We strive towards the day when nations will be judged not by their military or economic strength, nor by the splendour of their capital cities and public buildings, but by the well-being of their children.

Progress For Children is a contribution towards that day.

PROGRESS FOR CHILDREN

A Child Survival Report Card VOL 1 2004

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CHILD SURVIVAL LOF EVERYTHING U

The commitment to child survival is as old as UNICEF. In the 1940s and 1950s, UNICEF provided food and basic health interventions to children in war-torn countries. In the 1960s and 1970s, UNICEF expanded its work into every developing nation where children's lives were at risk. In the 1980s, UNICEF helped inspire a global child survival 'revolution'. And in the 1990s, UNICEF led efforts to help the world achieve the first set of goals focused on children's health and well-being.

Today UNICEF continues its focus on saving children's lives and improving their chances of becoming productive citizens. Underpinning the Millennium Development Goals, UNICEF's priorities are central to the programme of action adopted by the nations of the world at the UN Special Session on Children in 2002.

This report addresses the fourth Millennium Development Goal which aims for a two-thirds reduction of under-five mortality rates between 1990 and 2015. It reveals global gains in child survival since 1990, but also significant discrepancies within and across countries and regions.

The 50 per cent reduction in under-five mortality between 1960 and 2000 represents great progress, but much more needs to be done. A number of factors contribute to persistent child mortality – the estimated 11 million totally preventable child deaths that still occur every year. Some are the direct results of illness – acute respiratory infections, diarrhoea, malaria, measles – and others are due to indirect causes such as conflict, marginalization and HIV/AIDS. Malnutrition and the lack of safe water and sanitation contribute to more than half of these deaths.

IES AT THE HEART NICEF DOES

The world knows what it takes to improve child health and survival, and that millions of young children can be saved by basic, cost-effective measures such as vaccines, antibiotics, micronutrient supplementation, insecticide-treated mosquito nets and improved breastfeeding practices. Yet millions of the world's young citizens still die because they lack access to basic services.

UNICEF's 60 years of experience tell us that we can turn back child mortality and meet the Millennium Development Goals by 2015. Already, we've seen that vitamin A supplementation can save over a quarter of a million lives a year; oral rehydration therapy can prevent 1 million deaths; and immunization programmes can protect the lives of nearly 4 million children.

Over the last 20 years, UNICEF has made tremendous progress in addressing child mortality by fighting its underlying causes and working to change the world for children by mobilizing every stratum of society – from local community groups to Heads of State.

Progress For Children will be a critical tool – a report card to measure progress in the lead up to 2015 – in the fight to save millions of children's lives and ensure their healthy future. UNICEF will release these studies periodically to ensure that children are at the centre of the global development agenda.

Carol Bellamy
Executive Director, UNICEF



According to UNICEF projections, 53 developing countries will meet Millennium Development Goal No. 4, which aims by 2015 to have reduced the under-five mortality rate of 1990 by two thirds.

Children are half as likely to die before age five today as 40 years ago

At the start of the 1960s, nearly one in five children died before they were five years old. In 2002, the global under-five mortality rate had dropped to less than 1 in 12 – a rate still unacceptably high as it represents an estimated 11 million preventable deaths each year.

But progress is uneven

A child's chance of survival differs sharply depending on where they are born. In 2002, 7 of every 1,000 children in industrialized countries died before they were five. At the other extreme, in sub-Saharan

Africa, 174 of every 1,000 children died before celebrating their fifth birthday. In South Asia, 97 of 1,000 children died before they were five.

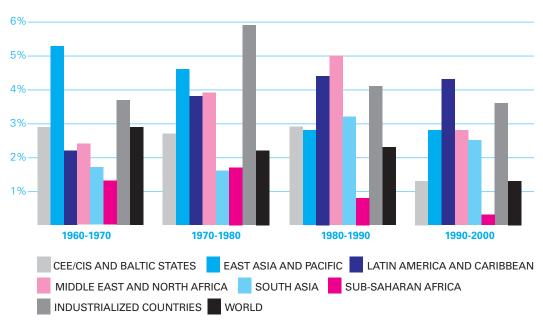
And a promise will be broken

In 2000, as part of the Millennium Development Goals, world governments pledged that by 2015 they will have reduced the 1990 under-five mortality rate by two thirds – from 93 children of every 1,000 in 1990 dying before they were five to 31 of every 1,000 in 2015.

As the rate of progress lags Setting MDG 4 assumed an

average annual reduction rate (AARR) of 4.4 per cent in the under-five mortality rate each year between 1990 and 2015. Each year a country fell below the 4.4 rate called for greater reduction in the remaining years. When the target was set late in 2000, it was already evident that countries that had faltered in the 1990s would need to intensify their efforts at reducing child deaths between 2000 and 2015 in some cases doubling the AARR if they were to have a chance of meeting the goal.

Average annual reduction rate of child mortality in the past 40 years



Few developing countries will meet MDG 4

The latest year for which firm estimates of underfive mortality are widely available is 2002. This is also the year that roughly marks the midpoint of the MDG target period, 1990-2015, so it is well suited to serve as a reference point for assessing progress.

It now seems likely that 90 countries, 53 of them developing nations, could reduce child mortality by two thirds by 2015 - if they maintain their current annual reduction rate. But 98 developing countries lag behind. (See map, pages 2-3.)

Wide variations in progress

Reduction in under-five mortality varies between regions. While the rate of children dying before five fell by over a third in Latin America and the Caribbean between 1990 and 2002, in sub-Saharan Africa, where almost half of under-five deaths occurred, there has been only slight progress in reducing the rate.

The disturbing truth is that 1 out of every 6 children born in sub-Saharan Africa dies before the age of five, compared to 1 out of every 29 children in Latin America and the Caribbean and 1 out of every 143 children in industrialized countries.

