

THE STATE OF THE WORLD'S CHILDREN 1990



United Nations Children's Fund
(UNICEF)

THE STATE OF THE WORLD'S CHILDREN
1990

Oxford University Press, Walton Street,
Oxford OX2 6DP
Oxford New York Toronto Delhi Bombay Calcutta
Madras Karachi Pealing Jaya Singapore Hong Kong
Tokyo Nairobi Dar-es-Salaam Cape Town Melbourne
Auckland and associated companies in Beirut Berlin
Ibadan Nicosia

Oxford is a trade mark of Oxford University Press
Published in the United States by Oxford University
Press, New York

Any part of *The State of the World's Children* may be
freely reproduced with the appropriate acknowledgment.

British Library Cataloguing in Publication Data

The state of the world's children 1990

1. Children—Care and hygiene

613' 0432 R7101

ISBN 0-19-261927-6

ISSN 0265-718X

The Library of Congress has catalogued this serial
publication as follows:-

The state of the world's children—Oxford

New York: Oxford University Press for UNICEF v.:ill.;
20cm. Annual. Began publication in 1980.

1. Children—Developing countries—Periodicals. 2.
Children—Care and hygiene—Developing countries—
Periodicals. I. UNICEF.

IIQ 792.2.S73 83-647550 362.7 1'091724

UNICEF, UNICEF House, 3 U.N. Plaza, New York,
N.Y. 10017 U.S.A.

UNICEF, Palais des Nations, CH. 1211
Geneva 10, Switzerland.

Cover and design: Miller, Craig and Cocking, Woodstock, U.K.

Charts and tables: Stephen Hatzkins, Oxford Illustrators, Oxford, U.K.

Typesetting and Printing: Burgess & Son (Abingdon) Ltd, U.K.

Edited and produced for UNICEF and Oxford University
Press by P & L Adamson, Benson, Oxfordshire, U.K.

THE STATE OF THE WORLD'S CHILDREN 1990



James P. Grant
Executive Director of the
United Nations Children's Fund
(UNICEF)

PUBLISHED FOR UNICEF

Oxford University Press

CONTENTS



THE STATE OF THE WORLD'S CHILDREN

The principle of first call

On present trends, over 100 million under-fives will die in the 1990s and many times that number will grow up malnourished. But as the world struggles to free itself from the burdens of debt servicing and military spending, there are signs of a new concern for children. The prospect of a *World Summit for Children*, the new *Convention on the Rights of the Child*, and practical advances such as the near achievement of *Universal Child Immunization*, all represent progress towards the principle that children should be protected not only from specific abuse but from the sharpest edges of the political and economic processes which are always at work in adult society. If that principle were widely accepted, then it would now be possible to protect the health and the development of the great majority of the world's children – at an affordable cost.

page 1

The specific opportunities

There are six major low-cost opportunities for protecting the lives and health of children in the developing world in the 1990s. More than half of all child deaths and malnutrition can be attributed to vaccine-preventable disease, dehydration, and pneumonia – all of which can be prevented or treated at very low cost if today's new communications capacity is mobilized to inform and support the majority of families in using today's knowledge. Combined with advances in knowledge about nutrition, and about the importance of breast-feeding and birth spacing, these breakthroughs could save the lives of at least 50 million children and protect the normal growth of many millions more.

page 16

Priority to the poor

In addition to these specific opportunities, progress must be resumed towards the great goals of adequate food, water, health care and education for all. Even in difficult economic times, a new commitment to primary health care and primary education could make more efficient use of resources and re-accelerate progress.

page 37

The role of the rich world

The resumption of progress towards a world in which every family can meet basic needs will also require action from the industrialized nations. A resolution of the debt crisis and a resumption of investment is now in the interest of all parties. But increases in aid should be offered in support of the developing nation's own plans for specific reductions in absolute poverty and measurable improvements in the survival, health, and nutrition of children.

