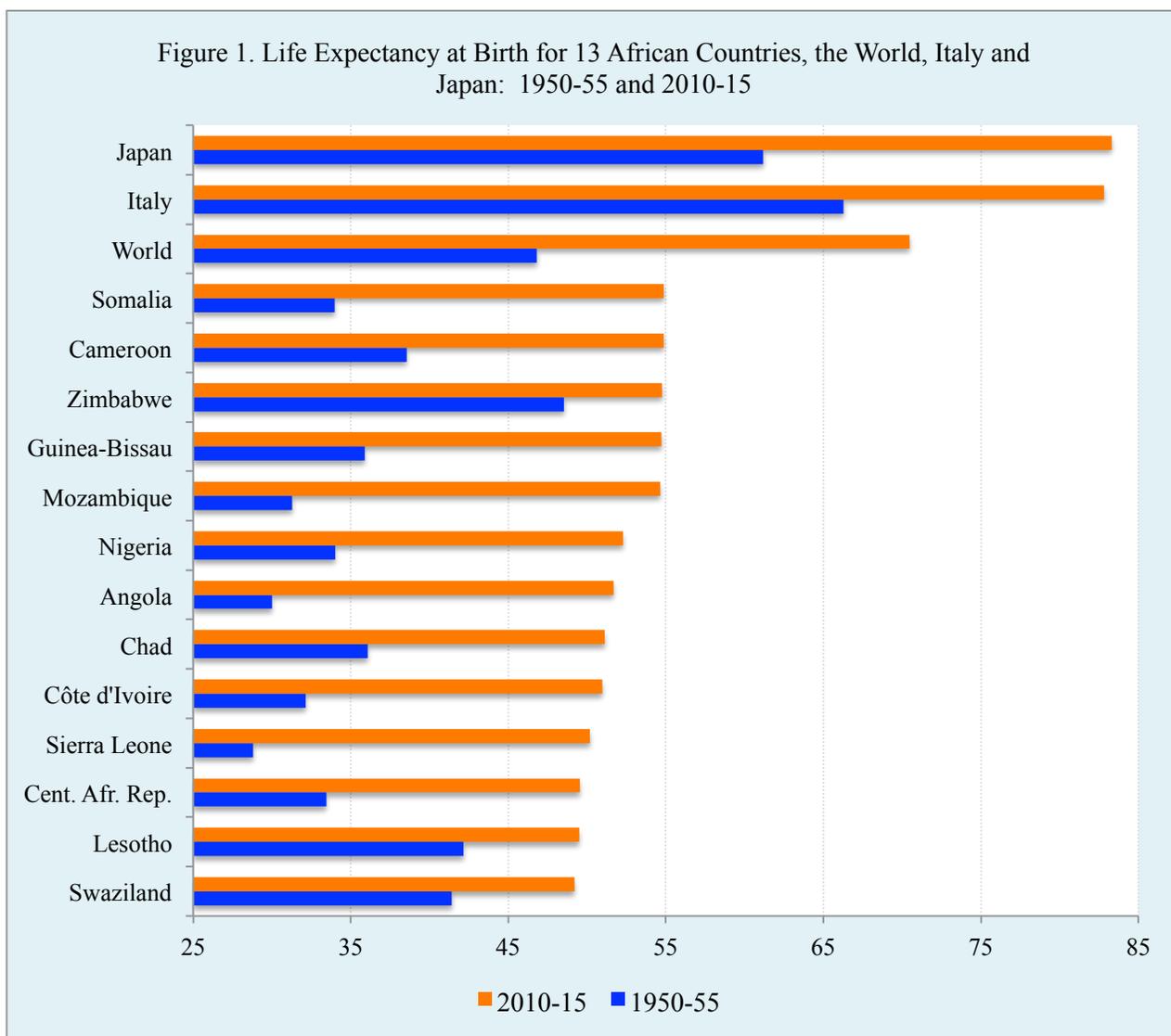


# All in Africa: The World's 13 Highest-Mortality Countries

By  
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Despite remarkable reductions in mortality, 13 sub-Saharan African countries – representing 1 out of every 20 people in the world - have yet to achieve life expectancies at birth of 55 years, the global average attained a half century ago. These highest-mortality countries are more than 15 years behind the world's current average life expectancy of about 70 years and approximately 30 years behind the global leaders: Japan and Italy at 83 years (Figure 1).

The world's lowest life expectancies at birth that fall just under 50 years old are found in the Central African Republic, Lesotho and Swaziland.



Source: United Nations Population Division.

Despite their low levels of life expectancy, the 13 sub-Saharan African countries have made some gains since the mid-20<sup>th</sup> century. At that time, most of these countries life expectancies at birth were less than 40 years, and several countries – Angola, Mozambique and Sierra Leone – were as low as 30 years.

