Cost-Effectiveness of Interventions to Improve Maternal, Newborn and Child Health Outcomes: A WHO-CHOICE Analysis for Eastern Sub-Saharan Africa and South-East Asia International Journal of Health Policy and Management (IJHPM)

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Supplementary file 2. Details on cost inputs and prices used in analysis.

Table S2.1. Cost inputs – including average outpatient visits, health worker time, and health products, per intervention.

| Numb er | Interventio n Name | Short name | Intervention Definition | Target population in need of intervention | Health Programm e | Service delivery platform | Average number of outpatient visits and inpatient bed days per person (facility level)* | Specialize d staff, time * per person receiving the interventi on - if applicabl e | Drugs and supplies (including diagnostics and essential equipment) |
|------------|-----------------------|----------------|---|--|----------------------------|---------------------------------|---|--|---|
| | Single interve | entions | | | | | | | |
| 1 | Family planning | MNCH _1. FP | Women of reproductive age (15-49 years) in union are provided with counseling and information on different methods for contraception. Modern methods include pills and condoms, injectables, IUD, implant, and sterilization, based on country-specific profile of contraceptive methods use. | Women of reproductive age (15-49 years) in union | Maternal and newborn | Primary level care | Varies by country (dependent on method use) | Sterilizati on methods require on average 69 minutes of time with Other specialist doctor (Ob/Gyn) | Country specific methods mix: Pill - Standard daily regimen Condom - Male Injectable - 3 month (Depo Provera) IUD - Copper-T 380-A IUD (10 years) Implant - Jadelle (5 years) Implant - Sino-Implant (4 years) Female sterilization Male sterilization Vaginal barrier method Vaginal tablets |

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| 2 | Folic acid supplementa tion | MNCH _2. FAS | All women, from the moment they begin trying to conceive until 12 weeks of gestation, should take a folic acid supplement (400 µg folic acid daily) | Pregnant women | Nutrition | Primary level care, incl. communi ty | 2 outpatient visits | - | Ferrous Salt + Folic Acid, tablet, 60 + 0.4 mg |
|---|--|--------------------|--|---|--|--|-----------------------------|---|--|
| 3 | Safe abortion services | MNCH _3. SA | Safe abortion provided to women seeking to terminate pregnancy. Methods include manual or electric vacuum aspiration and medical abortion (mifepristone followed by a prostaglandin). | Women seeking to terminate pregnancy (incidence of abortion) | Maternal and newborn | Primary level care | 1.5 outpatient visits | - | Depending on type of abortion: Lidocaine HCl (in dextrose 7.5%), ampoule 2 ml; Oxytocin, injection, 10 IU in 1 ml ampoule; Syringe, needle + swab; Misoprostol, tablet, 200 mcg; Paracetamol, tablet, 500 mg |
| 4 | Post abortion case management | MNCH _4. PAC | Treatment of women experiencing complications after undergoing unsafe abortions. Complications include haemorrhage, sepsis, peritonitis, and trauma to the cervix, vagina, uterus, and abdominal organs. | Women seeking to terminate pregnancy (incidence of abortion) | Maternal and newborn | Hospital | 2 inpatient bed days | - | Misoprostol, tablet, 200 mcg; Paracetamol, tablet, 500 mg; Ampicillin, powder for injection, 500 mg, vial; Gentamycin, injection, 40 mg/ml in 2 ml vial; Metronidazole, injection, 500 mg in 100 ml vial; Tetracycline, tablet, 500 mg; Foley catheter; Lidocaine HCl (in dextrose 7.5%), ampoule 2 ml; Syringe, needle + swab; Methylergometrine, Injection 0.2 mg/ml, 1 ml amp; Pethidine, 50 mg/ml, 2 ml ampoule; Sodium chloride, injectable solution, 0,9 %, 500 ml |
| 5 | Calcium supplementa tion in pregnant women for the prevention and management | MNCH _5. CS | In populations with low dietary calcium intake, daily calcium supplementation (1.5 g–2.0 g oral elemental calcium) is recommended for pregnant women to reduce the risk of preeclampsia. | Pregnant women | Nutrition; Maternal and newborn | Primary level care | 4 outpatient visits | - | Calcium, tablet, 600 mg |

