

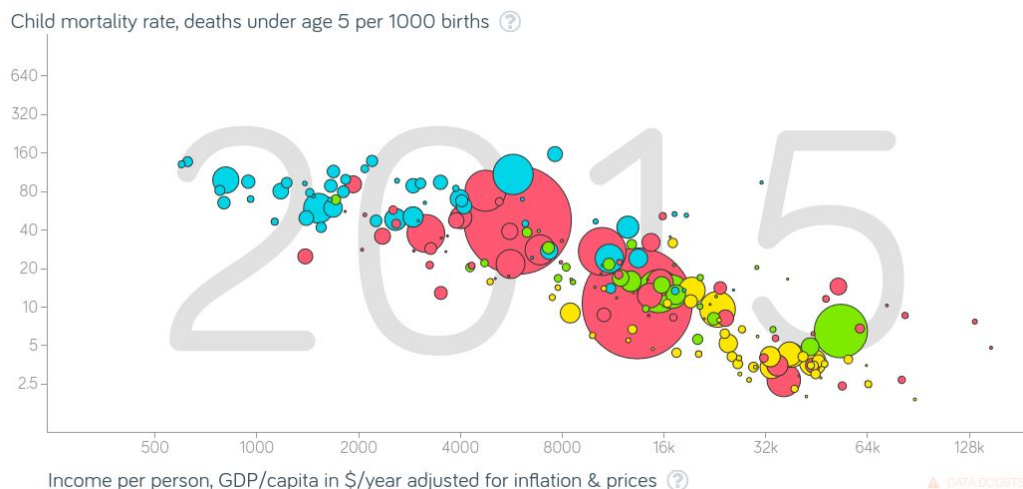
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Ms.I

Statistics

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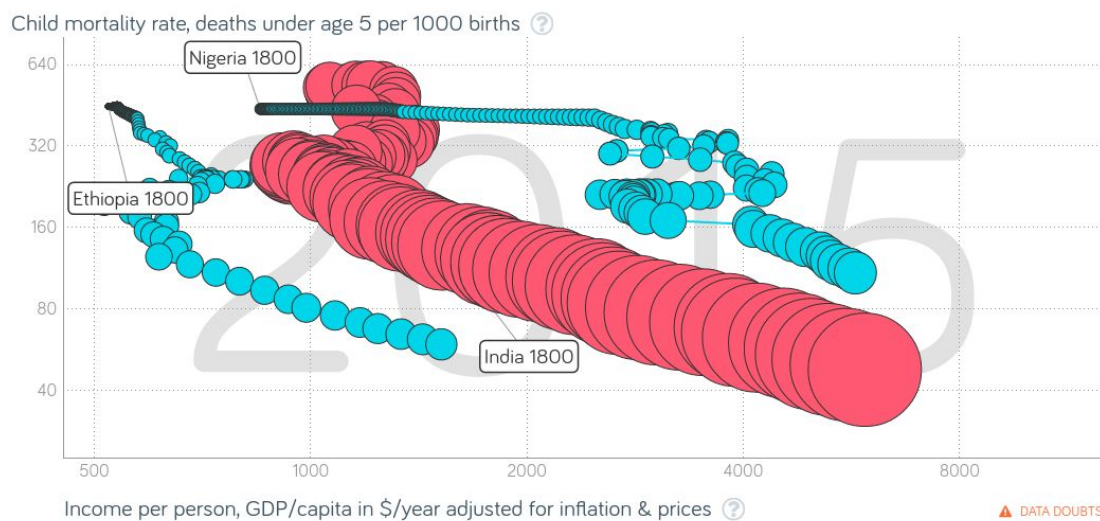
Every day, children die because of diseases that can easily be treated or prevented by having affordable health care plans for low-income families. I wanted to do more research in the correlation of income to child mortality rates. Does income per person affect the child mortality rate? Based on my research on child mortality rates and income per person in Ethiopia, Nigeria, and India, countries with the lowest income have the highest child mortality rates. Since the government is unable to afford health care facilities or good aids for low-income families, children are more likely to have health problems.



