



## WHEC Update

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

February 2025; Vol.20. No. 02

## ***Annual Project Report***

The Women's Health and Education Center (WHEC) regularly, gathers, evaluates and cites evidence to support its recommendations in *Practice Bulletin*, *Written Statement to the UN Sessions and its Side Events*. How this is done varies between various forms of collaborations, but highly centralized processes, complex methods and expert consultations are often used. As a reader of *WHEC Update*, You are a member of an extraordinary global community – 100 million people in overall UN Member States, and territories, about 227 unique locations around the world, who desire to learn and learn on what truly matters in life. Our experts in this edition share with you their opinions on how to design health financing, and moving towards universal health coverage. It is an enduring inspiration for citizens of nearly every nation. Don't forget to make your own voice heard. In fact, why not introduce your friends and colleagues to this great platform and open an account.

How health systems work and are financed largely determines whether people can obtain needed healthcare and whether they suffer financial hardship as a result of obtaining care. Both design and implementation of an adequate health financing system are essential in the pursuit of Universal Health Coverage (UHC), i.e., essential health services and interventions provided at a cost affordable for all. UHC implies equity of access and financial risk protection. This health policy goal clearly imposes important demands on those responsible for health system financing.

Urging UN Member States to work towards universal coverage and to ensure that their populations have access to needed health interventions without the risk of financial catastrophe. Enhancing pre-payments for health services, determining household contributions according to ability to pay and introducing risk pooling are core guiding principles of such efforts. These principles imply solidarity between the healthy and the sick, and between the population groups in all income classes, considerations that are valid for all countries – rich and poor alike.

These safety nets for societies' poorest and most vulnerable groups may not be sufficiently strong to provide financial risk protection. This concern is of international significance, and it also applies to some developed countries whose health financing systems have been established for many years. It is particularly relevant to the poorest countries, where available funds are insufficient for equitable access to essential health services. These costs prevent people from seeking or continuing care, while some who seek care incur catastrophic financial burdens that push them into poverty. Every year, approximately 44 million households worldwide, or more than 150 million individuals, face catastrophic healthcare expenditures. Of these, about 25 million households containing more than 100 million people are pushed into poverty by these costs.

Governments' roles in exercising overall stewardship in the transition to universal coverage, influence development of workable health financing systems. Mature universal coverage system in developed countries also need to address problems of inequity and to monitor the impact of policies that increase households' direct payment or co-payment for services.

Let us help policymakers devise practical steps towards attaining the goal of universal coverage. Your research, manuscripts and opinions will be published on ***WHEC Global Health Line*** ... create an account.

Towards Universal Coverage: Redesigning Health Financing

**Rita Luthra, MD**



## Your Questions, Our Reply

What Artificial Intelligence (AI) and e-Health can offer in attaining universal coverage? Does the advocacy work of programs, organizations, and institutions, in support of national priorities, has an impact?

**AI and e-Health – both a process and a tool:** It is important to differentiate between the process of selecting priorities and the tools used in that process. There is now general agreement that both are necessary for effective priority setting: the process cannot function without proper tools, and the tools require a well-defined process. Challenge: efforts to develop improved methods and compiling information and presenting data must take into account the processes and mechanisms required storytelling and knowledge sharing.

*Previous experience:* An effective EMR (Electronic Medical Records) system is in place in western Kenya and has already had a positive impact on healthcare in rural clinics. The argument that nothing like this has been accomplished in Africa and therefore cannot be expected to work, is no longer valid.

*Coordination:* Given the ever-shifting political landscape experienced by many organizations and institutions, working in Africa, with foreign or indigenous, effective coordination is always a challenge. The Women's Health and Education Center (WHEC) with its partners and its special relationship with the UN System, and its reputation as an "honest broker" is crucial in aligning the locally operating partners that are essential to this strategy's success.