The recent Ebola outbreak in Sierra Leone, however, pushed the country to higher rates of mortality, setting its progress back by more than a decade.

In nearly all countries in the world, women have lower mortality rates than men, resulting in an average global sex difference in life expectancy at birth of nearly five years more for women. Striking exceptions exist in Mali and Swaziland, where women's life expectancies at birth are less than those of men's, 0.5 and 1.2 years, respectively.

In addition, the female advantage over males in life expectancy at birth is unusually small in some African countries, such as Nigeria (0.6 years), Sierra Leone (1.1 years) and Ivory Coast (1.6).

Another useful indicator reflecting the level of mortality is the death rate of children under 5 years old. In many of the high-mortality African countries, the under age 5 mortality rate is well above 100 deaths for every 1,000 live births, or at least 1 in 10 children dies before reaching his or her fifth birthday.

In some cases, such as Angola, Central African Republic, Chad and Guinea-Bissau, the under age 5 mortality rates run even higher, at 150 deaths per 1,000 live births, or approximately 1 in 7 children do not reach age 5.

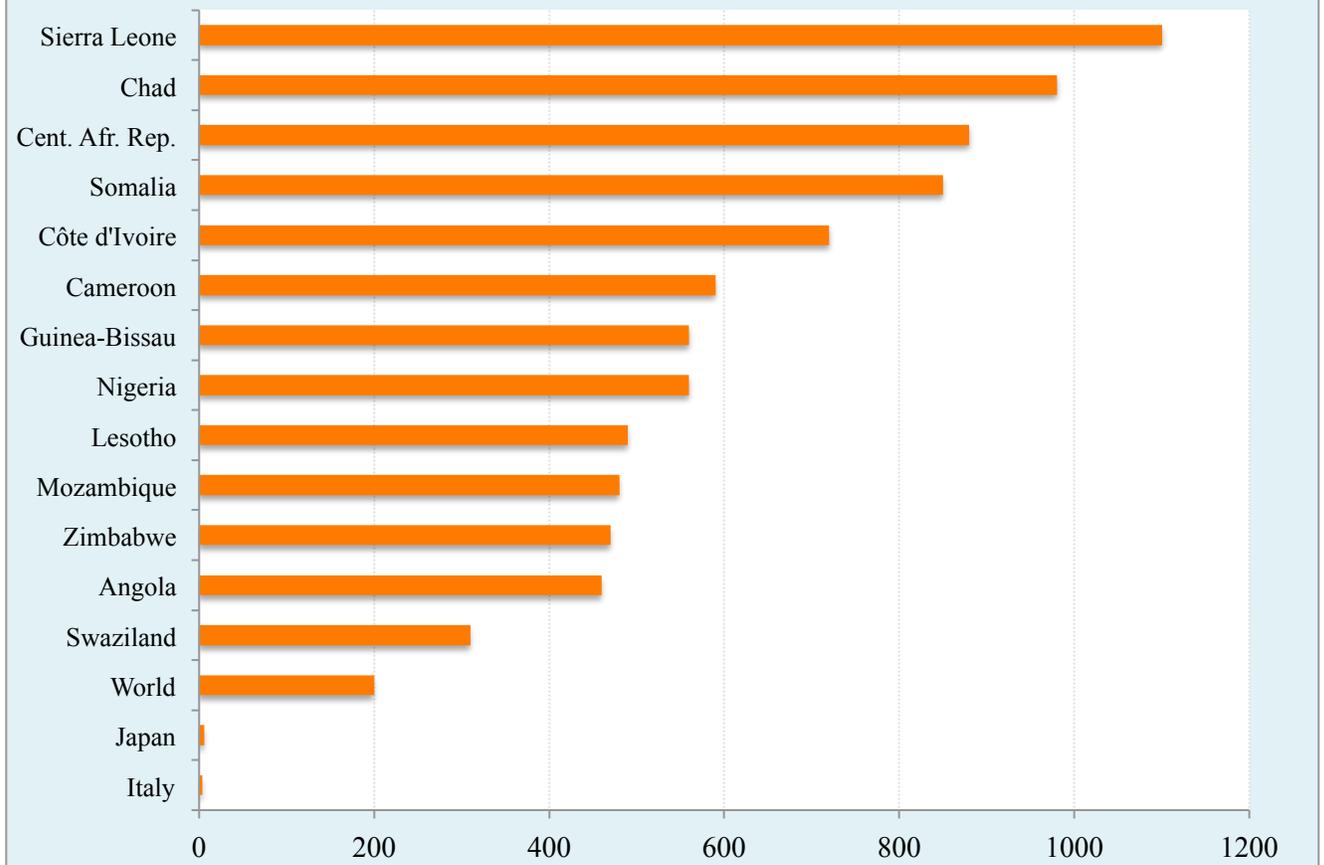
By contrast, child death rates in Italy and Japan are about 3 deaths for every 1,000 live births, or approximately 1 in 333 children do not survive to age 5. So the chances of a child dying before age 5 in the highest-mortality African countries is 50 times greater than in Italy and Japan.