| | of pre- eclampsia/ec lampsia | | | | | | | | |
|----|--|---------------------|---|---|--|--|-----------------------|---|--|
| 6 | Daily iron and folic acid supplementa tion in pregnant women | MNCH _6. DIFA | Daily oral iron and folic acid supplementation with 30 mg to 60 mg of elemental iron and 400 µg (0.4 mg) folic acid is recommended for pregnant women to prevent maternal anaemia, puerperal sepsis, low birth weight, and preterm birth. | Pregnant women | Nutrition; Maternal and newborn | Primary level care, incl. communi ty | 4 outpatient visits | - | Ferrous Salt + Folic Acid, tablet, 60 + 0.4 mg |
| 7 | Balanced energy- protein supplementa tion to pregnant women living in areas with high food insecurity Balanced | MNCH _7. BEPS | In undernourished populations, balanced energy and protein dietary supplementation is recommended for pregnant women to reduce the risk of stillbirths and small for gestational age neonates. | Pregnant women living in areas with high food insecurity (based on income per capita) | Nutrition; Maternal and newborn | Primary level care, incl. communi ty and outreach | 1 outpatient visit | - | Corn Soy Blend for 6 months |
| 8 | Tetanus toxoid vaccination | MNCH _8. TT | Two injections of tetanus toxoid vaccine. | Pregnant women | Immunizati on; Maternal and newborn | Primary level care | 2 outpatient visits | - | Tetanus toxoid, injection; Syringe, needle + swab |
| 9 | Intermittent presumptive treatment of malaria in pregnancy | MNCH _9. IPTM | Intermittent presumptive treatment of malaria of all pregnant women living in areas endemic for P. falciparum. | Pregnant women living in areas endemic for P. falciparum. | Malaria; Maternal and newborn | Primary level care | 2 outpatient visits | - | Sulfamethoxazole + trimethropin, tablet 400 mg + 80 mg |
| 10 | Syphilis detection and treatment in pregnancy | MNCH _10. SYP | Screening pregnant women by rapid plasma reagent test and treatment of sero- positive cases with penicillin. | Pregnant women | Maternal and newborn | Primary level care | 2 outpatient visits | - | Blood collecting tube, 5 ml; Gloves, exam, latex, disposable, pair; Syringe, needle + swab; Test, Rapid plasma reagin (RPR); |

| 11 | Hypertensiv | MNCH | Management of moderate to | Pregnant | Maternal | Primary | 5 outpatient | | Benzathine benzylpenicillin, powder for injection, 2.4 million IU; Water for injection, 5 ml ampoule Proteinuria test (dipstick) |
|----|---|---------------------|---|--|----------------------------|------------|------------------------|---|--|
| | e disease case management in pregnancy | _11. CMHD | severe hypertension without proteinuria | women | and newborn | level care | visits | 1 | |
| 12 | Management | MNCH | Management of | Pregnant | Maternal | Primary | 5 outpatient | - | Bag, urine, collecting, 2000 ml; |
| | of pre- eclampsia | _12. MPE | hypertension and mild pre- eclampsia through | women | and newborn | level care | visits + 0.5 inpatient | | Foley catheter; |
| | (mild and | | outpatient care; | | ne weem | | bed days | | Test strips, urine analysis; |
| | severe) | | management of severe pre- eclampsia through with magnesium sulfate through | | | | | | Hydralazine, powder for injection, 20 mg ampoule; |
| | | | inpatient care | | | | | | IV giving/infusion set, with needle; Sodium lactate injection (Ringer's), 500 ml, with giving set; |
| | | | | | | | | | Misoprostol, tablet, 200 mcg; |
| | | | | | | | | | Oxytocin, injection, 10 IU in 1 ml ampoule; Sodium chloride, injectable solution, 0,9 %, 500 ml; |
| | | | | | | | | | Magnesium sulfate, injection, 500 mg/ml in 10-ml ampoule; |
| | | | | | | | | | Syringe, needle + swab; |
| | | | | | | | | | Water for injection, 10 ml ampoule; Lidocaine HCl (in dextrose 7.5%), ampoule 2 ml |
| 13 | Ectopic pregnancy case management | MNCH _13. ECT | Surgical intervention (laparoscopy or laparotomy) to interrupt an ectopic pregnancy. | Pregnant women with ectopic pregnancy | Maternal and newborn | Hospital | | 240 minutes N/M; 60 minutes MD; 120 minutes Other specialist doctor | |