In a world rich with resources and knowledge, closing the gap between unnecessary human suffering and the potential for good health is one of the foremost health challenges of our times. How do we go about bringing this gulf, and what can AI and e-Health do to help?

ICT (Information and Communication Technology) for clinical, educational, research and administrative purposes, both at local site and at a distance is essential and also make significant contributions to public health, as demonstrated by the role of telemetry data in onchocerciasis control in West Africa and the use of the Internet in the control of the COVID-19 and SARS outbreak. ICT has become indispensable to health workers, as the volume and complexity of knowledge and information have outstripped the ability of health professionals to function optimally without the support of information management tools. In the area of health research, the volume of new information is enough to stretch even ICT-assisted decision-making systems: on an average day, there are 55 new clinical trials taking place, 1260 articles indexed in MEDLINE, and 5,000 papers published in the biomedical sciences. There is an urgent need for ICT tools that can aggregate information from multiple sources, to give an overall understanding of the healthy human or to provide a clearer picture at the system level.

### The Know – Do Bridge

AI and e-Health System can improve access to information, thus increasing awareness of what is known in health sciences, while selective dissemination by electronic means can facilitate targeting of information on those who either request it or are most likely to use it. The effective way of building the know – do bridge, however, is to provide just-in-time, high quality, relevant information to health professionals, and increasingly to laypersons.

Here is a tendency to imagine the AI and e-Health Systems are a tool exclusively for industrialized world. This is NOT true, as evidenced by the number of telehealth projects in developing countries. Average rates of penetration of mobile phones and Internet in the developing world rival those achieved in the industrialized countries. It is important to focus attention on the use of available knowledge by underserved communities, such as the Least Developed Countries.

Doing the right thing, in the right place, at the right time, the right way – can be greatly facilitated by AI and e-Health.

## 2024 in Review: A Mission of Hope Our Projects & Our Promises

The Women's Health and Education Center's (WHEC's) Policy on Access to Information has enabled the organization to become global leader in transparency and has made a groundbreaking change in how the WHEC makes information available to the public. Now the **WHEC Global Health Line (WGHL)** and its media channels are available in 227 countries and territories. It has provided the public access to more information than ever before – information about research and best practices in maternal and child health, projects under preparation, projects under implementation, analytic and advisory activities, and its administrative activities.

<http://www.WomensHealthSection.com> is a global, Web-enabled platform for multiple forms of collaboration. This platform enables individuals, groups, companies, and universities anywhere in the world to collaborate – for the purposes of innovation, education, research and to advance the causes peace, health and development. We invite you to tap into this platform, and finally, the governance to get the best out of this platform.

Women's Health and Education Center (WHEC) has a unique role to play in strengthening the health and educational systems, in rich and poor countries alike. Technology and innovation in learning are creating exciting new opportunities to accelerate progress towards health-for-all and education-for-all in every country. We are in midst of a digital proliferation around the globe. The Objective of this mission is to share experiences of various technological solutions in improving the accessibility or education and health systems, as well as to learn from the experts how to best apply technology in the learning process. Government commitment is necessary - A long-term plan that is binding on all parties at all times.

## Our Publications and UN Documents in 2024

### WHEC Participation with United Nations: Year 2024

#### Side Events

1. 2024 ECOSOC Partnership Forum; Virtual Side Event; 30 January 2024
2. 62<sup>nd</sup> Session for Commission for Social Development, Side Event (Virtual); 6 February 2024  
Side Event and summary published by UNSDN; SDG Learning  
<https://social.desa.un.org/sdn/towards-education-and-health-for-all>
3. 57<sup>th</sup> Session Commission on Population and Development (CPD); 01 May 2024
4. 9<sup>th</sup> Multistakeholder Science, Technology and Innovation (STI) Forum; ID: V-08; 09 May 2024
5. 2024 HLPF (High-Level Political Forum), Virtual Side Event; 9 July 2024

