# Wealth, Health, and Numbers: A 200-Year Global Perspective

An Exploratory Data Analysis of World Development Statistics

By: Abdulla Ebrahim & Waseem Mohammed

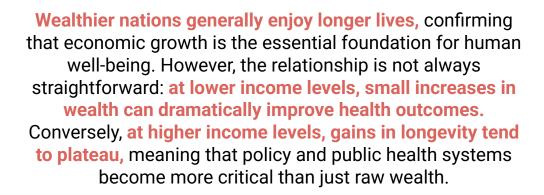


#### Where Should We Focus Our Efforts for Global Prosperity?

#### **Problem Statement**





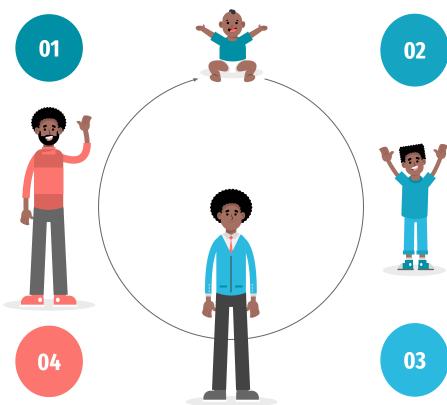




#### The Four Questions Guiding Our Analysis

How strongly are income and life expectancy related over time?

Can improvements in life expectancy be explained solely by income, or do other factors play a critical role?



Do all regions follow the same pattern, or are there clear exceptions?

What role does population growth play in shaping these trends?

#### **Connecting the Dots: Our Data-Driven Approach**

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## **Exploratory Data Analysis**

We analysed summary statistics and historical trends across years and countries. The core of our work involved using scatter plots and bubble charts to visually examine how a nation's wealth and scale directly relate to its citizens' health.

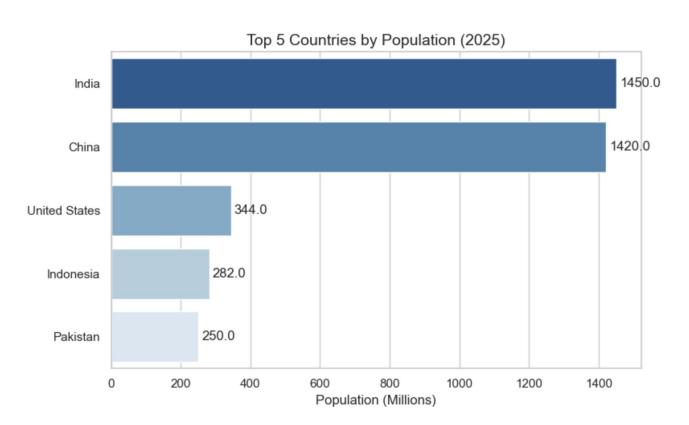
## Data Cleaning & Preparation

Before any analysis, we combined multiple datasets into one master file. We then cleaned this data meticulously, handling any missing values or duplicates and ensuring all information was correctly formatted for accurate historical comparison.

#### **Visualization**

Our analysis relied on creating powerful visualisations: line plots to show historical trends, scatter plots to establish relationship core wealth and hetween health, and bubble plots to incorporate the effect of population size into our findings.

#### **Top 5 Countries by Population (2025)**



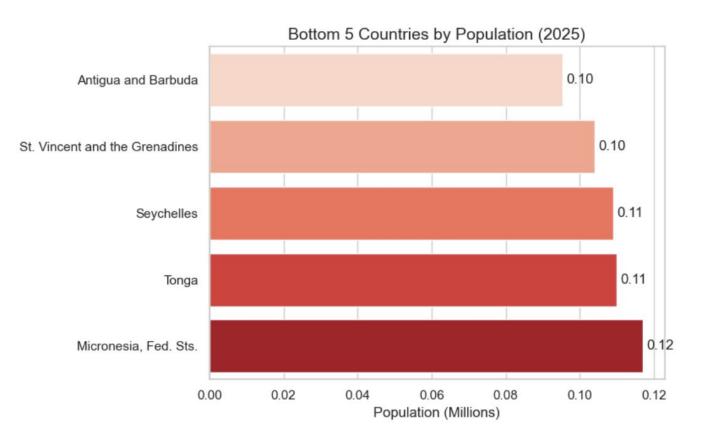
#### **The Opportunity**

These countries have huge labour forces and enormous internal consumer markets. Their scale is a key driver for global economic growth and a source of innovation.

#### **The Challenge**

The sheer size also means they face intense strain on infrastructure, severe resource demands, and massive issues of inequality. For instance, **India and China** must balance rapid economic expansion with urgent needs for environmental sustainability.

#### **Bottom 5 Countries by Population (2025)**



#### The Challenge

They have a **limited labour force, tiny domestic markets,** and are extremely vulnerable to **climate change**—a single storm can wipe out a large percentage of their GDP.

#### **The Key Contrast**

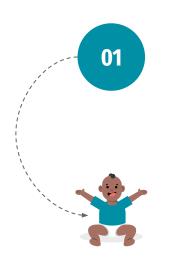
Large countries struggle with internal inequality and managing scale, while small nations struggle with external vulnerability and lack of market power. For our nonprofit, this means there's no single solution. A strategy for India will fail in Tonga, and vice versa.

#### **Life Expectancy Trends (1800-2050)**



#### **The Starting Line**

Notice that in the 1800s, every country was in the same boat, with a very low life expectancy of roughly **25 to 40 years**.



