

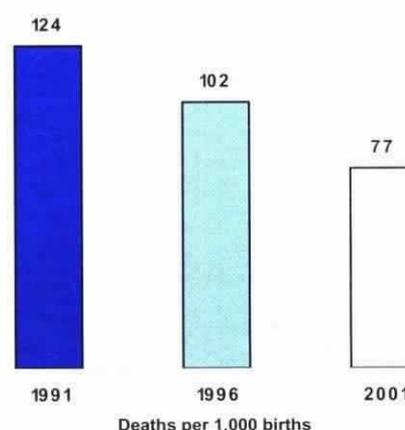
Mortality rates among young children are one of the key indicators of the health situation in a population. Information from the birth histories obtained from EIDHS respondents from Menya provide the information needed to explore levels and trends in mortality among young children in the governorate.

WHAT IS THE LEVEL OF CHILD MORTALITY AMONG YOUNG CHILDREN IN MENYA? (Tables 8.1-8.2)

The mortality rate for children under age five is 77 per thousand births. This means that around 1 in 13 babies born in Menya will die before reaching their fifth birthday. The under-five mortality rate for the governorate is nearly 70 percent higher than the rate for Egypt as a whole (46 per thousand births).

The infant mortality rate is 63 deaths per thousand births. A comparison of this rate with the under-five mortality rate indicates that more than 8 in 10 of the young children who die before age five will die during infancy, that is, before they reach their first birthday. In turn, around 40 percent of infant deaths take place during the first month of life (that is, during the neonatal period).

Mortality levels among young children have been declining steadily since the early 1990s in Menya.



An examination of trends in the EIDHS mortality data indicates that child mortality have been declining in the governorate, from a level of 124 deaths per thousand births in 1991 to the current rate of 77 deaths per thousand births in 2001. Thus, around two out of five babies who would have died at the beginning of the past decade now survive to their fifth birthday.

WHAT CHILDHOOD MORTALITY RISKS ARE AVOIDABLE? (Table 8.3)

There is a strong relationship between maternal fertility patterns and children's survival risks.

Children born to mothers who are too young or too old, children born after a too short interval, and children of birth order four and higher have a 78 percent greater chance of dying before age five than other children.

Typically, the risk of early childhood death is higher among children born to mothers who are too young or too old, children born after a too short birth interval, and among children of high birth order, than among other children. A mother is classified as "too young" if she is less than 18 years of age, and "too old" if she is over 34 years at the time of the birth. A "short birth interval" is defined by the birth occurring less than 24 months after the previous birth, and a child is of "high birth

order" if the mother had previously given birth to three or more children (i.e., the child is of birth order four or higher). Other than first births, births to women in these categories are considered to be avoidable through the use of contraception.

Forty percent of the births to women in Menya during the five-year period before the EIDHS occurred to women who were in at least one of the high-risk fertility categories; one in 6 births occurred to women who fell into two or more of the risk categories. The potential impact on mortality levels of avoiding births in these categories is substantial. Overall, children born to women in any avoidable high-risk category had a 78 percent greater chance of dying in early childhood than children born to mothers not in any of the risk categories.