Infant Mortality

Noteworthy:

- The lowest rate of infant mortality was recorded in 1997 at 4.9 deaths per thousand live births.
- The highest rate of infant mortality was in 1970, with 19.0 deaths per thousand live births.
- In 1997, 174 babies died in their first year: 100 boys and 74 girls.
- The most common causes of death were birth trauma, jaundice, infections, birth defects and sudden infant death syndrome (SIDS).
- The highest rate of low birth-weight babies is in Calgary; the lowest is in the Northwestern region of the province.
- 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 1999, the rate of infant mortality declined 70%. The most common causes of infant mortality are birth trauma, jaundice, infection (prenatal conditions), birth defects and sudden infant death syndrome (SIDS). This significant improvement 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 mortality 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, according to Alberta Health, in 1997 the rate climbed to 6.2%, the highest level in the 1990s. Alberta’s rate is higher than the Canadian average.

Infant Mortality, Alberta, 1970 to 1999

Source: Alberta Vital Statistics, Measuring Up, Human Resources Canada (Index for Social Health)
So What?

Fewer babies are dying in Alberta before their first birthday, which is something to celebrate in terms of improved conditions of human well-being. When expressed as an index, infant mortality has increased at a rate not unlike the rate of growth of the economy. Here we set 100 equal to the lowest rate of infant mortality per 1,000 live births. The year 1997 is our benchmark year, with the lowest level of infant mortality between 1961 and 1999. The GPI infant mortality index improves over time following a path similar to economic growth (GDP) since 1961.

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 in 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 community.

In the absence of any benchmark studies of the total societal costs of these issues, the Alberta GPI account is 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 along with estimating the full cost of auto crashes and suicide.

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 1999 ranked 87 on a scale of 0 to 100, where 100 is the lowest level of infant mortality, recorded in 1977 (see figure above).