| 14 | Neonatal resuscitation | MNCH _14. NR | Detection of breathing problems and resuscitation of newborn when required, using bag and mask. | Newborn | Maternal and newborn | Primary level care | 1 inpatient bed day | minutes N/M; 3 minutes other specialist doctor | Resuscitator,hand- operated.,infant/child,set |
|----|---|-----------------------|--|-------------------|----------------------------|-----------------------|-------------------------|---|--|
| 15 | Clean cord care (clean birth practices) | MNCH _15. CCC | Umbilical cord cleansing, with chlorhexidine or other disinfectant. | Newborn | Maternal and newborn | Primary level care | 1 outpatient visit | - | Chlorhexidine digluconate (10 ml bottle) |
| 16 | Antibiotics for preterm premature rupture of membranes. | MNCH _16. PPROM | Hospitalization prior to delivery, with administration of oral antibiotics to women with preterm premature rupture of membranes. | Pregnant women | Maternal and newborn | Hospital | 2 inpatient bed days | 30 minutes N/M | Amoxicillin, caplet, 250 mg; Erythromycin, tablet, 250 mg |
| 17 | Management of eclampsia with Magnesium- Sulphate | MNCH _17. MEMS | Management of convulsions associated with eclampsia, occurring ante-, intra- or postpartum. | Pregnant women | Maternal and newborn | Hospital | 7 inpatient bed days | 1440 minutes N/M; 60 minutes MD | Bag, urine, collecting, 2000 ml; Foley catheter; Test strips, urine analysis; Hydralazine, powder for injection, 20 mg ampoule; IV giving/infusion set, with needle; Sodium lactate injection (Ringer's), 500 ml, with giving set; Misoprostol, tablet, 200 mcg; Oxytocin, injection, 10 IU in 1 ml ampoule; Sodium chloride, injectable solution, 0,9 %, 500 ml; Magnesium sulfate, injection, 500 mg/ml in 10-ml ampoule; Syringe, needle + swab; Water for injection, 10 ml ampoule; Lidocaine HCl (in dextrose 7.5%), ampoule 2 ml |
| 18 | Management of maternal sepsis | MNCH _18. MMS | Management of sepsis symptoms within 42 days of delivery. | Pregnant women | Maternal and newborn | Hospital | 5 inpatient bed days | 60 minutes N/M; 180 | Amoxicillin, caplet, 250 mg; Ampicillin, powder for injection, 500 mg, vial; |

