

Beyond Precision: Knowledge and Governance in Global Health Statistics

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Summary of argument

Precision in measurement can be resolved, but at a cost.

Good data has to be politically relevant, and there is a danger that donor preference for data that does not coincide with state preference.

If data are weak or missing it is very dangerous to engaging in 'paying for results'.

Morten Jerven, 'Beyond Precision: Embracing the Politics of Global Health Numbers', *The Lancet*, forthcoming, March 2018.

Counting People in Nigeria

Table 1: Nigerian Population in Consecutive Censuses (millions)

	1911	1921	1931	1952/53	1962	1963	1973	1991	2006
'North'	8.12	10.56	11.44	16.84	22.01	29.78	51.38	47.37	n.a.
'South'	7.93	8.16	8.62	13.58	23.28	25.88	28.38	41.62	n.a.
Total	16.05	18.72	20.06	30.42	45.29	55.66	79.76	88.99	140

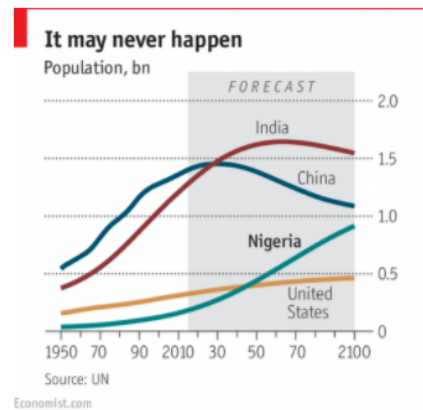
Counting People in Nigeria

We happy few

Nigeria's population has been systematically exaggerated

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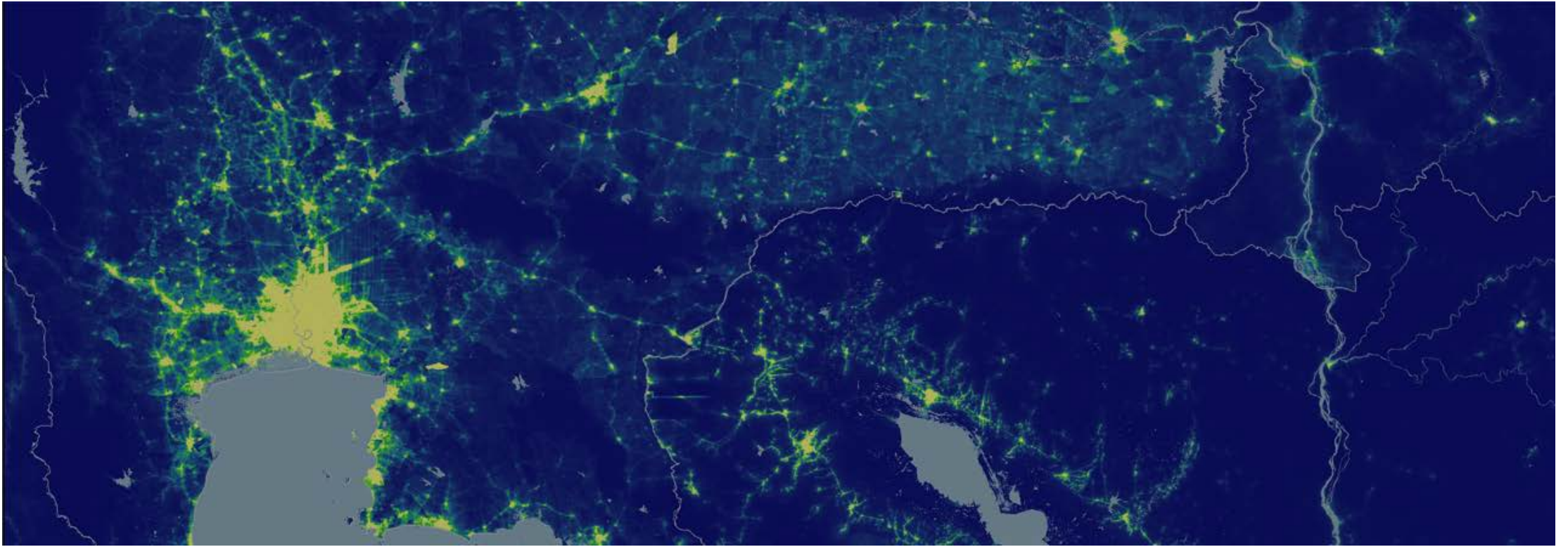
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NIGERIANS, THEIR NEIGHBOURS grumble, think of their country as the Texas of Africa, where everything is bigger and better. On size, at least, they are largely right. By land mass Nigeria is about as big as France and Germany combined, dwarfing many other African countries. After a recalculation of its GDP in 2014 it was found to have

