State of child health 1 - Mortality indicators

Key messages and actions from three indicators on child mortality: infants (under one year); children (one to nine years); young people (10 to 19 years).

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Infants (under one year)

Key messages

- There were 2,517 deaths among infants in England and Wales in 2014. Most deaths during childhood occur during the first year of life, particularly the first month of life.
- Infant mortality rates across all UK countries have declined markedly over the past 40 years. However, progress has slowed over the past 20 years, particularly compared to other European nations.
- Conditions related to preterm birth are the most common causes of death in infancy.
- Socioeconomic status is strongly associated with infant mortality, with increasing risk associated with higher levels of maternal deprivation.

Key actions

- Reduce child poverty and social inequalities in the UK.
- Maximise health during pre-conception and pregnancy, including smoking cessation programmes, promotion of breastfeeding and promoting heathy weight in women of childbearing age.
- Protect and support health promotion and early intervention services such as universal
midwifery and health visiting services for new mothers, and expand provision of targeted support for younger mothers.

- Ensure provision of high-quality, evidence-based sex, relationships and reproductive health education in schools.
- Establish a UK-wide system for systematic collection, analysis, and interpretation of infant mortality and maternal health data which can be used for accurate international comparison.
- Promote and support research into maternal and infant health and translate findings into improved practice and policy.
- Ensure that policy strategies to improve maternal and child health are joined up.

Children (one to nine years)

Key messages

- 838 children aged one to nine years died in 2014 across the UK: 761 in England and Wales, 28 in Northern Ireland and 49 in Scotland.
- Mortality rates amongst 1- to 9-year-olds have declined across the UK in the last four decades, although progress has slowed in the past 20 years.
- The leading causes of death in this age group are cancer, injuries and poisonings, congenital conditions and neurological and developmental disorders. Preterm birth also contributes to mortality for up to 10 years after birth.
- There is a strong association between deprivation and the risk of death throughout childhood, with children in deprived areas more likely to die.

Key actions

- Reduce child poverty and social inequalities in the UK.
- Establish a UK-wide system for the analysis and interpretation of child mortality data which can be used for accurate international comparison.
- Expand routine outcome data collection in long-term conditions in children.
- Increase involvement of children with rare and common long-term conditions in developing guidelines, measuring outcomes, service design and research trials.
- Maximise health during pre-conception and pregnancy, including smoking cessation programmes, promotion of breastfeeding, and promoting healthy weight in women of childbearing age.
- Protect and support early intervention services and strategies.
- Create safe environments, including access to information and safety equipment schemes to promote safety in the home.
- Reduce road speed limits in built-up areas to 20 mph.
- Ensure that clinical teams looking after children with known medical conditions make maximum use of tools to support improved communication, management and self-care. These might include the utilisation of epilepsy passports or asthma management plans where appropriate. There should be better cross-sector working to ensure adequate support in schools for children and young people to manage their long-term conditions.
- Increase provision of high-quality end-of-life care and access to appropriate palliative care.
Young people (10 to 19 years)

Key messages

- Nearly 1,300 young people aged 10 to 19 years died across the UK in 2014: 1,121 in England and Wales, 57 in Northern Ireland and 113 in Scotland. The majority of these deaths are among 15- to 19-year-olds; the risk of dying for young men is notably higher than for young women.
- There has been a decrease in mortality among adolescents in all UK nations in recent years. However, the UK has not matched the reductions in adolescent mortality seen in comparable wealthy countries, largely due to higher rates of death from non-communicable diseases.
- The most common causes of death in this age group are injuries, violence and suicide, followed by cancer, substance misuse disorders and nervous system and developmental disorders.
- Deprivation and mental health problems increase the risk of death throughout adolescence.

Key actions

- Reduce child poverty and social inequalities.
- Reduce deaths from traffic injuries through the introduction of a graduated licensing scheme (see Indicator 4.4).
- Improve adolescent mental health and wellbeing in the UK.
- Protect and support early intervention services and strategies.
- Promote healthy physical, mental and social health through statutory, comprehensive, evidence-based personal health and social education in all schools.
- Improve quality of physical and mental healthcare for young people with long-term conditions, including developing dedicated services for young people and transition programmes to adult care (see Indicators 4.5, 6.2 and 6.4).
- Provide high-quality end-of-life care and access to appropriate palliative care.
- Establish a UK-wide system for systematic collection, analysis and interpretation of child and adolescent mortality data which can be used for accurate international comparison.
- Increase involvement of young people with rare and common long-term conditions in developing guidelines, measuring outcomes, service design and research trials.
- Promote and support research into adolescent health and translate findings into improved practice and policy.

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