



WHEC UPDATE

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Shaping The Future

Threats to sustainable global health include poverty and inequality, rising vulnerability to diseases and natural hazards, water and sanitation issues, uncontrolled urbanization, marginalization of rural populations, unsafe living conditions, and lack of health infrastructure. Most importantly, there is a severe lack of human capacity building programs for the health sector critical to achieving reasonable health indicators in developing countries. This can be attributed to policy restrictions, migration of healthcare workers, and constraints in finance, infrastructure and expertise. At the same time, the environment continues to be an important contributing factor to disease and mortality, where 23% of all deaths globally can be attributed to environmental risk factors like sanitation, disease vectors, accidents and air pollution. Among children, they account for up to 36% of global deaths. On a global scale, the greatest threats to health from environmental change and modifications, which are yet to be realized, have to be those related to climate change. Case-mix or DRGs is a disease classification system with the objective of creating mutually exclusive, clinically meaningful categories of cases with similar resource utilization. The system has been used as a tool to enhance the quality and efficiency of healthcare services in many developed countries. Case-mix has the reputation as an effective and efficient tool for providing payment for health financing schemes. The use of case-mix system in resource-challenged countries is erratic due to the lack of awareness among health decision makers, low technical capacity and inaccessibility to low cost and reliable case-mix groupers. With the Women's Health and Education Center (WHEC) Global Health Initiative Series it is our pleasure to showcase the recent work on developing better healthcare systems in **WomensHealthSection.com**, from around the world. In conjunction with other experts from different organizations, WHEC writers/editors and researchers share new ideas and highlight new policy avenues in the areas of security, environment and development.

Where is global health heading? The Millennium Development Goals (MDGs) are interlinked and mutually reinforcing. This gives reason for hope, as we have multiple angles to tackle problems. Achievements in one goal will drive further achievements in other goals. In its report *Progress for Children: A Report Card on Nutrition*, the United Nations Children's Fund (UNICEF) states that the cost of malnutrition to national economic development is estimated at \$ 20-30 billion per annum, and according to World Food Program, eradicating iron deficiency anemia can improve national productivity levels by as much as 20%. With equal access to girls to education, more women could add to the growth of this critical sector and educate the generations after them. Eradicating hunger and poverty is a massive challenge, and when setbacks such as the recent food and financial crisis wipe away years of hard-won progress, hope can fade quickly – but hope should not be lost. The world is on deadline. After all said and done, commitment is the key for achieving any MDG. We are more than halfway through the target date, and there is still much to do. More people should be motivated and inspired at a young age. Apathy is extremely dangerous when we are just four years away from the deadline, but with the right amount of enthusiasm and the will to make a difference, I am sure the MDGs are achievable. Of all the developing regions, Africa stands out as the least networked. A history of colonialism, poor physical and human infrastructures, large distances, and the absence of governmental stability in some parts have contributed to delayed socio-economic development and slow introduction of the Internet. One of the biggest deterrents in Africa is the extremely high cost of providing and accessing the Internet which, in turn, has prevented the emergence of sufficient demand to reduce overall cost. Let us work together for a better tomorrow.

Commitment Is The Key

Rita Luthra MD

Your Questions, Our Reply

What about people whose concern is their next meal, not Internet connectivity?

Digital Divide & Economic Divide: We are in an emerging Internet age in which information equals power. Therefore, societies that do not have access to information and communication technologies suffer a serious setback, compounding the burdens of poverty, disease, debt, and illiteracy. Often, people in those societies do not even have access to a telephone – their concerns are focused on their next meal. As information and communication technologies become inexpensive and pervasive across the world, the questions are whether it is the availability of and access to hardware and software, or more about social possibilities and the inclination of societies to engage with these technologies. The ripples from the invention of the Internet in 1989 continue to spread, with industrialized countries at the center and developing countries at the periphery. But, an information gap remains between the two groups of countries. As a consequence, the term “digital divide” has entered everyday language, describing the disparity between those who have access to the latest information and communication technologies and those who do not. However, it is important to explore the nature of the digital divide and of a social divide within each country between the “information rich” and the “information poor”. If technological diffusion can be achieved, the Internet could provide multiple opportunities for social as well as economic development. Rapid internet expansion represents substantial promise for developing nations, which can benefit greatly from the Internet’s communication and information delivery capabilities. Electronic networking is a powerful rapid and inexpensive way to communicate and exchange information, and it is also crucial to scientific research and development efforts, many of which yield tangible economic benefits.