Details: <http://www.womenshealthsection.com/content/whec/sideevents.php3>

#### UN Documents / Publications

1. 62<sup>nd</sup> Commission for Social Development (CSocD) Session: E/CN.5/2024/NGO/30
2. 68<sup>th</sup> Commission on Status of Women (CSW) Session: E/CN.6/2024/NGO/87
3. 23<sup>rd</sup> Committee on Public Administration (CEPA); *Agenda item 6: Effective Governance for SDGs*
4. 57<sup>th</sup> Commission on Population and Development (CPD): E/CN.9/2024/NGO/9
5. 9<sup>th</sup> Multi-Stakeholder Science, Technology & Innovation (STI) Forum; **Science-Policy-Brief**, SDG16

Available @: <http://www.womenshealthsection.com/content/whec/publications.php3>

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.

All over the world we all provide care to a multicultural society.

Preparing the next generation of healthcare providers in the international arena, deepening their knowledge and improving the skill set for a career in global health and global governance is urgently needed. Programs are needed for healthcare professionals to provide them with academic training and practical knowledge to assist them in providing national and international healthcare. We have the knowledge, means and motivation to act.

## **BEST of 2024**

Top 10 UN Member States out of 193

- USA; Canada; China; Australia; India; Switzerland; Saudi Arabia; Belgium; U.K.; Germany; Venezuela; Spain; Japan; Mexico; and France.

Top 5 Groups out of 25 groups for educational purposes:

- US Educational; US Commercial; US Government; US Military and International (Int).

Top 10 User Agents out of 1,012:

- Meta-externalagent/1.1; Mozilla/5.0; The Knowledge AI; BLEXBot/1.0; AhrefsBot/7.0; serpstatbot/2.1 (advanced backlink tracking bot); GoogleBot/ 2.1; Linux X 86\_64; SemrushBot/7-bi; and bingbot/2.0.

Top 5 most popular sections out of 30:

- 1) Newborn Care; 2) WHEC Update; 3) Obstetrics; 4) Gynecology; 5) Violence against Women.

Top 10 most read comprehensive review articles out of 300 Practice Bulletins:

- 1) Marijuana and Pregnancy Implications; 2) LGBTQ+ Healthcare: Building A Foundation For Better Understanding; 3) Neonatal Abstinence Syndrome; 4) Neonatal Seizures; 5) Human Trafficking and Exploitation; 6) Haemophilia: A Comprehensive Review; 7) Iron Deficiency Anaemia in Pregnancy; 8) Learning Life Lessons Series; 9) Homelessness, Health and Human Habitation; 10) End of Life Care Series.

So, we want to hear from you, and we are eager to work together to advance good ideas that have enduring impact. As a global community, we can create change at scale. Tackle that big dream. Ignore the doubt in your head and follow the joy in your heart. The desire for a healthier and better world in which to live our lives and raise our children is common to all people and all generations.

**Beneficiaries and Our Impact in Numbers:** Visitors of *WomensHealthSection.com* (more than 280 million readers / subscribers worldwide so far and growing fast...) **2025 will be a Good Year!** With very best wishes for a new year of passion, purpose and promise.

***We the peoples of the United Nations.....***

*Dedicated to Women's and Children's Well-being and Health Care Worldwide*



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# COMMISSION for SOCIAL DEVELOPMENT

United Nations Headquarters, New York

EVERYONE  
INCLUDED



United Nations

Department of  
Economic and  
Social Affairs



#CSocD #SDGs #GlobalGoals WEBSITE: [social.un.org/csocd](http://social.un.org/csocd)

## WHEC CSocD63

The 63rd session of the Commission for Social Development (CSocD63) will take place from 10 to 14 February 2025, in Conference Room 4 at the United Nations Headquarters in New York.

<https://social.desa.un.org/csocd/63rd-session>

### Priority Theme:

Strengthening solidarity, social inclusion and social cohesion to accelerate the delivery of the commitments of the Copenhagen Declaration on Social Development and Programme of Action of the World Summit for Social Development as well as the implementation of the 2030 Agenda for Sustainable Development.