| | | | | | | | | minutes Other staff | Gentamycin, injection, 40 mg/ml in 2 ml vial; Metronidazole, injection, 500 mg in 100 ml vial; Syringe, needle + swab; Water for injection, 5 ml ampoule; Bag, urine, collecting, 2000 ml; Foley catheter; Gloves, surgeon's, latex, disposable, sterile, pair; IV giving/infusion set, with needle; Lancet, blood, disposable; Oxygen, 1000 liters, primarily with oxygen cylinders; Paracetamol, tablet, 500 mg; Sodium chloride, injectable solution, 0,9 %, 500 ml; Complete blood count |
|----|--|----------------------|---|-------------------------|--|--|-----------------------|------------------------|--|
| 19 | Promotion of breastfeedin g | MNCH _19. BF | Promotion of early and exclusive breastfeeding through skilled care providers and community health workers | Newborn | Nutrition; Maternal and newborn | Primary level care, incl. communi ty | 6 outpatient visits | - | |
| 20 | Home visits for clean postnatal practices | MNCH _20. CPNP | Home visits within 48 hours of delivery to promote clean practices, specifically that the mother washes her hands frequently, the child lives in a clean environment, and no harmful practices are performed. | Newborn | Maternal and newborn | Commun ity level | 1 outpatient visit | - | Clean delivery kit |
| 21 | Vitamin A supplementa tion (0-4 years) | MNCH _21. VAS | Vitamin A supplementation for children 6-59 months of age in countries (or sub- national areas in some cases) where vitamin A deficiency is a public health problem | Children 6-59 months | Nutrition; Child | Commun ity level | 2 outpatient visits | - | Vitamin A, caplet, 100,000 IU / 200,000 IU |

| 22 | Promotion of complement ary feeding | MNCH _22. CF | Comprehensive counselling for the caregiver of a child (two full sessions) on the importance of continued breastfeeding after six months of age along with information on appropriate complementary feeding practices, through skilled care providers and community health workers | Children 6-11 months | Nutrition; Child | Primary level care, incl. communi ty | 3 outpatient visits | - | |
|----|--|---|--|----------------------|---------------------|--|---------------------|---|---|
| 23 | DPT vaccine | MNCH _23.DP T | 3 doses of DPT vaccine | Newborn | Immunizati on | Primary level care | 3 outpatient visits | - | DTP vaccine; Syringe, auto-disposable, 0.5 ml, with needle; Safety box for used syringes/needles, 5 liter |
| 24 | H. influenzae b vaccine | MNCH _24. HIB | 3 doses of HiB vaccine | Newborn | Immunizati on | Primary level care | 3 outpatient visits | - | Hib vaccine; Syringe, auto-disposable, 0.5 ml, with needle; Safety box for used syringes/needles, 5 liter |
| 25 | Pneumococc al vaccine | MNCH _25. PCV | 3 doses of Pneumococcal vaccine | Newborn | Immunizati on | Primary level care | 3 outpatient visits | - | Pneumococcal vaccine; Syringe, auto-disposable, 0.5 ml, with needle; Safety box for used syringes/needles, 5 liter |
| 26 | Rotavirus vaccine | MNCH _26. ROTA | 3 doses of Rotavirus vaccine | Newborn | Immunizati on | Primary level care | 3 outpatient visits | - | Rotavirus vaccine |
| 27 | Pentavalent vaccine (DPT + Hep B + Hib) | MNCH _27. PENTA (DPT + HEPB + HIB) | 3 doses of Pentavalent vaccine (a combination of five vaccines-in-one to prevent diphtheria, tetanus, whooping cough, hepatitis b and haemophilus influenza type b). | Newborn | Immunizati on | Primary level care | 3 outpatient visits | - | Pentavalent vaccine (DPT, Hep B, Hib); Syringe, auto-disposable, 0.5 ml, with needle; Safety box for used syringes/needles, 5 liter |
| 28 | Measles vaccine | MNCH _28. MCV | 2 doses of Measles vaccine | Newborn | Immunizati on | Primary level care | 2 outpatient visits | - | Measles vaccine; Syringe, auto-disposable, 0.5 ml, with needle; Safety box for used syringes/needles, 5 liter |

