



## WHEC UPDATE

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

July 2017; Vol. 12, No. 7

### *Before & After Issue*

The bond between a mother and a child is universal and timeless. I hope, this new July Edition of [WHEC Update](#) helps us celebrate this relationship. A mother's love and guiding hands help us to find our way in this challenging world. It is a startling and sobering fact that in 2017, every minute of every day, a woman dies in pregnancy and childbirth somewhere in the world. This equates to more than 500,000 women dying in pregnancy and childbirth every year, with 99% of these tragedies occurring in developing countries. The targets are clear-sighted enough, and have been present on the global agenda for many years.

*International Health and Development* means building a system and/or partnership that allow people to solve their own problems. Global health deals with a wide range of concerns and tensions, not only between countries but also between sectors, and between many different actors and interests. The growing complexity calls for better global-health-governance, including better coherence among multiple initiatives, clear distribution of responsibilities, and more transparency and accountability.

We all are different and we have different beliefs and religions. It is good that we have different perspectives. We all have one thing in common, that is, we all are seeking peace and happiness. Our unique characteristics should not prevent us from engaging in a dialogue at the international level and find mutually beneficial relationships. We live in a world of diverse policy priorities based on deep-seated value dispositions that invite different interpretations of concepts such as democracy, human rights, justice, equality and health care. Great challenges of our time demand a global perspective.

In 2008, WHEC was granted *NGO in Special Consultative Status with Economic and Social Council of the United Nations*. The WHEC has been actively working to advance the causes of peace, health and development with the United Nations since its inception. It has vision to build infrastructure in developing countries and to create meaningful opportunities for girls and women to participate in global philanthropy.

We embrace the tremendous diversity of people, religions, and cultures around the world. In support of this belief, we have established academic and cultural focus at iconic institutions around the globe, to nurture our common interests and potential. By supporting reproductive health and research, open dialogue and objective analysis, we lay the ground work for mutual understanding among nations.

Mutual understanding and mutual respect is the way forward. Global problems require global initiatives. The United Nations (UN) is an international forum **not a world government**. It is an association of 193 Member States (Countries). In order to promote dialogues and to plan and develop local, national and international initiatives in global health and governance, a platform is needed to learn from each other's mistakes and successes. United Nations system is one such platform which is helpful to us for finding solutions to advance the global health agenda.

The development of partnerships among all the relevant disciplines, especially between scientific and research community and public health entities is essential, for a more efficient prevention-and-response strategy. I hope we find ways that stimulate all of us and find new ways to build healthy alliances with the UN system in achieving global health and good governance.

Building international career in global health and governance. *Create forums for individual success.*

A Global Responsibility

**Rita Luthra, MD**

## Your Questions, Our Reply

How much does the United Nations cost? Where does the UN work? Who pays?

**A Little Background.....:** There is a tendency now and again to characterize the UN as a bottomless pit, where financing is concerned. The reality is very different. Here are some facts and figures that will put the costs in perspective.

The annual budget of the UN: The UN spends \$ 1.3 billion per year for its core functions – the Secretariat operations in New York, Geneva and every other part of the world where the UN is present. This is only about 4% of the annual budget of New York City. The city of Tokyo spends \$ 1.8 billion just to cover the cost of its fire department. The money spent by the UN, its agencies and Government delegations contribute \$3.2 billion a year to the economy of the New York City area.

The annual cost of peace-keeping operations: The cost of peace-keeping in 2013 was approximately \$10.7 billion – the equivalent of less than 0.75% of the US military budget and less than 0.3% of the world's military spending. From the first peace-keeping operation in 1948, up to 2009, 2,400 people employed by the UN – military and civilian – have died on these missions.

The annual budget of the UN System's operational activities: The UN and its agencies, funds and programs (excluding the financial institutions, such as the World Bank and the International Monetary Fund) have \$ 4.8 billion a year to spend on economic, social and humanitarian assistance to the world's poorest countries. This is the equivalent of 80% inhabitant on this planet. By contrast, in 1996 the world's Governments spent about \$797 billion for military purposes, or about \$135 per individual.

