

# Infant Mortality



## Noteworthy:

- The lowest rate of infant mortality over the study period was recorded in 1997 at 4.9 deaths per thousand live births.
- The highest rate of infant mortality over the study period was in 1970, with 19.0 deaths per thousand live births.
- In 2002, 279 babies died in their first year: 146 boys and 133 girls.
- The most common causes of infant deaths are birth trauma, jaundice, infections, birth defects and sudden infant death syndrome (SIDS).
- Alberta's rate of low birth-weight babies continues to be higher than the Canadian average.
- The most common causes of low birth-weight are prematurity, fetal defects (caused by inherited and environmental factors), multiple births, acute or chronic diseases in the mother, and domestic violence or abuse.

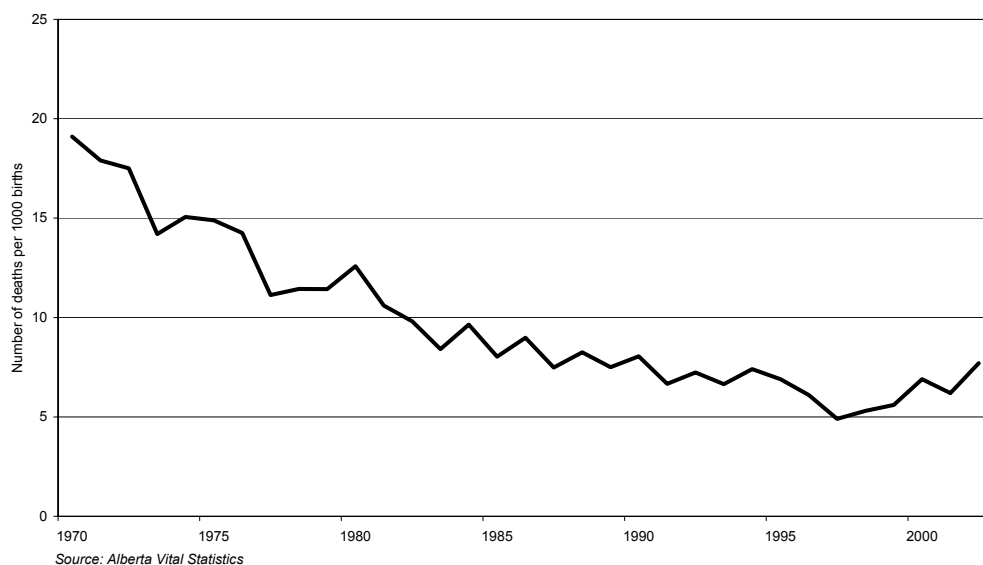
## Infant Mortality in Alberta: How Much?

Measuring the health and wellness of children is a complex task. The Alberta GPI Accounts provide a brief evaluation of children's health, examining trends in infant mortality and low-birth weight babies. A big success story in Alberta and Canada is the dramatic reduction in infant mortality. From 1970 to 2003, we estimate that the rate of infant mortality de-

clined 59%. The most common causes of infant mortality are birth trauma, jaundice, infection (prenatal conditions), birth defects and sudden infant death syndrome (SIDS). This significant change is due to improved medical services, as well as healthier mothers with healthier pregnancies and an improved quality of life for all. While Alberta's infant mortal-

ity rate has dropped, it still tends to be higher than the Canadian average. Over the past ten years, Alberta's rate of low birth-weight babies has gone up and down. However, in 2001 the rate was 6.2%, higher than the national average in that year of 5.5%.