| 29 | Kangaroo mother care (KMC) | MNCH _29. KMC | Inpatient support to Kangaroo Mother Care, defined as continuous skin- to-skin contact between a mother and her newborn as well as frequent and exclusive breastfeeding. | Newborn | Maternal and newborn | Hospital | 5 inpatient bed days | 30 minutes N/M | |
|----|--|-----------------------------|---|----------------------|----------------------------|-----------------------|--------------------------|---|--|
| 30 | Full supportive care for premature babies | MNCH _30. FSC | Prematurely born neonates receive hospital-based full supportive care, including KMC, feeding support/IV fluids, infection prevention/management, oxygen provision, management of neonatal jaundice, nasal CPAP/IPPV (as required), and surfactant for Respiratory Distress Syndrome. | Newborn | Maternal and newborn | Hospital | 10 inpatient bed days | 1200 minutes N/M; 600 minutes Other specialist doctor | Blood culture; Cephalotin, 100 ml vial; Chest X-ray; Gentamycin, injection, 40 mg/ml in 2 ml vial; IV giving/infusion set, with needle; Oxygen, 1000 liters, primarily with oxygen cylinders |
| 31 | Case management of severe neonatal infection (sepsis/pneu monia) with full supportive care | MNCH _31. CMSNI | Case management of neonates with suspected sepsis/pneumonia treated with hospital-based full supportive care, including oxygen, IV fluids, IV antibiotics, blood transfusion, phototherapy, etc. as needed, in addition to KMC. | Newborn | Maternal and newborn | Hospital | 10 inpatient bed days | 160 minutes N/M | Blood culture; Cephalotin, 100 ml vial; Chest X-ray; Gentamycin, injection, 40 mg/ml in 2 ml vial; IV giving/infusion set, with needle; Oxygen, 1000 liters, primarily with oxygen cylinders |
| 32 | Facility based management of neonatal infection (sepsis/pneu monia) with injectible (and oral) antibiotics | MNCH _32. CMNI | Treatment of sepsis and infection at first level facility, with two days injectable antibiotics followed by oral amoxicillin for 7 days. | Newborn | Child | Primary level care | 3 outpatient visits | - | Gentamycin, injection, 40 mg/ml in 2 ml vial; Procaine benzylpenicillin, powder for injection, 1 g (= 1 million IU) in vial |
| 33 | Management of diarrhea through Oral Rehydration Solution and Zinc | MNCH _33. ORSzin c | Management of mild and moderate diarrhea with oral rehydration solution (ORS) and zinc tablets | Children 0-59 months | Child | Commun ity level | 1 outpatient visit | - | ORS, sachet; Zinc, tablet, 20 mg |

| 34 | Community based management of pneumonia | MNCH _34. CCM_P | Home visits for diagnosis and treatment of community based management of pneumonia in children below the age of five years, provided by community health workers | Children 0-59 months | Child | Commun ity level | 2 outpatient visits | - | Amoxicillin, caplet, 250 mg; Paracetamol, tablet, 100 mg; Salbutamol, tablet, 4 mg; Salbutamol, syrup, 2 mg/5 ml |
|----|---|---------------------------|--|-------------------------|---------------------|--|--|--|--|
| 35 | Antibiotics for treatment of dysentery | MNCH _35. DYS | Children with diarrhea presenting with blood in the stool receive a three day course of ciprofloxacin and are re-evaluated after 2 days. | Children 0-59 months | Child | Primary level care | 2 outpatient visits | - | Ciprofloxacin, tablet, 250 mg |
| 36 | Facility based management of pneumonia | MNCH _36. FCM_P | Management of pneumonia with oral antibiotics. | Children 0-59 months | Child | Primary level care | 2 outpatient visits | - | Amoxicillin, caplet, 250 mg; Paracetamol, tablet, 100 mg; Salbutamol, tablet, 4 mg; Salbutamol, syrup, 2 mg/5 ml |
| 37 | Management of children with severe acute malnutrition | MNCH _37. CMSA M | Integrated management of children with Severe Acute Malnutrition (<-3 Z-score) through outpatient care for cases without medical complication (80%), and inpatient care for cases with medical complications and/or infants younger than 6 months (20%). | Children 0-59 months | Nutrition; Child | Primary level care, incl. communi ty | 8 outpatient visits + 2.8 inpatient bed days | 480 minutes N/M; 360 minutes Other specialist doctor | Therapeutic spread, sachet 92g/CAR-150 Amoxicillin, caplet, 250 mg Mebendazole, chewable tablet, 500 mg F-100 therapeutic diet, sach., 114g/CAR-90 F-75 therapeutic milk, 102.5 g Nystatin 100,000 iu/ml Fluconazole 2 mg/ml Amoxicillin, powder/oral suspension, 125 mg/5 ml Benzathine benzylpenicillin, powder for injection, 2.4 million IU Sulfamethoxazole + trimethropin, tablet, 100 mg + 20 mg Gentamycin, injection, 40 mg/ml in 2 ml vial Ampicillin, powder for injection, 500 mg, vial Metronidazole, injection, 500 mg in 100 ml vial Metronidazole, oral solution 200 mg/5 ml |

