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Supplementary appendix 2

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Supplement to: GBD 2019 Pakistan Collaborators. The state of health in Pakistan and its provinces and territories, 1990–2019: a systematic analysis for the Global Burden of Disease Study 2019. *Lancet Glob Health* 2023; **11:** e229–43.

Supplementary appendix to "The state of health of Pakistan and its provinces and territories, 1990–2019: a systematic analysis for the Global Burden of Disease Study 2019"

This appendix provides supplemental information and more detailed results for "The state of health of Pakistan and its provinces and territories, 1990–2019: a systematic analysis for the Global Burden of Disease Study 2019."

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Section 1: Abbreviations

Abbreviation Full phrase

CODEm Cause of Death Ensemble modelling
COPD chronic obstructive pulmonary disease

COVID-19 coronavirus disease 2019
DALY disability-adjusted life-years

GATHER Guidelines for Accurate and Transparent Health Estimates Reporting

GBD Global Burden of Diseases, Injuries, and Risk Factors Study

HALE healthy life expectancy

HAQ Healthcare Access and Quality

IHD ischaemic heart disease

IHME Institute for Health Metrics and Evaluation

LE life expectancy

LMIC low- and middle-income countries

SARS-CoV-2 severe acute respiratory syndrome coronavirus 2

SDI Socio-demographic Index

SDG Sustainable Development Goals

SEV summary exposure value SRS sample registration survey

TB tuberculosis

UHC universal health coverage

U5M under-5 mortality
UI uncertainty interval

WHO World Health Organization YLD years lived with disability

YLL years of life lost

Section 2: GATHER compliance

This study complies with GATHER recommendations. We have documented the steps in our analytical procedures and detailed the data sources used. See section 9 for the GATHER checklist. The GATHER recommendations can be found on the GATHER website.

Section 3: Pakistan subnational locations

Pakistan subnational locations and administrative units

Name	Capital	Designation					
Azad Jammu and Kashmir	Muzaffarabad	Territory					
Balochistan	Quetta	Province					
Gilgit-Baltistan	Gilgit	Territory					
Islamabad Capital Territory	Islamabad	Territory					
Khyber Pakhtunkhwa*	Peshawar	Province					

Punjab	Lahore	Province
Sindh	Karachi	Province

^{*}Formerly known as North-West Frontier Province (NWFP)

Section 4: Data sources

4.1. Input data sources used in GBD 2019 national and subnational estimation of Pakistan

Further information on the data sources utilised for this study can be found within the Global Health Data Exchange (GHDx) via the Data Input Sources tool, accessible here: http://ghdx.healthdata.org/gbd-2019/data-input-sources

Input data for GBD 2019 national and subnational estimation of Pakistan

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4.2. Source counts by national and subnational administrative units

Pakistan source counts by location

Location	Source counts
Pakistan	1571
Azad Jammu & Kashmir	272
Balochistan	296
Gilgit-Baltistan	255
Islamabad Capital Territory	268
Khyber Pakhtunkhwa	319
Punjab	323
Sindh	384