Graph A: This graph is looking at children mortality rates, deaths under age 5 per 1000 births, compared to the income per person in every country over time. The size of the circle is looking at the total population of each country. While the colors shows where each country regions are.

Child Mortality has decreased throughout time. Looking at *Graph A*, it shows that most countries in Africa represented by the blue have the highest child mortality rates and low income.

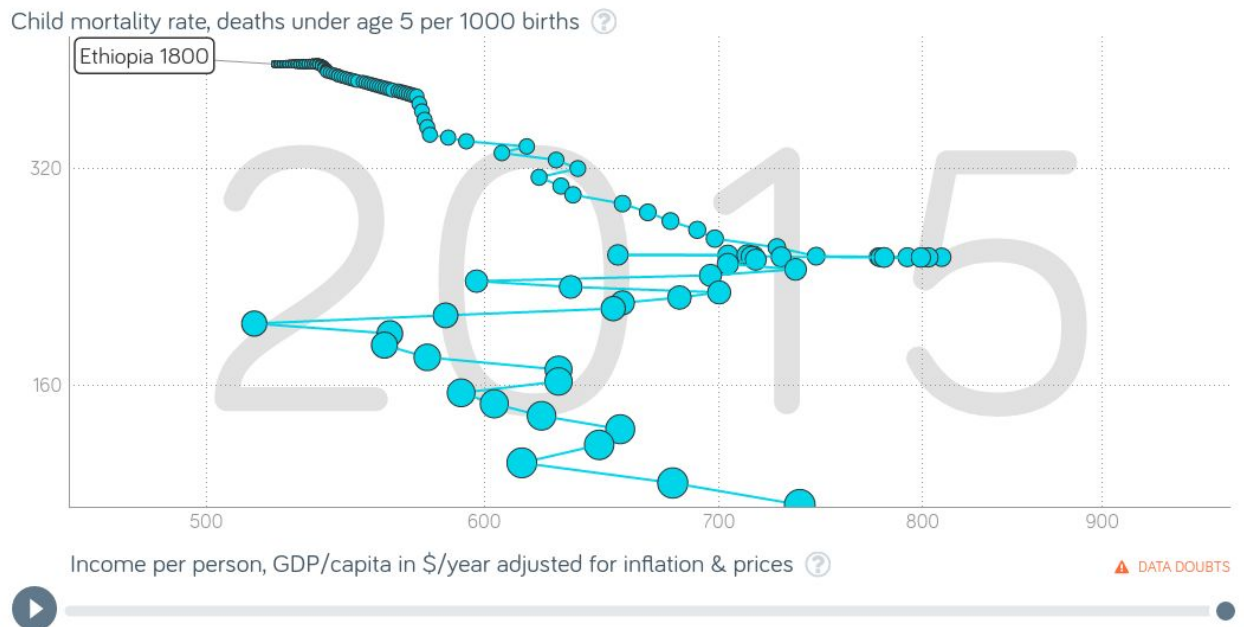
They also have similar data. Countries in Asia representing the red and Europe representing yellow have average child mortality rates and income, compared to sub-Saharan countries in Africa. While countries in South America, and North America representing green have the highest income per person and low child mortality rates. Countries like Equatorial Guinea has the highest income per person but high child mortality rates compared to other rich countries. Africa has only 2.3 health workers per 1,000 people (Matthew Heberger, 2013). Some of the health assistance are not fully skilled



Graph B: This graph is looking at children mortality rates, deaths under age 5 per 1000 births, compared to the income per person in Ethiopia, Nigeria, and India when comparing child mortality rates and income per person over time. The size of the circle is looking at the total population of each country. While the colors show where each country regions are.

