

Fayik Amin Nosair. 2005.

Levels, Trends and Differentials of Infant and Child Mortality in Egypt, 1990 - 1999.

The current study aims mainly at investigating the levels, time trends, and differentials in infant and child mortality in Egypt during the ten years before 2000 EDHS. The first one concerns the estimation of levels, age patterns and time trends of infant and child mortality. Mortality rates are estimated for different age period of under-five mortality, namely neonatal, post-neonatal, infant, childhood and under-five age periods. The effect of the proximate biomedical and the distant factors on infant and child mortality. TO address this question the study was guided by the conceptual framework of Chen (1980). To achieve this target β coefficients, odd ratios or relative risk of child death, and also probabilities of child death were estimated, using logistic regression analysis, for each age period of under-five-mortality (NN, P-NN, IM and childhood age periods)and childhood age periods) the findings showed that infant and child mortality rates have deadly declined over the last twenty years. The ratio between infant mortality and under-five mortality revealed that majority of less than five deaths were increasingly concentrated during infancy period. All available variables that thought to affect infant and child mortality were selected. These are eight demographic factors (age of child, sex of child, multiplicity age of mother at child birth, birth order, blood relationship, size of child at birth and inter-birth interval). Both bivariable and multivariate analysis showed that all selected demographic variables are powerful predictors of mortality during neonatal and post-neonatal sub-periods. The study showed also that the infant mortality in twin births are significantly much higher than singletons. Both bivariable and multivariate analyses showed that the presence of blood relationship between child's parents significantly increases the risk of infant mortality. Effects of both assistance at delivery and place of delivery on neonatal mortality are found to be contrary to what expected. Bivariable analysis showed that the risk of infant mortality was much lower among births born to educated mothers, residing in urban areas.