



WHEC Update

Briefing of worldwide activity of the Women's Health and Education Center (WHEC)

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Practice & Policy

Happy New Year from all of us @ the Women's Health and Education Center (WHEC)

As 2023 draws to a close, and as **WHEC Update**, celebrated its 16th anniversary, we would like to take this opportunity to extend our sincere thanks to you for your loyal readership and for continuing to follow Women's Health and Education Center's (WHEC's) efforts in promoting sustainable development for all. We hope you continue with us on this path and make 2024 a success for all.

Here are 6 things you should know about efforts and keeping Sustainable Development Goals (SDGs 1, 3, 4, 5, 10, 16 & 17) at the center of all our initiatives – we wish to achieve these 7 goals.

1. Addressing poverty and the root causes of inequality: We promoted integrated long-term social policy frameworks addressing poverty, food security, malnutrition and inequalities, and partnered with World Health Organization (WHO) and UNESCO, in 2023 in our various publications and Side Events. We will continue to address the digital divide too, in 2024.
2. Guiding global action on our global goals: Our efforts with the High-level Political Forum (HLPF) will accelerate action on the SDGs.
3. Ensuring sustainable financing: Addressing the urgent issues of financing is high on our agenda.
4. Making data count: We helped to put data to the task of effective decision-making. And we supported our partner's efforts to compile and disseminate crucial, innovative, detailed, disaggregated, and geo-referenced data on the pandemic's impact on society, economy, and government.
5. Protecting our planet: We moved forward to the essential truth that the goals of the 2030 Agenda and the Paris Agreement are closely interlinked, and they require multistakeholder partnership and collaboration to be implemented.
6. Framing the future of development: We understand the complex challenges created by recurrent crises by monitoring, analyzing, and forecasting social, economic, and demographic trends.

The year 2023 will be remembered as a critical crossroad in development history. Never before science, technology and innovation has painted a starker picture of the world we are facing. We can either continue down the path of business-as-usual and suffer the catastrophic consequences of reversal of SDGs 3, 4, 5 by COVID-19 or we can embrace "rapid, far-reaching and unprecedented changes in all aspects of society." In a word, we have to achieve the Sustainable Development Goals (SDGs), we have to accelerate our actions.

Through our publications, Written Statements and Side Events at the United Nations, we convey the voices of the peoples to the Member States of the United Nations. In 2023, many scholarly articles were contributed by academic institutions and the UN System. Issues we covered spanned from poverty to food security, from economic situation, climate change to social inclusion. It is against this backdrop that the Women's Health and Education Center (WHEC) is increasingly supporting interventions that are improving accessibility for girls, women, minorities, migrants, refugees and other marginalized people in our societies. We welcome you once again on this journey with us.

Share your opinions on **WHEC Global Health Line (WGHL)** – create an account.
Championing the SDGs: *In The Face of Intensified Crisis*

Rita Luthra, MD



Your Questions, Our Reply

What can you tell us about the average person on the move today? What trends do you foresee in the coming years?

Migrants and Refugees are Important Agents of Change: International migrants, refugees and/or internally displaced people are an extremely diverse group of people. They hail from all continents and all areas of our societies and have very different social and economic backgrounds and characteristics. It is not trivial, therefore, to identify who is a typical, “average” migrant.

Looking to the future, it is extremely difficult to predict how international migration trends will unfold. However, it is likely that the volume and complexity of international migration flows will continue to grow, influenced, in part, by other global trends, including climate change, population dynamics and urbanization.

Conflicts and crises, which have played a significant role in shaping migration trends in the past, are also likely to keep international migration at the center of the global policy debate going forward. The number of refugees and asylum seekers forced to flee across international borders because of persecution, conflict, violence, and human rights violations rose in 2022 and 2023 to the highest levels in decades.