Although steady progress has been made in CEE/CIS, South Asia and East Asia and the Pacific since the early 1990s, it has been at an average annual reduction rate that would fall short of ensuring MDG 4 is met. UNICEF estimates that, at present rates, under-five mortality will be reduced by approximately 23 per cent globally over the 1990-2015 period - well below the goal of a two-thirds reduction.

With developed countries accounting for 37 of the 90 countries that are on target, efforts to reduce under-five mortality in developing countries will need to intensify if the 2015 global target is to be achieved. The global AARR will have to reach 7.5 per cent (up from the original AARR of 4.4 per cent implied by the 25-year target), and stay at that pace in the 2002-2015 period.

Where U5MR rose

A large number of countries have seen mortality rates increase since 1990. While most of these countries are located in sub-Saharan Africa, also featured are Iraq and former members of the Soviet Union.

Where U5MR stagnated

Only slightly less disturbing is the group of countries that have failed to register any improvement in underfive mortality in the first half of the MDG period. These countries almost all come from the same regions: sub-Saharan Africa and CEE/CIS and the Baltic States. The exception is Jamaica.

Where efforts must double

In those countries where the under-five mortality rate either rose or stagnated, efforts will have to be doubled, particularly those countries that have experienced a rise in child mortality rates since 1990. In some extreme cases, Botswana, Iraq and Zimbabwe, for example, efforts will need to almost triple.

Causes of young deaths

Knowing why so many children die before they are five is important for targeting interventions that will save their lives and also for monitoring progress towards MDG 4.

Poor neonatal conditions are, according to WHO, the single most prominent cause of young deaths, followed by infectious and parasitic diseases, particularly in developing countries. Acute respiratory infections and diarrhoea together are at the root of approximately one third of child deaths.

Significant progress has been made in reducing measles deaths and the goal of decreasing them by half by 2005 is likely to be met. However, measles still accounts for around 5 per cent of child deaths.

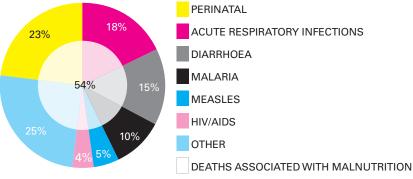
Going backwards

Countries where the under-five mortality rate has increased

Kazakhstan

Kenya

Under-five deaths in developing countries by cause, 2002



Source: World Health Organization.

With HIV/AIDS on the rise, as evidenced by the increasing numbers of children orphaned by the epidemic - most visibly in sub-Saharan Africa - and only modest inroads achieved in countering malaria, which accounts for more child deaths than HIV/AIDS, the threats facing young children's chances of survival are as grave as ever.

Malnutrition is a major issue affecting many children; it contributes to more than half of all child deaths worldwide.

Stagnating

Countries where the under-five mortality rate has remained static since 1990

Angola Azerbaijan Bulgaria Burundi

Central African Republic Democratic People's Republic of Korea

Democratic Republic of the Congo

Georgia Jamaica Latvia Liberia Mauritania Rwanda

Russian Federation Sao Tome and Principe

Somalia Turkmenistan

United Republic of Tanzania

Zambia Source: UNICEF.

Forging ahead

Countries currently on schedule to reduce under-five mortality by two thirds between 1990 and 2015*

Armenia Israel Austria Libyan Arab Jamahiriya **Bahamas** Luxembourg Bangladesh Malaysia Bhutan Malta Bolivia Morocco Brunei Darussalam **New Zealand** Cyprus Norway Czech Republic Oman Denmark Peru Dominican **Philippines** Republic **Poland** Ecuador **Portugal** Egypt

Republic of Korea

Germany Singapore Greece Slovenia Hungary Sweden Indonesia Tunisia Islamic Republic Turkey

of Iran

Source: UNICEF.

^{*}Countries whose average annual reduction rate of under-five deaths for 1990-2002 reached, or exceeded, 4.4 per cent, the implied annual rate required to meet MDG 4 by 2015.

Forty-two per cent of the children who die before they are five are in sub-Saharan Africa.

Here, the AARR has slowed sharply, falling from 1.3 per cent in 1960-1990 to just 0.3 per cent in the 1990-2002 period.

In 18 countries in the region, the under-five mortality rate has either stayed the same or worsened since 1990.

The causes

Although poor perinatal conditions are still the main cause of infants' dying in the region, infections and diseases are the main killers of children under five.

the population are 1.7 times more likely to die before the age of five than the wealthiest 20 per cent, with an excess under-five mortality rate of 80 deaths per thousand live births (181 vs. 100 respectively).

The greatest challenge

Sub-Saharan Africa faces the greatest challenge of any region in meeting MDG 4. The region will need to raise its AARR to 8.2 per cent, almost double the rate originally required, if it is to make the 2015 target.

SUB-SAHARAN AF EFFORTS MUST RE

HIV/AIDS is responsible for 8 per cent of all under-five deaths in the region, more than double the global average.

