Statistics meets Health:
A High Level Dialogue between health sector and statistical leaders for a formidable partnership between NSOs and health to save lives and improve the health of billions

Monday 4th March 2019, 50th Statistical Commission
10:30 – 13:00, Conference Room 1, UN Headquarters New York

Co-conveners
Committee for Directors General of African NSOs, Bangladesh, Burkina Faso, India, Fiji, Mexico, Philippines, as well as UNICEF, World Bank and WHO

Event note
Agenda 2030 unequivocally placed National Statistical Offices (NSOs) at the centre of monitoring of the Sustainable Development Goals (SDGs). However, most national health data producers are outside of the remit of NSOs. A strong and formidable collaboration between national health actors and the statistical system, NSO being at the centre of this, is key to having an effective metrics and measurement system for monitoring the impact of programmes and interventions and for assessing progress towards the SDGs. The session will highlight the issues countries are facing in various parts of the world – what works and what doesn’t and what is needed to improve data and statistics at the national and international level through a coordinated approach of effective partnership. For the health sector this is key to having decisions that can save lives as well as improve health of the populations.

SDG declaration urged the global community ‘by 2020, enhance capacity-building support to developing countries, including for least developed countries and small island developing States, to increase significantly the availability of high-quality, timely and reliable data disaggregated by income, gender, age, race, ethnicity, migratory status, disability, geographic location and other characteristics relevant in national contexts’. Yet three years since the universal adoption of the SDGs by the global community, majority of the developing world still struggle to have appropriate and adequate data to meaningfully report on their progress against most of the SDG targets. This is particularly acute in the low and middle-income countries of Africa and Asia.

Finally, better data and statistics, as global public goods also make economic sense. At the 2015 Financing for Development meeting, a report showed that to measure the SDGs we need an additional $1 billion annually for low and middle-income countries. In contrast WHO’s investment case in 2018 showed that to meet the SDG3 targets alone would require in the range of $134 billion to $371 billion annually for similar set of countries where the need is the greatest. Therefore, investing in SDG health monitoring would be a very small fractional supplement to the total cost to achieve the related SDGs. Effective partnership between the NSOs and health sector agencies will only reduce this cost significantly as data will be collected, analyzed, disseminated and used much more efficiently. The dialogue at this side event aims to reinvigorate this for a better way forward.

Provisional annotated programme

10:30 – 10:40 Opening remarks by Committee of DGs of National Statistics Offices of the African Union countries (CoDGs): Dr Karam Allah Ali Abdelrahman, Chief Statistician Sudan

He will talk about the urgent need to strengthen health data and statistics in Africa both for SDG monitoring as well as monitoring towards African Agenda 2063. Health statistics is weak in Africa and the fragmentation is rife of data and statistics works between NSOs and African health sector institutions. He will call on development community, international development partners, especially those involved in measuring and monitoring health sector trends and progresses to help African NSOs and African institutions for urgent support. He will also summarize the recommendations from their last annual meeting of CoDGs, that called for closer attention to health statistics and the urgent need to strengthen the WHO
Welcome remarks from Dr Natela Menabde, Executive Director, WHO Office to the UN NY. She will talk about WHO’s commitment to strengthen health statistics across institutions in the world, especially the LMICs, including those in Africa and Asia where the need is the greatest. She will also briefly talk about how WHO’s triple billion targets are interlinked with a measurable impacts framework, and how the UN’s health agency is preparing to be more impactful through a better and committed delivery of its programmes which is measured through an accountable monitoring framework.

10:40 – 11:10 Health sector needs – how can NSOs help:

10:40 – 10:55 Special Guest, Honourable Minister of Health and Medical Services, Fiji, H. E. Dr Ifereimi Waqainabete. He will express his commitment to deliver universal health coverage in his country within the Pacific context and to work closely with WHO to implement WHO’s new impacts framework in Fiji. This can be a model for other Pacific Island Countries and Small Island Developing States in general. He will reiterate the commitment of his government to develop with support from WHO and other development partners a robust monitoring system that is coupled with strengthened delivery of programmes. He will indicate the intrinsic need to have greater collaboration with national statistics office, as well as global monitoring partners to support national institutions to strengthen national and global monitoring for effective reporting and policy making.