Our world is facing multiple crises: conflicts, war, hunger and an escalating climate emergency. Every year, millions of people migrate across international borders in a safe, orderly and regular manner. However, unfavorable political, economic, social and environmental circumstances, combined with unrealistic perceptions of the opportunities available abroad and limited understanding of the risks and dangers can compel people to migrate even when they do not have access to safe and regular pathways.

Under such circumstances, migrants can become vulnerable to exploitation and abuse, can fall victim to human traffickers, and in extreme cases even loss of their lives. According to the International Organization for Migration (IOM), since 2014, more than 4,000 fatalities have been recorded annually along migratory routes worldwide, with many more migrant deaths going unrecorded. To reduce these risk, it is critical to create opportunities for people to migrate in a dignified, safe and orderly fashion, upholding and protecting the human rights of all migrants, regardless of their migration status.

Migration should never be an act of desperation.

Addressing the adverse drivers and structural factors that hinder people from building and maintain sustainable livelihoods in their own country can also reduce the pressure to migrate irregularly.

Migration and Sustainable Development Goals (SDGs)

Making positive contributions to SDGs in communities of origin and destination, international migrants have an important role. It can facilitate the achievement of many Goals and targets of the 2030 Agenda for Sustainable Development. Conversely, the implementation of the 2030 Agenda can reduce the adverse drivers that compel people to move, making the option to remain in one’s country a more viable choice.

International migrants, despite their many contributions, are also among the groups most vulnerable to being “left behind” in the context of the 2030 Agenda for Sustainable Development. To maximize the benefits of migration and minimize its negative effects, it is critical to create opportunities for people to migrate in a safe, orderly and regular manner.

Respecting, protecting and fulfilling the human all migrants, regardless of their migration status, also enhances the development potential of migration.



ECOSOC Partnership Forum



The 2024 Partnership Forum of the Economic and Social Council (ECOSOC) will be held on 30 January 2024 at the United Nations Headquarters in New York.

Theme: “Reinforcing the 2030 Agenda and eradicating poverty in times of multiple crises: the effective delivery of sustainable, resilient and innovative solutions.” The Forum will place a special emphasis on the Sustainable Development Goals (SDGs) 1, 2, 13, 16 and 17.

Participation of the Women’s Health and Education Center (WHEC) Virtual Side Event

Date: 30 January 2024; Time: 8:15 am to 9:30 am (EST, New York Time)

Education- and Health-For-All To Achieve United Nations 2030 Agenda

<http://www.womenshealthsection.com/content/whhec/ecosoc-partnership-forum.php3>

Summary:

The aim of this Side Event is to understand the potential of social and economic impacts, that quality education and improved health can bring in achieving peaceful co-existence. Our initiatives have an unique role to play in strengthening the health and educational systems, worldwide. Education and Health are Human Rights.

Concept Note:

<http://womenshealthsection.com/content/whhec/2024ECOSOC-Concept-Note.pdf>

Announcement / Invitation / Flyer:

<http://womenshealthsection.com/content/whhec/2024ECOSOC-Invite.pdf>

WHEC Statement

<http://womenshealthsection.com/content/whhec/2024ECOSOC-WHEC.pdf>

All are invited to the Virtual Session and all are welcome to participate.



United Nations at a Glance

North Macedonia became UN Member State on 8 April 1993



North Macedonia (Macedonia before February 2019), officially the **Republic of North Macedonia**, is country in Southeast Europe. It gained independence in 1991 as one of the successor to the northwest, Serbia to the north, Bulgaria to the east, Greece to the south, and Albania to the west. It constitutes approximately the northern third of the larger geographical region of Macedonia. Capital: Skopje; Population: 1.83 million; Official languages: Macedonian and Albanian; Ethnic groups: 59% Macedonians, 24.3%, and Turks, Serbs and others-30%. Religion: 61% Christianity, 33% Islam. Currency: Macedonia denar.

The majority of the residents are ethnic Macedonians, a South Slavic people. Albanians form a significant minority at around 25%, followed by Turks, Romani, Serbs, Bosnians, Aromanians and few other minorities. In 1945 this region was established as constituent state of communist Yugoslavia, which it remained until its peaceful secession in 1991. The country became a member of the UN in April 1993.

