

PRESS RELEASE
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Launch of the Social Monitor 2003

**UNICEF Report Finds 'Child Survival Crisis'
in Caucasus and Central Asia**

ROME, 22 July 2003 – Infant mortality rates in nine countries of Eastern Europe and the Commonwealth of Independent States are much higher than official figures have long claimed, according to a new report by UNICEF released today. UNICEF found that in some countries deaths among children less than one year old were four times higher than the official counts.

According to UNICEF's *Social Monitor 2003*, the infant death rate in the Caucasus and Central Asiaⁱ is five times greater than in the rest of Central and Eastern Europe and the Commonwealth of Independent States,ⁱⁱ and 12 times greater than in western industrialised countries.

"Our research shows that infant mortality is a far greater problem in these countries than suggested in the official data," said UNICEF Executive Director Carol Bellamy. "We have looked beyond the official statistics and talked to mothers in their own homes. And their stories reveal a child survival crisis."

Most of the infant deaths are preventable, according to the report, which was produced by UNICEF's Innocenti Research Centre in Florence. UNICEF said a mix of factors such as poverty, poor maternal health and nutrition, infection and poor medical care were to blame for most of the deaths.

"What we have is two distinct problems," Bellamy said. "We have tens of thousands of infant deaths that should be prevented. And we have a systemic failure to properly count the lives being lost. Misunderstanding the scope of what's happening prevents effective action to fix it, so getting the numbers right is a major issue. It's a crucial first step to saving young lives."

The report focuses on infant mortality trends in the eight countries of the Caucasus and Central Asia, plus Romania and Ukraine. It compares the official infant mortality rate in these countries against data gathered in face-to-face interviews with women. In all eight countries of the Caucasus and Central Asia, the estimated infant mortality rate from the surveys is far higher than the official rate. In Azerbaijan, for example, the survey estimate is four times greater – 74 infant deaths for every 1,000 live births, compared to an official rate of 17 per

1,000. Romania also appears to be affected by under-reporting, although on a smaller scale.

“These kinds of inaccurate and misleading statistics can breed complacency,” Bellamy said. “They keep governments and health workers unaware of the risks of child death and the need for action, and they keep parents and community leaders in the dark.”

What’s Going Wrong

Examining the reasons for the gap, the *Social Monitor* highlights three problems: failure to define ‘live birth’ according to accepted international standards, misreporting of infant deaths at the local level, and barriers to birth registration.

The report finds that the death of a baby may go unrecorded because, officially, the baby was never ‘alive’. According to the definition established by the World Health Organization, an infant is alive at birth if breathing or showing any other signs of life, such as muscle movement or heartbeat. Under the Soviet era definition, however, breathing is the only criterion for life. In addition, infants who are born at less than 28 weeks, weighing less than 1,000 grams, or less than 35 centimetres in length are not counted as live births if they die within seven days. This Soviet definition still predominates in many countries of the Commonwealth of Independent States.

Misreporting pushes the official figures down further. The communist system stressed the need to keep infant mortality low, and hospitals and medical staff faced penalties if they reported increases in infant deaths. As a result, they sometimes reported the deaths of babies in their care as miscarriages or stillbirths. With deteriorating conditions in health services and little focus on health care reform, this has proved a hard legacy to overcome and misreporting continues in some countries.

Difficulties in measuring infant mortality are exacerbated by barriers to birth registration. A recent study estimated that about 10 per cent of births in poorer parts of the region each year go unregistered – most of them in the Caucasus and Central Asia. Parents face obstacles to registration such as the costs or difficulty of travel to the nearest civil registration centre, heavy bureaucracy, and the lack of incentives to register births promptly. If a birth is not registered, it is unlikely that a death will be registered.

Why So Many Lives Lost?

By global standards, new surveys show high infant mortality rates in the Caucasus and Central Asia, ranging from 36 per 1,000 live births in Armenia to 89 per 1,000 in Tajikistan.