| | Ciprofloxacin, tablet, 250 mg Artusenate, 20 mg/ml, 1 ml |
|--|---|
| | ampoule |
| | Glucose inj 5 %, 500 ml with giving set |
| | CareStartMal Pf (HRP2/pf-pLDl kit/60 |
| | Tetracycline eye ointment, 1 %, tube 5 mg |
| | Gentamicine eye drops 0.3%/5m |
| | Zinc oxide ointment, 10% |
| | Miconazolenitrate cream 2%/TB 30g |
| | Folic acid, tablet, 5 mg |
| | Vitamin A, caplet, 100,000 IU |
| | Vitamin A, caplet, 200,000 IU |
| | Sodium lactate injection (Ringer 500 ml, with giving set |
| | Furosemide inj 10mg/ml 2ml an |
| | Paraffin compress |
| | Cloxacillin |
| | ReSoMal, 42 g sachet for 1 liter |
| | Erythromicine solution 125 mg/ |
| | Ceftriaxone, powder for injection 250 ml vial Magnesium sulfate, injection, 50 mg/ml in 10-ml ampoule |
| | Permetrine cream 5% |
| | Permethrin shampoo/sol. 1%, 100ml bottle Ciprofloxacin, 250 mg / 5 ml |
| | Albendazole, tablet, 400 mg |
| | prothionamide 125 mg tablet |
| | Artemether + Lumefantrine, tablets, 20 + 120 mg, 6 x 1 blisto |

| P1 | Preventing and managing unplanned pregnancy | MNCH _P1. UPP | Family planning counseling integrated into safe abortion and post-abortion care (3 interventions) | Women seeking to plan pregnancy | Maternal and newborn | Primary level care; (Hospital level for post- abortion care) | country- specific depends on methods mix | - | As listed above for individual interventions |
|----|---|-------------------------------|--|--|----------------------------|---|--|--|--|
| P2 | Comprehens ive antenatal care | MNCH _P2. ANC | A package of antenatal care aligned with WHO guidelines and including tetanus toxoid vaccine, iron supplementation, calcium supplementation, balanced energy supplementation, syphilis detection and treatment, hypertensive disorder case mgt, MgSO4 mgt of pre-eclampsia, and IPT where relevant (8 interventions) | Pregnant women | Maternal and newborn | Primary level care | 8 outpatient visits | - | As listed above for individual interventions |
| Р3 | Skilled assistance for normal delivery | MNCH _P3. SBA | Skilled assistance with facility based births, not neccessarily EmOC level. Components include immediate assessment and stimulation, support during labor and delivery, active management of the third stage of labour, newborn resuscitation, and clean cord care. (5 interventions) | Pregnant women | Maternal and newborn | Primary level care | 1 inpatient bed day | Normal delivery includes 360 minutes M/N and 30 minutes MD | As listed above for individual interventions |
| P4 | Skilled assistance for normal delivery + family planning | MNCH _P4. SBA + FP | P3+ integrated postpartum family planning advice and contraceptive provision (6 interventions) | Pregnant women | Maternal and newborn | Primary level care | country- specific depends on methods mix | - | As listed above for individual interventions |
| P5 | Skilled delivery + management of complication s | MNCH _P5. SBA + comp | Skilled assistance for normal deliveries with quick and efficient referral to quality emergency obstetric care services when complications arise, + induction of labor + full | Pregnant women | Maternal and newborn | Primary level care + Hospital | Country- specific, (depends on prevalence of complicatio ns) | Induction of labor includes 40 minutes M/N and 20 | As listed above for individual interventions |