Former Yugoslavia and Successor States: Bosnia and Herzegovina, Croatia, Montenegro, North Macedonia, Serbia, Slovenia. General Assembly: A/RES/47/225 – the General Assembly decided to admit as a Member of the United Nations the State being provisionally referred to for all purposes withing the United Nations as “The former Yugoslav Republic of Macedonia” pending settlement of the difference that had arisen over its name. Further to the communication dated 14 February 2019 from the Permanent Mission addressed to the Protocol and Liaison Service, the country name was changed to the Republic of North Macedonia (short from: North Macedonia) from the former name of The former Yugoslav Republic of Macedonia. Effective date: 14 February 2019.



North Macedonia's statistical regions exist solely for legal and statistical purposes. The regions are: Eastern, Northeastern, Pelagonia, Polog, Skopje, Southeastern, Southwestern, and Vardar. In August 2004, the country was reorganized into 84 municipalities; 10 of the municipalities constitute the City of Skopje, a district unit of local self-government and the country's capital. Most of the current municipalities were established in September 1996; others were consolidated, and their borders changed. Prior to this, local government was organized into 34 administrative districts, communes or counties.

Ranked as the fourth “best reformatory state” out of 178 countries ranked by the World Bank in 2009, North Macedonia has undergone considerable economic reform since independence. The country has developed an open economy with trade accounting for more than 90% of GDP in recent years.

North Macedonia has one of the highest shares of people struggle financially, with 72% of its citizens stating that they could manage on their household's income only “with difficulty” or “with great difficulty.” North Macedonia still has one of the lowest per capita GDPs in Europe. It is a less developed country and has a considerably smaller economy than most of the former Yugoslav states.

North Macedonia is a parliamentary democracy with an executive government composed of a coalition of parties form the unicameral legislature and an independent judicial branch with a constitutional court.

Details:

https://sustainabledevelopment.un.org/content/documents/26387VNR_2020_Macedonia_Report.pdf

Collaboration with World Health Organization (WHO)



WHO| North Macedonia

Health Status and Risk Factors

The estimated population is of 2.1 million people and life expectancy has been increasing slowly in recent years. The proportion of the population older than 65 years increased from 8.0% in 1991 to 12.2% in 2019. Although the country is young, population ageing will certainly pose challenges in the future needs for long-term care. Raising rates of overweight and obesity and a high prevalence of smoking, especially among young people, co-exist with an increasing burden of non-communicable diseases (NCDs). NCDs account for an estimated 95% of total deaths: 61% from cardiovascular diseases and 20% from cancer. Premature mortality is higher than in the European Region, for both sexes, although generally declining except for cancer. Infant mortality is also increasing.

Main Behavioral Risk Factors: Smoking and Unhealthy Diet

Tobacco, high blood pressure and unhealthy diet are the top risk factors driving mortality and disability. Increasing rates of overweight – 58% of the population and obesity (24% of the population) together with a rising prevalence of smokers among people 15-64 years old (from 43% in 2002 to 46% in 2019) indicate concerning trends, especially in vulnerable populations. It also indicates the need for addressing the determinants of health and for improving equity through population-based interventions.

Performance of Health Services

Ambulatory care sensitive conditions are health conditions that can be effectively prevented, diagnosed and treated in primary health care. They include acute, chronic and vaccine-preventable conditions that do not require inpatient treatment if timely and appropriate primary care is received. Ambulatory care sensitive conditions are a proxy for the quality of care. Unnecessary hospital admissions suggest a lack of uniformity in health providers' patterns of referral and admission procedures.

