

# **Medical and social aspects of demography**

**Demography**  
is the statistical study of populations,  
especially human beings

**Demography** (prefix *demo-* from Ancient Greek meaning "the people", and *-graphy* implies "writing, description or measurement")

**The statistical study of population conducted in two main directions:**

- Statics of the population (the population at a given time, composition of the population by sex, age, occupation, marital status, language, education, etc.).
- Population Dynamics (changes in the number of people): the mechanical movement of the population and the natural movement of the population or reproduction

## **Indicators of population statistic are needed to:**

- **natural movement indicators calculation**
- **planning the work of the whole health system**
- **determining the need for different types of medical care**
- **determine the required amount of budgeted funds for health care**
- **the organization of anti-epidemic work, etc.**

The most reliable source of information about the statics of the population is **population census**

**Census - a global (full) population registration when takes place the collection of demographic, economic and social data characterizing each inhabitant of the country or administrative territory in a certain time**

**The main features of modern censuses:**

**periodicity, universality, simultaneity, unity of methods, a centralized data processing**

## **Mechanical population movement - population change under the influence of migration processes**

«**Migration**» (*stem from Latin migrātus - migrāre ... to move from place to place, change position or abode*)

**Human migration** is the movement by people from one place to another with the intentions of settling, permanently or temporary in the new location.

- **The main reasons for migration:** socio-economic, political, military, natural and climatic. The past ones include natural disasters (earthquakes, floods, etc.).

## **Types of migration:**

- **Irrevocable migration (with a constant change of residence)**
- **Revocable (temporary)**
- **Seasonal migration**
- **Pendulum migration (commuting rides to and from work or study outside their locality)**
- **External (emigration, immigration) and internal (inter-regional migration and resettlement of residents from rural to urban)**
- **Over the last 2 centuries, the world population is characterized by the process of urbanization (from the Latin «urbs» - city) - increasing the role of cities in the development of society**

## **Migration has a great medical and social importance:**

- **Urbanization alters the environment affects the structure of morbidity and mortality**
- **Pendulum migration - leads to an increase in injuries and contributes to the spread of infectious diseases**
- **Seasonal migration leads to uneven loading of medical organizations**
- **Health indicators of migrants differ from health indicators of the indigenous population**

The natural movement of the population - a set of processes of birth, mortality and natural growth that provide generational renewal and change

- **The main components of the population natural movement:**
- **birth rate (natural process of the population renewal)**
- **mortality (the process of natural population decline)**
- **population growth**  
If birth rate exceeds death rate of a population => natural increase of a population  
If death rate exceeds birth rate of a population => natural decrease of a population
- **average life expectancy**



**Birth rate is characterized by statistically registered number of live births in a given population over a certain period of time**

**For the analysis of major trends of natality using the following statistics indicators:**

- **The total fertility rate**
- **Special fertility rate**
- **Age-specific birth rates**
- **Aggregated fertility rate**



## **Factors affecting natality**

- **Age, sex and marital structure of the population**
- **The social position of women**
- **The level of material well-being**
- **The cultural level**
- **Living conditions**
- **Urbanization, migration**
- **National traditions, religious factors**
- **Demographic aging of population**
- **State demographic policy**

*To ensure birth registration* in the Russian Federation approved the account form "Medical birth certificate» №103/y

**Mortality is characterized by statistically recorded number of deaths in a given population over a certain period of time**

**For the analysis of mortality statistics are used:**

- **Crude death rate (total mortality rate)**
- **Age-specific death rates**
- **Indicators of mortality patterns per reasons**
- **The maternal mortality rate**
- **The infant and child mortality coefficients**
- **Perinatal mortality rate**
- **Coefficient of stillbirth**

## Method of calculating the crude death rate

$$\frac{\text{the total number of deaths per year} \times 1000}{\text{average annual population}}$$

### *Evaluation levels of total mortality (WHO):*

- **Low** 7-10 %
- **Medium** 11-15 %
- **High** 16-20 %

## **Factors affecting the mortality rate:**

- **Demographic aging of the population (in the age structure when more than 12% of persons aged 60 years and older)**
- **Lifestyle of the population**
- **The current state of medical science**
- **The availability and quality of care, and others.**

*To ensure the registration of mortality in the Russian Federation approved the account form "Medical death certificate» №106 / y*

## **Infant mortality - deaths of children in the first year of life**

**A simple way to calculate the infant mortality rate (crude rate):**

$$\frac{\text{the number of children who died during the year at the 1st year of life}}{\text{the number of live births in given calendar year}} \times 1000$$

The calculation methodology of the infant mortality rate recommended by the WHO (Raatz formula)

**the number of children who died  
during the year  
at the 1st year of life × 1000**

**2/3 live births + 1/3 live births in  
in a given calendar the previous year  
year**

*Evaluation levels of the indicator according to the WHO:*

<b>Very low</b>	<b>6-10‰</b>
<b>Low</b>	<b>11-15‰</b>
<b>Medium</b>	<b>16-23‰</b>
<b>High</b>	<b>above 24‰</b>



## **Causes of infant mortality (by primary causes of death)**

- **Certain conditions originating in the perinatal period**
- **Congenital anomalies (malformations) and chromosomal abnormalities**
- **Respiratory diseases**
- **External causes**
  
- **Factors affecting infant mortality: mother's health and way of life, the pregnant woman should in time be registered in the antenatal clinic, peculiarities of pregnancy, labor (parturition) management tactics, newborn care , etc.**

**Perinatal mortality (mortality in the perinatal period: 22 weeks of gestation before birth, during childbirth, in the first 168 hours of life)**

**Perinatal mortality index :**

**number of born dead + the number of deaths during the first  
168 hours of life × 1000**

**the number of live and dead births**

***The main causes of perinatal mortality:***

**states of the perinatal period, congenital anomalies, hemolytic diseases of the newborn, fetal infection**

**To ensure the registration of perinatal mortality in the Russian Federation approved the accounting form  
"Medical certificate of perinatal death» №106-2 / y**

## **The overall rate of natural increase**

- **This is the difference between total fertility rates and mortality rates for a certain period of time**
- **The negative natural increase in all cases evidence of negative processes in the public health**
- **Low natural increase with high mortality also indicates a unfavorable demographic situation**
- **High natural increase can be seen as a favorable demographic phenomenon only in low mortality rates.**

## **Life expectancy**

- **This is a hypothetical number of years which shall be lived by this generation ( born or living among a certain age), provided that throughout the life of deaths in each age group will be the same as it was in the year for which the calculation is made**
- **The indicator characterizes the viability of the population as a whole and does not depend on the population age structure**