Section 5: Politics and governance

5.1. Political chronology, 1990–2019

Year	Event(s)
1990	Benazir Bhutto dismissed as prime minister
1991	Prime Minister Nawaz Sharif begins economic liberalisation programmes
1993	Prime Minister Sharif resigns under pressure from military. Benazir Bhutto reelected.
1996	President Leghari dismisses Bhutto government amid corruption allegations.
1997	Nawaz Sharif returns as prime minister after Muslim League wins elections.
1998	Pakistan conducts nuclear tests after India explodes several nuclear devices.
1999	Benazir Bhutto and husband convicted of corruption and given jail sentences. Bhutto voluntarily exiled.
1999	General Pervez Musharraf seizes power in coup.
2000	Nawaz Sharif sentenced to life imprisonment on hijacking and terrorism
	charges over his actions to prevent the 1999 coup.
2001	General Pervez Musharraf names himself president while remaining head of the military.
2002	Musharraf wins another five years in office in a controversial referendum.
2005	Pakistan tests its first nuclear-capable cruise missile.
2005	Earthquake kills tens of thousands of people in Pakistani-administered Kashmir.
2007	Pakistan and India sign an agreement aimed at reducing the risk of accidental nuclear
	war.
2007	Ex-prime minister Benazir Bhutto returns from exile.
2007	Musharraf's reelection challenged by Supreme Court. He declares emergency rule,
	dismisses Chief Justice Chaudhry, and appoints new Supreme Court, which confirms
	his re-election.
2007	Benazir Bhutto assassinated at election campaign rally in Rawalpindi.
2008	Pakistan People's Party (PPP) nominee Yusuf Raza Gilani becomes Prime Minister at
	head of coalition with Nawaz Sharif's Muslim League party following parliamentary
	elections.
2008	President Musharraf resigns.
2012	Supreme Court disqualifies Prime Minister Gilani from holding office. Parliament
	approves Water and Power Minister Raja Pervez Ashraf as his successor.
2013	Parliament approves Nawaz Sharif as prime minister after his Muslim League-N wins
201=	parliamentary elections in May.
2017	Prime Minister Nawaz Sharif is forced to resign after being disqualified by the
	Supreme Court over corruption charges. He is convicted and given a jail
2010	sentence. Parliament approves Shahid K. Abbasi as his successor.
2018	Former international cricket star Imran Khan becomes Prime Minister.

5.2. Additional notes on the 18th amendment

The National Assembly of Pakistan ratified the 18th amendment of the constitution on April 8, 2010. The 18th amendment brought massive changes to the Pakistan political system. It confined the federal government's role in the health-care industry to health information, interprovincial coordination, global health, and health regulation, while all other health responsibilities were brought under provincial governments.

Section 6: Appendix tables

Appendix Table 1: Life expectancy, HALE, and SDI for both sexes for Pakistan and comparator countries

We also analysed national estimates for six comparator countries: Iran, Indonesia, Afghanistan, China, Bangladesh, and India. Comparator countries were chosen based on similar sociodemographic levels and/or location adjacency. Supplemental Appendix Table 1 shows life expectancy and HALE for males, females, and both sexes combined for Pakistan, China, India, Iran, Afghanistan, Bangladesh, and Indonesia in 1990 and 2019. Life expectancy in Pakistan increased from $61\cdot7$ years (95% UI $60\cdot9-62\cdot6$) in 1990 to $66\cdot4$ ($63\cdot8-69\cdot1$) in 2019 for males and from $61\cdot6$ ($60\cdot8-62\cdot4$) to $67\cdot5$ ($65\cdot1-70\cdot1$) for females, an increase of $7\cdot6$ % ($3\cdot0-12\cdot0$) and $9\cdot6$ % ($5\cdot3-14\cdot0$), respectively. HALE increased from $54\cdot1$ ($51\cdot8-56\cdot2$) in 1990 to $58\cdot2$ ($55\cdot3-61\cdot1$) in 2017 for males and from $52\cdot5$ ($45\cdot0-54\cdot9$) to $57\cdot8$ ($54\cdot6-60\cdot9$) for females, an increase of $7\cdot6$ % ($3\cdot5-11\cdot8$) and $10\cdot1$ % ($6\cdot3-13\cdot8$), respectively. Among all seven countries, only Afghanistan had a lower life expectancy and HALE than Pakistan in 2019. Both India and Bangladesh had lower life expectancies and HALE in 1990 than Pakistan but higher ones in 2019.