For the fortunate men and women surviving childhood in these high mortality countries, their chances of dying before reaching old age are comparatively high. In countries such as Angola, Chad, and Nigeria, the chances of a 15-year old dying before reaching age 60 are about 1 in 3. And in some extreme cases, such as in Lesotho and Swaziland, more than half of 15-year olds are not expected to survive to age 60. In contrast, the chances of a 15-year old in low-mortality countries, such as Italy, Japan and Sweden, not reaching age 60 are about 1 in 20.

Besides child and adult mortality, maternal deaths are also high among many of the sub-Saharan African countries. Maternal death estimates in most of the highest-mortality countries are above 500 maternal deaths per 100,000 births, with peaks reaching above 900 in Chad and Sierra Leone (Figure 2).

Again in striking contrast, the maternal mortality ratio for most developed countries is less than 10. Also, in several African countries, such as Chad, Mali and Somalia, it is estimated that a quarter or more of the deaths among women of reproductive ages are from maternal causes relating to pregnancy and childbirth.

Figure 2. Maternal Mortality for 13 African Countries, the World, Italy and Japan: 2013  
(maternal deaths per 100,000 births)



Source: World Health Organization

Among the top causes of death in the highest-mortality countries are lower respiratory infections, diarrhea-caused diseases, preterm birth complications, stroke, tuberculosis and, in some of the countries, HIV/AIDS and malaria.

In Nigeria, for example, the most populous African country with 182 million people, the five major causes of death in 2012 were: lower respiratory infections (14 percent), HIV/AIDS (10 percent), malaria (9 percent), diarrheal diseases (6 percent), and preterm birth complications (5 percent).

In Lesotho, Swaziland and Zimbabwe, the proportions of deaths from HIV/AIDS are estimated to be 41, 38 and 27 percent, respectively.

In low-mortality developed countries, by contrast, among the top causes of death are ischemic heart disease, stroke, trachea bronchus and lung cancer, Alzheimer's and other dementia diseases, chronic obstructive lung disease and lower respiratory infections.

In Germany, for instance, the five major causes of death in 2012 were: ischemic heart disease (15 percent); stroke (7 percent); trachea, bronchus, lung cancers (5 percent), hypertensive heart disease (4 percent) and Alzheimer's and other dementias (4 percent).

The international community gives high priority to improving health and reducing high-mortality levels. Three of the eight Millennium Development Goals (MDGs), for example, aimed to reduce child mortality, improve maternal health and combat HIV/AIDS, malaria and other diseases.

The recently adopted United Nations Sustainable Development Goals (SDGs) also include goal No. 3, which aims to ensure healthy lives and promote well-being for everyone at all ages. In particular, three of the goal's targets are similar to the earlier MDG goals on health and mortality.

By 2030, those targets in goal No. 3 aim to reduce the global maternal mortality ratio to less than 70 per 100,000 live births; end preventable deaths of newborns and children under 5 years old, with all countries aiming to reduce neonatal mortality to at least as low as 12 per 1,000 live births and under-5 mortality to at least as low as 25 per 1,000 live births; and end the epidemics of AIDS, tuberculosis, malaria and neglected tropical diseases as well as combat hepatitis, water-borne diseases and other communicable diseases.

Achieving these targets poses major developmental challenges, especially for the highest-mortality countries in Africa. Reducing the death rate for children under 5 years old to no more than 25 deaths per 1,000 live births, for example, will be difficult to attain given that the current rates for most of the high-mortality African countries noted above are over 100 and, in some cases, are as high as 150 deaths per 1,000 live births.

Bringing down the global maternal mortality ratio, currently about 200 deaths per 100,000 births, to less than 70 by 2030 will also be hard to achieve without Africa's high ratios falling dramatically over the next 15 years.

Living a long and healthy life is recognized universally as a desirable goal and a fundamental component of social and economic development. While notable global progress has been made in achieving this goal in the recent past, with many men and women living longer than ever before, such progress has been uneven, as too many countries continue to experience high death rates.

Many governments have made commitments to significantly reduce child, maternal and adult mortality levels by 2030. However, the efforts currently envisioned for the 13 highest-mortality African countries must be greatly strengthened and supported so that their citizens can have the opportunity to live a long time in good health – like people in most of the developed world.

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