| | | | supportive care for newborn infections (12 interventions) | | | | | minutes MD | |
|-----|---|---------------------------------------|--|--|--------------------------------------|--|--|---------------|--|
| P6 | Skilled delivery + management of complication s + family planning | MNCH _P6. SBA + comp + FP | P5+ integrated postpartum family planning advice and contraceptive provision (13 interventions). | Pregnant women | Maternal and newborn | Primary level care + Hospital | country- specific depends on methods mix | - | As listed above for individual interventions |
| P7 | Case management of newborn complication s at referral level | MNCH _P7. CMNC | Full supportive care for premature babies + Case management of severe neonatal infection (sepsis/pneumonia) with full supportive care (2 interventions). | Newborns with complications (prematurity, severe infection) | Maternal and newborn | Hospital | 6 inpatient bed days | - | As listed above for individual interventions |
| P8 | Community based newborn and child care | MNCH _P8. CBNCC | Community based preventive and curative care (breastfeeding promotion, postnatal visits, vitamin A supplementation, management of infections, pneumonia and diarhea), (5 interventions). | Newborns and children 0-59 months | Maternal and newborn; Child | Commun ity | Country- specific | - | As listed above for individual interventions |
| P9 | Infant and young child feeding | MNCH _P9. IYCF | Breastfeeding promotion + Complementary feeding promotion + Vitamin A supplementation (3 interventions). | Newborns and children 0-59 months | Nutrition; Child | Commun ity and primary level care | 9 outpatient visits | - | As listed above for individual interventions |
| P10 | Routine EPI (measles, diphteria, pertussis, tetanus, and tuberculosis) | MNCH _P10. EPI | BCG, DTP, Hib, and Measles immunization (4 interventions). | Newborns and children 0-59 months | Immunizati on | Primary level care | 6 outpatient visits | - | As listed above for individual interventions |
| P11 | Routine EPI + additional vaccines | MNCH _P11. EPI+R OTA+P CV | BCG, DTP, Hib, Measles, Rotavirus and Pneumonococcal vaccines (6 interventions). | Newborns and children 0-59 months | Immunizati on | Primary level care | 6 outpatient visits | - | As listed above for individual interventions |

| P12 | Primary | MNCH | Management of diarrhea, | Children 0-59 | Child | Primary | Country- | _ | As listed above for individual |
|-----|-------------|-------|---------------------------|---------------|-------|------------|----------|---|--------------------------------|
| | level | _P12. | dysentery, pneumonia, and | months | | level care | specific | | interventions |
| | integrated | IMCI | severe malnutrition (4 | | | | | | |
| | management | | interventions). | | | | | | |
| | of the sick | | | | | | | | |
| | child | | | | | | | | |
| | (includes | | | | | | | | |
| | link to the | | | | | | | | |
| | community) | | | | | | | | |

^{*} Notes on Specialized Staff time: MD = Medical Doctor; N/M = Nurse/Midwife; the category of "Other staff" includes Assistant nurses and midwives, Laboratory technicians and assistants