The under-five mortality rates in most of the sub-Saharan countries appear to be less affected by household wealth than in other developing regions. This is in part explained by the high levels of absolute poverty still prevailing in these countries, which are translated into the lack of adequate and essential services at the household level. and lack of health infrastructure and basic resources. However, children born into the poorest 20 per cent of

5% Middle East/North Africa

42% Sub-Saharan Africa

4% Latin America/ Caribbean

1% Industrialized countries

2% CEE/CIS and Baltic States

13% East Asia/Pacific

RICA: DOUBLE

Sub-Saharan Africa: Countries where child mortality has stayed the same or risen, 1990-2002

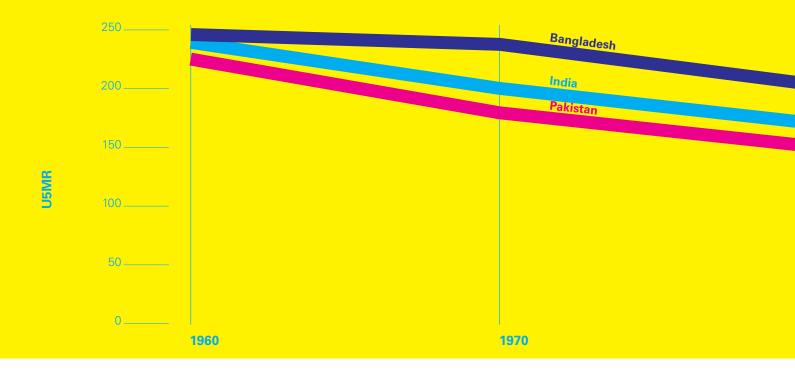
Angola
Botswana
Burundi
Cameroon
Central
African
Republic
Côte d'Ivoire

Democratic Republic of the Congo Kenya Liberia Mauritania

Rwanda Sao Tome and Principe Somalia
South Africa
Swaziland
United
Republic of
Tanzania
Zambia
Zimbabwe

Global under-five deaths by region, 2002

Source: UNICEF.



SOUTH ASIA: FALL

Every one of the nine countries in South Asia has made progress in reducing child mortality rates since 1990. But some still struggle to attain the required pace of reduction.

Where the children are

India's one billion plus population, together with young and large populations in Bangladesh and Pakistan, means that the region has the world's second largest population of children. Of the three countries, only Bangladesh, with a lower rate of child mortality than either India or Pakistan, is on track to meet MDG 4. It reduced under-five deaths to almost half of its 1990 level by 2002, at an average annual rate of reduction of 5.2 per cent.

In contrast, the slowdown in child mortality reduction seen in India and Pakistan in the 1990s has left them lagging behind. India must accelerate its annual rate of reduction to over 6 per cent to meet MDG 4, and for Pakistan, the required rate is 7 per cent.

Other countries

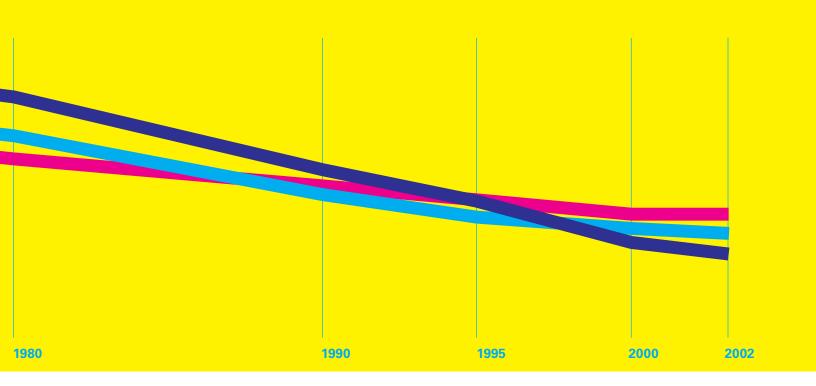
Of the remaining countries in the region, only Bhutan is on schedule to meet MDG 4. While Nepal is not far behind, the Maldives and Sri Lanka will have to intensify their efforts. Child mortality in Afghanistan was virtually unchanged in 2002 compared with 1990, and although the situation

is likely to have improved in the past year, the country is still facing the daunting challenge of reducing child deaths by 8 per cent a year to achieve MDG 4.

The causes

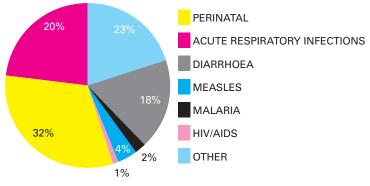
In South Asia, poor perinatal care is the leading reason for children under five dying, accounting for almost one third of all their deaths. Acute respiratory infections and diarrhoea are the other main killers. In proportionate terms, diarrhoea as a single proximate cause of child deaths is at its worst in the South Asia region.

According to the latest available statistics, HIV/AIDS is not yet a major cause of child mortality in the region; only 1 per cent of deaths are linked to the disease. However, rates of HIV infection are likely to increase in the coming years, adding to the burden faced by the region in its attempts to reduce child mortality.



ING BEHIND





Source: World Health Organization.

While most countries will meet MDG 4, eight are falling behind.

Almost two thirds of the 21 countries in the region of Middle East and North Africa were on schedule to meet MDG 4 as of 2002. The five North African countries (Algeria, Egypt, Libyan Arab Jamahiriya, Morocco and Tunisia) have demonstrated significant reductions in under-five mortality in the 1990s, averaging an annual reduction rate of 6.6 per cent.

Each has made substantial progress in providing services to the population to

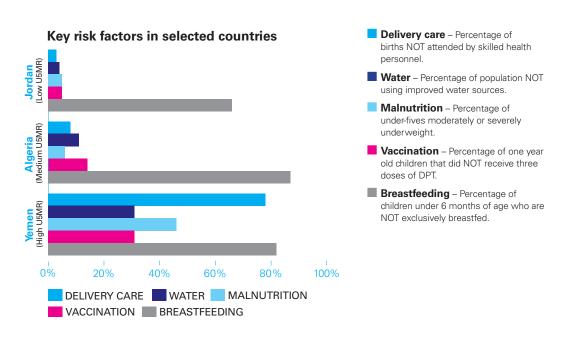
- reduce the levels of malnutrition to below 10%
- increase the coverage of water and sanitation to above 80%
- increase the immunization coverage to 90% of children with 3 doses of DPT and more than 80% of children vaccinated against measles
- provide antenatal care during pregnancy and skilled attendants at delivery