Primary Health Care Delivery System

In 2007, a structural reform of the primary healthcare delivery system privatized the production of primary care services provided by general practitioners, pediatricians, dentists, gynecologists, school doctors, and pharmacists. These health providers were compelled to establish formal contracts with the Health Insurance Fund based on a newly introduced capitation payment model. Since then, the major efforts in strengthening primary health care have been the creation of a health network introduced in 2012 to make all general practitioners and pediatricians, become family physicians by 2020 and the deployment of the health information system, call Moj Termin, to streamline the process of referral to specialists and prescription of medicine by primary care doctors.

Moj Termin: The Digital Backbone of The Health System

Moj Termin is the national integrated health infrastructure system that creates and stores medical records data and information related to health care. Such services as e-referrals, e-prescriptions, medical diaries and access to hospital, laboratory and radiology reports are offered to complement the electronic health record. As a centralized e-Health system, it consolidates data from more than 70 sources, including primary care doctors, health care centers, hospital, institutes, clinics and pharmacies. At present, 1,950,000 records have been created, and it is the sole system used by primary care doctors to refer patients and prescribe medications. However, it is still not open to patients to make appointments or to access their data.

Details: <https://www.who.int/north-macedonia>



North Macedonia Joined UNESCO on 28 June 1993



Ancient and Primeval Beech Forests of the Carpathians and Other Regions of Europe

This transnational property includes 94 component parts in 18 countries. Since the end of the last Ice Age, European Beech spread from a few isolated refuge areas in Alps, Carpathians, Dinarides, Mediterranean and Pyrenees over a short period of a few thousand years in a process that is still ongoing. The successful expansion across a whole continent is related to the tree's adaptability and tolerance of different climate, geographical and physical conditions.

During each glacial phase (ice ages) of the last 1 million years, European Beech (*Fagus sylvatica*) survived the unfavorable climatic conditions in refuge areas in the southern parts of the European continent. After the Ice Age, around 11,000 years ago, beech started expanding its range from these southern refuge areas to eventually cover large parts of the European continent. These forests contain an invaluable population of old trees and a genetic reservoir of beech and many other species, which are associated with and dependent on these old-growth forest habitats.



Natural and Cultural Heritage of The Ohrid Region

A superlative natural phenomenon, Lake Ohrid region provide a refuge for numerous endemic species of freshwater fauna and flora dating from the Tertiary period. Situated on the shores of the lake, the town of Ohrid is one of the oldest human settlements in Europe. Built mainly between the 7th and 19th centuries, it has the oldest Slav monastery (St. Pantelejmon) and more than 800 Byzantine-style icons dating from the 11th to the end of the 14th century. In the shallow waters near the shores of the lake, three sites testify to the presence of prehistoric pile dwellings, and the small Lin Peninsula is the site of the remains of an Early Christian church founded in the middle of the 6th century.

Although the town of Struga is located along the northern shores of Lake Ohrid, town life is concentrated along the banks of the Crn Drim River, which flows out of the lake. The existence of Struga is connected with several fishermen settlements on wooden piles situated along the lake shore. A great number of archaeological sites testify to origins from the Neolithic period, the Bronze Age, the Macedonian Hellenistic period, the Roman and the early Middle Age period. Similar pre-historic pile dwelling sites have also been identified in the western margins of the Lake.

UNESCO Training on Building a Climate Resilient Future

The project aims to contributing to a more climate-resilient South=East European region, notably more climate resilient UNESCO designated sites by improving the understanding of the impacts of climate change and natural hazards on natural and cultural sites, and improving capacities for effective emergency preparedness and response within heritage management and site governance frameworks. The project targets 5 UNESCO Member States in South-East Europe: Albania, Bosnia and Herzegovina, Montenegro, **Republic of North Macedonia**, and Serbia.

Details: <https://en.unesco.org/countries/north-macedonia>

Education-for-All and Health-for-all

Bulletin Board



SDG 17

Strengthen the means of implementation and revitalize the Global Partnership for Sustainable Development

OVERVIEW

- Rising debt burdens threaten developing countries' pandemic recovery.
- Debt to GNI Ratio rose sharply in sub-Saharan African Countries; from 23.4% in 2011 to 43.7% (2020).
- Internet: Uptake accelerated during the pandemic 54% of individuals using in 2019 to 63% in 2021.
- ODA for SDG Data declined by more than 18% in 2020.
- Net ODA reached a new high of \$177.6 Billion, largely due to Covid-Related Aid.
- Foreign Direct Investment rebounded to \$1.58 Trillion, up 64% from 2020.
- Remittances reached \$605 Billion, up 8.6% from 2020.