### Written Statement of Women's Health and Education Center (WHEC) Published by CSocD63

• UN Document: E/CN.5/2025/NGO/1

Title: **Strategies for Higher Education for All: An International Initiative**

<http://www.womenshealthsection.com/content/n2433389.pdf>

### Virtual Side Event; Sponsored by WHEC

### Creating A World Where Everyone Thrives through Education and Health

Thursday 13 February 2025; 10 am to 11:15 am (EST, New York Time)

<https://teamup.com/ks7vpe5gnthdncvqag/events/1779323428>

### Concept Note:

<http://www.womenshealthsection.com/content/whhec/63rd-CSocD-Side-Event-Concept-Note-2025.pdf>

### WHEC Statement

<http://www.womenshealthsection.com/content/Side-Event-CSocD63-2025-WHEC-Statement.pdf>

### List of Speakers and Agenda

<http://www.womenshealthsection.com/content/63rd-CSocD-Speakers-list-and-Agenda.pdf>

**Details:** <http://www.womenshealthsection.com/content/whhec/csocd.php3>

### Join Us!



# ECOSOC Partnership Forum



**2025 ECOSOC Partnership Forum**  
<https://sdgs.un.org/2025ECOSOCPartnershipForum>

**Virtual Side Event**  
**Improving Health of Our Children & Future Generations through Education**  
Date 5 February 2025; Time: 10 am to 11:15 am (EST, New York Time)

## Sponsor

**Women's Health and Education Center (WHEC)**

## Short Introduction

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. For policy-makers and individuals alike, this means planning for the future, and working together. The initiatives of the Women's Health and Education Center (WHEC), have been hard at work for the last two decades, to achieve education- and health-for-all. It is at the heart of our projects and programs to focus on eliminating poverty, hunger and achieving the United Nations' 2030 Agenda. Our initiatives have a unique role to play in strengthening the health and educational systems worldwide. Cultural diversity is now the norm in each and every country.

## Details:

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



## In The Mail

Greetings and Acknowledgements from **LE PRÉSIDENT DE LA RÉPUBLIQUE,**  
**President Macron** President of France; 8 January 2025

<http://www.womenshealthsection.com/content/President-Macron-France-Greetings-2025.pdf>



## United Nations at a Glance

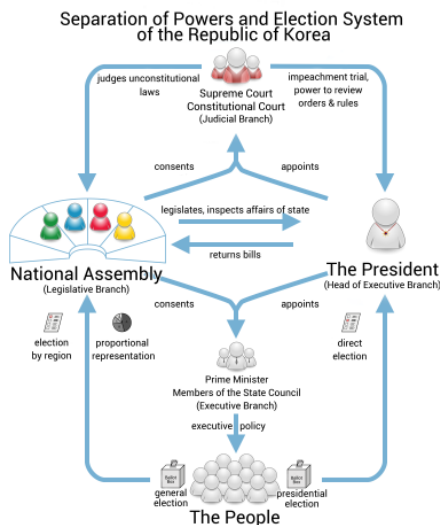
**Republic of Korea (South Korea) became UN Member State on 17 September 1991**



**South Korea**, officially the **Republic of Korea**, is a country in East Asia. It constitutes the southern part of the Korean Peninsula and borders North Korea along the Korean Demilitarized Zone. The country's western border is formed by the Yellow Sea, while its eastern border is defined by the Sea of Japan. South Korea claims to be the sole legitimate government of the entire peninsula and adjacent islands. Capital: Seoul; Population: 52 million; official language: Korean; Government: Unitary presidential constitutional republic; Total area: 100,410 km<sup>2</sup> (38,770 sq. mi); Currency: Korean Republic Won.

