## Supplementary Table 1: Baseline information of participating networks and countries

	Indonesia	Japan	Korea	Malaysia	Philippines	Singapore	Sri Lanka	Taiwan	Thailand
Gross domestic product (per capita, \$USD; 2020) <sup>a</sup>	3870	39990	31947	10402	3299	58114	3729	25026 <sup>1</sup> (2018)	7189
Gini index <sup>b</sup>	37.9 (2021)	32.9 (2013)	31.4 (2016)	41.1 (2015)	42.3 (2018)	NA	39.3 (2016)	34 <sup>m</sup> (2020)	35.0 (2020)
Health expenditure (% of gross domestic product; 2019) <sup>b</sup>	2.9	10.75	8.14	3.84	4.17	4.42	3.66	6.1 <sup>n</sup> (2018)	3.86
Mother's mean age at first birth <sup>c</sup>	22.4 (2017)	30.7 (2018)	32.2 (2019)	NA	23.5 (2017)	30.5 (2015)	25.6 <sup>f</sup> (2016)	32° (2018)	23.3 (2009)
Maternal mortality ratio (per 100 000 live births; 2017) <sup>d</sup>	177	5	11	29	121	8	29 <sup>g</sup> (2020)	13 <sup>m</sup> (2020)	37
Birth rate, crude (per 1000 people; 2020) <sup>b</sup>	17.4	6.8	5.3	16.4	19.9	8.5	13.8 <sup>h</sup> (2020)	7.7 <sup>p</sup> (2018)	10.0
Preterm birth rate (per 100 live births; 2010) <sup>a</sup>	16.0	6.0	9.0	12.0	15.0	12.0	7.9 <sup>i</sup> (2014)	9.3 <sup>q</sup> (2010)	12.0
Low birth weight rate (%, 2015) d	10	9.5	5.8	11.3	20.1	9.6	16.1 <sup>j</sup> (2018)	9.04 <sup>r</sup> (2010)	10.5
Neonatal mortality rate (per 1000 live births; 2020) <sup>d</sup>	11.7	0.8	1.5	4.6	12.6	0.8	4 <sup>k</sup> (2021)	2.4 <sup>s</sup> (2019)	4.9
Infant mortality rate (per 1000 live births; 2020) <sup>d</sup>	19.5	1.8	2.6	7.4	20.9	1.8	6 <sup>k</sup> (2021)	3.8 <sup>s</sup> (2019)	7.4
Cause of death 1st (0-1 year; 2019) e	Prematurity	Congenital anomalies	Prematurity	Prematurity	Prematurity	Congenital anomalies	Congenital anomalies	Congenital anomalies s	Prematurity
Cause of death 2nd (0-1 year; 2019) <sup>e</sup>	Acute LRI	Prematurity	Congenital anomalies	Congenital anomalies	Acute LRI	Prematurity	Prematurity	Perinatal Respiratory disease <sup>s</sup>	Congenital anomalies
Cause of death 3rd (0-1 year; 2019) e	Congenital anomalies	Sudden infant death syndrome	Sudden infant death syndrome	Acute LRI	Congenital anomalies	Acute LRI	Hypoxic ischemic encephalop athy	Prematuritys	Acute LRI

Abbreviations: LRI: lower respiratory infection, NCD: non-communicable disease

a: UN Data (https://data.un.org/)

b: World Bank (<a href="http://data.worldbank.org/products/wdi">http://data.worldbank.org/products/wdi</a>)

c: Central Intelligence Agency, World Fact book (https://www.cia.gov/the-world-factbook/field/mothers-mean-age-at-first-birth/)

d: UNICEF Data (https://data.unicef.org/#)

e: World Health Organization (<a href="https://www.who.int/data">https://www.who.int/data</a>)

- f: Sri Lanka Demographic and Health Survey 2016. (http://www.statistics.gov.lk/Resource/en/Health/DemographicAndHealthSurveyReport-2016-Chapter4.pdf)
- g: Family Health Bureau. Ministry of Health Sri Lanka
- h: Department of Census and Statistics of Sri Lanka

 $(\underline{http://www.statistics.gov.lk/Population/StaticalInformation/VitalStatistics/CrudeBirthRatesCrudeDeathRatesProvinceDistrictSex2019-2022})$ 