Our Approach to Capacity Development

Capacity building activities of the Women's Health and Education Center (WHEC) are aimed to strengthening and maintaining the capabilities of states and societies to design and implement strategies that minimize the negative impacts of current social, economic and environmental crises and emerging challenges. As cross-cutting entry point, capacity building activities promote the integration of the 2030 UN Agenda and the SDGs into national sustainable development planning frameworks, sharing lessons learned and good practices through workshops and related events.

What Do Our Projects and Programs do?

- Support governments and stakeholders to strengthen the contribution of micro-, small, and medium-sized enterprises, to achievement of the 2030 Agenda and SDGs, etc.
- Strengthen the capacity of countries to integrate the 2030 Agenda and the SAMOA (Small Island Developing States Accelerated Modalities of Action) Pathway.
- Strengthen the capacity of countries to integrate the 2030 Agenda and the SDGs into national development plans and sustainable development strategies. Use is made of practical tools and peer learning to facilitate implementation.
- Promote multi-stakeholder and participatory approaches through the provision of both workshops and online training courses.
- Support governments and stakeholders to monitor and develop effective partnerships for the SDGs.

Countries interested in capacity development support are invited to visit our Global Platform <http://womenshealthsection.com/> - a grand collaboration with the UN, WHO and UNESCO.

[Women's Health and Education Center | WHEC | \(womenshealthsection.com\)](http://womenshealthsection.com/)



Collaboration with UN University (UNU)

UNU-WIDER (World Institute for Development Economics Research)

Expert Series on Health Economics

Doing Business in A Deals World

The doubly false premise of rules reform

The Doing Business reports have evoked an intense policy debate about whether countries should simplify regulatory rules or make them more stringent. The authors argue that doing business in developing countries is based on deals struck between firms and the state, rather than rules. The authors show that there is a weak relationship between rules and deals, and at low levels of state capability, more stringent rules leading to less compliance, rather than more. The authors provide a diagnostic approach to rules reform where the appropriate reform depend on the level of stringency of the rules, and the level of its state capability.

The Doing Business (DB) indicators have generated the most controversy. One recent critique of DB has been on the sensitivity of aggregate country rankings to the small changes in the methodology. But a more fundamental and influential critique has been against the underlying assumption: that improvement in DB is a desirable objective. This critique argues that laws and regulations are necessary for countries to meet their legitimate public policy objectives, such as collecting taxes, protecting workers' rights, promoting health and safety standards in the workplace, and improving the natural environment. The laws and regulations that are needed for these public policy objectives may be seen as constraining the ability of firms to do business easily, but are nevertheless needed for overall societal welfare in the country in question .

The annual DB exercises encourages countries to provide a better business environment by quantifying the difficulty faced by firms in fulfilling existing formal legal regulatory processes. The quantification is based on expert opinion on a large number of relevant rules and regulations in these countries and this encourages countries to change their legal procedures and rules, such that these regulatory processes are, by law, simplified and completed within a shorter period of time. Thus, better rankings on the DB index require countries to achieve an "ease of doing business" by providing regulatory rules that are as simple as possible, and the required processing according to these rules need to be as fast as possible. There are two interpretations to this Doing Business approach.

One interpretation is that it is based on a complete misunderstanding of the reality of how firms actually do business in developing countries. It is both obvious to the typical person in the street and easy to document empirically that the way business is done is through striking deals with the political and bureaucratic elite, either via connections or through intermediaries.

