

**The Impact of Health Insurance on Infant Mortality Rate in Switzerland and the U.S.**

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## **The Impact of Health Insurance on Infant Mortality Rate in Switzerland and the U.S.**

Infant mortality rate is one of the ways we gauge the overall health of a society. It helps to generate information on maternal and infant health. When comparing the infant mortality rates of Switzerland and the United States, it can be found that Switzerland's is lower than that of the U.S. Infant mortality rate can be defined as the death of a child before their first birthday and is measured as the number of deaths per every 1,000 live births (Centers for Disease Control and Prevention, 2021). There are many factors that can affect these numbers including the sex of the child, multiple births from the mother, prematurity, place of residence, wealth index, birth interval, maternal age, maternal education, domestic violence, health related behavior like delaying in seeking health care, SES, and metabolic disorders (Baraki, A. G. et. al, 2020). One other factor is the health insurance policies in each of the countries, which can help to explain the differences between the infant mortality rate of Switzerland and the United States. The purpose of this paper is to examine why Switzerland's infant mortality rate is lower than that of the United States.

### **Infant Mortality in the United States and Switzerland**

The infant mortality rate in the United States has significantly decreased from 1960. In 1960 the rate was 457 deaths per 100,000 live births and declined rapidly reaching 83.6 deaths per 100,000 live births by 1988 (Singh & Yu, 2019). This decline has continued throughout the years, bringing the current rate all the way down to only 5.7 deaths per 1,000 live births (Organization for Economic Co-operation and Development, 2021). It has been found that the leading factors of infant mortality include birth defects, preterm birth and low birth weight, injuries, sudden infant death syndrome, and maternal pregnancy complications (Centers for Disease Control and Prevention, 2021). Similar to the leading factors in the United States,

preterm birth and low birth weight along with maternal pregnancy complications have an effect on Switzerland's infant mortality rate. However, Switzerland has also found that other factors of infant mortality in the country include the nationality of parents, age of mother, birth of twins, low social class, inadequate quality of care including poor communication, and discrimination against migrant mothers in receiving societies poverty (Wanner & Bollini, 2017).

Regardless of these risk factors, Switzerland has been able to improve their infant mortality rate by keeping it at a steady decline over the years. In 1875 the rate was 198 deaths per 1,000 live births and due to the steady decline overtime has dropped to 3.7 deaths per 1,000 live births (O'Neill, 2019). While Switzerland has the highest infant mortality rate of all Western European countries and the highest percentage of the foreign population at 23%, it is lower than that of the United States (Wanner & Bollini, 2017). It can be argued that the difference between the rates of these two countries may be partly due to the differences in their healthcare and interventions. While there are many factors of infant mortality, interventions can be used around the world to lower the risks they pose. Currently, interventions are focused on expanding our current knowledge and focusing on data found through research. This includes improving our understanding of Sudden Unexpected Infant Death (SUID) and Sudden Infant Death Syndrome (SIDS) and building support to improve child and maternal health (Centers for Disease Control and Prevention, 2020). Building support to improve child and maternal health can be a part of intervention as well as prevention and is much more effective when covered under health insurance.

### **Differences in Health Care Coverage**

As of 2019, health insurance is no longer mandatory in the United States at the federal level (Lake, 2021). While this may allow citizens the freedom to make a choice as to whether or

not they want to invest in health insurance, some people just may not be able to afford it therefore not having any assistance for maternity, prenatal, and post-natal care. When looking at the specific plans one can receive, it was found that all health insurance plans cover pregnancy to a certain degree. The coverage of pregnancy under these plans refers to prenatal care, inpatient services, postnatal care, and newborn care. These services were put into place by the Affordable Care Act in 2014; however, every pregnancy is different and will have varying costs. Before 2014, only 12% of individual plans listed pregnancy as a covered benefit. If an individual does not have health insurance and gets pregnant, it is possible they have the opportunity to qualify for government health insurance programs. These programs may be free or discounted but can still be at a large medical and monetary disadvantage (eHealth, 2022). Specific services that are covered under health insurance plans in the United States include some outpatient and inpatient services, newborn baby care, and lactation counseling and devices. The outpatient services covered include prenatal and postnatal doctor visits, gestational diabetes screenings, lab studies, medications, along with a few others while the inpatient services covered usually include hospitalization and physician fees. When it comes to out-of-pocket spending amounts vary depending on factors such as the metallic tier of coverage, deductibles, copayments, and which providers are chosen (eHealth, 2022). This can be found to be the same regarding Switzerland's out-of-pocket spending however, coverage laws and factors differ.

When examining Switzerland's health insurance policies, it can be found that it is both universal and mandatory while also having a variety of private insurance to choose from and purchase if able (Tikkanen et al., 2020). Under the coverage of the mandatory insurance, costs begin to be covered at the 12th week of pregnancy. This includes tests, check-ups, ante-natal classes, delivery, and breastfeeding consultations. Education for mothers during pregnancy is

encouraged and also covered under insurance. This is important because maternal education, specifically the lack of it, is one of the factors that may increase the chances of infant mortality. The baby will have full coverage with the mother if it is healthy and remains in the hospital and will continue to have this coverage until 8 weeks after birth, but will need its own health insurance when it is born. Within these 8 weeks, there will also be some post-natal classes included within the coverage which gives more focus to maternal education. When it comes to the choice of medical professionals, pregnant women have many choices to choose from such as using midwives, obstetricians, or GP's for prenatal checks as well as delivery at home, in hospital, or in a birth house (Expatica, 2022). With their wide range of coverage for services needed within a pregnancy, including the emphasis on maternal education, Switzerland offers better coverage options to expecting mothers than the United States.

## **Conclusion**

With the purpose of this paper being to examine why Switzerland's infant mortality rate is lower than that of the United States, it was found that the differences in the healthcare systems between the two are large contributing factors. In the U.S. some people do not have or cannot afford healthcare and it is not mandatory. Therefore, the number of people without healthcare is greater which prevents proper care to those who don't have it. It may also prevent them from trying to receive any medical care due to the costs, putting their lives as well as the babies lives at greater risk. Switzerland's health insurance is not only mandatory, but covers some pre and post-natal classes which increases maternal education. The increase in education also lessens the risk of infant mortality because the mother is more versed in what to do in certain situations. In conclusion, Switzerland's healthcare laws and coverage provide a better environment for the safety of both mother and child before, during, and after pregnancy.

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