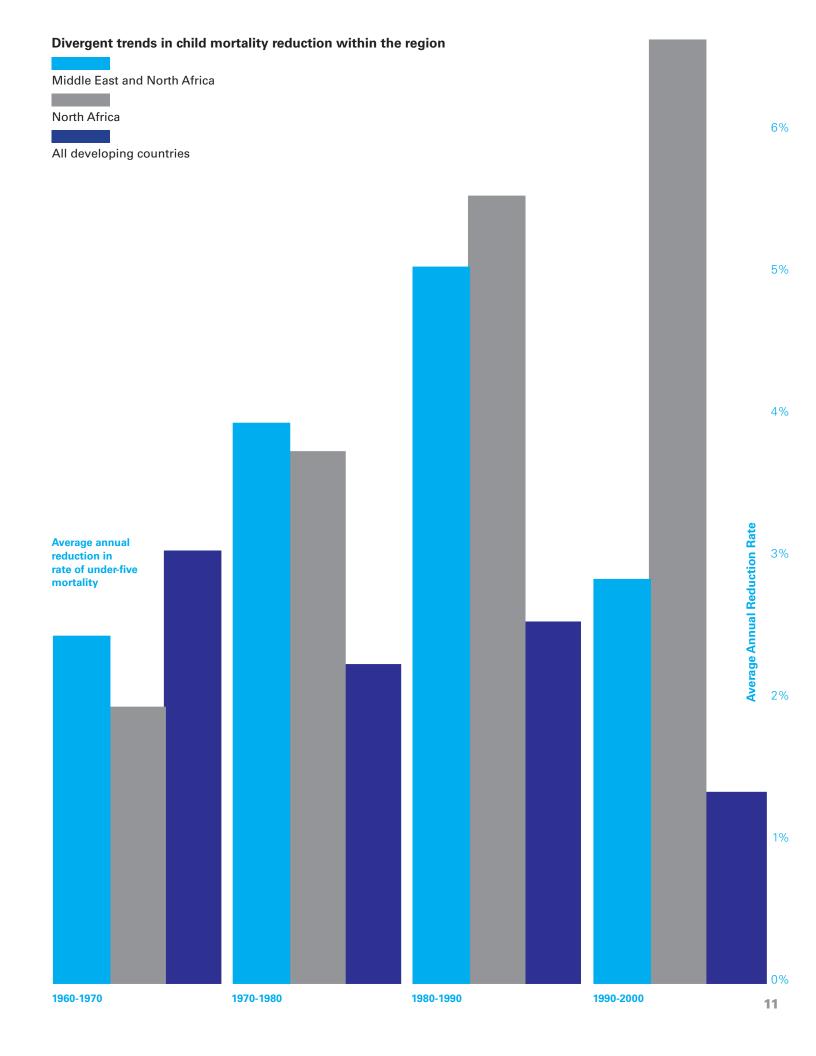
Of the eight countries falling behind, three – Bahrain, Jordan and Lebanon – have an under-five mortality rate of less than 1 child in 30, compared with the regional average of 1 child in 17. By contrast, the reductions in Sudan and Yemen are less than 2.5 per cent.

1 in 10

In three countries of the region – Djibouti, Iraq and Yemen – 1 in every 10 children dies before the age of five. All three, especially Iraq, will need to increase their efforts markedly to meet MDG 4.

MIDDLE EAST AND NORTH AFRICA: A MIXED PICTURE





The East Asia and Pacific region has cut child mortality rates by over 75 per cent since 1960, but momentum has slowed.

At present, only 43 children out of every 1,000 live births do not reach their fifth birthday.

Unlike Latin America and the Caribbean, however, the momentum of reduction has slowed sharply over the past two decades. Between 1980 and 2000, the annual reduction rate averaged just 2.8 per cent, compared with almost 5 per cent in 1960s and 1970s.

The slowdown mostly reflects trends in China. At 39 per 1,000 live births, China's child mortality rate is half of the global average and below any regional average apart from Latin America and the Caribbean. However, in the past two decades progress on reducing child mortality has slowed sharply, and was less than 2 per cent during the 1990s.

In contrast, under-five mortality has fallen rapidly in Indonesia, the second most populous country in the region. Indonesia managed to halve its infant mortality from 91 per 1,000 live births in 1990 to just 45 in 2002, a level approaching China's rate for the same year. Indonesia remains on schedule to meet MDG 4.

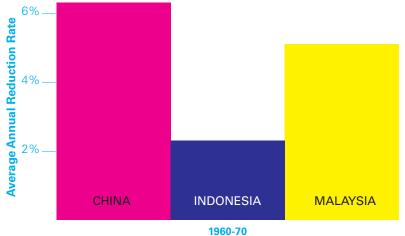
Other than Indonesia, the best performing countries in the region over the past decade are those that enjoyed the lowest levels of child mortality in 1990: Brunei Darussalam, Malaysia, Republic of Korea and Singapore.

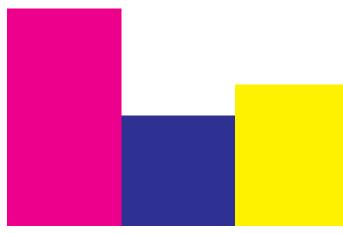
Their success is all the more impressive given the relatively low starting base and the sharp constraints on public finances imposed by the Asian financial crisis of 1997-1999. All four countries have managed to reduce their child mortality rates to levels comparable to those in industrialized countries. The Philippines also remains on schedule to meet MDG 4, having cut its child mortality rate by 40 per cent.

