

World Health Organization

World Health Report 2003

Chapter One

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- evidence of widening gaps in health worldwide: life expectancy reached 78 years for women in developed countries but fell back to 46 years for men in Sub-Saharan Africa largely because of HIV/AIDS
- one the biggest challenges in Africa is mortality in the first five years of life which is worse than 10 years ago
- this is a result of the continuing impact of communicable diseases
- there is also a global increase in noncommunicable diseases
- main causes of death of children in Sub-Saharan Africa:
 - perinatal conditions
 - diarrheal diseases
 - pneumonia and other lower respiratory tract conditions
 - malaria
 - HIV/AIDS
- three groups of countries in terms of mortality improvements: developed countries (+9 years), high-mortality developing countries (+17 years), low-mortality developing countries (+26 years)
- earlier there was a gap between developed and developing countries, now there is a large gap between high-mortality developing countries and the rest of the world
- exceptions to life expectancy increases: Africa and former Soviet Union (1990 to 2000: male life expectancy -2.9 years, female life expectancy -1 year)
- mortality patterns:

- 57 million people died in 2002, 10.5 million were children under 5, 98% in developing countries
- 60% of deaths in developed countries occur above 70 vs 30% in developing countries
- 20% of deaths in developed countries occur between 15 and 59 vs 30% in developing countries
- contrast between low-mortality developing and high-mortality developing countries:
 - <10% of deaths in China occur below 5 vs 40% in Africa
 - 48% of deaths in China occur above 70 vs 10% in Africa
- mortality statistics underestimate the burden of noncommunicable adult diseases because they exclude non-fatal health outcomes such as depression and visual impairment
- useful measurement: disability-adjusted life years (DALYs) combining years of life lost (YLLs) and years lived with disability (YLDs)
- child mortality:
 - 10.5 million under-5 children die every year vs 17 million in 1970
 - nearly all child deaths occur in developing countries, half of them in Africa
 - majority of African children live in countries where survival gains have been wiped out by HIV/AIDS
 - children are at higher risk of dying if poor
 - most impressive declines were achieved in developed countries and low-mortality developing countries where the economic situation improved
 - slower improvement, stagnation or even reversal in high-mortality developing countries
 - mortality gap between developed and developing countries has narrowed since 1970
 - mortality gap between low- and high-mortality developing countries is widening
 - important gender and socioeconomic differences in child mortality (in China girls have a 33% higher chance of dying than boys!)
 - using an absolute income/poverty scale, there are huge differences between countries even when income is taken into account: a non-poor child in Africa has a higher mortality risk than a poor child in the Americas

- adult health:
 - life expectancy at 15 has been increasing in most regions, the exceptions are Africa (-7 years) and the former Soviet Union (-4.2 years for men, -1.6 years for women)
 - about 75% of adult deaths caused by noncommunicable diseases, about 10% caused by injury
 - lot of variation in the relative importance of causes across regions (e.g., in Africa 1 in 3 deaths caused by noncommunicable diseases vs 9 in 10 deaths in developed countries)
 - 5% of the burden of disease in developed countries comes from communicable diseases, maternal, perinatal, and nutritional conditions vs 40% in high-mortality developing regions vs 50-60% in Africa
 - widening gaps in adult mortality
 - HIV/AIDS is the leading killer, but there is a growing burden of noncommunicable diseases, and a hidden epidemic of injuries among young men