In 1950, a North Korean invasion began the Korean War, which ended in 1953 after extensive fighting involving the American-led United Nations Command and the People's Volunteer Army from China with Soviet assistance. The war left 3 million Korean dead and the economy in ruins. The country is now considered among the most advanced democracies in Continental and East Asia. Its armed forces are ranked as one of the world's strongest militaries, with the world's second-largest standing army by military and paramilitary personnel. The country is world's 9<sup>th</sup> largest exporter and 9<sup>th</sup> largest importer.

In the late 19<sup>th</sup> century, Japan became a significant regional power after winning the First Sino-Japanese War against Qing China and the Russo-Japanese Empire. Towards the end of World War II, the U.S. proposed dividing the Korean peninsula into two occupation Zones: a U.S. zone and a Soviet zone.



South Korea was formally invited to become a member of the United Nations in 1991. The transition of Korea from autocracy to modern was marked in 1997 by the election of Kim Dae-Jung, who was sworn as 8<sup>th</sup> President of South Korea on 25 February 1998. In March 2022, Yoon Suk Yeol, the candidate of conservative opposition People Power Party, won a close election over the Democratic Party candidate by the narrowest margin even. Yoon was sworn in on May 10, 2022.

On 1 January 2007, former South Korean Foreign Minister Ban Ki-moon served as UN Secretary General from 2007 to 2016.

The U.S. and South Korea share a close economic relationship, with the U.S. being South Korea's second largest trading partner, receiving \$66 billion in exports in

2016. On 12 October 2011, the U.S. Congress passed the long-stalled trade agreement with South Korea. It went into effect on March 15, 2012.

South Korea's mixed economy is the 13<sup>th</sup> largest GDP at national and the 14<sup>th</sup> largest GDP by purchasing power parity in the world, identifying it as one of the G20 major economies. It is a developed country with a high-income economy and is the most industrialized member country of the OECD.

Details: <https://sdgs.un.org/statements/republic-korea-16285>

# Collaboration with World Health Organization (WHO)

## WHO | Republic of Korea (South Korea)



### National Priorities for Health

The *National Health Plan 2020* (NHP 2020) of the Republic of Korea includes six priority areas:

1. Healthy lifestyles;
2. Chronic disease management;
3. Infectious disease management;
4. Safe environment;
5. Population healthcare;
6. System Management.

The vision of NHP 2020 is to promote a “healthy community” by increasing life expectancy while achieving health equity. By assessing the social, environmental and climatic determinants of health in the above priorities, the Republic of Korea decided to focus on disease prevention to promote population health. The goals of NHP2020 are set around the definition of comprehensive health, as well as the basic concept of health promotion, self-management of health and health as a fundamental right. Thus, the plan seeks to apply the concept of health towards the construction of a society where everyone enjoys good health and longevity. NHP 2020 aligned its goals with social and environmental changes in the Republic of Korea related to health challenges, including:

- Ageing and its consequences, such as the rising population of older people and increasing medical expenses due to chronic diseases and social exclusion;
- The need to strengthen health policies that address the low fertility rate;
- The gap between poor and the rich has intensified with economic growth; and
- Obesity and metabolic diseases are caused by a lack of exercise due to the nature of modern lifestyles.

The Ministry of Health and Welfare advocates the broad application of NHP 2020, emphasizing preventive efforts and multidisciplinary approaches.

### Maternal, Newborn and Child Health

It is undeniable that the promotion and protection of the health of mothers are essential. This is also crucial for newborn babies as the health investment will enable a “Healthy Start in Life.” The problems listed below still persist in the Republic of Korea, despite the high quality and availability of maternal, newborn and child health services:

1. High prevalence of preterm and low-birthweight infant;
2. Decreased practice of breastfeeding;
3. Relatively high rates of Cesarean Section delivery; and
4. Limited practice of skin-to-skin contact after birth and Kangaroo Mother Care for preterm and low birth-weight infants.