EASTASIA AND PA WORRYING SLOW

East Asia and Pacific: Differing under-five mortality rate reductions in three countries

8% ___

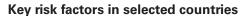


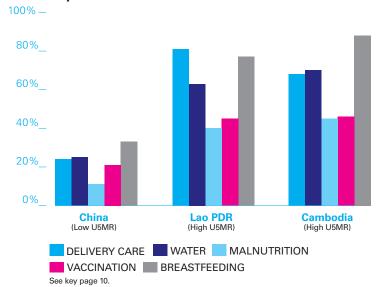


70 1970-80

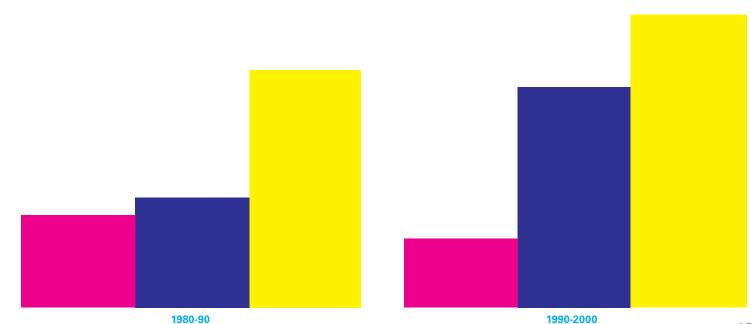
But greater efforts to lower child mortality are required in the Pacific, as all the islands are falling behind.

Cambodia, where one in every seven children does not reach the age of five, is, sadly, the only country in the region that has seen an increase in child mortality since 1990. Progress has been slow in other countries with high child mortality rates, such as Myanmar and Papua New Guinea, and has stagnated in the Democratic People's Republic of Korea.

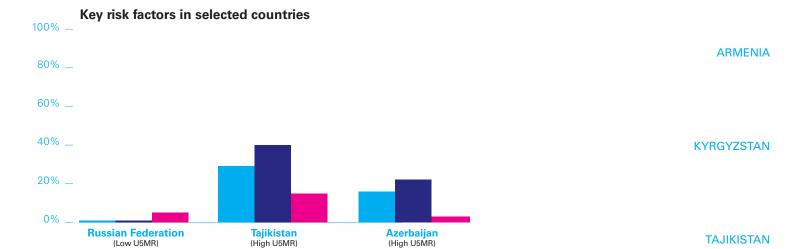




CIFIC: DOWN



13



RUSSIAN FEDERATION

CEE/CIS AND BALT DROPPING BACK

-2%

TURKMENISTAN

UZBEKISTAN

KAZAKHSTAN

0%

Average Annual Reduction Rate 1990-2002

-3%

-4%

DELIVERY CARE WATER VACCINATION

See key page 10.

14

IC STATES:

With only eight exceptions, most countries will not meet MDG 4.

The average annual rate of reduction slowed to 1.3 per cent in the 1990s, far below the 3.6 per cent recorded by industrialized countries. Indeed, the region only managed to reduce its child mortality rate by seven points between 1990 and 2002, from 48 to 41. This contrasts sharply with the 20-point reduction in Latin America and the Caribbean.

1%

Child mortality rates are notably higher in the countries of Central Asia than in those of Central and Eastern Europe. The probability of a child dying before the age of five is three times more likely in Central Asian countries than those in Central and Eastern Europe.

2%

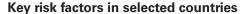
Albania, Armenia, Croatia Lithuania, Romania, Serbia and Montenegro, the former Yugoslav Republic of Macedonia and Turkey are on target. All other countries in the region are behind schedule on the child mortality MDG. The Russian Federation, the largest country in the region, with relatively low levels of mortality has nonetheless barely made any advances on reducing child mortality over the past decade. In contrast, Turkey has made impressive advances, almost halving its under-five mortality rate.

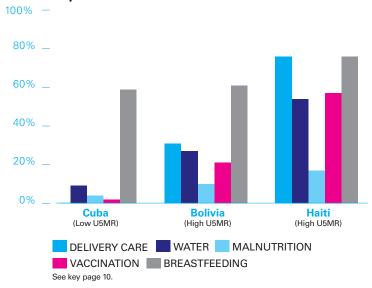
3%

0%

15

4%





2%

LATIN AMERICA A THE CARIBBEAN: A

Average annual reduction in rate of under-five mortality

0%

1960-70

1970-80

1980-90

1990-2000

1%

Progress in reducing child deaths in Latin America and the Caribbean has been substantial in the past 40 years.

In 1960, 153 out of every 1,000 children did not make it to their fifth birthday; by 2002, that figure was 34.

Unlike most other regions, Latin America and the Caribbean was able to maintain a steady pace of reduction during the 1990s, posting an annual reduction rate of 4 per cent over the course of the decade. No other region managed to maintain an average annual reduction rate of 3 per cent or above in that period. Despite these advances, there is still much work to do to reach levels approaching those of industrialized countries, where the probability of a child dying before the age of five is less than 1 per cent.

Brazil, the country with the largest child population in the region, is on schedule to meet the MDG, having managed to reduce child deaths by just under 4.3 per cent between 1990-2002.

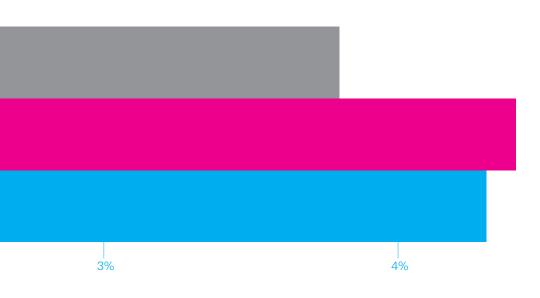
Although Mexico's average annual rate of reduction was smaller, at 3.8 per cent, it was from a lower base, leaving the U5MR at just 29 per 1,000 live births – the lowest rate among developing countries with populations in excess of 100 million. If this rate is maintained, Mexico will meet MDG 4.

