Infant Mortality in Uganda: Determinants, Trends, and the Millennium Development

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MDGs Goal targeted: Child mortality (Goal no. 4)

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This article discusses three major issues concerning the MDG 4 “Reduce child mortality” in respect to Uganda’s infant mortality rates - one of the East African countries. The three major issues are: the irony of rapidly increasing incomes coinciding with flat Infant Mortality Rates (IMR) in the 1990s; the possibility of achieving the Millennium Development Goal for infant mortality; and the extent to which health and education policies in the country might help to reach that goal – of infant mortality.

The authors used three rounds of the Uganda Demographic and Health Surveys (UDHS) to construct a national time series for infant mortality from 1974-1999.

From 1990 to 2005, Uganda’s under-five mortality rate, which measures child deaths before the age of five, was 90 children per 1000 live births. They also used these survey data to model the determinants of infant mortality and, based on those results, they examined the likelihood that Uganda will meet the Millennium Development Goal of halving infant mortality by 2015.

In their study, the authors established, among others that, the interdependence between household incomes and infant mortality is small such that even if Uganda’s rapid growth were to continue for another decade, the growth impact on IMRs will be small up to 2015.

Furthermore, the report analyses other different factors with a growing impact on this phenomenon, such as the mother’s educational level. The study established that the increase in mothers’ primary school graduation rates will greatly reduce IMRs as the number of mothers graduating from primary school education is much higher compared to mothers’ graduating from secondary schools. This is to say that, the enrolment in mothers’ secondary schools is lesser than in primary schools. Mortality rates for infants whose mother is a primary graduate are 20 per thousand lower than those whose mother did not complete primary school. For the infants of mothers who attended or completed secondary school or higher, mortality rates are 34 per thousand lower.

Achieving 100 percent secondary graduation would have an even larger impact, but that does not seem attainable by 2015.

Invitation to read

This report, published in 2005, is an important reading and reference for someone who wants to understand infant mortality in Uganda in relation to MDGs. The article not only assesses infant mortality rate in Uganda after 2000 when MDGs was signed, but goes back to 1970’s thereby giving out a bigger picture of the situation and a base as to whether Uganda will be able or unable to halve infant mortality by 2015.

This study is a fundamental reading to understand the various aspects (for example age and mother’s educational level) that can influence the infant mortality.

Goal 4: Reduce child mortality rates