When looking at *Graph A*, starting from the 1800s, you can see that child mortality decreases while the income per person increases. This shows a negative and positive correlation. I will be analyzing Ethiopia, Nigeria, and India when comparing child mortality rates and income per person. Looking at *Graph B*, starting in 1974 there is a sharp decrease in income per person

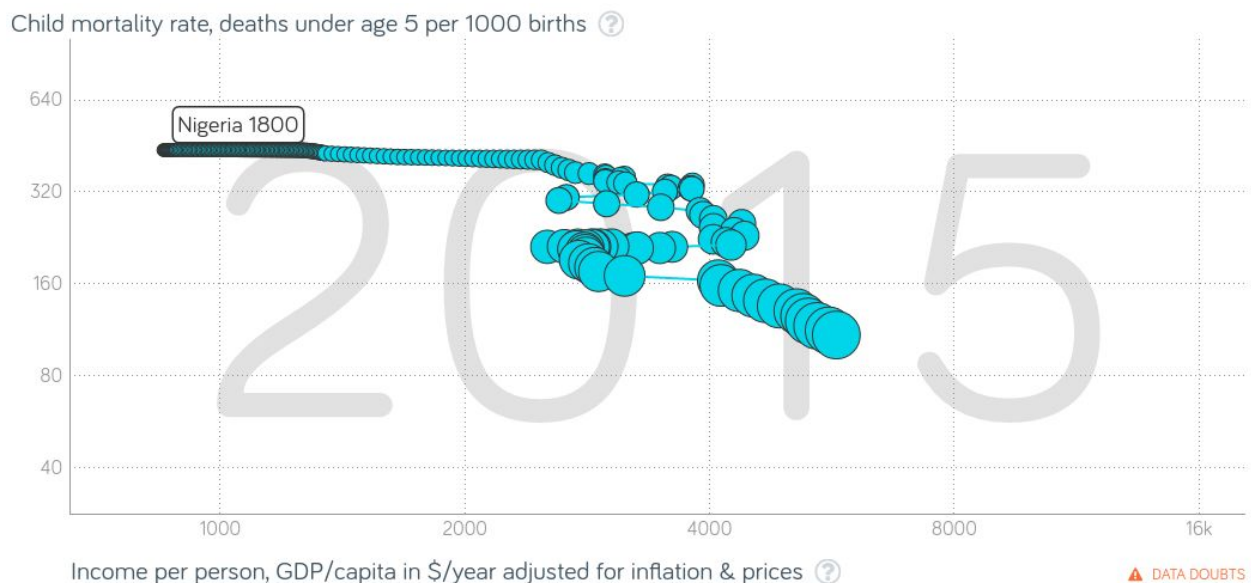
in Nigeria. In 1973 there is a sharp decrease in income per person in Ethiopia. I want to do further research on Ethiopia, Nigeria, and India, if there are any events (war, drought, independence, or other factors) that occurred that affected the child mortality rates.



Graph C: This graph is looking at children mortality rates, deaths under age 5 per 1000 births, compared to the income per person in Ethiopia over time.

Ethiopians are suffering from the lack of basic needs of life such as food, clothing, housing, and health care, education, safe and healthy environment as consequences of the uncontrolled and rapid increase of population growth. Ethiopia has such a high mortality rates because it has a low standard of living and no family planning programs. In Ethiopia health services are limited. Of war and famine that occurred in 1973 throughout 1997, the government used the finances to support the military. The Ethiopian-Eritrean war caused almost all of the health services and infrastructure including roads to be destroyed. Urban areas like Tigray were severely hit by both land battles and air strikes, because of that child mortality in Tigray was excessively high (Sathiya Susuman, 2012). *Graph C* explains during, 1973 throughout 1997,