Some 61,000 people work in the UN system. This includes the UN Secretariat in New York, Geneva and other duty stations, as well as the staff of the other organizations around the world. In comparison, the World Disney Company, a multinational corporation, has almost twice the number of employees in USA and globally, McDonald's restaurants have 3 times as many.

All countries that belong to the UN pay for its budget. The share of each state is determined by its ability to pay and is proportionate to its national income. Hence the rich countries are the major contributors to the UN. 9 countries cover more than 75% of the Organization's expenditures. In 2013 they ranked as follows: United States (22%), Japan (16.6%), Germany (8.5%), United Kingdom (6.6%), France (6.3%), Italy (5.8%), Canada (2.9%), Spain (2.9%), China (2.6%) and Mexico (2.2%).

Taken together, these expenditures amount to \$1.8 billion a year, barely more than the public health budget of a country like France. If these figures seem high it is because they cover activities on a world-wide scale. In fact, the share paid by each contributing country represents only a very small part of its national budget. Considering the scope of the work carried out, the costs incurred by the UN system are really modest. The funds available are also quite inadequate to meet the continuously growing demand for UN assistance.

Did you know that.....Over the years a number of major issues have been largely resolved; for example, colonialism. More than 80 countries gained their independence through decolonization, a movement for which the United Nations was the driving force.

Financial problems: Time and again the UN has been plagued with serious shortages of money. A number of Governments do not pay their contributions on time, causing a continuously recurring financial crisis in the Organization. Consequently, the UN and the other organizations of the UN system are frequently forced to cut programs urgently needed by the countries and populations whom they were designed to benefit. Also, much like private companies, these organizations must often reduce their staff.

The UN is a complex, somewhat *mythical* world, which serves as the meeting-ground for political powers from around the world. It is unique among international institutions, considering the vast array of tasks

entrusted to it. The UN is involved in all aspects of human activities; it is therefore plays an important role in the international community, in spite of the inadequate human and financial resources at its disposal.

**UN is an irreplaceable Organization.** We need UN today as much as we needed it in 1945. We must continue to evolve and improve UN and its abilities to respond to the great challenges of our world in the 21<sup>st</sup> century.

The World Today: <http://www.un.org/Depts/Cartographic/map/profile/world00.pdf>

You are welcome to join our efforts.



### **2017 High-Level Political Forum (HLPF) Thematic Review of Sustainable Development Goal 3 (SDG3): Ensure healthy lives and promote well-being for all at all ages**

It is indeed a pleasure and privilege to be invited to this forum at the United Nations, Headquarter, New York, on behalf of the organization: The Women's Health and Education Center (WHEC). We are looking forward to participate in this forum, which will be convened under the auspices of the Economic and Social Council, to be held from Monday, 10 July, to Wednesday, 19 July 2017. Please feel free to share your thoughts, ideas and suggestions with us. We welcome everyone.

Goal 3 seeks to ensure health and well-being for all, at all ages; and in all settings, including humanitarian and fragile. The Goal addresses all major health priorities, including sexual, reproductive, maternal, newborn, child and adolescent health, communicable, non-communicable and environmental diseases, universal health coverage and access for all to safe, effective, quality and affordable medicines and vaccines. It also calls for more research and development, increased and diversified health financing, enhanced health workforce and strengthened capacity of all countries in health risk reduction and management. Universal health coverage (UHC) acts as key driver for achieving all targets. Investment in all the health related targets in the 2030 agenda is a prerequisite as the health focus moves to contend with the double burden of long held priorities in communicable diseases, the unfinished MDG agenda and emerging issues such as non-communicable diseases (NCDs) and injuries.

Details: [https://sustainabledevelopment.un.org/content/documents/14367SDG3format-rev\\_MD\\_OD.pdf](https://sustainabledevelopment.un.org/content/documents/14367SDG3format-rev_MD_OD.pdf)

## **United Nations at a Glance**

### **Permanent Mission of Denmark to the United Nations**



Denmark became Member State of the United Nations on 24 October 1945



**Denmark**, officially the **Kingdom of Denmark**, is a Scandinavian country in Europe and a sovereign state. The southernmost and smallest of the Nordic countries, it is south-west of Sweden and south of Norway, and bordered to the south by Germany.