The countries of Central America (with the exception of Costa Rica) and the impoverished countries of northern South America, Guyana and Suriname, are among those with the highest rates of child mortality in the region.

Infant mortality is also high in Bolivia, despite the fact that it remains on schedule to meet the MDG. Haiti is the only country in the region where child mortality is greater than 1 in 10.

Progress on reducing child deaths stalled in Jamaica during the 1990s. The country, which suffered a prolonged recession, is the only one in the hemisphere that failed to register a reduction in U5MR. Without a near doubling of effort, it will not meet MDG 4.

ND LMOST



Despite relatively low rates of child mortality, there is room for improvement.

Industrialized countries have achieved substantial reductions in child mortality since 1990.

In 1990, 1 in 100 children died before reaching five years of age; by 2002 that rate had improved to 1 in 143. Scandinavian countries enjoy the lowest rate of child mortality.

The under-five mortality rate of 20 of the 36 industrialized

rates, the specific goal of reducing levels of under five mortality by two thirds may not need the same emphasis.

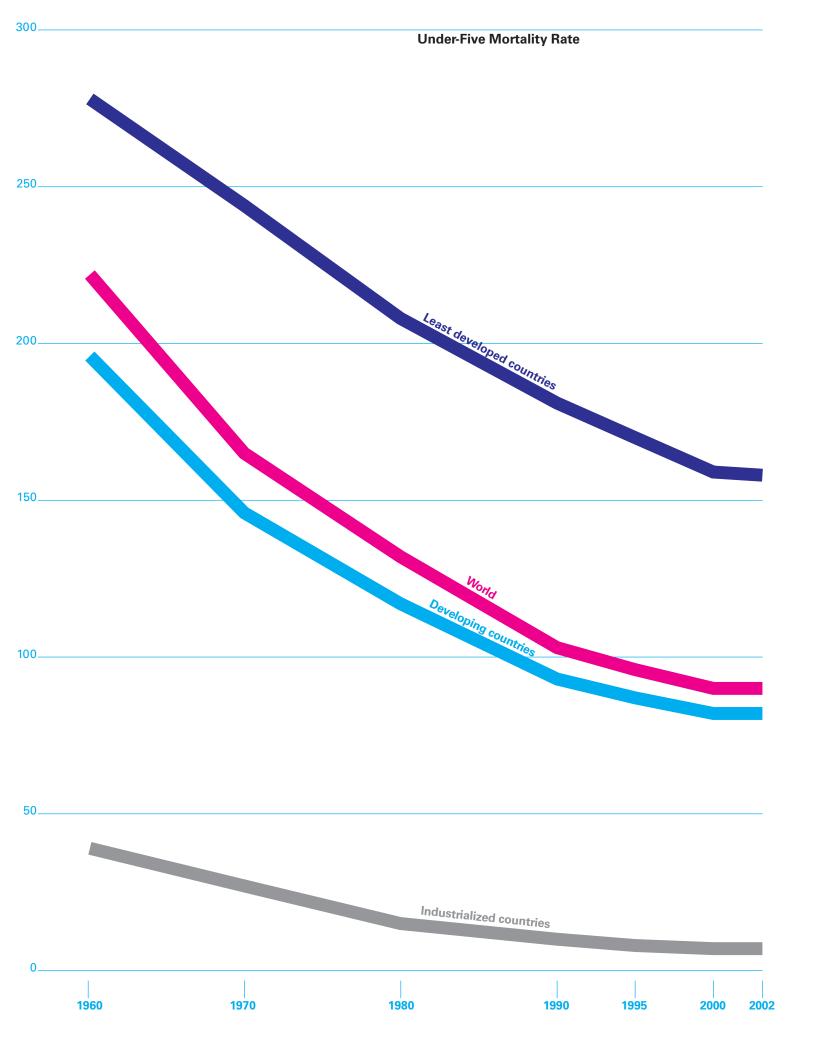
The steady decline in mortality rates in the industrialized countries during the period 1990-2003 has been aided by new and costly medicines, technology, and interventions. This is in sharp contrast to the situation in developing countries,

INDUSTRIALIZED COUNTRIES: ROOM FOR IMPROVEMENT

countries is double that of the best performing country, Sweden, where the rate is just 3 out of every 1,000 live births. In Hungary, Poland and Slovakia, child mortality rates are conspicuously higher than the region's average.

Some of the industrialized countries still have work ahead of them to further reduce under five mortality rates. Yet for those countries with the lowest mortality

which are still struggling to control many preventable causes of mortality, including communicable diseases, maternal and perinatal conditions and nutritional deficiencies, violence and injuries.