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#### **The Early Leaders**

Around the turn of the 20th century, countries like the USA and Japan rapidly pulled ahead. Their success was driven by industrialisation, advancements in medicine (like vaccines and antibiotics), and major public health initiatives such as clean water and sanitation.

#### The Steady Improvers

Nations like **Brazil and India** show consistent improvement, but they lag behind the early leaders.

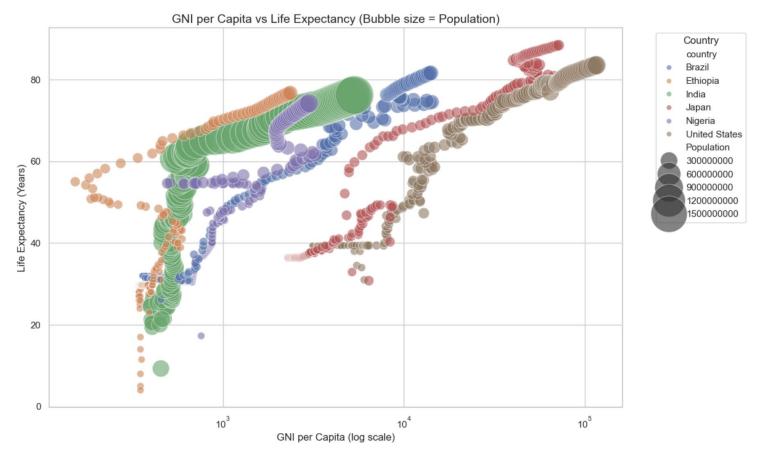




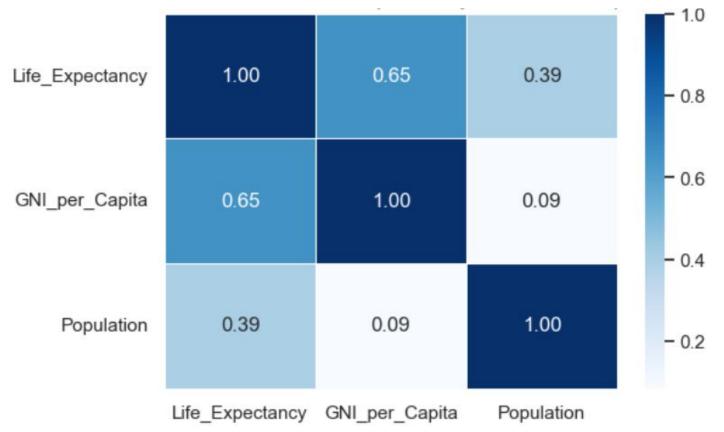
#### **The Late Starters**

Countries like Nigeria and Ethiopia show much slower improvement, only significantly picking up pace in the later half of the 20th century. Their delayed progress is directly linked to poverty, the lasting effects of colonialism, and struggling healthcare infrastructure.

#### **GNI per Capita vs Life Expectancy (Bubble size = Population)**



Correlation Between Life Expectancy, GNI, and Population



#### **Life Expectancy**



A country's wealth (GNI per capita) and its citizens' health (life expectancy) are strongly linked; higher income generally means longer life.

At lower income levels, small increases in wealth result in dramatic improvements in life expectancy, making this a priority zone for targeted investment.

For very wealthy nations (above ~\$20,000 GNI per person), the health gains **plateau**, meaning additional money does not significantly increase life span.







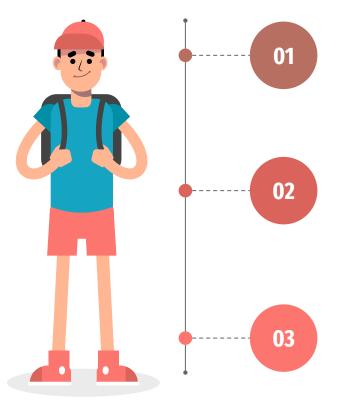
Aid and development efforts should focus on basic public health measures in low-income countries to generate the fastest, most effective gains.

In high-income nations, the focus must shift from simply generating wealth to **smart policy and system design** to achieve marginal gains in longevity.

This pattern proves that while money matters, **effective policy and social systems** ultimately dictate the health ceiling for any population.



#### **Conclusion**



#### **Strong Correlation, Changing Rules:**

We confirmed that wealth and health are strongly linked, but above a GNI of ~\$30,000, extra wealth yields **diminishing returns**. Efficiency shifts from raw money to smart policy.

#### **Scale Creates Complexity:**

Fast-growing, large populations (like India and Nigeria) face unique challenges that slow the rise of average income, requiring highly **localised** policy interventions.

#### **Early Investment Pays Off:**

Countries that invested early in public health and education (like Japan and the USA) created a **long-term economic advantage**, proving that health drives wealth, not just the reverse.

#### **Recommendations**

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#### **Prioritize High-Impact Zone**

Direct investment toward foundational public health and basic infrastructure in low-income countries, where the data proves returns on life expectancy are the fastest and highest.



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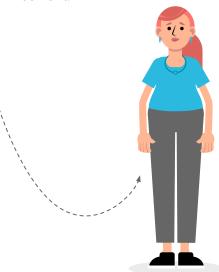
#### **Customize Strategy**

Avoid one-size-fits-all solutions. Tailor aid to address **internal inequality** in large nations and **external vulnerabilities** (like climate change risk) in small island nations.



### Support Foundational Systems

Focus funding not just on quick fixes, but on strengthening local governance, healthcare access, and education systems to ensure progress is **sustainable** and resilient.





# Thank you!

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