The other interpretation of the politics of the advocacy exercise of Doing Business is that it understands this pervasive *De Jure-de facto* gap, but it is predominantly concerned with creating the conditions for *foreign* investment – and foreign investors are significantly impeded in their deal making abilities relative to domestic investors.

Publisher: UNU-WIDER; Authors: Sabyasachi Kar, Lant Pritchett, Spandan Roy, and Kunal Sen;
Sponsors: Project – How do effective states emerge?

Details of the paper can be accessed from the link of UNU-WIDER on CME Page

<http://www.womenshealthsection.com/content/cme/>

Two Articles of Highest Impact, December 2023

Editors' Choice – Journal Club Discussions

Fully open-access with no article-processing charges

Our friendship has no boundaries. We welcome your contributions.

1. **Iron Deficiency Anemia in Pregnancy;**

<http://www.womenshealthsection.com/content/obs/obs038.php3>

WHEC Publications. Funding: WHEC Global Initiatives are funded by a grant from an anonymous donor. Join us at WHEC Global Health Line for discussion and contributions.

2. **Update on Colposcopic Terminology;**

<http://www.womenshealthsection.com/content/gynpc/gynpc008.php3>

WHEC Publications. Funding: WHEC Global Initiatives are funded by a grant from an anonymous donor. Join us at WHEC Global Health Line for discussion and contributions.

Partnership for Maternal, Newborn & Child Health (World Health Organization) PMNCH Member

Worldwide service is provided by the WHEC Global Health Line



From Editor's Desk

WHEC Projects under Development

Guidance on Adolescent Health and Wellbeing – A Call for Global Initiative



Key Facts

1. Over 1.5 million adolescents and young adults aged 10-24 years died in 2021, about 4500 every day.
2. Young adolescents aged 10 – 14 years have the lowest risk of death among all age groups.
3. Injuries (including road traffic injuries and drowning), interpersonal violence, self-harm and maternal conditions are the leading causes of death among adolescents and young adults.
4. Half of all mental health disorders in adulthood

start by age 14, but most cases are undetected and untreated.

5. Early onset of substance use is associated with higher risks of developing dependence and other problems during adult life, and people of younger ages are disproportionately affected by substance use compared with people of older ages.

6. Globally, there were 42 births per 1000 girls aged 15 – 19 years in 2021

Tobacco Use

The vast majority of people using tobacco began doing so when they were adolescents. Globally, in 2018, at least 1 in 10 adolescents aged 13 – 15 years uses tobacco, although there are areas where this figure is much higher. **E-Cigarettes** are particularly risky when used by children and adolescents. Nicotine is highly addictive and young people's brain develop up to their mid-twenties.

Key Facts of Tobacco Use

- Tobacco kills up to half of its users who do not quit.
- Tobacco kills more than 8 million people each year, including an estimated 1.3 million non-smokers who are exposed to second-hand smoke.
- Around 80% of the world's 1.3 billion tobacco users live in low- and middle-income countries.
- In 2020, 22.3% of the world's population used tobacco: 36.7% of men and 7.8% of women.
- To address the tobacco epidemic, WHO Member States adopted WHO Framework Convention on Tobacco Control in 2003. Currently 182 countries are Parties to this treaty.
- The WHO MPOWER measures are in line with WHO FCTC and have been shown to save lives and reduce costs from averted healthcare expenditure.

How risky are the e-cigarettes?

There are many different types of e-cigarettes in use, also known as electronic nicotine delivery systems (ENDS) and sometimes electronic non-nicotine delivery systems (ENNDS). These systems heat a liquid to create aerosols that are inhaled by the user. These so-called e-liquids may or may not contain nicotine (but not tobacco) but also typically contain additives, flavors and chemicals that can be toxic to people's health. E-cigarette emissions typically contain nicotine and other toxic substances that are harmful to both users, and non-users who are exposed to the aerosols second-hand. Some products claiming to be nicotine-free have been found to contain nicotine.

