just 39 per cent in its under-five mortality rate since 1990, the lowest among all regions. Moreover, its annual rate of reduction, while accelerating, is still the slowest in the world. The region also has the highest rate of mortality, with almost one in every eight children dying before the age of 5.

**Fast progress in reducing the number of under-five deaths in sub-Saharan Africa is imperative as its child population soars**



- West and Central Africa is also the only region not to have at least halved its rate of under-five mortality since 1990, and the only region to have seen *virtually no reduction in the absolute number of children dying* over the past 22 years. Its burden of child deaths now stands at about 2 million annually, almost identical to the level in 1990.

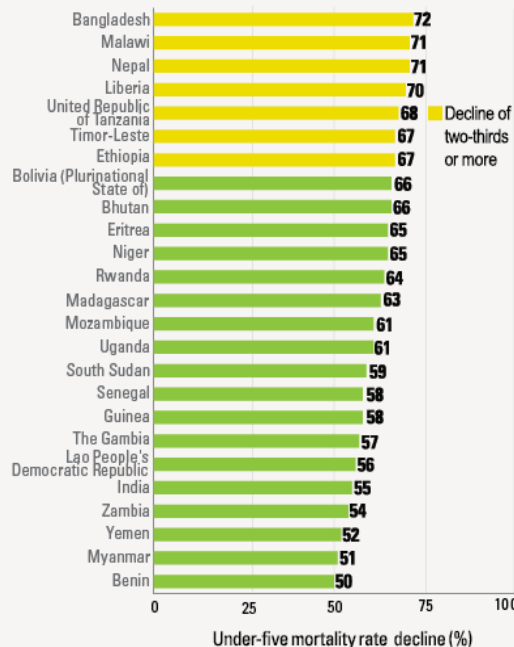
**The good news is that much faster progress is possible. Country experience shows that sharp reductions in preventable child deaths are possible at all levels of national income and in all regions.**

- Some of the world's poorest countries in terms of national income have made the strongest gains in child survival. Seven high-mortality countries (Bangladesh, Ethiopia, Liberia, Malawi, Nepal, Timor-Leste and the United Republic of Tanzania) have already reduced their under-five mortality rates by two thirds or more since 1990; six of these countries are low-income, proving that low national income is not a barrier to making faster and deeper gains in child survival. A further 18 high-mortality countries have also managed to at least halve their under-five mortality rates over the same period. *See Figure 5 on the next page.*
- Many middle-income countries have also made tremendous progress in reducing under-five deaths, and most high-income countries have also seen sharp declines since 1990 — proving that even in high-income countries, rapid declines in child mortality are possible.

**Many countries have made, and are still making, tremendous strides in lowering child mortality**

High-mortality countries\* with greatest percentage declines (≥ 50%) in under-five mortality rate from 1990–2012

FIG. 5



\*Countries with an under-five mortality rate of 40 or more deaths per 1,000 live births in 2012.

Source: IGME 2013.

- New analysis suggests that disparities in under-five mortality rates between the richest and the poorest households have declined in most regions of the world. And under-five mortality rates have fallen among the poorest households in all regions.
- These examples show that it is possible to sharply reduce preventable child deaths, even from initially high rates and among the poorest households, when concerted action, sound strategies, adequate resources and political will are consistently applied in support of child and maternal health.

*A Promise Renewed* is a movement based on shared responsibility for child survival, and is mobilizing and bringing together governments, civil society, the private sector and individuals in the cause of ending preventable child deaths within a generation.

- A Promise Renewed is a global movement that seeks to advance Every Woman Every Child — a strategy launched by United Nations Secretary-General Ban Ki-moon to improve the health of women and children — through action and advocacy to accelerate reductions in preventable maternal, newborn and child deaths.
- Since its launch just over a year ago, *A Promise Renewed* has driven several important developments. A current total of 176 governments have signed the *Committing to Child Survival: A Promise Renewed* pledge and thousands of civil society groups and private individuals have mobilized actions and resources in support of the goal.
- A diverse array of governments, from Bangladesh to Zambia, India to Liberia, Ethiopia to the Democratic Republic of the Congo, are setting bold new targets for maternal, newborn and child survival. Every month, more governments are following suit.
- Around the world, civil society is increasingly holding governments accountable for their promises, facilitated by new communication technologies and tools such as Uganda’s SMS-based U-report.
- *A Promise Renewed* recognizes that leadership, commitment and accountability are vital if we are to end preventable child deaths. And since child survival is increasingly recognized as a shared responsibility, everyone has a role to play.



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More details on *A Promise Renewed* are available at <[www.apromiserenewed.org](http://www.apromiserenewed.org)>.