Denmark also comprises two autonomous constituent countries in the North Atlantic Ocean: The Faroe Islands and Greenland. Denmark has a total area of 42,924 square kilometers (16,573 sq. miles), and a population of 5.75 million. The country consists of a peninsula, Jutland, and an archipelago of 443 named

islands, with the largest being Zealand and Funen. The islands are characterized by flat, arable land and sandy coasts, low elevation and a temperate climate.

The unified kingdom of Denmark emerged in the 10<sup>th</sup> century as a proficient seafaring nation in the struggle of control of Baltic Sea. Denmark, Sweden and Norway were ruled together under the Kalmar Union, established in 1397 and ending the Swedish secession in 1523. Denmark and Norway remained under the same monarch until outside forces dissolved the union in 1814. The union with Norway made it possible for Denmark to inherit the Faroe Islands, Iceland, and Greenland. Beginning in the 17<sup>th</sup> century, there were several sessions of territory to Sweden. In the 19<sup>th</sup> century there was a surge of nationalist movements, which were defeated in the 1864 Second Schleswig War. Denmark remained neutral during World War I. In April 1940, a German invasion saw brief military skirmishes while the Danish resistance movement was active from 1943 until the German surrender in May 1945. An industrialized exporter of agricultural produce in the second half of the 19<sup>th</sup> century, Denmark introduced social and labor-market reforms in the early 20<sup>th</sup> century that created the basis for present welfare state model with a highly developed mixed economy.

The Constitution of Denmark was signed on 5 June 1849, ending the absolute monarchy which has begun in 1660. It established a constitutional monarchy organized as a parliamentary democracy. The government and national parliament are seated in Copenhagen, the nation's capital, largest city and main commercial center.

Denmark exercises hegemonic influence in the Danish Realm, devolving powers to handle internal affairs. Home rule was established in the Faroe Islands in 1948; in Greenland home rule was established in 1979 and further autonomy in 2009. Denmark became a member of the European Economic Community (now the EU) in 1973, maintaining certain opt-outs; it retains its own currency, the krone. It is among the founding members of North Atlantic Treaty Organization (NATO), the Nordic Council, the Organization for Economic Co-operation and Development (OECD), Organization for Security and Co-operation in Europe (OSCE) and the United Nations (UN); it is also part of the Schengen Area.

Danes enjoy a high standard of living and the country ranks highly in some metrics of national performance, including education, health care, and protection of civil liberties, democratic governance, prosperity and human development. The country ranks as having the world's highest social mobility, a high level of income equality, is the country with the lowest perceived level of corruption in the world, has one of the world's highest per capita incomes, and one of the world's highest personal income tax rates.

### **Denmark's Engagement with the UN**

As one of the founding nations of the United Nations, Denmark remains strongly committed to the ideals and aspirations enshrined in the UN Charter.

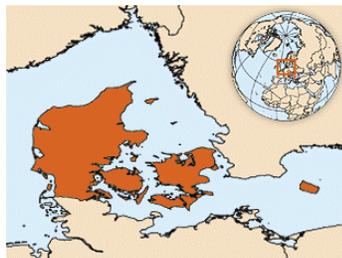
As the main forum for dealing with global issues, the UN - with its universal mandate - is one of the cornerstones of Danish foreign policy. Denmark attaches particular importance to the role of the UN in the fields of conflict prevention, peacekeeping and peacebuilding, promotion of democracy and human rights, as well as sustainable development and poverty eradication.

Denmark was honored to serve in the UN Security Council for the period 2005-06. Denmark has also been a member of the Security Council in 1953-54, 1967-68, and 1985-86. Over the years, Denmark has provided considerable support to the UN, including through contributions to peacekeeping operations, high levels of development assistance and active engagement in the normative work of the organization.

Denmark held the Presidency of the 70th General Assembly. Mogens Lykketoft, former Minister of Finance and Minister of Foreign Affairs as well as speaker of the Danish Parliament has served as President of the General Assembly September 2015 – 2016. Details: <http://fnnewyork.um.dk/en/>

# Collaboration with World Health Organization (WHO)

## WHO | Denmark



**Denmark** is a small country with over 5 million inhabitants; however, it is one of the wealthiest countries in the world. The Danish health care sector is dominated by the public sector and is financed by local and state taxes. Governed by a combination of national state institutions, regions and municipalities, the Danish health care system has democratically elected assemblies in all levels.