The consumption of nicotine in children and adolescents has deleterious impacts on brain development, leading to long-term consequences for brain development and potentially leading to learning and anxiety disorders. Nicotine is highly addictive and some evidence suggests that non-smoker minors who use ENDS can double their chances of starting to smoke tobacco cigarettes later in life.

Evidence reveals that these products are harmful and are not safe. However, it is too early to provide a clear answer on the long-term impact of using them or being exposed to them. Some recent studies suggest that ENDS use can increase the risk of heart disease and lung disorders. Nicotine exposure in pregnant women can have similar consequences for the brain development in the fetus. Accidental exposure of children to ENDS e-liquids poses serious risks as devices may leak, or children may swallow the poisonous e-liquid.

Ban Smoking and Vaping in School to Protect Young People

The tobacco industry relentlessly targets young people with tobacco and nicotine products resulting in e-cigarette use increasing and 9 out of 10 smokers starting before the age of 18. Products have also been affordable for young people through the scale of single-use cigarettes and e-cigarettes, which typically lack health warnings.

Women's Health and Education Center (WHEC) highlights four ways to foster a nicotine- and tobacco-free environment for young people:

1. Banning nicotine and tobacco products on school campuses;
2. Prohibiting the sale of nicotine and tobacco products near schools;
3. Banning direct and indirect ads and promoting of nicotine and tobacco products near schools; and
4. Refusing sponsorship or engagement with tobacco and nicotine industries.

To protect people's health, WHEC encourages all countries and its territories through its publications and projects, to make all indoor public places completely smoke-free.

Israel Palestine Conflict in Gaza

No Home To Return To



A sharp escalation of the conflict in and around Palestine means people face challenges in accessing essential food supplies, with distribution networks disrupted and production severely hampered.

Alongside access, increasing funding is also critical if WFP (World Food Program) is to continue the support that is so desperately needed. Food-insecurity levels were already alarmingly high before the conflict intensified, with one third of people in Palestine 1.8 million – experiencing food insecurity. WFP requests an immediate US \$17.3 million for the next four weeks to address this emergency

situation. In total it requires US \$44.8 million over the next 6 months, for one-monthly emergency response and six months' regular assistance.

Bare Minimum

Over 1.7 million people in Gaza are estimated to be internally displaced and about one million of them are staying in more than 150 UNRWA (United Nations Relief and Works Agency) shelters across the Strip. Shelters in the south, where people were forced to flee by Israeli military operations, are many times over capacity and OCHA (Coordination of Humanitarian Affairs), stated that most displaced men and older boys are sleeping in the open, in school yards or in the streets nearby. They deserve to sleep without being anxious about whether they will make it through the night. This is the bare minimum anyone should be able to have.

We Advocate

Through our public and private advocacy, we raise awareness of humanitarian crises and the needs of affected people. We advocate for the protection of civilians and respect for international humanitarian laws. By doing so, we amplify the voices of crisis-affected people greater access to humanitarian assistance for people who need it. We use our unique role to bring attention to humanitarian crises and the necessity to uphold international humanitarian law, secure humanitarian access and promote the protection of civilians.

Our ultimate goal is to save lives and reduce the impact of conflicts and natural disasters. All of our advocacy work, whether we are mobilizing relief money after a massive earthquake, ensuring vulnerable communities are protected, or raising awareness of forgotten crises, is aimed at keeping the world's attention on humanitarian crises, raising funds and ensuring that resources alleviate the suffering of affected people.

For us, advocacy means communicating the right message to the right people at the right time. Whether we are talking to crisis-affected communities, Governments, humanitarian agencies, community-based organizations, the media, donors, the private sector or parties in conflict, we work tirelessly to build coalitions and initiate commitments to save lives and protect those who are in harm's way. Advocacy is as important in the Security Council at the UN, as it is among local community leaders. We have a diverse network of advocacy experts who work at every level of our organizational structure. We always promote the principles of humanity, neutrality, independence and impartiality, and respect for International Law.

Join our initiatives!



In The News

Whose trash is it, Anyway?