page 55

STATISTICS

<i>Table 1</i> basic indicators	USMR <input type="checkbox"/> IMR <input type="checkbox"/> population <input type="checkbox"/> births and infant and child deaths <input type="checkbox"/> GNP per capita <input type="checkbox"/> life expectancy <input type="checkbox"/> adult literacy <input type="checkbox"/> school enrolment <input type="checkbox"/> income distribution	<i>page 76</i>
<i>Table 2</i> nutrition	Low birth-weight <input type="checkbox"/> breast-feeding <input type="checkbox"/> malnutrition <input type="checkbox"/> food production <input type="checkbox"/> calorie intake <input type="checkbox"/> food spending	<i>page 78</i>
<i>Table 3</i> health	Access to water <input type="checkbox"/> access to health services <input type="checkbox"/> immunization of children and pregnant women <input type="checkbox"/> ORS use	<i>page 80</i>
<i>Table 4</i> education	Male and female literacy <input type="checkbox"/> radio and television sets <input type="checkbox"/> primary school enrolment and completion <input type="checkbox"/> secondary school enrolment	<i>page 82</i>
<i>Table 5</i> demographic indicators	Child population <input type="checkbox"/> population growth rate <input type="checkbox"/> crude death rate <input type="checkbox"/> crude birth rate <input type="checkbox"/> life expectancy <input type="checkbox"/> fertility rate <input type="checkbox"/> urbanization	<i>page 84</i>
<i>Table 6</i> economic indicators	GNP per capita <input type="checkbox"/> annual growth rates <input type="checkbox"/> inflation <input type="checkbox"/> poverty <input type="checkbox"/> government expenditure <input type="checkbox"/> aid <input type="checkbox"/> debts	<i>page 86</i>
<i>Table 7</i> women	Life expectancy <input type="checkbox"/> literacy <input type="checkbox"/> enrolment in school <input type="checkbox"/> contraceptive use <input type="checkbox"/> tetanus immunization <input type="checkbox"/> trained attendance at births <input type="checkbox"/> maternal mortality	<i>page 88</i>
<i>Table 8</i> less populous countries	Basic indicators on less populous countries	<i>page 90</i>
<i>Table 9</i> the rate of progress	USMR reduction rates <input type="checkbox"/> GNP per capita growth rates <input type="checkbox"/> fertility reduction rates	<i>page 91</i>
notes	General note on the data, signs and explanations	<i>page 74</i>
	Footnotes to tables 1-9, definitions, main sources	<i>page 94</i>

PANELS

Immunization: a league table	1	Facts for Life: the top ten messages	12
The Convention: on the rights of the child	2	All for Health: an information revolution	13
Adjustment: with a human face	3	Health workers: what they can do	14
Egypt: shots and salts	4	Indonesia: 800,000 volunteers	15
Measles and tetanus: priorities for the 90s	5	Uganda: health in 8,000 schools	16
Missed opportunities: for 80% immunization	6	Zimbabwe: education for all	17
Breast-feeding: ten out of ten service	7	Education: breakthrough in Bangladesh	18
Iodine: the ten years war	8	Aids: the threat to children	19
Vitamin A: the story so far	9	Debt relief: for child survival	20
Guinea worm disease: elimination by mid 90s	10	Goals for the 90s: what can be achieved	21
Science for children: research in the 1990s	11		

panels editor: Glen Williams

TEXT FIGURES

- Fig. 1 Alternative global projections of under-five deaths and lives saved, 1980–2000
- Fig. 2 Total number of 6 to 11-year-olds not enrolled in primary schools in the developing world, 1960–1987
- Fig. 3 Immunization coverage of children under one year in the developing world, 1980–88
- Fig. 4 Annual deaths of children under five by main causes
- Fig. 5 Results of typical 'missed opportunities survey' (children attending clinics for other purposes who were not screened for immunization)
- Fig. 6 Vaccine preventable diseases: deaths, and cases of polio, prevented and still occurring, 1988
- Fig. 7 Percentage of children under five with diarrhoea being treated with ORT, annual deaths prevented and still occurring, developing countries, 1984–88
- Fig. 8 Infant mortality by age of mother, birth order, and interval between births, Brazil, 1976–86

预览已结束，完整报告链接和二维码如下：

https://www.yunbaogao.cn/report/index/report?reportId=5_6338