The state level is responsible for legal framework for health care and coordinates and supervises the regional and municipal delivery of services. Hospitals are generally owned and operated by the regions.

### Statistics

Total population (2015) .....	5,669,000
Gross national income per capita (PPP international \$ 2013) .....	44
Life expectancy at birth m/f (years, 2015).....	79/82
Probability of dying 15 and 60 years m/f (per 1,000 population, 2015) .....	88/54
Probability of dying under five (per 1,000 live births, 0) .....	Not available
Total expenditure on health per capita (Intl \$, 2014) .....	4,782
Total expenditure on health as % GDP (2014) .....	10.8

### Health inequalities and young people's drinking in focus at the 2017 Danish national alcohol conference

Alcohol consumption in Denmark decreased from 13.8 liters of pure alcohol per capita in 1990 to 10.6 liters in 2014 – just below the WHO/Europe average. However, the yearly total consumption is higher than that of neighboring countries Norway and Sweden. This is particularly true for young people in Denmark, who drink more often, in greater quantities, and get intoxicated to a greater extent compared to youth in other Nordic countries. Alcohol has a significant impact on public health in Denmark; in 2014, 4.5% of all cancers and 33% of all injuries (unintentional and intentional) were attributed to alcohol.

### Greater harm among the poorest

During the first day of the conference, Dr Finn Diderichsen, Emeritus Professor at the University of Copenhagen, stressed that compared to Norway and Sweden, there is a bigger gap in mortality in Denmark between people with the lowest and the highest level of education, and that alcohol contributes to this gap.

### Policy and action – a focus on what can be done

Dr Lars Møller, Programme Manager for Alcohol and Illicit Drugs at WHO/Europe, noted that alcohol consumption in Denmark has decreased over time, but drinking among young people is a significant public health concern. Dr Møller gave an overview of policy options promoted by WHO in the European action plan to reduce the harmful use of alcohol 2012–2020, and emphasized that reduced availability, pricing policies and marketing restrictions are core policies that have a strong evidence base supporting their effectiveness. Furthermore, Dr Møller noted that having an inter-sectoral national alcohol policy is an important part of preventing the harm caused by alcohol. Denmark does not have a written alcohol policy. Dr Astrid Blom, Unit Head, the Danish Health Authority highlighted the need for restrictions on affordability, age limits, pricing policies and marketing restrictions at the central level, but a more focused approach at the local level to address young people's drinking at educational establishments and the responsible licensing and serving of alcohol.

Details: <http://www.who.int/countries/dnk/en/>

# Bulletin Board

## Guidelines for Contributors *Scope and Editorial Policy*

### III. Preparation and Submission of Manuscripts

Manuscripts should be prepared in accordance with the Uniform Requirements for Manuscripts Submitted to Biomedical Journals established by the Vancouver Group (International Committee of Medical Journal Editors, ICMJE). The complete document, updated December 2016, is available at: <http://www.icmje.org>

3.1 Languages. Manuscripts should be submitted in English. Authors who have difficulty in preparing their manuscript in English should contact the editorial office for advice.

3.2 Authorship. Authors should give their full names and the name and address of their institutions. If possible, only one institution per author should be given. In accordance with the "Uniform requirements" (see above), each author should have participated sufficiently in the work being reported to take public responsibility for the content; each author should provide a description of his or her contribution to the work being reported. The full postal and e-mail address of the corresponding author will be published unless otherwise requested. The **WomensHealthSection.com** encourages submissions from authors in developing countries, and in line with this policy at least one author should be a national of the country where the study was carried out and have an affiliation there.

3.3 Automatic links. All links inserted by the automatic reference and footnote facilities of word-processing software must be removed before the manuscript is submitted. Footnotes are not permitted and such material should be inserted into the main text.