- i: Jayaratne K, Perera D, Jayathilake A, Agampodi SB. WHO multicountry survey on maternal and newborn health Country report Sri Lanka. Colombo: Family Health Bureau. 2014.
- j: Family Health Bureau. Annual Report of the Family Health Bureau, Ministry of Health Sri Lanka, 2019.
- k: UN Interagency Group for Child Mortality Estimation. Levels and Trends in Child Mortality: Report 2022. 2023.
- I: CEIC Data (https://www.ceicdata.com/en/indicator/taiwan/gdp-per-capita)
- m: Statistica.com (https://www.statista.com/markets/)
- n: Taiwan Insight (<a href="https://taiwaninsight.org/2020/10/08/sustaining-taiwans-high-performing-national-health-insurance-a-call-to-invest-in-health/">https://taiwaninsight.org/2020/10/08/sustaining-taiwans-high-performing-national-health-insurance-a-call-to-invest-in-health/</a>)
- o: The Taipei Times (https://www.taipeitimes.com/News/taiwan/archives/2020/04/12/2003734468)
- p:Trends in birth rate provided by the National Development Council, Taiwan (<a href="https://pop-proj.ndc.gov.tw/chart.aspx?c=1&uid=61&pid=60">https://pop-proj.ndc.gov.tw/chart.aspx?c=1&uid=61&pid=60</a>)
- q: Live Births and Still Births by Weeks of Pregnancy (https://www.hpa.gov.tw/File/download/themeParkId=542/000804/1.13b.pdf)
- r: 2015 Statistics of Birth Reporting System by Health Promotion Administration, Ministry of Health and Welfare, Taiwan (Page 47) (https://www.hpa.gov.tw/Pages/ashx/File.ashx?FilePath=~/File/Attach/1266/File\_2470.pdf)
- s: Ministry of Health and Welfare, Taiwan (https://www.mohw.gov.tw/np-125-2.html)

## Supplementary Table 2: Information of neonatal care and neonatal research networks

		Indonesia	Japan	Korea	Malaysia	Philippines	Singapore	Sri Lanka	Taiwan	Thailand
D: .!	Home	16%	< 1%	0.5 %	_1_%	9%	< 1%	< 1%	< 1%	3-5 %
Birth places of	Birth center	29%	< 1%	1.1%	< 1%	NA	0%	0%	< 1%	0%
newborn infants (term or preterm infants)	Clinics	18-22%	45%	NA	NA	33%	0%	0%	28%	0%
	Hospitals	33%	54%	98.4%	95%	57%	> 99 %	> 99 %	72%	95-97 %
illialitsj	Other places	NA	0%	0.03%	2%	< 1%	0%	0%	< 1%	0%
Neonatal resuscitation program (NRP)		Indonesian NRP	Japanese NRP	AAP's NRP	AAP's NRP	NRPhPlus	Singapore NRP	Sri Lanka NRP	AAP's NRP (modified)	AAP's NRP
The lowest GA or BW of infants	The lowest GA	25-26 weeks	22 weeks	22 weeks	24 weeks	24-25 weeks	23 weeks	23weeks	22-23 weeks	23 weeks
resuscitated (Viability)	The lowest BW	600 g	250-300 g	>300 g	500 g	400 g	400 g	400-500 g	300-400 g	500 g
Who pay the cost of NICU care of preterm infants?		Some patients use national insurance which do not cover all the needs. Others use their own money	National insurance & Government	Government	Government in public hospital. Individuals in private hospital	National insurance run by private company but supported by Government	Patients and government as co-pay system (Full subsidy for patients with very low income)	Government	Government	Government (Rare cases paid by their own parents)
	Existence of NRN	NO	YES	YES	YES	NO	NO*	NO	Yes	YES
Neonatal research networks (NRN) with registries of	Inclusion criteria of the registries	NA	GA < 32 weeks or BW ≤ 1500g	BW < 1500g	GA < 32 weeks or BW 500- 1500g	NA	GA < 32 weeks or BW ≤ 1500g *	NA	GA ≤29 weeks or BW 401-1500g	GA <32 weeks or BW < 1500 g
VLBW infants	Population coverage of the registries	NA	50-60 %	87%	70-80 %	NA	>80 %*	NA	70%	No data

The information in the table is based on the personal understanding of the steering committee members regarding NICU care in their respective countries.

