UNICEF: Social inequality costs the lives of 7,000 newborns daily

Shelley Connor 22 February 2018

A report released by the United Nations International Childhood Emergency Fund (UNICEF) reveals that worldwide, 7,000 newborns die each day. While most of the countries that ranked poorly for newborn mortality are impoverished, fragile states, extreme income inequality in a number of wealthy countries costs the lives of thousands of children each year.

Released on Tuesday, UNICEF's "Every Child Alive: The Urgent Need to End Newborn Deaths" opens by pointing out that 2.6 million babies yearly die before they turn one month old. Of that number, 1 million die on the same day they are born and an additional 2.6 million infants are stillborn every year. While child mortality rates overall have fallen, the UNICEF report asserts, "newborn deaths now account for a greater, and growing, share of all deaths among children younger than 5."

The report ranks the newborn mortality rates of the world's nations based on statistics from 2016. Pakistan, where one in 22 infants dies before turning one month old, had the highest newborn mortality rate. Japan had the lowest infant mortality rate, with only one death per 1,111 births.

Predictably, the countries with the highest newborn mortality rates were those plagued by poverty, war, and lack of sanitation. After Pakistan, the countries with the poorest outcomes for newborns were the Central African Republic, Afghanistan, Somalia, Lesotho, Guinea-Bissau, South Sudan, Cote D'Ivoire, Mali, and Chad. Eight of those countries—Somalia, Central African Republic, Afghanistan, South Sudan, Pakistan, Cote D'Ivoire, Guinea-Bissau, and Mali—are designated as fragile states, characterized by instability, crisis, social inequality, and human flight.

The countries with the lowest newborn mortality rates in 2016 were Japan, Iceland, Singapore, Finland,

Slovenia, Estonia, Cyprus, Republic of Korea (South Korea), Norway and Luxembourg.

That a baby born in Pakistan is almost 50 times more likely to die before reaching one month of age than his or her Japanese counterpart is hardly surprising. A mother in rural Pakistan, after all, faces obstacles to prenatal care, nutrition, and safe, sanitary spaces that mothers in Japan do not. There are also fewer qualified health care providers in poorer countries. In Somalia for instance, there is only one skilled health professional per 1,000 people, while in Norway, there are 218.

Greater wealth, however, does not necessarily translate to lower newborn mortality rates. The average newborn mortality rate in wealthy countries is about 3 deaths per 1,000 births; yet in a high-income developing country such as Trinidad and Tobago, the rate is 13, comparable to that of low income countries.

The United States and Kuwait both had newborn mortality rates of 4; in these high-income countries, newborns fare only marginally better than newborns in the low-to-middle income countries of Ukraine and Sri Lanka, which both had a rate of 5. The United States and the United Kingdom both had higher death rates than Cuba and South Korea. Equatorial Guinea, an upper-middle-income nation, placed among the 20 countries with the highest newborn mortality rates with 32 out 1,000 babies dying before they are one month old.

Most newborn deaths are attributable to birth complications, prematurity, infection, and malnourishment—almost all of which are preventable. Yet as UNICEF states, a nation's wealth makes little difference if there is no "political will" to confront the social issues underlying infant mortality. This is a resounding indictment of countries such as the United

States, which consistently has higher child mortality rates than nations of comparable wealth.

"Keeping Every Child Alive" highlights the vast social inequalities, not only between poor countries and wealthy ones, but also between the poor and the rich in the world's wealthiest nations. The report states that "Babies born to the poorest families are more than 40 per cent more likely to die during the newborn period than those born to the least poor."

"If we consider the root causes, these babies are not dying from medical causes such as prematurity or pneumonia. They are dying because their families are too poor or marginalized to access the care they need," the report notes.

Two of the hallmarks of a fragile state are economic inequality and deterioration of social services. The United States is marked by both; year after year, increasing social inequality and decreased spending on social services serve to underwrite ever expanding military operations and preparations for even larger wars. Seen from this perspective, the US' relatively poor newborn mortality rates are of a piece with the shocking rates of newborn deaths in Afghanistan, Pakistan, and Somalia, countries that have been targeted by the imperialist war machine.

The report concludes: "When we talk in the cold language of statistics—of rates, averages, percentages, indicators—it is easy to forget that we are talking about the lives and deaths of real babies—babies who deserve to survive, to grow up healthy and contribute to their societies. This report shines a light on the fact that millions of newborn babies are denied this opportunity, dying too soon from causes that are almost all preventable."

UNICEF outlines concrete steps that would lower newborn mortality rates; yet without confronting the capitalist system, which is the crux of the global social crisis the report outlines, the world's most vulnerable children remain endangered.



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