3.4 Tables and figures. Tables and figures should be used only if they enhance understanding of the text. In the text, tables and figures should be numbered consecutively (e.g. Table 1, Fig. 1). They should be presented with clear, concise titles at the end of the text and not incorporated or embedded into it. Abbreviations or acronyms should be avoided but if used must be explained. Graphs or figures, which should be presented in two-dimensional and not pseudo three-dimensional "perspective" format, should be clearly drawn and all the data identified.

3.5 Abstracts. Abstracts, which should be clearly written to highlight the text's most significant points, should be provided for the following types of papers: Research, Systematic reviews, Policy & practice, base papers for Round tables and Lessons from the field. The abstract, which should not exceed 250 words, appears in **WomensHealthSection.com** and **WHEC Update**.

**» Please note that WHEC-branded materials should be used as-is. For questions on use of the materials, please visit: <http://www.womenshealthsection.com/content/whec/faq.php3>**

## Collaboration with UN University (UNU)

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

### The Danish Model and the Globalizing Learning Economy

#### Lessons for Developing Countries

Although Denmark shares with the other four Nordic countries certain attributes, such as pragmatic protestant religion, small and homogenous population, strong social democratic parties and ambitious welfare states, it also has its own characteristics. High degree of specialization in the so-called low-tech

sectors, combined with high mobility and income security in labour markets, contributes to making the Danish system unique in the world. Denmark has experienced some stagnation in its growth over the last decade but still ranks among the top ten in the world in terms of GNP per capita, registered unemployment is less than 2% (as of June 2008) while the inflation rate has remained moderate.

These goals for economic policy have been realized in an environment with a high degree of income equality. In this paper we use the concepts 'innovation system', 'the learning economy' and 'learning modes' to analyze the evolution of the Danish model and what can be learnt from it. My conclusion is that the developing countries can learn from Denmark's history. The integration of farmers and workers through self-organization, education and state guaranteed civil rights together with the emancipation of women and young people are historical factors that have established the foundation for the current success. Social cohesion and egalitarian working life support participatory organizational learning in a society characterized both by individualism and by high levels of trust and low levels of corruption.

Another important lesson is that the broad participation of workers in the decision-making process is an advantage in an environment characterized by rapid change, and that such broad participation needs an active labour market policy as well as investments in education and training for both the young generations and for adult workers. The Danish example illustrates how this kind of participation can flourish in a society with a high degree of social and economic equality.

The history and current reality of Denmark, in some respects, are very far from the reality of most developing countries. Nonetheless, the Danish model may be useful in orienting development strategies. Also when the starting point is modest, development strategies could constitute a parallel effort for upgrading the professional skills of workers and farmers, as well as their self-confidence through broad education on the one hand and on the other, a gradual enhancement of the role they play in the transformation of working life and society.

Publisher: UNU-WIDER; Author: Bengt-Ake Lundvall; Sponsors: UNU-WIDER gratefully acknowledges the financial contributions to the project by the Finnish Ministry for Foreign Affairs, and the financial contributions to the research programme by the governments of Denmark (Royal Ministry of Foreign Affairs), Finland (Finnish Ministry for Foreign Affairs), Norway (Royal Ministry of Foreign Affairs), Sweden (Swedish International Development Cooperation Agency – Sida) and the United Kingdom (Department for International Development).

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

## **United Nations Girls' Education Initiative (UNGEI)**

*The Effort to Advance the Global Strategy*

*(Continued)*

### **World Bank Group Announces Record \$57 Billion for Sub-Saharan Africa**

The bulk of the financing – \$45 billion – will come from the International Development Association (IDA), the World Bank Group's fund for the poorest countries. The financing for Sub-Saharan Africa also will include an estimated \$8 billion in private sector investments from the International Finance Corporation (IFC), a private sector arm of the Bank Group, and \$4 billion in financing from International Bank for Reconstruction and Development, its non-concessional public sector arm.



In December, development partners agreed to a record \$75 billion for IDA, a dramatic increase based on an innovative move to blend donor contributions to IDA with World Bank Group internal resources, and with funds raised through capital markets.

Sixty percent of the IDA financing is expected to go to Sub-Saharan Africa, home to more than half of the countries eligible for IDA financing. This funding is available for the period known as IDA18, which runs from July 1, 2017, to June 30, 2020.

