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Child mortality (under 5 years)

28 January 2022

Key facts

- In 2020 an estimated 5 million children under the age of 5 years died, mostly from preventable and treatable causes. Approximately half of those deaths, 2.4 million, occurred among newborns (in the first 28 days of life).
- While the global under-5 mortality rate (U5MR) fell to 37 deaths per 1000 live births in 2020, children in sub-Saharan continued to have the highest rates of mortality in the world at 74 deaths per 1000 live births- 14 times higher than the risk for children in Europe and North America.
- The leading causes of death in children under 5 years are preterm birth complications, birth asphyxia/trauma, pneumonia, diarrhoea and malaria, all of which can be prevented or treated with access to affordable interventions in health and sanitation.
- SARS-CoV-2 infections among children and adolescents typically cause less severe illness and fewer deaths as compared to adults. Moreover, the youngest children are least vulnerable, with less than 0.1% of global deaths (1902) occurring in children under 5 years of age (1).

Overview

Substantial global progress has been made in reducing childhood mortality since 1990. The total number of under-5 deaths worldwide has declined from 12.6 million in 1990 to 5 million in 2020. Since 1990, the global under-5 mortality rate has dropped by 60%, from 93

deaths per 1000 live births in 1990 to 37 in 2020. This is equivalent to 1 in 11 children dying before reaching age 5 in 1990, compared to 1 in 27 in 2020.

While the global under-5 mortality rate (U5MR) fell to 37 (35–40) deaths per 1000 live births in 2020, children in sub-Saharan Africa continued to have the highest rates of mortality in the world at 74 (68–86) deaths per 1000 live births- 14 times higher than the risk for children in Europe and North America.

Sub-Saharan Africa and southern Asia, account for more than 80% of the 5 million under-5 deaths in 2020, while they only account for 53% of the global live births. Half of all under-5 deaths in 2020 occurred in just 5 countries: Nigeria, India, Pakistan, the Democratic Republic of the Congo and Ethiopia. Nigeria and India alone account for almost a third of all deaths.

At the country level, under-5 mortality rates in 2020 ranged from 2 deaths per 1000 live births to 115 deaths per 1000 live births, and the risk of dying before turning 5 for a child born in the highest-mortality country was about 65 times higher than in the lowest-mortality country.

Top 10 countries with the highest numbers of deaths (thousands) for children under 5 years, 2020

Country	Under-5 deaths	Lower bound	Upper bound
Nigeria	844	645	1 140
India	783	688	882
Pakistan	389	320	469
Democratic Republic of the Congo	284	177	455
Ethiopia	173	138	215
China	121	110	135
Indonesia	110	89	136
United Republic of Tanzania	102	73	144
Angola	91	40	178
Bangladesh	84	76	93

Globally, infectious diseases, including pneumonia, diarrhoea and malaria, along with pre-term birth complications, birth asphyxia and trauma and congenital anomalies remain the leading causes of death for children under 5 years. Access to basic lifesaving interventions such as skilled delivery at birth, postnatal care, breastfeeding and adequate nutrition, vaccinations and treatment for common childhood diseases can save many young lives.

Malnourished children, particularly those with severe acute malnutrition, have a higher risk of death from common childhood illness such as diarrhoea, pneumonia and malaria. Nutrition-related factors contribute to about 45% of deaths in children under 5 years of age.

COVID-19 disease and children's health

The evidence on deaths directly attributable to COVID-19 infection is strongly age-dependent, with children and adolescents least affected. Children under 5 years represent approximately 2% of the global cases (2 231 276) and 0.1% of the global deaths (1902) (1).

Data from civil registration and vital statistic systems (CRVS), health management information systems (HMIS) from 80 countries as well as specific country-wide monitoring systems (Mozambique and South Africa) indicate no significant deviation from expected mortality for this age group for 2020 and in some cases indicate fewer deaths than would be expected from historical data. As more data comes in from countries, and further analyses are performed, these results may change for 2021.

Global response: Sustainable Development Goal 3.2.1

The Sustainable Development Goals (SDGs), adopted by the United Nations in 2015, were developed to promote healthy lives and well-being for all children. The SDG Goal 3.2.1 is to end preventable deaths of newborns and under-5 children by 2030. There are two targets:

- 1. reduce newborn mortality to at least as low as 12 per 1000 live births in every country; and**
- 2. reduce under-5 mortality to at least as low as 25 per 1000 live births in every country.**

Target 3.2.1 is closely linked with target 3.1.1, to reduce the global maternal mortality ratio to less than 70 deaths per 100 000 live births, and target 2.2.1 on ending all forms of malnutrition, as malnutrition is a frequent contributing cause of death for under-5 children. These have been translated into the new *Global strategy for women's, children's and adolescent's health*. Member States need to set their own targets and develop specific strategies to reduce child mortality and monitor their progress.

In 2020, 125 countries have already met the SDG target for under-5 mortality and a further 16 countries are expected to meet the target by 2030 if current trends continue. However, accelerated progress will be needed in 54 countries, which will not achieve the target by 2030 on current trends. Thirty-five of these countries will need to double their current rate of reduction without considering the additional challenges brought about by the COVID-19

pandemic. Meeting the SDG target in the 54 off-track countries would reduce the number of under-5 deaths by 8 million between 2021 and 2030, reducing the number of under-5 deaths to 2.5 million in 2030. Focused efforts are still needed in sub-Saharan Africa and southern Asia, including in fragile and conflict-affected situations.

WHO response

WHO calls on Member States to address health equity through universal health coverage so that all children can access essential health services without undue financial hardship. Moving from business as usual to innovative, multiple and tailored approaches to increase access, coverage and quality of child health services will require strategic direction and an optimal mix of community and facility-based care. Health sector and multisectoral efforts are also needed to overcome inequalities and any negative effects of social determinants of health.

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1. WHO Coronavirus (COVID-19) Dashboard | WHO Coronavirus (COVID-19) Dashboard With Vaccination Data (<https://covid19.who.int/measures>); last accessed 17 December 2021.