### Infant Mortality in Alberta, 1961 to 2003

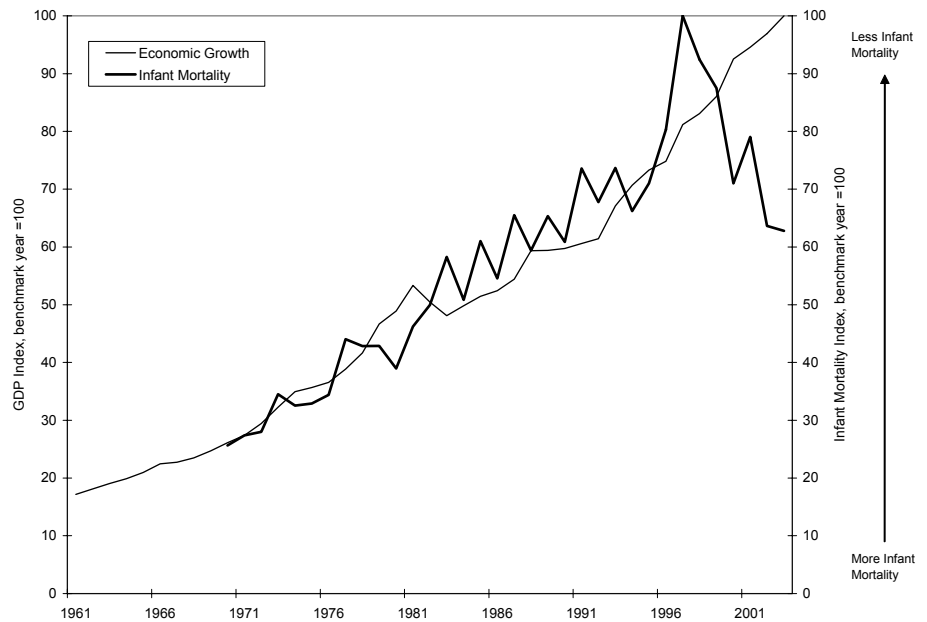


# So What?

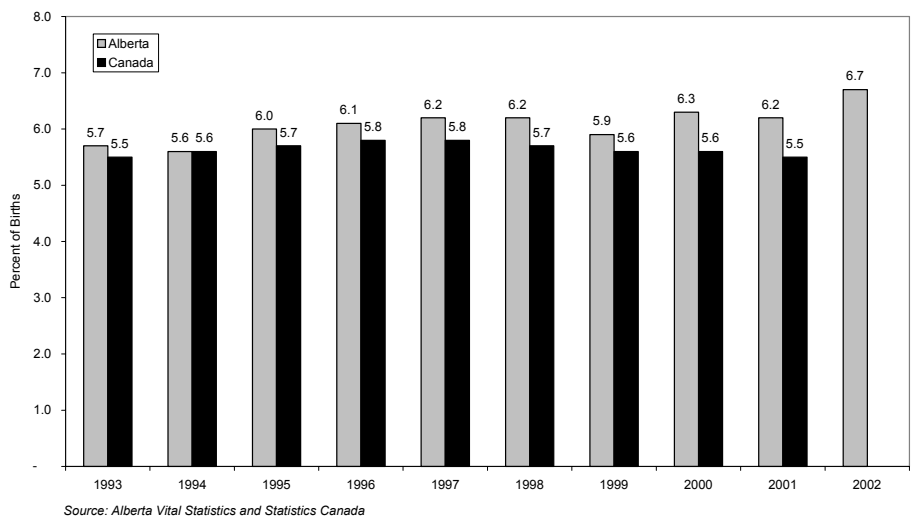
Fewer babies are dying in Alberta before their first birthday. This is something to celebrate in terms of improved conditions of human well-being in the province. When expressed as an index, infant mortality has increased at a rate not unlike the rate of growth of the economy. To compare the trend in infant mortality with the trend in economic growth, we have established indices. To do so, we set 100 equal to the lowest rate of infant mortality per 1,000 live births over the study period and measure change from that "benchmark" year. Infant mortality was lowest in 1997 when the mortality rate was 4.9 per 1,000 live births.

The likely societal and human benefits associated with reduced infant mortality and low birth-weight babies have not been calculated. Mitigating against infant mortality and investing time and resources into improving conditions that would avoid the problems associated with low birth-weight babies would provide a net benefit to society. Direct and indirect costs associated with the effects of these conditions on human health and the community would be reduced or mitigated with investments that reduce the risks of such occurrences. Society and individuals are better off in both the short and long term when healthy individuals are contributing to the well-being of households and communities. In the absence of any benchmark studies of the total societal costs of these issues, the Alberta GPI accounts are silent on the full and long-term societal and personal costs associated with infant mortality and low birth-weight babies. This remains an important piece of future GPI analysis.

## Infant Mortality Index: Where are we today?



## Low Birth-Weight Babies, Alberta vs. Canada, 1993 to 2002



There is no price tag or cost attached to infant mortality in the GPI income statement although we recognize that the social and economic costs of infant mortality are substantial.

As an index, infant mortality in Alberta in 2003 ranked 63 on a scale where 100 is the lowest level of infant mortality- recorded in 1997 (see figure above).