“This represents an unprecedented opportunity to change the development trajectory of the countries in the region,” World Bank Group President Jim Yong Kim said. “With this commitment, we will work with our clients to substantially expand programs in education, basic health services, clean water and sanitation, agriculture, business climate, infrastructure, and institutional reform.”

The IDA financing for operations in Africa will be critical to addressing roadblocks that prevent the region from reaching its potential. To support countries’ development priorities, scaled-up investments will focus on tackling conflict, fragility, and violence; building resilience to crises including forced displacement, climate change, and pandemics; and reducing gender inequality. Efforts will also promote governance and institution building, as well as jobs and economic transformation.

“This financing will help African countries continue to grow, create opportunities for their citizens, and build resilience to shocks and crises,” Kim said.

While much of the estimated \$45 billion in IDA financing will be dedicated to country-specific programs, significant amounts will be available through special “windows” to finance regional initiatives and transformative projects, support refugees and their host communities, and help countries in the aftermath of crises. This will be complemented by a newly established Private Sector Window (PSW)—especially important in Africa, where many sound investments go untapped due to lack of capital and perceived risks.

The Private Sector Window will supplement existing instruments of IFC and the Multilateral Investment Guarantee Agency (MIGA) – the Bank Group’s arm that offers political risk insurance and credit enhancement – to spur sound investments through de-risking, blended finance, and local currency lending.

Details: <http://www.worldbank.org/en/news>

*To be continued.....*

## Two-Articles of Highest Impact, June 2017

1. Marijuana and Pregnancy implications;  
<http://www.womenshealthsection.com/content/obs/obs035.php3>  
WHEC Publications. Special thanks to WHO and NIH for the contributions.
2. Zika Virus Infection in Pregnancy;  
<http://www.womenshealthsection.com/content/obsidp/obsidp012.php3>  
WHEC Publications. Special thanks to WHO, CDC and NIH for the contributions. We thank the reviewers for their helpful suggestions.

## From Editor's Desk

### Delegates at the United Nations



Delegates represent their countries at UN meetings. This page is for delegates, government officials and others participating in meetings. It is also for anyone who wants more information about the inner workings of the UN.

Available online, the "Blue Book" (<https://protocol.un.org/dgacm/pls/site.nsf/BlueBook.xsp>) contains contact information for all 193 Member States. Information given includes the address and phone number of the Permanent Mission of each Member State in New York City, the name of their Ambassador, and the names of other Mission officials and staff members.

The Manual of Protocol has information every delegate needs to know, from letters of credentials, diplomatic privileges and immunities, and more. This publication is by no means an exhaustive review of protocol matters and diplomatic etiquette. Its objective is to formulate basic guidelines and fundamental norms and practices of protocol and administrative requirements accepted at United Nations Headquarters.

Much of what is written in the following pages has been gathered over the years from practical experience and common sense successfully applied at the United Nations since its inception. The United Nations Protocol and Liaison Service sincerely hopes that this manual will enhance the co-operation between permanent/observer missions and the Protocol and Liaison Service, which serves the international community at United Nations Headquarters.



#### Establishing a new mission in New York

When a country has been admitted by the General Assembly as a Member State of the United Nations, it is expected that it will establish a permanent mission at United Nations Headquarters or at other major United Nations centres, such as Geneva or Vienna, and appoint a Permanent Representative. By its resolution 257 A (III), the General Assembly expressed its opinion that the presence of the permanent mission and the

Permanent Representative of a Member State at the seat of the Organization would serve to assist in the realization of the purposes and principles of the United Nations and to keep the necessary liaison between the Member States and the Secretariat.

In conformity with international law and United Nations practice, the term "Permanent Representative" has a clear interpretation. At the United Nations, this term was institutionalized by the General Assembly in its resolution 257 A (III) wherein it recommended, inter alia, that credentials of newly appointed Permanent Representatives be issued by either the Head of State or Government or Minister for Foreign Affairs and that in the case of the temporary absence of the Permanent Representative from the seat of the Organization, the Secretary-General of the United Nations be notified of the name of the person who would be in charge of the mission as *chargé d'affaires a.i.*

From the foregoing, it is obvious that the term "Permanent Representative of a Member State to the United Nations" defines a person of the appropriate diplomatic rank who permanently (as distinct from temporarily) resides at the seat of the organization and is the head of an established permanent representation (mission) with a postal address, a telephone number and an e-mail address.