(a) (s. \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	%
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130 700 15 % 7003	SON

OUD CALLADAM AFRICA					
SUB-SAHARAN AFRICA					
Botswana	58	110	19	-5.3	13.4
Zimbabwe	80	123	27	-3.6	11.8
Swaziland	110	149	37	-2.5	10.8
Kenya	97	122	32	-1.9	10.2
Cameroon	139	166	46	-1.5	9.8
Côte d'Ivoire	155	176	52	-1.1	9.4
South Africa	60	65	20	-0.7	9.1
Rwanda	178	183	59	-0.2	8.7
Zambia	189	192	63	-0.1	8.6
Tanzania, United Rep. of	163	165	54	-0.1	8.5
Burundi	190	190	63	0.0	8.5
Central African Rep.	180	180	60	0.0	8.5
Congo, Dem. Rep. of the	205	205	68	0.0	8.5
Liberia	235	235	78	0.0	8.5
Mauritania	183	183	61	0.0	8.5
Sao Tome and Principe	118	118	39	0.0	8.5
Somalia	225	225	75	0.0	8.5
Angola	260	260	87	0.0	8.4
Gabon	92	91	31	0.1	8.4
Congo	110	108	37	0.2	8.3
Burkina Faso	210	207	70	0.1	8.3
Chad	203	200	68	0.1	8.3
Nigeria	190	183	63	0.3	8.2
Sierra Leone	302	284	101	0.5	8.0
Togo	152	141	51	0.6	7.9
Senegal	148	138	49	0.6	7.9
Uganda	160	141	53	1.1	7.5
Mali	250	222	83	1.0	7.5
Guinea-Bissau	253	211	84	1.5	7.1
Mozambique	235	197	78	1.5	7.1
Ethiopia	204	171	68	1.5	7.1
Benin	185	156	62	1.4	7.1
Niger	320	265	107	1.6	7.0
Gambia	154	126	51	1.7	6.9
Madagascar	168	136	56	1.8	6.8
Ghana	126	100	42	1.9	6.7
Namibia	84	67	28	1.9	6.7
Mauritius	25	19	8	2.3	6.4
Seychelles	21	16	7	2.3	6.4
Malawi	241	183	80	2.3	6.3
Equatorial Guinea	206	152	69	2.5	6.1
Lesotho	120	87	40	2.7	6.0
Guinea	240	169	80	2.9	5.8
Comoros	120	79	40	3.5	5.2
Cape Verde	60	38	20	3.8	4.9
Eritrea	147	89	49	4.2	4.6

SOUTH ASIA					
Afghanistan	260	257	87	0.1	8.4
Pakistan	130	107	43	1.6	7.0
Sri Lanka	23	19	8	1.6	6.9
India	123	93	41	2.3	6.3
Maldives	115	77	38	3.3	5.4
Nepal	145	91	48	3.9	4.9
Bhutan	166	94	55	4.7	4.1
Bangladesh	144	77	48	5.2	3.6

MIDDLE EAST AND NORTH AFRICA					
Iraq	50	125	17	-7.6	15.5
Lebanon	37	32	12	1.2	7.4
Bahrain	19	16	6	1.4	7.2
Djibouti	175	143	58	1.7	6.9
Sudan	120	94	40	2.0	6.6
Jordan	43	33	14	2.2	6.4
Yemen	142	107	47	2.4	6.3
Algeria	69	49	23	2.9	5.8
Saudi Arabia	44	28	15	3.8	5.0
Syrian Arab Republic	44	28	15	3.8	5.0
Qatar	25	16	8	3.7	5.0
United Arab Emirates	14	9	5	3.7	5.0
Occupied Palestinian Territory	40	25	13	3.9	4.9
Kuwait	16	10	5	3.9	4.9
Iran (Islamic Republic of)	72	42	24	4.5	4.3
Morocco	85	43	28	5.7	3.2
Tunisia	52	26	17	5.8	3.1
Cyprus	12	6	4	5.8	3.1
Libyan Arab Jamahiriya	42	19	14	6.6	2.3
Oman	30	13	10	7.0	2.0
Egypt	104	41	35	7.8	1.3

EAST ASIA AND PACIFIC					
Cambodia	115	138	38	-1.5	9.9
Korea, Dem. People's Rep. of	55	55	18	0.0	8.5
Papua New Guinea	101	94	34	0.6	7.9
Tuvalu	56	52	19	0.6	7.9
Palau	34	29	11	1.3	7.2
Myanmar	130	109	43	1.5	7.1
China	49	39	16	1.9	6.7
Timor-Leste	160	126	53	2.0	6.6
Kiribati	88	69	29	2.0	6.6
Micronesia (Federated States of)	31	24	10	2.1	6.5
Viet Nam	51	39	17	2.2	6.4
Tonga	27	20	9	2.5	6.1
Marshall Islands	92	66	31	2.8	5.9
Cook Islands	32	23	11	2.8	5.9
Thailand	40	28	13	3.0	5.7
Fiji	31	21	10	3.2	5.5
Mongolia	104	71	35	3.2	5.5
Solomon Islands	36	24	12	3.4	5.3
Lao People's Dem. Republic	163	100	54	4.1	4.7
Vanuatu	70	42	23	4.3	4.5
Samoa	42	25	14	4.3	4.5
Philippines	66	38	22	4.6	4.2
Korea, Rep. of	9	5	3	4.9	3.9
Brunei Darussalam	11	6	4	5.1	3.7
Indonesia	91	45	30	5.9	3.0
Singapore	8	4	3	5.8	3.0
Malaysia	21	8	7	8.0	1.0
Niue	.	ļ .	-	-	· · · · · · · · · · · · · · · · ·
Nauru		30	.		