As a recipient country, the Republic of Korea over the years received official development assistance (ODA) from foreign countries totaling approximately US\$ 12 billion. Ranging from emergency relief to structural readjustment programs, ODA significantly contributed to economic and social development in the Republic of Korea.

Details: <https://www.who.int/countries/kor/>





**Republic of Korea is UNESCO Member since 1950**



**Baekje Historic Areas**

Located in the mountainous mid-western region of the South Korea, this property comprise eight archaeological sites dating from 475 to 660 CE, including the Gongsanseong fortress and royal tombs at Songsan-ri related to the capital, Ungjin (present day Gongju), the Busosanseong Fortress and Gwanbuk-ri administrative buildings, the Jeongminmsa Temple, the royal tombs in Neungsan-ri and Naseong City wall related to the capital, Sabi (new Buyeo), the royal palace at Wanggung-ri and the Mireuksa Temple in Iksan related to the secondary Sabi capital. Together, these sites represent the later period of the Baekje Kingdom – one of three earliest kingdoms on the Korean peninsula (18 BCE to 660 CE) – during which time they were at the crossroads of considerable technological, religious (Buddhist), cultural and artistic exchanges between the ancient East Asian kingdoms in Korea, China and Japan.



**Gaya Tumuli**

This serial property includes archaeological cemetery sites with burial mounds attributed to the Gaya Confederacy, which developed in the southern part of the Korean Peninsula from the 1<sup>st</sup> to the 6<sup>th</sup> century CE. Through their geographical distribution and landscape characteristics, types of burials, and grave goods, the cemeteries attest to the distinctive Gaya political system in which polities existed as autonomous political equals while sharing cultural commonalities. The introduction of new forms of tombs and the intensification of the spatial hierarchy in the tumuli sites reflect the structural changes experienced by Gaya society during its history. The cemeteries all feature a particular kind of stone-lined burial chamber and have produced a distinctive form of pottery, respectively known as the Gaya-type stone-lined chamber burial and Gaya-style pottery.



**UNESCO Education Camp in South Korea Empowers Girls in STEM Education.**

While strides have been made in improving girls' access to education around the world, girls are held back early in their education by biases and social norms that influence the quality of the education they receive and the subjects they study. This is particularly true for STEM education. Today, only 35% of higher education students studying STEM are women, and only 17 women have won a Nobel Prize in Physics, chemistry or medicine compared to 572 men. In South Korea, the ratio of females in STEM professions is significantly low.

Details: <https://www.unesco.org/en/countries/kr>

***Education-for-All and Health-for-all***

# Bulletin Board

## Transforming Our World: The 2030 Agenda for Sustainable Development

*Adopted at the United Nations Sustainable Development Summit on 25 September 2015*

..... *Sustainable Development Goals Continued*

### Sustainable Development Goals

- Goal 1. End poverty in all its forms everywhere
- Goal 2. End hunger, achieve food security and improved nutrition and promote sustainable agriculture
- Goal 3. Ensure healthy lives and promote wellbeing for all at all ages
- Goal 4. Ensure inclusive and equitable quality education and promote lifelong learning opportunities for all
- Goal 5. Achieve gender equality and empower all women and girls
- Goal 6. Ensure availability and sustainable management of water and sanitation for all
- Goal 7. Ensure access to affordable, reliable, sustainable and modern energy for all
- Goal 8. Promote sustained, inclusive and sustainable economic growth, full and productive employment and decent work for all
- Goal 9. Build resilient infrastructure, promote inclusive and sustainable industrialization and foster innovation
- Goal 10. Reduce inequality within and among countries
- Goal 11. Make cities and human settlements inclusive, safe, resilient and sustainable
- Goal 12. Ensure sustainable consumption and production patterns
- Goal 13. Take urgent action to combat climate change and its impacts\*
- Goal 14. Conserve and sustainably use the oceans, seas and marine resources for sustainable development
- Goal 15. Protect, restore and promote sustainable use of terrestrial ecosystems, sustainably manage forests, combat desertification, and halt and reverse land degradation and halt biodiversity loss
- Goal 16. Promote peaceful and inclusive societies for sustainable development, provide access to justice for all and build effective, accountable and inclusive institutions at all levels
- Goal 17. Strengthen the means of implementation and revitalize the global partnership for sustainable development.