Companies spend millions of dollars on “greenwashing” – marketing aimed at convincing the public that their products have minimal environmental impact – and stimulating conversations around individual carbon footprints.

What if the plastic bottle did make it into the trash pickup, only to fall out as it was dumped into the main receptacle? Or, if somehow the bottle made it through the recycling facility, where it was sorted and was shipped off to a country on the other side of the

world for others to sort through. Is it then the responsibility of those in the destination country to clean contaminated recycling?

Just think back to unread, discarded newspapers. Who is ultimately responsible for them? Right now, we live in a world where we accept things the way they are. We believe we have a responsibility as “good people” to pick up trash and reduce our individual impact on the earth. We can pick up trash. We can organize plogging events and inspire others to do the same, but until we talk about it enough to make change happen at the top, from the level of those who make the decision to produce it, our footprint will continue to grow.

We pass responsibility on to the next person as we create more waste, take more microplastics into our bodies and face ever greater pressure to reduce our waste footprint. Living through acceptance takes eyes off those who are responsible, or who should at least be under pressure to find a better way. Instead, they shift the attention back to us. **What can we do?**

We need to rethink the way we see waste. Instead of using our mental and physical energy picking up the slack for others, we need to use those moments to project our voices, asking those in positions of money and power what they are doing to fix the problem. Not through finding loopholes to look like they are doing something like going “carbon neutral,” but instead doing the work to lessen the pressure on individuals.

We must ask our leaders to show courage by accepting responsibility for their part in climate change, or at least be willing to work together to figure out how to improve the situation. Humanity is at stake. As the Cree Indigenous prophecy says, “Only when the last tree has been cut down, the last fish been caught, and the last stream poisoned, will we realize we cannot eat money.” Truer words have never been spoken.

It is a good point – when we see trash on our street, plastic bottles floating in our oceans, or our electronic waste dumped in the third world countries – to whom did trash belong? The people creating most of this trash, the packaging we did not ask for, are many of the same 100 corporations responsible for 71% of global emissions. When we purchase a product, we are paying for the item, not the packaging, so why is it on us to reduce packaging waste?

So, whether you are reading your local newspaper or taking a few moments to look at your trash next time you are getting ready to throw it out, ask yourself the question: whose trash is it anyway?

Think about it!

Art & Science

Art that touches our soul

The Young Sabot Maker by Henry Ossawa Tanner



The Young Sabot Maker is an oil painting made by the African-American artist Henry Ossawa Tanner in 1895. It was accepted for the 1895 Paris Salon, and was Tanner's second painting entered for the Salon. The painting follows a theme Tanner used for his genre paintings, "age instructing youth," which can also be seen in *The Bagpipe Lesson* and *The Banjo Lesson*.

It depicts an older man proudly watching a boy push with his weight against the crossbar handle of a sawhorse to carve a sabot, or wooden shoe. A **sabot** is a clog from France or surrounding countries such as The Netherlands, Belgium or Italy. Sabots were considered a work-shoe associated with the lower classes in the 16th to 19th centuries.

The two figures stand within the sabot maker's workshop, with wood shavings scattered around them on the floor. The figures in *The Young Sabot Maker* exist within a humble, timeless interior, seemingly apart from the modern world. Within the composition, Tanner emphasized the inherent dignity and ennobling effect of work that was publicized by important African-American educator, Booker T. Washington. Washington was a family friend who had helped to support Tanner's studies in Paris. He emphasized the importance of training in skilled

manual labor, especially for African Americans, and built this into the curriculum he designed as the president of the Tuskegee Institute in Alabama (USA).

Measuring 47 3/8 X 35 3/8 inches (120.3 X 89.9 cm), Oil on canvas; genre: French academic.

The painting was purchased by a group of donors and sponsors and given to the Nelson-Atkins Museum of Art in Kansas City, Missouri (USA), in 1995.

*Monthly newsletter of WHEC designed to keep you informed on
The latest UN and NGO activity*

<http://www.WomensHealthSection.com>