upplementary Table 1. Comparison of life expectancy (LE), healthy life expectancy (HALE), and Socio-demographic Index (SDI) between Pakistan and select countries, 1990-2019																		
	Life expectancy at birth, HALE, and Socio-democratic index, both sexes																	
		fe expectancy at bi			LE % Change			HALE			HALE % Change			io-Demographic In		SDI % Change		
	1990			1990 - 2010	2010 - 2019	1990 - 2019	1990			1990 - 2010	2010 - 2019	1990 - 2019	1990	2010	2019	1990 - 2010	2010 - 2019	1990 - 201
Pakistan	61.1 (60.0-62.1)	63.3 (61.7-65.0)	65.9 (63.8-67.8)	3.60%	4.11%	7.86%	53.2 (50.8-55.3)	55.1 (52.7-57.6)	57.2 (54.3-60.1)	3.57%	3.81%	7.52%	0.26	0.417	0.476	60.38%	14.15%	83.08%
South Asia	59.5 (58.8-60.3)	67.0 (66.3-67.7)	70.4 (69.2-71.7)	12.61%	5.07%	18.32%	51.2 (48.7-53.4)	57.6 (54.9-59.9)	60.4 (57.3-63.1)	12.50%	4.86%	17.97%	0.312	0.455	0.539	45.83%	18.46%	72.76%
Bangladesh	58.2 (57.1-59.2)	70.0 (69.0-71.1)	74.6 (72.4-76.7)	20.27%	6.57%	28.18%	50.7 (48.3-52.8)	61.0 (58.2-63.5)	64.5 (61.3-67.4)	20.32%	5.74%	27.22%	0.246	0.389	0.475	58.13%	22.11%	93.09%
India	59.6 (58.7-60.5)	67.3 (66.4-68.1)	70.8 (69.3-72.2)	12.92%	5.20%	18.79%	51.1 (48.5-53.3)	57.6 (54.9-60.1)	60.5 (57.4-63.3)	12.72%	5.03%	18.40%	0.327	0.469	0.558	43.43%	18.98%	70.64%
Nepal	58.3 (56.3-60.3)	69.0 (67.5-70.5)	71.1 (69.4-73.2)	18.35%	3.04%	21.96%	50.4 (47.7-53.1)	59.8 (56.9-62.3)	61.5 (58.6-64.4)	18.65%	2.84%	22.02%	0.198	0.358	0.427	80.81%	19.27%	115.66%
Mexico	70.9 (70.5-71.2)	75.2 (75.0-75.5)	75.6 (74.6-76.7)	6.06%	0.53%	6.63%	61.4 (58.7-63.8)	65.2 (62.2-67.7)	65.4 (62.3-68.1)	6.19%	0.31%	6.51%	0.492	0.593	0.636	20.53%	7.25%	29.27%
Brazil	67.3 (66.9-67.7)	73.8 (73.5-74.2)	75.8 (75.4-76.3)	9.66%	2.71%	12.63%	58.0 (55.2-60.4)	63.5 (60.5-66.1)	65.2 (62.2-67.9)	9.48%	2.68%	12.41%	0.484	0.594	0.64	22.73%	7.74%	32.23%
Afghanistan	53.8 (51.4-56.6)	60.5 (57.5-63.2)	63.3 (60.7-65.9)	12.45%	4.63%	17.66%	45.6 (41.3-49.0)	51.7 (48.0-54.8)	54.1 (50.7-57.2)	13.38%	4.64%	18.64%	0.179	0.248	0.332	38.55%	33.87%	85.47%
Iran (Islamic Republic of)	66.7 (65.9-67.4)	75.5 (75.2-75.7)	77.8 (77.5-78.0)	13.19%	3.05%	16.64%	57.8 (55.1-60.1)	65.0 (62.0-67.6)	66.8 (63.7-69.7)	12.46%	2.77%	15.57%	0.43	0.636	0.697	47.91%	9.59%	62.09%
China	68.1 (67.0-69.4)	74.9 (74.2-75.7)	77.6 (76.3-79.0)	9.99%	3.60%	13.95%	60.5 (58.1-62.7)	66.6 (64.1-68.8)	68.5 (65.9-71.0)	10.08%	2.85%	13.22%	0.44	0.624	0.692	41.82%	10.90%	57.27%
Indonesia	64.1 (63.2-64.9)	69.3 (68.2-70.3)	71.4 (70.0-73.0)	8.11%	3.03%	11.39%	55.9 (53.5-58.1)	60.9 (58.4-63.2)	62.6 (59.9-65.0)	8.94%	2.79%	11.99%	0.458	0.593	0.658	29.48%	10.96%	43.67%
Maldives	65.5 (64.8-66.2)	77.8 (77.2-78.3)	79.1 (77.6-80.6)	18.78%	1.67%	20.76%	57.5 (55.1-59.7)	68.1 (65.3-70.5)	69.1 (66.1-71.8)	18.43%	1.47%	20.17%	0.321	0.519	0.579	61.68%	11.56%	80.37%
Sri Lanka	69.6 (68.9-70.3)	74.1 (73.9-74.2)	77.3 (74.4-80.1)	6.47%	4.32%	11.06%	61.0 (58.4-63.3)	64.5 (61.7-66.9)	66.9 (63.3-70.3)	5.74%	3.72%	9.67%	0.505	0.624	0.685	23.56%	9.78%	35.64%
Nigeria	54.7 (52.9-56.6)	59.6 (57.5-61.8)	64.3 (62.2-66.6)	8.96%	7.89%	17.55%	47.6 (45.1-50.1)	52.0 (49.1-54.7)	56.0 (53.0-58.9)	9.24%	7.69%	17.65%	0.249	0.378	0.461	51.81%	21.96%	85.14%
			Average change:	11.53%	3.96%	15.96%			Average change:	11.55%	3.66%	15.64%			Average change:	44.76%	15.47%	67.60

