**Notes:**

**1.** Sample of 133 countries. On track (n=95) is defined as those countries which have either achieved (n=91) or are on track (n=4) to achieve the SDG 3.2.1 goal of under 5 mortality by 2030. Off-track (n=38) is defined as those countries which need acceleration to achieve the SDG 3.2.1 goal by 2030. This classification is provided by the United Nations Inter-agency Group for Child Mortality Estimation (UN IGME)

**2. ANC4 -** the percentage of women (aged 15-49 years) attended at least four times during pregnancy by any provider; **SBA** - the percentage of deliveries attended by skilled healthcare personnel like doctors, nurses, midwives.

**3.** Latest available ANC4 and SBA country-level data between 2018-2022 from UNICEF Global Data Repository was used. Projected births in 2022 (from UN world Population Prospects) were used for weighted-coverage calculations.

With no discernable difference between ANC4 coverage of on-track countries (54%) and off-track countries (53%), ANC4 might not be the most reliable predictor of under-5 mortality although it is considered an important building block towards the same. Looking at SBA, we find on-track countries having a 25% percentage point higher SBA coverage compared to the 53% coverage in off-track countries. This considerable difference demonstrates the crucial role SBA plays in reducing under-5 mortality. Considering the temporality of these two variables, we can see that the SBA’s proximity to birth is prominent with its higher correlation with the status of under-5 mortality in the country. This demonstrates the variables’ ability to predict under-5 mortality better than ANC4.

However, this interpretation needs to be corroborated using more granular data and multivariate regression models. It is important to identify the reasons behind such low coverage of ANC4 and the profile of countries that are on-track. This will help to determine if it is a measurement issue from substitution (better penetration of internet providing alternate methods/sources of counselling) or lack of adherence owing to widening quality-coverage gap, and other bottlenecks. Research[[1]](#footnote-1) has demonstrated that ANC4 as an indicator might have shortcomings when it comes to the actual content of those visits with widescale quality-coverage gap on important aspects like IFA (72%) and malaria prevention (86%). Additional analysis like structural equation modelling is needed to understand the pathway of impact on under-5 mortality and the role of ANC4 and SBA

1. Hodgins S, D'Agostino A. The quality-coverage gap in antenatal care: toward better measurement of effective coverage. Glob Health Sci Pract. 2014 Apr 8;2(2):173-81. doi: 10.9745/GHSP-D-13-00176. PMID: 25276575; PMCID: PMC4168625. [↑](#footnote-ref-1)