

LETTER TO EDITOR:

Millennium Development Goal -4 For Reducing Child Mortality- Are We On The Right Track?

Shakeel Ahmed

To,
Editor

The basic health progress of any country is measured in terms of indicators such as rates of child and maternal morbidity and mortality, immunization and nutritional status. Although there has been an increase in health awareness and easy access to health care facilities, childhood morbidity and mortality are still a global concern. According to UNICEF report of 2012 approximately 6.6 million children die each year before their fifth birthday¹.

The majority (83%) of these deaths occur in lower middle income countries from sub-Saharan and south-east Asian region including Pakistan. Early childhood infections like diarrhea, pneumonia, measles and malaria are the common causes². Majority of these deaths can easily be prevented by improving the health care infrastructure and health awareness in the community³.

Millennium Development Goal- 4(MDG-4) commits the global community to reduce child mortality rates in children below 5 year of age to two thirds of the 1990 baseline by the year 2015. Given the fact that Pakistan is one of the signatories of millennium declaration to improve the health and economic status of the people of the country, the Government of Pakistan must be committed to maximize the country's progress towards the Millennium Development Goals (MDGs) and improve the lives of Pakistani children. If we look even in 2014, a year away from when world leaders will meet again and assess whether we have achieved the MDG, we are far behind the target.

Under MDG 4, progress is measured against six indicators: under-five child mortality rate (U5MR); infant mortality rate; proportion of children 12-23 months fully immunized; proportion of children under-one year of age immunized against measles; proportion of children under-five years of age suffering from diarrhea in previous 30 days; and Lady Health Worker coverage. Among these the first and most important indicator to measure progress is the U5MR. Based on the evidence, Pakistan has shown slow progress on this indicator over the years but is far behind the target. According to recent report released by

Planning Commission, Government of Pakistan, under-five mortality fell from 117 deaths in 1990/91 to 89 deaths per 1,000 live births in 2012/13; and the infant mortality rate in this period fell from 102 to 74 deaths per 1,000 live births. However, both are still short of the MDG targets of 52 and 40 deaths per 1,000 live births for under-five and infant mortality respectively. Similarly the coverage for fully immunized children increased only from 75 to 80 percent and of measles immunization from 80 to 81 percent in this period; both are still short of the target of above 90 percent coverage⁴.

The National Health Policy is consistent with MDG targets, addressing childhood diseases and provision of quality care to reduce maternal mortality. Noteworthy programs focused on strengthening maternal and child health services within the existing health system include: the "Expanded Program on Immunization" (EPI), the Pakistan National Maternal Neonatal and Child Health Program (MNCH); the Population Welfare Program; People's Primary Health Care Initiative (PPHI). TB Control (DOTS), Malaria and HIV/AIDS control programs⁵. Despite these programs, Pakistan is still behind the target and hence unlikely to attain MDG 4 by the end of 2015.

There is a dire need for the government, health care providers, policy makers and Planning Commission to play an instrumental role in developing a new vision for a National Health Policy with a shift of focus from curative to preventive healthcare.

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✉ Dr. Shakeel Ahmed
Professor & Head
Department of Paediatrics
Bahria University Medical and Dental College Karachi
Email: shakeel.ahmed@aku.edu
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