

Child mortality in Kiribati: a wake-up call for urgent action

by Rachel Nunn, Tinte Itinteang, Nabura Ioteba and William Tan

1 November 2024



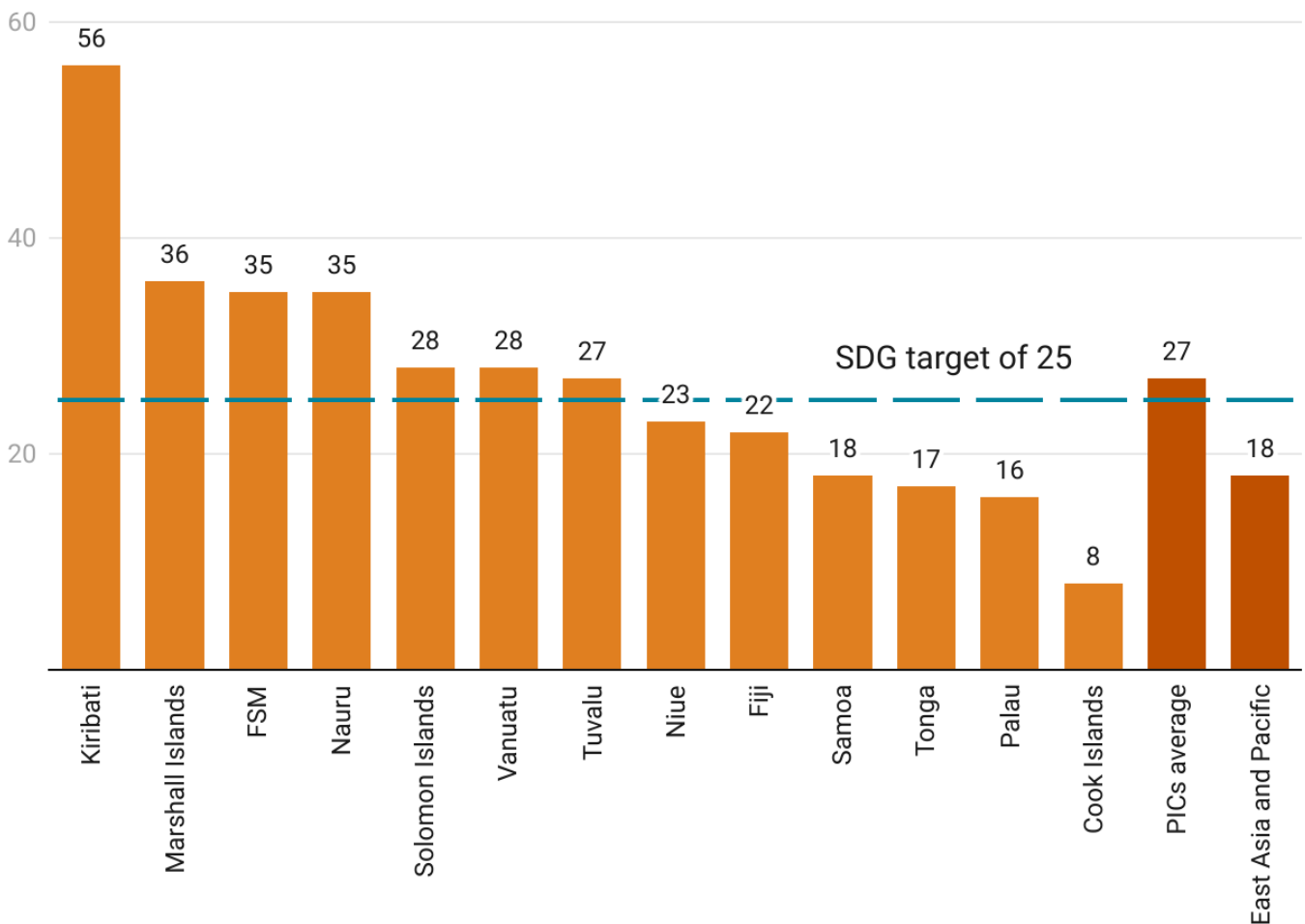
The opening of a New Zealand government-funded community health clinic in Banana, Kiribati, September 2023

Kiribati faces one of the highest child mortality rates in the region, with under-5 mortality rates (U5MR) remaining stubbornly high for more than a decade. According to UNICEF's 2016 State of the World's Children report, Kiribati recorded **56 deaths per 1,000 live births** in 2015, a figure alarmingly higher than both regional and global averages.