# AGREEMENT BETWEEN THE UNITED NATIONS AND THE UNITED STATES OF AMERICA REGARDING THE HEADQUARTERS OF THE UNITED NATIONS

PUBLIC LAWS-CHS, 480-482-AUG 4, 1947

“And, on this 8th day of July, 1947, JAMES H. DUFF has affixed his signature hereto as Governor of the Commonwealth of Pennsylvania and caused the great seal of the Commonwealth to be attached thereto.

“JAS. H. DUFF

*“Governor, Commonwealth of Pennsylvania.”*

(GREAT SEAL)

Approved August 4, 1947.

Details: <http://www.un.org/depts/DGACM/index.shtml>  
[https://protocol.un.org/dgacm/pls/site.nsf/files/HQ\\_Agreement/\\$FILE/Headquarters\\_Agreement.pdf](https://protocol.un.org/dgacm/pls/site.nsf/files/HQ_Agreement/$FILE/Headquarters_Agreement.pdf)



## In The News

### CHAPTER XXVII - ENVIRONMENT

#### 7. d Paris Agreement

Paris, 12 December 2015

Entry into force: 4 November 2016, in accordance with article 21(1). The Agreement enters into force on the thirtieth day after the date on which at least 55 Parties to the Convention accounting in total for at least an estimated 55 per cent of the total global greenhouse gas emissions have deposited their instruments of ratification, acceptance, approval or accession.

<http://newsroom.unfccc.int/paris-agreement/>

Registration: 4 November 2016, No. 54113;

Status: Signatories: 195. Parties: 148

The Paris Agreement was adopted on 12 December 2015 at the twenty-first session of the Conference of the Parties to the United Nations Framework Convention on Climate Change held in Paris from 30 November to 13 December 2015. In accordance with its article 20, the Agreement shall be open for signature at the United Nations Headquarters in New York from 22 April 2016 until 21 April 2017 by States and regional economic integration organizations that are Parties to the United Nations Framework Convention on Climate Change. <http://newsroom.unfccc.int/paris-agreement/>

The Paris Agreement was open for signature by the Parties to the United Nations Framework Convention on 22 April and remained open for signature for one year. This list contains the countries that signed the Agreement at the Signature Ceremony on 22 April. Bold–States that have signed the Paris Agreement and deposited their instrument of ratification at the Ceremony for the Opening for Signature, on 22 April 2016.

The United States of America signed the declaration on 22 April 2016 and ratification, acceptance (A) on 3 September 2016.

List of parties that signed the Paris agreement on 22 April

<http://www.un.org/sustainabledevelopment/blog/2016/04/parisagreementsignatures/>



The Spokesman for the United Nations Secretary-General today said the decision by the United States to withdraw from the Paris Agreement on climate change is a major disappointment for global efforts to reduce greenhouse gas emissions and promote global security.

“The Paris Agreement was adopted by all the world’s nations in 2015 because they recognize the immense harm that climate change is already causing and the enormous opportunity that climate action presents,” Stéphane Dujarric told the media at the UN Headquarters in New York, shortly after US President Donald Trump

announced his country’s withdrawal from the Agreement.

“It offers a meaningful yet flexible framework for action by all countries.” He further added that Secretary-General António Guterres remains confident that cities, States and businesses within the US – along with other countries – will continue to demonstrate vision and leadership by working for the low-carbon, resilient economic growth that will create quality jobs and markets for 21st century prosperity.

Details:

<http://www.un.org/sustainabledevelopment/blog/2017/06/secretary-generals-statement-on-the-us-decision-to-withdraw-from-the-paris-agreement/>

## Words of Wisdom

And so because you love me, and because  
I love you, Mother, I have woven a wreath  
Of rhymes wherewith to crown your honored name;  
In you not fourscore years can dim the flame  
Of love, whose blessed glow transcends the laws  
Of time and change the mortal life and death.

- Christina Georgina Rossetti's (5 December 1830 – 29 December 1894; English poet and author)  
Extract from **Sonnets Are Full of Love**

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

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