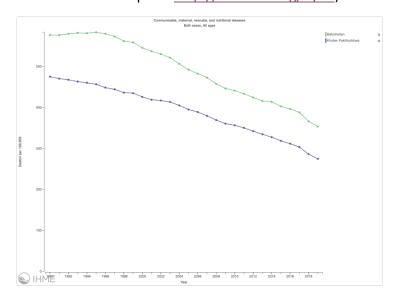
Appendix Table 2: Healthcare Access and Quality Index for Pakistan, 1990-2019

Healthcare Access and Quality (HAQ) Index for Pakistan and subnational units, 1990–2019							
	Healthcare Access and	Healthcare Access and Quality (HAQ) Index					
	1990	2019	1990–2019				
Deliston	21.9 (20.2–23.6)	32.1 (30.4–33.8)	46.94%				
Pakistan	•	, ,					
Azad Jammu & Kashmir	24.3 (22.6–26.0)	37.7 (36.1–39.3)	54.79%				
Balochistan	24.6 (22.9–26.3)	30.5 (29.0–32.2)	24.13%				
Gilgit-Baltistan	22.2 (20.4–24.1)	29.7 (28.2–31.3)	33.89%				
Islamabad Capital Territory	38.3 36.6–40.3)	56.1 54.4–57.7)	46.21%				
Khyber Pakhtunkhwa	29.0 (27.2–30.7)	32.4 (30.8–33.9)	11.63%				
Punjab	20.4 (18.8–22.4)	31.5 (30.0–33.1)	54.17%				
Sindh	24.4 (22.7–26.2)	36.1 (34.5–37.7)	47.59%				

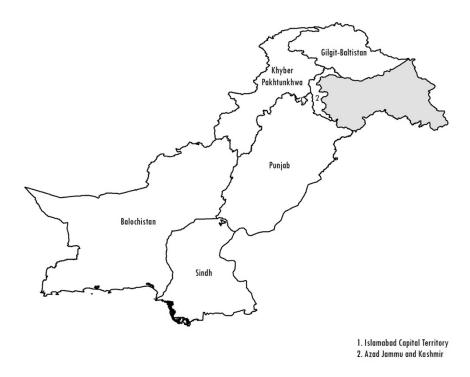
Section 7: Appendix figures

Appendix Figure 1: Trends in communicable, maternal, neonatal, and nutritional causes for Khyber Pakhtunkhwa and Balochistan