\*Acknowledging that the United Nations Framework Convention on Climate Change is the primary international, intergovernmental forum for negotiating the global response to climate change.

..... *To be continued*



## Collaboration with UN University (UNU)

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

### **Industrial Development in Asia**

Trends in industrialization and industrial policy experiences of developing Asia

Industrial transformation of Asia arguably constitutes the most surprising and dramatic change in the global economy in the last fifty years. This paper provides an outline of some of the most important trends of this development and analyses selected national industrial policies that promoted structural transformation in developing Asia during the period. In the first part, we describe crucial dimensions of industrialization in the region – its extent, its historical trajectory, and the resulting industrial upgrading. In the second part, the authors use four case studies – of the **Republic of Korea**, Malaysia, China and India – to describe some of the strategies which Asian economies used in order to induce industrial development. The authors argue that more successful cases did not try to implement a golden policy template but rather pragmatically adopted their policies to overcome specific bottle necks and meet strategic objectives.

#### ***Republic of Korea***

The ‘classic’ Korean industrial policy started in the 1960s, motivated by revanchism against Japan and by the military threat from its communist neighbors. It was heavily influenced by the industrial planning and ideologies of Japan, the USSR, and China, despite the widely advertised allegiance to the ‘free world’ by its new military government. It was structured by the (indicative) five-year plans of the Economic Planning Board (EPB), with detailed sectoral plans provided by the ministry of Commerce and Industry.

The Korean government provided a range of strong incentives to expand into hi-tech sectors at a relatively low level of development – the Heavy and Chemical Industrialization program was launched in 1973 when the country’s per capita income was just over 5% of the US level. First, the government protected ‘infant’ industries from international competition through trade restrictions; quantitative restrictions were prevalent until the 1980s and average manufacturing tariff was 30 – 40% until the 1970s. Second, the government rationed foreign exchanges, giving priority to importers of capital goods and intermediate inputs. Third, subsidies, including export subsidies, were provided conditional on improving the export performance or developing R & D capabilities and retracted whenever the recipient failed to perform. Fourth, foreign direct investment (FDI) was heavily regulated to promote capability acquisition by domestic firms. Fifth, where the private sector was unwilling to invest in sectors deemed strategic, the government set up state-owned enterprises (SOEs) – the most notable example being POSCO, which is not the fourth largest steel-maker in the world.

More policy measures will be needed to help firms develop capabilities in quality control, abilities to coordinate R & D with buyer firms, and workers’ skills, among others. Once again, successful industrial catch-up in the face of these and other challenges will require an ability to skillfully adapt a country’s industrial policy.

Publisher: UNU-WIDER; Authors Ha-Joon Chang and Kiryl Zach; Sponsors: The Institute is funded through income from an endowment fund with additional contributions to its work programme from Finland, Sweden, and the United Kingdom as well as earmarked contributions for specific projects from a variety of donors.

*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, January 2025

*Editors' Choice – Journal Club Discussions*

*Fully open-access with no article-processing charges*

*Our friendship has no boundaries. We welcome your contributions.*

### 1. **Artificial Intelligence Literacy in Education and Health Sectors;**

<http://www.womenshealthsection.com/content/health/AI-Literacy-in-Education-and-Health-Sectors.pdf>

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. **Newborns Exposed to HIV: Prevention, Evaluation and Management;**

<http://www.womenshealthsection.com/content/obsnc/obsnc018.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*