REDUCING CHILD MORTALITY

Millennium Development Goal 4: Reduce by two thirds, between 1990 and 2015, the under-five mortality rate

Kazakhstan 67 76 22 Uzbekistan 62 68 21 Latvia 20 21 7	-0.8	9.4 9.1
Uzbekistan 62 68 21 Latvia 20 21 7		
	-0.4	0.0
T 1		8.8
Turkmenistan 97 98 32		8.5
Azerbaijan 105 105 35		8.5
Russian Federation 21 21 7		8.5
Bulgaria 16 16 5		8.5
Georgia 29 29 10		8.4
Belarus 21 20 7		8.1
Ukraine 22 20 7		7.8
Tajikistan 78 72 26		7.8
Moldova, Rep. of 37 32 12		7.4
Bosnia and Herzegovina 22 18 7		6.9
Kyrgyzstan 83 61 28		6.1
Lithuania 13 9 4		5.7
Albania 45 30 15		5.3
Romania 32 21 11	3.5	5.2
Serbia and Montenegro 30 19 10	3.8	4.9
The former Yugoslav Republic		1
of Macedonia 41 26 14		4.9
Croatia 13 8 4		4.8
Armenia 60 35 20		4.3
Turkey 78 42 26	5.2	3.7

LATIN AMERICA AND CARIBBEAN					
Jamaica	20	20	7	0.0	8.4
Saint Vincent and the Grenadines	26	25	9	0.3	8.1
Barbados	16	14	5	1.1	7.5
Suriname	//2	40	16	1.5	7.0
Trinidad and Tobago	2/	20	8	1.5	7.0
Paraguay	37	30	12	1.7	6.9
Haiti	150	123	50	1.7	6.9
Belize	49	40	16	1.7	6.9
Venezuela	27	22	9	1.7	6.9
Guyana	90	72	30	1.9	6.7
Saint Lucia	24	19	8	1.9	6.7
Panama	34	25	11	2.6	6.1
Honduras	59	42	20	2.8	5.8
Cuba	13	9	4	3.1	5.7
Grenada	37	25	12	3.3	5.5
Argentina	28	19	9	3.2	5.5
Saint Kitts and Nevis	36	24	12	3.4	5.3
Dominica	23	15	8	3.6	5.1
Costa Rica	17	11	6	3.6	5.1
El Salvador	60	39	20	3.6	5.1
Chile	19	12	6	3.8	5.0
Colombia	36	23	12	3.7	5.0
Mexico	46	29	15	3.8	4.9
Uruguay	24	15	8	3.9	4.8
Guatemala	82	49	27	4.3	4.5
Brazil	60	36	20	4.3	4.5
Nicaragua	68	41	23	4.2	4.5
Bolivia	120	71	40	4.4	4.4
Dominican Republic	65	38	22	4.5	4.3
Bahamas	29	16	10	5.0	3.8
Ecuador	57	29	19	5.6	3.3
Antigua and Barbuda	_	14	-	-	-
Peru	80	39	27	6.0	2.9

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INDUSTRIALIZED COUNTRIES					
Japan	6	5	2	1.5	7.0
United States	10	8		1.9	6.8
Iceland	5	4	2	1.9	6.6
Canada	9	7	3	2.1	6.5
Switzerland	8	6	3	2.4	6.1
Finland	7	5	2	2.8	6.0
United Kingdom	10	7	3	3.0	5.8
Belgium	9	6	3	3.4	5.3
Estonia	17	12	6	2.9	5.7
France	9	6	3	3.4	5.3
Ireland	9	6	3	3.4	5.3
Spain	9	6	3	3.4	5.3
Netherlands	8	5	3	3.9	4.7
Australia	10	6	3	4.3	4.6
Italy	10	6	3	4.3	4.6
San Marino	10	6	3 3 3 3 3 5 5	4.3	4.6
Slovakia	15	9	5	4.3	4.5
Hungary	16	9	5	4.8	4.1
Austria	9	5 5	3	4.9	3.9
Germany	9	5	3	4.9	3.9
Luxembourg	9	5	3	4.9	3.9
Slovenia	9	5	3	4.9	3.9
New Zealand	11	6	4	5.1	3.7
Israel	12	6	4	5.8	3.1
Sweden	6	3	2	5.8	3.1
Poland	19	9	6	6.2	2.7
Greece	11	5	4	6.6	2.3
Czech Republic	11	5	4	6.6	2.3
Norway	9	4	3	6.8	2.2
Denmark	9	4	3	6.8	2.2
Portugal	15	6	5	7.6	1.4
Malta	14	5	5	8.6	0.5
Monaco	-	5	-	-	-
Liechtenstein	-	11		-	
Holy See	-	-	-	-	-
Andorra	-	7	-	-	· · · · · · · · · · · · · · · · ·
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Countries whose AARR has matched or exceeded the implied MDG target in 1990-2002 are shown as shaded.

^a Millennium Development Goal 4 set each country the task of reducing the under-five child mortality rate by two thirds between 1990 and 2015.

b The speed of progress in reducing the U5MR is measured here by calculating the average annual reduction rate (AARR). Unlike the comparison of absolute changes, the AARR reflects the fact that the lower limits to U5MR are approached only with increasing difficulty. The AARR is calculated on an exponential basis, which assumes a continuous, exponential reduction between two points in time. It does not take into account the intermediate values of the series. To achieve a two-thirds reduction between 1990 and 2015 requires a progress rate of 4.4 per cent or higher.

Using 1880 3003 lin 1910 Number 3015 1886 3003 88 117 Using 300 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 1886 3015 18

Regional summaries							
CEE/CIS and Baltic States	48	41	0.2	18	1.3	35	72
East Asia and Pacific	58	43	1.4	19	2.5	31	6.2
Latin America and Caribbean	54	34	0.4	27	3.9	21	4.9
Middle East and North Africa	81	58	0.6	27	2.8	40	5.9
South Asia	128	97	3.6	43	2.3	72	6.3
Sub-Saharan Africa	180	174	4.6	60	0.3	167	8.2
 Eastern and Southern Africa 	166	159	2.1	55	0.4	152	8.1
 West and Central Africa 	194	188	2.4	65	0.3	182	8.2
Industrialized countries	10	7	0.1	3	3	5	5.8
Developing countries	103	90	10.8	34	1.1	78	7.4
Least developed countries	181	158	4.3	60	1.1	136	7.4
World	93	82	10.8	31	1.1	71	7.5

For more information contact the UNICEF Strategic Information Section, Division of Policy and Planning

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