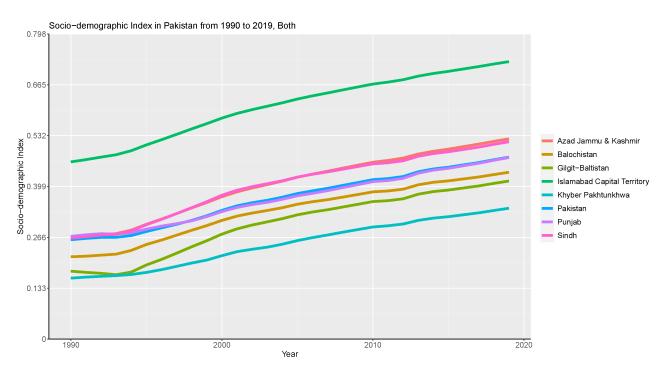
(This image is accessible via GBD compare: http://ihmeuw.org/5yh9)



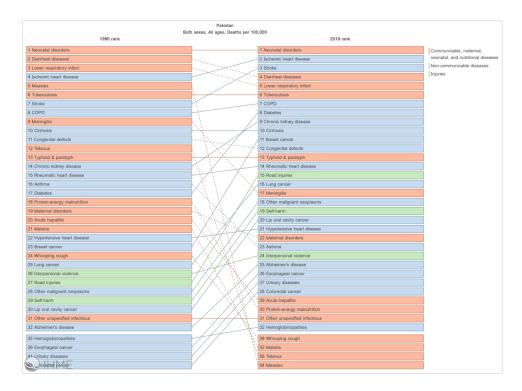
Appendix Figure 2: Political map of Pakistan



Appendix Figure 3: SDI values for Pakistan and seven subnational units, 1990–2019



Appendix Figure 4: Leading causes of all-age deaths for both sexes, 1990 to 2019



Appendix Figure 5: Leading causes of YLLs for all ages and both sexes, 1990 and 2019

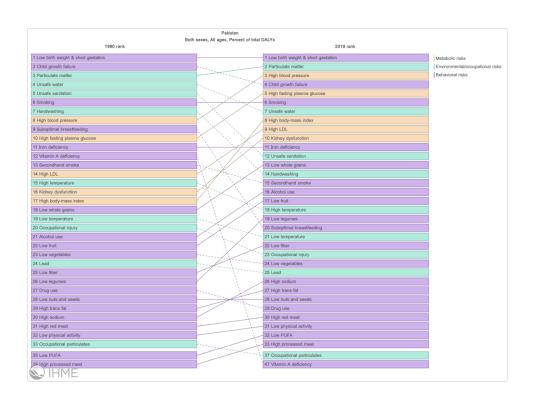


Appendix Figure 6: Changes in YLDs for all ages and both sexes, 1990 and 2019



Appendix Figure 7: Number of deaths (top) and percentage of DALYs (bottom) attributable to the leading risk factors for all ages and both sexes, 1990 and 2019