Access to electronic networks also strengthens the impact of the development community, comprising international agencies and non-governmental organizations working locally and abroad. It is also critical for connecting the world’s younger generation on a single platform, such as through social media networks, thus strengthening bonds, the collaboration on ideas, and inter-cultural exchanges. Access to information affects political democratization efforts at the global level, as well as within countries. A revolutionary initiative, the Millennium Development Goals e-Nabber, was recently launched by the United Nations Global Alliance for Information and Communication Technologies and Development to help reach the UN Millennium Development Goals. e-Nabler was developed as an online portal where governments of developing countries can access vital information on best practices, information and communication technology solutions, and applications for their health, education, and development needs. e-Nabler also includes information on effective program implementation and cost efficiency. Our e-Health initiative, **WomensHealthSection.com**, in reproductive health is serving with pride in 220 countries and territories and making a difference in number of ways to improve maternal and child health, policy development and understanding of different cultures.

These examples show that the Internet can be used effectively to help bridge not only the development divide between developed and developing countries, but also the social divide within countries, and help to improve the lives of people everywhere.

About NGO Association with the UN

UN Partner on Millennium Development Goals (MDGs)
A Gateway to the UN System’s Work on MDGs

UNWTO – World Tourism Organization
Global forum for tourism policy issues

Tourism and the MDGs

As the United Nations specialized agency for tourism UNWTO is committed to fostering the sector's contribution the MDGs by promoting the development of responsible, sustainable and universally accessible tourism. Tourism, one of the world's top job creations, and a lead export sector, especially for developing countries, can play a significant role in the achievement of MDG 1 – eradication of poverty; MDG 3 – gender equality; MDG 7 – environmental sustainability; and MDG 8 – global partnerships for development. Responsible and sustainable tourism allows destinations and companies to minimize the negative impacts of tourism on the environment and cultural heritage, while maximizing its economic and social benefits. UNWTO is committed to driving Corporate Global Citizenship in tourism by acting as a central platform for partnerships, entrepreneurship, and governance. Tourism stakeholders play a key role in developing environmental, cultural and social awareness and contributing to the sector's capacity to promote sustainable and responsible development. UNWTO is working closely with UN Global Compact to ensure that corporate citizenship is mainstreamed throughout the sector and that tourism companies be leaders in facing the challenges of our time.

Details: <http://www.unwto.org/tourism&mdgsezine/>

Collaboration with World Health Organization (WHO)

Multilingualism and WHO

WHO's multilingual web site, publications and other resources ensure that health information reaches the people who need it, in the languages they can understand. This makes access to health information both more equitable - and effective. Multilingual communication bridges gaps and fosters understanding between people. It allows WHO to more effectively guide public health practices, reach out to international audiences, and achieve better health outcomes worldwide. In this way, multilingual communication is an essential tool for improving global health:

"A multilingual WHO is better equipped to communicate health messages, to produce and disseminate health information and to generate, share and use knowledge about health in an equitable manner. It is also better placed to meet today's major public health challenge: strengthening health systems in order to provide essential health care for all."

Six official languages

WHO's six official languages - Arabic, Chinese, English, French, Russian and Spanish - were established by a 1978 World Health Assembly resolution, turning multilingualism into a WHO policy. Since the adoption of a 1998 resolution, all Governing bodies documents and corporate materials have been made available online in all official languages. Many of WHO's key scientific publications - like the International Classification of Diseases, World Health Statistics, and the World Health Report - appear in six languages, and often many more. The World Health Assembly's most recent resolution on multilingualism, adopted in 2008, repeats the call for linguistic diversity across the Organization, and a five-year plan of action (2008-2013) is underway to meet this challenge.

[Multilingualism: plan of action \[pdf 39.7kb\]](#)

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Collaboration with UN University (UNU)

UNU-WIDER (World Institute for Development Economics Research) *Expert Series on Health Economics*:

Growth, Inequality, and Poverty Reduction in Developing Countries: Recent Global Evidence

The study presents recent global evidence on the transformation of economic growth to poverty reduction in developing countries, with emphasis on the role of income inequality. The focus is on the period since the early/mid-1990s when growth in these countries as a group has been relatively strong, surpassing that of the advanced economies. Both regional and country-specific data are analyzed for the US\$1.25 and US\$2.50 level poverty headcount ratios using the most recent World Bank data. The study finds that on average income growth has been the major driving force behind both the declines and increases in poverty. The study, however, documents substantial regional and country differences that are masked by this 'average' dominant growth story. While in the majority of countries growth was the major factor behind falling or increasing poverty, inequality, nevertheless, played the crucial role in poverty behavior in a large number of countries. And, even in those countries where growth has been the main driver of poverty reduction, further progress could have occurred under relatively favorable income distribution. For more efficient policy-making, therefore, idiosyncratic attributes of countries should be emphasized. In general, high initial levels of inequality limit the effectiveness of growth in reducing poverty while growing inequality reduces poverty directly for a given level of growth. It would seem judicious, therefore, to accord special attention to reducing inequality in certain countries where income distribution is especially unfavorable. Unfortunately, the present study also points to the limited effects of growth and inequality-reducing policies in low-income countries.