Abbreviations: AAP, American Academy of Pediatrics; BW, birth weight; GA, gestational age; NA, not applicable or unavailable; NICU, neonatal intensive care unit; NRN, neonatal research network; NRP, neonatal resuscitation program.

<sup>\*</sup> There is no national registry of VLBW infants in Singapore. However, the three NICUs manage more than 80% of VLBW infants born in the country, and each of them have their own unit database of VLBW infants.

## **Supplementary Table 3: Availability of treatment and diagnostic tests**

	, , , , , , , , , , , , , , , , , , ,	Indonesia	Japan	Korea	Malaysia	Philippines	Singapore	Sri Lanka	Taiwan	Thailand
treatments	Incubators	Mostly	Mostly	Mostly	Mostly	Often	Mostly	Mostly	Mostly	Mostly
	Surfactant	Sometimes	Mostly	Mostly	Mostly	Sometimes	Mostly	Mostly	Mostly	Often
	Mechanical ventilation	Sometimes	Mostly	Mostly	Mostly	Mostly	Mostly	Mostly	Mostly	Mostly
	HFO	Rarely	Mostly	Mostly	Mostly	Rarely	Often	Often	Mostly	Sometimes
	СРАР	Mostly	Mostly	Mostly	Mostly	Mostly	Mostly	Mostly	Mostly	Mostly
	Peripherally inserted central catheter	Often [about 50%]	Mostly	Mostly	Mostly	Sometimes*	Mostly	Sometimes*	Mostly	Sometimes
tre	Total parenteral nutrition	Sometimes	Mostly	Mostly	Mostly	Often	Mostly	Never	Mostly	Often
of t	Probiotics	Sometimes	Mostly	Mostly	Rarely	Rarely	Sometimes	Rarely	Often	Rarely
Availability	Donor milk	Rarely	Mostly	Rarely	Rarely	Sometimes	Mostly	Rarely	Mostly	Rarely
labi	Indomethacin	Never	Mostly	Never	Mostly	Sometimes	Mostly	Rarely	Often	Often
wai	Ibuprofen	Rarely	Mostly	Mostly	Mostly	Sometimes	Mostly	Rarely	Mostly	Sometimes
٩	Corticosteroids	Sometimes	Mostly	Mostly	Mostly	Often	Mostly	Mostly	Often	Often
	Caffeine	Sometimes	Mostly	Mostly	Often	Rarely	Mostly	Never	Rarely	Never
	Inhaled nitric oxide (iNO)	Rarely	Mostly	Mostly	Sometimes	Never	Often	Often	Mostly	Rarely
	Therapeutic hypothermia	Often [about 50%]	Mostly	Mostly	Mostly	Mostly*	Mostly	Often	Mostly	Sometimes
Availability of tests	Pulse oximeter (SpO2 monitor)	Often	Mostly [80-101%]	Mostly	Mostly	Mostly	Mostly	Mostly	Mostly	Mostly
	Electrocardiogram monitor	Often	Mostly	Mostly	Mostly	Sometimes	Mostly	Mostly	Mostly	Rarely
	Transcutaneous CO <sub>2</sub> monitor	Rarely	Mostly	Often	Rarely	Rarely	Mostly	Never	Sometimes	Rarely
	Brain ultrasound	Sometimes	Mostly	Mostly	Mostly	Mostly	Mostly	Sometimes	Mostly	Sometimes
	Echocardiography	Sometimes	Mostly	Mostly	Often	Often	Mostly	Sometimes	Mostly	Sometimes
	aEEG	Rarely	Often	Often	Sometimes	Rarely	Often	Often	Sometimes	Rarely

<sup>\*</sup> Available only in level-III NICUs.

The information in the table is based on the personal understanding of the steering committee members regarding NICU care in their respective countries. The words of "Mostly", "Often", "Sometimes", "Rarely", and "Never" indicate the proportions of 80-100%, 50-79%, 20-49%, 1-19%, and <1 %, respectively. Abbreviations: aEEG, amplitude-integrated electroencephalogram; CPAP, continuous positive airway pressure; CO<sub>2</sub>, carbon dioxide; HFO, high-frequency oscillation; SpO2, oxygen saturation.