10:55 – 11:10 Representative from Government of India (to be confirmed; in absence of Joint Secretary, Ministry of Health and Family Welfare, India). India has been developing Integrated Health Information Platform, which is now operational in seven States of India, is a leading data and information system across all facets of health and health information, and integrates individual health records, to hospital/institutional records, to administrative systems to risk factors, disease burdens, socioeconomic determinants etc. This, coupled with their National Health Protection Scheme (Ayushman Bharat, an Indian national version of universal health coverage) will be the first and unique in the world to have an end to end solution for health and health determinants that can fully cater for national and global monitoring at any scale and at any level of disaggregation.

11:10 – 11:30 How can the UN system help:

Dr Laurence Chandy, Director, Division of Data, Research and Policy, UNICEF
Dr Samuel Lantei Mills, World Bank Health Global Practice

11:30 – 11:45 The role of NSOs in health sector evidence and decision making

Special Guest, Honourable State Minister of Health and Family Welfare, Bangladesh, Dr Murad Hassan. He will express his government’s commitment to Universal Health Coverage through the improved framework of effective coverage that will have a built-in monitoring framework to be developed with support from international development partners, such as WHO, UNICEF, World Bank etc. He will also talk about Prime Minister’s commitment to bring UHC to the fore of international development and prominence, such as setting up of a Global Action Plan on UHC, to be led by Government of Bangladesh. He will also talk strengthening of data systems for such monitoring, such as CRVS administrative data sources as well as data quality checks and use of standards and best practices of data collection, analysis and reporting by the national statistics offices.


Dr Boureima Ouedraogo, Chief Statistician, Burkina Faso: He will focus on specific needs of strengthening national monitoring systems in Burkina Faso as well as Western African in general
through greater collaboration between producers of administrative and surveillance data generally done by line ministries and national statistics offices across Western Africa

**Dr Lisa Bersales, National Statistician and Registrar General, Philippines Statistics Authority.** She will talk about their plans to strengthen their national CRVS, especially the cause of death statistics, a key data issue for mortality estimates and health statistics in general.

**Dr Enrique de Alba, Vice President, INEGI, Mexico:** He will highlight the model of INEGI of coordinating sectoral statistics, such as health statistical issues within INEGI, by providing a hosting and coordinating platform for health sector agencies and INEGI. This model, also used in other NSOs could be replicated elsewhere in the world to enhance collaboration between health and statistics.

12:15 – 12:30  **Brief statements:**

Bangladesh: involvement of Bangladesh Bureau of Statistics in helping better admin data on health issues, as well as strengthening of CRVS and other data needed for health sector monitoring

Other Chief Statisticians to be decided

12:30 – 12:50  **Facilitated discussions highlighting the following points towards a way forward: facilitated by Dr Samira Asma, Director, Health Metrics and Measurement Cluster, WHO**

1. Starting point of UN system supporting countries in accordance with the Fundamental Principles of National Official Statistics for which the NSO is the natural locus of upholding statistical standards (quality assurance and – as necessary technical support to line ministries). Also, within the context of the SDGs, the UN resolution adopting the SDG indicators framework places NSOs at the front and centre of national monitoring. It is also the NSO reps in IAEG-SDGs that oversees SDG indicators framework and monitoring.
2. Administrative Data Systems are felt more “owned” by Line Ministries (“our data”) rather than household surveys and censuses which tend to be viewed as either ‘objective’ or ‘external’ because undertaken by NSO, not Line Ministry.
3. Admin data systems are being looked to by many as potential source of national planning and international reporting data and statistics. However, for most part so of the developing world, admin data often isn’t appropriate for multi indicator based global reporting, such as the SDGs. Additionally, it also feels that lot of work ahead of us (as development community) to make complete (and shock-resilient) systems. This doesn’t mean they can’t be used, now, but must be triangulated with other sources.
4. An improved breadth of reporting needed for the SDGs can happen by sustained interaction with census, household surveys, institutional surveys, and increasingly Big Data sources. UN is supporting work to explore how this will be operationalized.
5. Better data, statistics and reporting can also happen by sustained interoperability between administrative data systems. Administrative data systems are very good at disaggregating to small geographical areas. However, Health Information Management System (HMIS) will not, for example, usually give disaggregation by various socioeconomic stratifies – wealth status, educational attainment, to name a few. Linking data and statistics could allow this but has very severe demands on systems to maintain confidentiality of information. Interoperability of administrative, regulatory, surveillance and populated based data systems are also not always compatible due to their spatial and temporal scales being different and therefore their integration can be challenging.

12:50 – 13:00  **Concluding remarks – Nana Taona Kuo, Senior Advisor, Executive Office of the Secretary General**

13:00 – 14:30  **Lunch (hosted by WHO)**