The current results suggest that adopting the appropriate pro-poor growth strategies requires some understanding of idiosyncratic country attributes. After all, policies are by and large country-specific, and the present study does indeed find that there are substantial differences in the abilities of countries to translate economic growth to poverty reduction, based on their respective inequality and income profiles. By shedding light on this transformation process by country these findings, at least, provide a 'roadmap' for undertaking country studies to uncover the underpinning idiosyncratic factors. Understanding such country-specific profiles is crucial in crafting policies for most effectively achieving poverty reduction globally.

Publisher: UNU-WIDER; Series: WIDER Working Paper; Author: Augustin Kwasi Fosu; Sponsor: UNU-WIDER gratefully acknowledges the financial contributions to the research program by the governments of Denmark (Royal Ministry of Foreign Affairs), Finland (Ministry for Foreign Affairs), Sweden (Swedish International Development Cooperation Agency—Sida) and the United Kingdom (Department for International Development—DFID).

(Details of the paper can be accessed from the link of UNU-WIDER on CME Page <http://www.womenshealthsection.com/content/cme/>)

Constitution Of The World Health Organization Draft network Constitution

INTRODUCTION

Following the recent meeting in Kampala in March 2008 of management institutions interested in forming a resource network, WHO was requested to assist with the preparation of a draft constitution for the network.

This document responds to a request for development of a constitution for the proposed resource network on management and leadership of health services in Africa. The accompanying discussion documents sets out issues that founding members will need to consider when making decisions about the final shape of the constitution.

The purpose is to provide a core document to which founding members of the management resource network can then have detailed discussions about what the needs of the network will be and what the constitutions should cover. Decisions need to be taken about the legal form, purpose, activities and rules and thus this constitution is not final but a draft for review and revision. This draft takes into account the previous discussions in Accra (2007) and Kampala (2008). Important documents related to the discussions leading to the draft constitution include the following:

1. Waddington, C., D. Egger, P. Travis, L. Hawken and D. Dovlo (2007) Towards Better Leadership and Management in Health: Report on an International Consultation on Strengthening Leadership and Management in Low-Income Countries, 29 January – 1 February 2007, Accra Ghana, Making Health Systems Work: Working Paper No. 10, Department for Health Policy, Development and Services, Health Systems and Services, WHO: Geneva. http://www.who.int/management/working_paper_10_en_opt.pdf
2. D. Dovlo (2008) Building Management Capacity for Primary Health Care Renewal: The Role of Health Management Resource Institutions in Africa, Report on a meeting of Health Management Resource Institutions in Africa during the 1st Global Forum on Human Resources for Health, Kampala, Uganda, 3rd March 2008 (emailed to all participants).
3. A. Kgosidintsi (in draft) Developing Networks of Resource Institutions in Africa: A Background Paper, The paper discusses the experiences of three networks operating in Africa. It identifies lessons from their governance, financing and operations and summarizes critical issues for the sustainability of networks. A copy is attached.

A constitution is a legal document that defines a formal organization, able to receive funds and conduct activities. This document does not, therefore, consider informal networks or other approaches to linking the African institutions that have requested this assistance.

To be continued.....

Top Two-Articles Accessed in August 2011

1. Obesity in Pregnancy; <http://www.womenshealthsection.com/content/obsmd/obsmd013.php3>
Authors: [Dr. Robert M. Silver](#); Professor of Obstetrics and Gynecology; Chief Maternal and Fetal Division; University of Utah Health Sciences Center Salt Lake City, UT (USA) and Dr. Jeanette Chin; Clinical Instructor; Department of Obstetrics and Gynecology University of Utah Health Sciences Center; Salt Lake City, UT (USA)
2. Ectopic Pregnancy; <http://www.womenshealthsection.com/content/obs/obs024.php3>
WHEC Publications. Special thanks to editors and reviewers for the manuscript preparation and helpful suggestions.

From Editor's Desk

Publishing translations of WHO information materials

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Words of Wisdom

WHETHER YOU LOVE WHAT YOU LOVE

OR LIVE IN DIVIDED CEASELESS
REVOLT AGAINST IT

WHAT YOU LOVE IS YOUR FATE

— From "Guilty of Dust" by Frank Bidart

*Monthly newsletter of WHEC designed to keep you informed on
the latest UN and NGO activities*