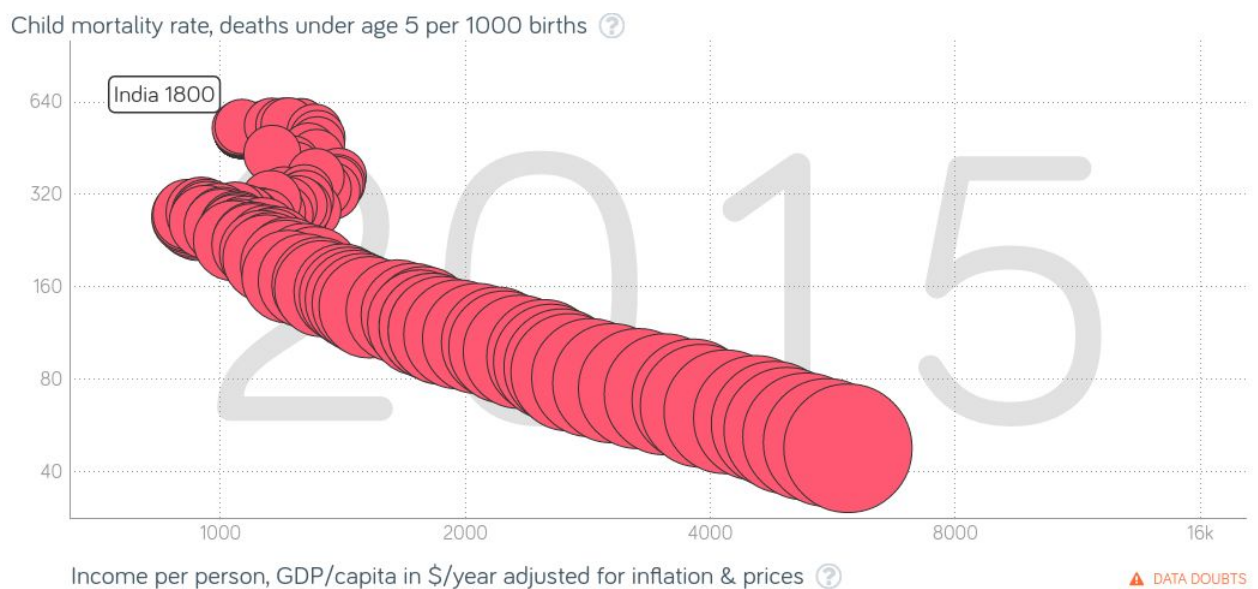
income per person were extremely low due to wars and famine that occurred in Ethiopia, because of that children were in risk of dangerous health conditions and even death because they weren't given the right medical aid that they needed. The Ethiopian government is now trying to undertake a number of interventions aimed at reducing childhood diseases and mortality. Government has established the health sector development program and health policy with emphasis on disease prevention. Child mortality rates have not declined as it should. This is also due to the fact that pregnant women are not given pre natal care and most of the deliveries conducted at home are untrained birth assistance. Mothers are not given given pre natal care, children are more likely to be sick because their family can't afford health services, and the government is trying but the child mortality rate should be low.



Graph D: This graph is looking at children mortality rates, deaths under age 5 per 1000 births, compared to the income per person in Nigeria over time.

Every day there are 2,300 child death in Nigeria, making the country the second highest child mortality rates in the world. Many blame the countries poor access to health facilities,

poverty, illiteracy and the unwillingness of some women getting treated by the health care to the high child mortality rates in Nigeria. In the aftermath of the Nigerian Civil War between 1967 and 1970, The hygienic level of the society was very low and basic supplies for healthcare were lacking because of that children suffered immensely. In *Graph D* it shows that the income per person decreased because of the aftermath of The Nigerian Civil. The funded for the expenses for the military and hospitals were destroyed.



Graph E: This graph is looking at children mortality rates, deaths under age 5 per 1000 births, compared to the income per person in India.

There has been a decrease of child mortality rates in India throughout the years. The coverage rates of preventive and curative child health services are declining or levelling off. This due to many awarenences and organizations.

In conclusion, Ethiopia, Nigeria, and India, countries with the lowest income have the highest child mortality rates. Since the government is unable to afford health care facilities or

good aids for low-income families, children are more likely to have health problems.

Sources :

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