	Pakistan		
1990 rank	Both sexes, All ages, Deaths	2019 rank	
1 Low birth weight & short gestation		1 Particulate matter	Metabolic risks
2 Particulate matter	***********	2 High blood pressure	Environmental/occupational ris
3 Child growth failure		2 Figh blood pressure 3 Low birth weight & short gestation	Behavioral risks
	<u> </u>		Deliavioral floks
4 Unsafe water		4 High fasting plasma glucose	
5 High blood pressure		5 Smoking	
6 Smoking		6 High body-mass index	
7 Unsafe sanitation		7 High LDL	
8 High fasting plasma glucose		8 Kidney dysfunction	
9 Handwashing		9 Unsafe water	
10 High LDL		10 Child growth failure	
11 Kidney dysfunction		11 Low whole grains	
12 Secondhand smoke		12 Secondhand smoke	
13 Low whole grains		13 Unsafe sanitation	
14 High body-mass index		14 Low fruit	
15 Suboptimal breastfeeding		15 Low temperature	
16 Low temperature		16 Low legumes	
17 High temperature		17 Low vegetables	
18 Low fruit		18 High sodium	
19 Vitamin A deficiency		19 Low fiber	
20 Low vegetables		20 Handwashing	
21 Low fiber		21 High temperature	
22 Low legumes		22 Lead	
23 Lead		23 High trans fat	
24 Low nuts and seeds		24 Alcohol use	
25 Alcohol use		25 Low nuts and seeds	
26 High sodium		26 Low physical activity	
27 High trans fat		27 High red meat	
28 Low physical activity		28 Ozone	
29 Occupational injury		29 Low PUFA	
30 Occupational particulates		30 Occupational injury	
31 Ozone		31 Suboptimal breastfeeding	
32 High red meat		32 Drug use	
33 Low PUFA		33 Occupational particulates	
34 Drug use		34 High processed meat	
35 High sweetened beverages		35 High sweetened beverages	
an processed meat		47 Vitamin A deficiency	



Section 8: GATHER tables

GATHER checklist

Item#	Checklist item	Reported on page
		#
	ves and funding	I
1	Define the indicator(s), populations (including age, sex, and geographic	2; 11-15
	entities), and time period(s) for which estimates were made.	
2	List the funding sources for the work.	4; 15; 28
Data In		
For al	data inputs from multiple sources that are synthesised as part of the study:	
3	Describe how the data were identified and how the data were accessed.	11-15; Appendix
4	Specify the inclusion and exclusion criteria. Identify all ad-hoc exclusions.	11-15; Appendix
5	Provide information on all included data sources and their main	11-15; Appendix
	characteristics. For each data source used, report reference information or	
	contact name/institution, population represented, data collection method,	
	year(s) of data collection, sex and age range, diagnostic criteria or	
	measurement method, and sample size, as relevant.	
6	Identify and describe any categories of input data that have potentially	11-15; Appendix
	important biases (e.g., based on characteristics listed in item 5).	
For do	ita inputs that contribute to the analysis but were not synthesised as part of the	study:
7	Describe and give sources for any other data inputs.	11-15; Appendix
For al	l data inputs:	
8	·	Appendix; GHDx
	· · · · · · · · · · · · · · · · · · ·	URL
	data listed in item 5. For any data inputs that cannot be shared because of	
	ethical or legal reasons, such as third-party ownership, provide a contact	
	name or the name of the institution that retains the right to the data.	
Data ar		
9	Provide a conceptual overview of the data analysis method. A diagram may be	11-15
	helpful.	
10	Provide a detailed description of all steps of the analysis, including	11-15; Appendix
	mathematical formulae. This description should cover, as relevant, data	-, - -
	cleaning, data pre-processing, data adjustments and weighting of data	
	sources, and mathematical or statistical model(s).	
11	Describe how candidate models were evaluated and how the final model(s)	11-15; Appendix
	were selected.	, , , ,
12	Provide the results of an evaluation of model performance, if done, as well as	N/A
	the results of any relevant sensitivity analysis.	1.7.
13	Describe methods for calculating uncertainty of the estimates. State which	14
	sources of uncertainty were, and were not, accounted for in the uncertainty	
	analysis.	
14	State how analytic or statistical source code used to generate estimates can	Available
	be accessed.	through GHDx link
	be decessed.	(upon publication)
L	I	(apon publication)

Resul	Results and Discussion						
15	Provide published estimates in a file format from which data can be efficientl extracted.	yN/A					
16	Report a quantitative measure of the uncertainty of the estimates (e.g. uncertainty intervals).	14					
17	Interpret results in light of existing evidence. If updating a previous set of estimates, describe the reasons for changes in estimates.	5-7					
18	Discuss limitations of the estimates. Include a discussion of any modelling assumptions or data limitations that affect interpretation of the estimates.	26-27					