Many of these deaths are rooted in poverty, linked to malnutrition and health problems among women and resulting complications in pregnancy and childbirth. Poverty restricts access to health care and drug treatment, as one mother in Tajikistan told researchers, when describing the death of her son: “I went to a paediatrician who prescribed drugs, but I did not have any money to purchase drugs. I went to a healer. But the child’s condition became worse. On the seventh day he died.”

Poor medical care is also an issue. Problems cited in the report include a lack of preventive health care, and failure to carry out basic, non-technological tests at

birth, such as weighing the baby or assessing his or her activity, pulse, grimace, appearance and respiration (the APGAR test).

The Report Calls For:

- Adoption and implementation of the WHO definition of live birth in every country
- Improved training of medical staff and better management of health care
- Incentives for parents to promptly register the births of their children

Resumed economic growth in the region presents an opportunity to reduce poverty, improve the well-being of mothers and children, increase investment in basic and preventive health care, and, with international help, upgrade the skills of medical staff and administrators in order to provide effective health care services. Good statistics have a crucial role to play in alerting governments and the public to the magnitude of the problem, in supporting reform and in mobilizing resources and action.

“States have an obligation to give every child the best possible start in life,” said Bellamy. “States in this region have all ratified the Convention on the Rights of the Child. They have all signed up to the Millennium Development Goals and to the goals of a World Fit for Children – goals that can only be reached by tackling the issue of preventable infant death and its causes. It is time to give infant mortality the attention it deserves as a sign of national well-being – a sign that is every bit as important as economic growth and poverty reduction.”

The Social Monitor Covers 27 Countries

The *Social Monitor* is an annual regional report examining the well-being of children in the transition countries of Central and Eastern Europe and the Commonwealth of Independent States.

And while it finds the risk of infant death is low in some of the 27 countries in the region, such as the Czech Republic, official figures suggest that in the region as a whole, at least 60,000 babies died before their first birthday in 2001. This is three times greater than the number of infant deaths in the European Union, which has only slightly fewer births each year.

In addition, *Social Monitor 2003* looks at other trends affecting children in the region.

- It finds economic growth but continuing poverty, with almost 11 million children in poverty in Russia alone.
- It highlights the debt crisis, with Georgia, Kyrgyzstan, Moldova and Tajikistan spending at least one-third of government expenditure on debt servicing.
- It reports three million refugees, asylum seekers, and displaced people in the region at the end of 2001, with numbers falling in the countries of the former Yugoslavia but rising in Russia and Uzbekistan.
- It finds that there have been at least 100,000 adoptions since 1989 from the region, which now accounts for one-third of the world total and for most of the increase in intercountry adoption to industrialized countries in recent years.
- And an examination of latest trends in HIV/AIDS reveals that only 1 in every 25 people registered with HIV in the region receives antiretroviral therapy.

The report includes a statistical annex covering a broad range of indicators for the years 1989 to 2002, and statistical profiles on each country in the region.

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Note to Editors

The *Social Monitor* is produced by the UNICEF Innocenti Research Centre in Florence. Embargoed media materials, including information on UNICEF activities on infant mortality and downloadable copies of the report in English and Russian, are available from the IRC Newsroom:

<http://www.unicef-icdc.org/presscentre/indexNewsroom.html>

Early childhood care – to give every child the best start in life – is a major UNICEF priority, along with immunization, education for all boys and girls, preventing the spread of HIV/AIDS among young people, and protection of children from violence, abuse, and exploitation.

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ⁱ Armenia, Azerbaijan, Georgia, Kazakhstan, Kyrgyz Republic, Tajikistan, Turkmenistan, Uzbekistan

ⁱⁱ The 27 countries of Central and Eastern Europe, the Commonwealth of Independent States and the Baltics are: Albania, Armenia, Azerbaijan, Belarus, Bosnia and Herzegovina, Bulgaria, Croatia, Czech Republic, Estonia, Georgia, Hungary, Kazakhstan, Kyrgyz Republic, Latvia, Lithuania, former Yugoslav Republic of Macedonia, Moldova, Poland, Romania, Russian Federation, Serbia and Montenegro, Slovakia, Slovenia, Tajikistan, Turkmenistan, Ukraine, Uzbekistan.