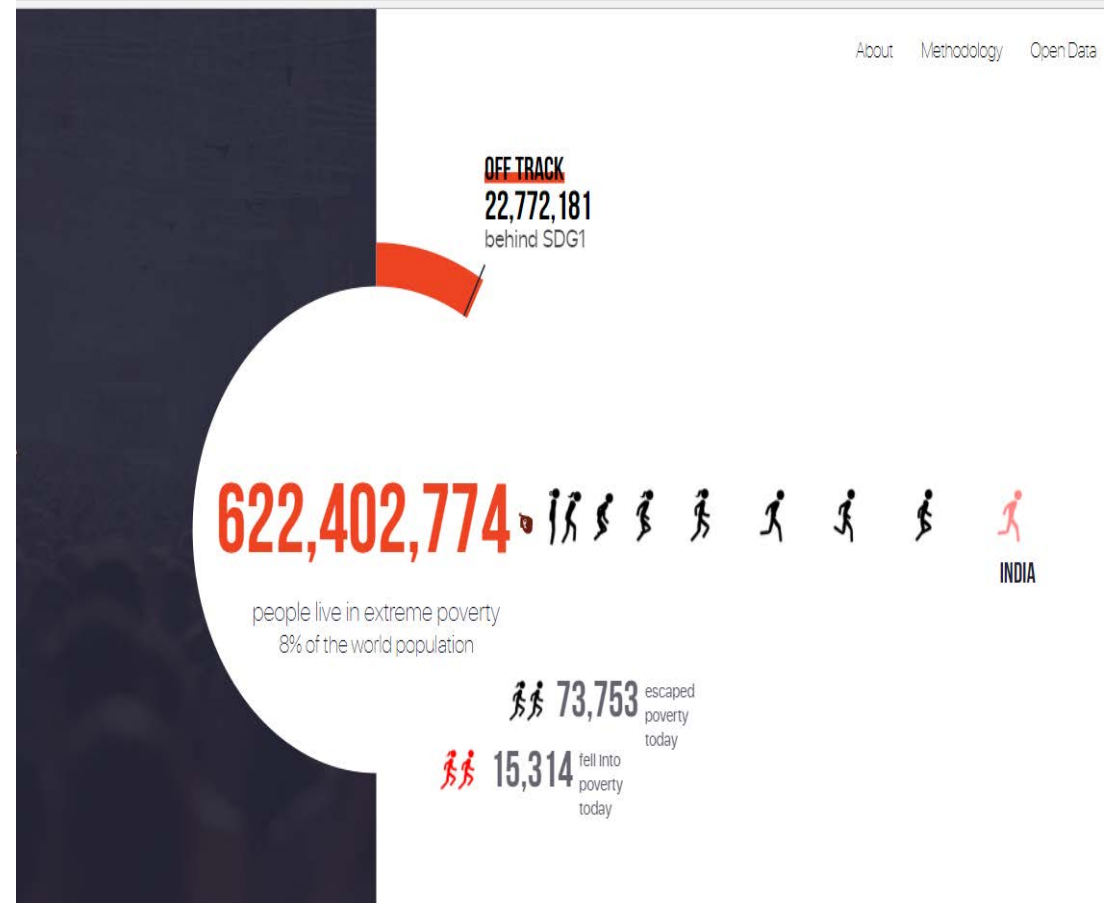
overtaken South Africa to become the continent's biggest economy. Its population, too, at an estimated 183m, is the largest of any African country. And it is growing so rapidly that the United Nations Population Division expects it to overtake America's by 2050.

Counting Nigerians from Space



Precision in Global Health Numbers

It is a curious creation of global aggregation that you can know the size of the problem on the global level precisely, but then you go down to regional, national or particularly at local levels there will be gaps in the information.



Evidence based policy or Policy based evidence?

What happens to the evidence when you incentivize statistics with clearly identifiable carrots?

Comparing survey data to administrative data

- 1) Vaccination in Tanzania
- 2) School enrollment in Kenya
- 3) Fertilizers in Malawi

Trade-offs in health data provision

It is easy to present the global health data agenda as a simple precision problem, but if we acknowledge that statistical capacity is a limited resource, we need to think long and hard about trade-offs in data provision. These are the hard questions for global health data – if we disregard them, we may just end up with precise answers to the wrong questions.

Without politics, statistics are irrelevant, and with too much politics statistics are unusable.