Table S2.2. Prices used in analysis (2010 I\$)

| Country | Outpatient visit (health centre, no beds)* | Inpatient bed day (primary level hospital) * | Annual wage MD** | Annual wage N/M** | Annual wage Other staff** |
|-------------|--|--|------------------|----------------------|---------------------------|
| Cambodia | 3.7 | 19.5 | 7,010 | 5,695 | 3,269 |
| Indonesia | 6.7 | 44.5 | 5,341 | 4,339 | 2,490 |
| Laos | 4.2 | 23.2 | 7,232 | 5,875 | 3,372 |
| Malaysia | 20.2 | 201.7 | 27,289 | 22,168 | 12,724 |
| Maldives | 11.7 | 95.3 | 14,180 | 11,519 | 6,612 |
| Myanmar | 2.2 | 9.6 | 2,655 | 2,157 | 1,238 |
| Philippines | 6.2 | 40.2 | 11,367 | 9,234 | 5,300 |
| Sri Lanka | 7.8 | 54.3 | 5,380 | 4,370 | 2,508 |
| Thailand | 12.6 | 105.4 | 8,005 | 6,503 | 3,732 |
| Timor-Leste | 2.7 | 12.9 | 4,168 | 3,386 | 1,943 |
| Viet Nam | 5.1 | 30.3 | 8,443 | 6,859 | 3,937 |

| | 1.1 | 3.7 | 2,627 | 2,134 | 1,225 |
|-------------|------|-------|--------|---------|--------|
| Burundi | | | | | |
| _ | 2.2 | 9.5 | 5,375 | 4,367 | 2,506 |
| Comoros | | | | | |
| D:://4 | 4.0 | 21.7 | 12,775 | 10,378 | 5,956 |
| Djibouti | 1.0 | 3.4 | 2 110 | 2.524 | 1 454 |
| Eritrea | 1.0 | 3.4 | 3,119 | 2,534 | 1,454 |
| Littica | 1.9 | 7.7 | 3,324 | 2,700 | 1,550 |
| Ethiopia | 2.5 | , | 3,32 : | 2,700 | 1,555 |
| 1 | 2.9 | 14.0 | 5,475 | 4,448 | 2,553 |
| Kenya | | | · | | |
| | 1.8 | 7.2 | 3,547 | 2,881 | 1,654 |
| Madagascar | | | | | |
| 3.6.1 | 1.7 | 6.5 | 3,418 | 2,777 | 1,594 |
| Malawi | 40.5 | 402.2 | 22.472 | 10.011 | 40.000 |
| Mauritius | 19.5 | 192.3 | 22,172 | 18,011 | 10,338 |
| Mauritius | 1.7 | 6.8 | 4,338 | 3,524 | 2,023 |
| Mozambique | 1.7 | 0.0 | 4,330 | 3,324 | 2,023 |
| | 2.2 | 9.5 | 4,134 | 3,358 | 1,927 |
| Rwanda | | | , | , | |
| | 28.7 | 328.6 | 34,897 | 28,348 | 16,271 |
| Seychelles | | | | | |
| | 1.9 | 7.7 | 3,324 | 2,700 | 1,550 |
| Somalia | 1.0 | | 26.722 | 0.1.505 | |
| South Sudan | 4.2 | 23.5 | 26,708 | 21,696 | 12,453 |
| South Sudan | 4.2 | 23.5 | 26,708 | 21,696 | 12,453 |
| Sudan | 4.2 | 23.3 | 20,700 | 21,090 | 12,433 |
| | 2.3 | 10.3 | 4,400 | 3,574 | 2,051 |
| Uganda | - | | , | -, | , |
| | 2.5 | 11.6 | 4,653 | 3,780 | 2,170 |
| Tanzania | | | | | |
| | 2.7 | 12.9 | 6,360 | 5,167 | 2,965 |
| Zambia | | | | | |

^{*}Source: Stenberg K, Lauer JA, Gkountouras G, Fitzpatrick C and Stanciole A. Econometric estimation of WHO-CHOICE country-specific costs for inpatient and outpatient health service delivery Cost Effectiveness and Resource Allocation. 2018 16:11

^{**}Source: Serje J, Bertram MY, Brindley C and Lauer JA. Global health worker salary estimates: an econometric analysis of global earnings data. Cost Effectiveness and Resource Allocation 2018 16:10.