Compared to other Pacific island nations, Kiribati's U5MR is more than **twice the regional average** of 27 per 1,000 live births (Figure 1). Neighbouring countries like Cook Islands have achieved a U5MR of just 8 per 1,000 but Kiribati continues to grapple with a healthcare crisis that puts the lives of its youngest and most vulnerable at risk.

Figure 1: Under-5 mortality rates in Pacific island countries

Deaths per 1,000 live births.



Data for Tokelau was not available.

Source: State of the World's Children UNICEF Report 2016 • Created with Datawrapper

While other Pacific nations have made strides towards reducing child mortality, Kiribati has struggled to achieve even modest progress, leaving it far from reaching the Sustainable Development Goal (SDG) target of reducing U5MR to 25 per 1,000 live births by 2030. This disparity raises serious questions about the adequacy of health interventions in the country.

UNICEF, the World Health Organization and the UN Population Fund have been present in Kiribati for many years, yet their activities have failed to result in the desired outcomes. These organisations, while crucial in shaping global health policies, have failed to implement impactful strategies in Kiribati. Their efforts have often been more focused on paperwork than on practical, life-saving healthcare solutions. This pattern of “paper progress” — producing reports and attending meetings — has done little to address the realities on the ground.

Kiribati’s small size and perceived lack of geopolitical influence have contributed to

this neglect. Larger nations in the Pacific, such as Fiji and Solomon Islands, have historically received more attention and resources from global health actors, leaving Kiribati to suffer the consequences of inequitable resource distribution.

One of the key factors contributing to Kiribati's ongoing child mortality crisis is the misallocation of resources. International donors and health organizations have funnelled resources into projects that, while valuable in a broader context, have not directly addressed Kiribati's most pressing healthcare needs — namely, maternal and child health services.

The Government of Kiribati, through the Ministry of Health and Medical Services, has taken steps to develop new, locally led partnerships aimed at tackling its child mortality crisis. In 2023, Kiribati signed key agreements with [Victoria University of Wellington](#) (VUW), [Plunket Nursing New Zealand](#), and Te Vaka Atafaga Pacific Nursing, marking the beginning of a new chapter in the country's healthcare efforts. This year, these partnerships will play a pivotal role in the establishment of the Child Community Nursing Outreach Program (CCNOP), a key initiative that will recruit nursing staff from Kiribati and train them within the New Zealand health service delivery system, as well as providing the opportunity for their partners to visit and learn from the Kiribati context, with the aim of developing a culturally sensitive and contextualised program.

The government is well aware that the current limitations of health service delivery in Kiribati start and end when the patient enters and leaves either one of the four hospitals or community-based clinics. The ultimate goal of CCNOP is to extend service provision into people's homes, where the determinants of sickness and wellbeing are.

As part of this initiative, two nurses have already begun their postgraduate qualifications in midwifery at VUW at the start of 2024, with plans for additional training and capacity building efforts to follow. The CCNOP program represents a shift towards sustainable, culturally appropriate community-based healthcare that is more closely aligned with the needs of the people of Kiribati. It is a promising step, but it requires continued support and investment to succeed.

The international community has a moral obligation to protect the health and future of every child, regardless of where they live. Kiribati's persistently high child mortality rate is a stark reminder of the inequalities that exist in global health efforts. It is time for true partnerships — partnerships that go beyond rhetoric and result in meaningful, life-saving actions on the ground.

The children of Kiribati deserve better. They deserve healthcare systems that are

equipped to protect them from preventable diseases and provide them with the chance to grow and thrive. The establishment of the CCNOP and the recruitment, training, and support of dedicated nursing staff are important first steps, but more needs to be done.

Hear Kiribati's Minister for Health and Medical Services Tinte Itinteang talk about the new Child Community Nursing Outreach Program on the [Good Will Hunters podcast](#).

Author/s:

Rachel Nunn

Rachel Nunn works with a range of social and development sector clients as an independent consultant. Rachel is the founder of the Good Will Hunters podcast.

Tinte Itinteang

Tinte Itinteang is the Minister for Health and Medical Services in the Republic of Kiribati.

Nabura Ioteba

Nabura Ioteba is an i-Kiribati doctor and public health specialist based in New Zealand.

William Tan

William Tan is the Liaison Officer for Kiribati's Ministry of Health and Medical Services and is based in Singapore. He coordinates essential health programs and international partnerships.

Link: <https://devpolicy.org/child-mortality-in-kiribati-a-wake-up-call-for-urgent-action-20241101/>