### **The Macroeconomics of Artificial Intelligence (AI)**



#### **Growing Stage of AI Adoption and Impact.**

Well-informed policy decisions are needed in shaping AI's impact on productivity growth, the labor market, and industrial concentration. The collective decisions we make today will determine how AI affects productivity growth, income inequality, and industrial concentration. Economists have a poor track record of predicting the future.. And Silicon Valley repeatedly cycles through hope and disappointment over the next big technology. So a healthy skepticism toward any pronouncements about how AI will change the economy is justified. nonetheless, there are good reasons to take

seriously the growing potential of AI – systems that exhibit intelligent behavior, such as learning, reasoning, and problem-solving – to transform the economy, especially given the astonishing technological advances of the past year. Getting to the better future will require good policy – including:

- Creative policy experiments;
- A set of Positive goals for what society want from AI, not just negative outcomes to be avoided;
- Understanding that the technical possibilities of AI are deeply uncertain and rapidly evolving and that society must be flexible in evolving with them.

#### **Economic Gains Or Economic Losses**

Despite the rapidly improving technical capabilities of AI, its adoption by businesses may continue to be slow and confined to large firms. Displaced workers might disproportionately end up in even less productive and less dynamic jobs, further muting any aggregate benefit to the long-term productivity growth rate of the economy. AI may also end up being less promising or less ready to bring to market than initially hoped. Any real economic gains, even modest ones, may show up in the data many decades after the first moments of technical promise, as has often been the pattern.

In addition, national regulators driven by any number of concerns may impose strict regulations that slow the speed of AI development and dissemination. They may even be urged on by the early developers of AI who are eager to protect their lead. Moreover, some countries, businesses, and other organizations may totally ban AI.



### ***Higher-Productivity Future***

But there is an alternate scenario in which AI leads to a higher-productivity-growth future. AI might be applied to a substantial share of tasks done by most workers and massively boost productivity in those tasks. In this future, AI lives up to its promise of being the most radical technological breakthrough in many decades. Moreover, it ends up complementing workers – freeing them to spend more time on non-routine, creative, and inventive tasks, rather than just replacing them. AI captures and embodies the tacit knowledge of individuals and organizations by drawing on vast

amounts of newly digitalized data. As a result, more workers can spend more time working on novel problems, and a growing share of the labor force increasingly comes to resemble a society of research scientists and innovators. The result is an economy not simply at a higher level of productivity, but at a permanently higher growth rate.

### **Will AI Lead to higher income-inequality?**

AI is not the future of mass unemployment. But in this higher-inequality future, as AI substitutes for high- or decently-paying jobs, more workers are relegated to low-paying service jobs – such as hospital orderlies, nannies and doorman – where some human presence is intrinsically valued and pay is so low that businesses cannot justify the cost of a big technological investment to replace them. The final bastion of purely human labor may be these types of jobs with a physical dimension. Income inequality increases in this scenario as the labor market is further polarized into a small, high-skilled elite and a large underclass of poorly paid service workers.

Creating a future of lower income inequality, AI may help labor in another more subtle, but profound, sense. If AI is a substitute for the most routine and formulaic kinds of tasks, then by taking tedious routine work off human hands, AI may complement genuinely creative and interesting tasks, improving the basic psychological experience of work, as well as the quality of output. It may reduce worker turnover and increase customer satisfaction for those using an AI assistant.

### **Impact of AI on Industrial Concentration**

Industrial Concentration – measures the collective market share of the largest firms in a sector. It has risen dramatically in the United States and many other advanced economies. The “visible hand” of top management managing resources inside the largest firms, now backed by AI, allows the firm to become even more efficient, challenging the Hayekian advantages of small firms’ local knowledge in a decentralized market. More subtly, but perhaps more important, even in a world in which propriety AI does not require a large firms cost that only the largest firms can afford, AI might still disproportionately benefit the largest firms, by helping them better internally coordinate their complex business operations – of a kind that smaller and simpler firms do not have.

Today, when the effects of AI on society are like to be measured in trillions of dollars, for greater investment should be made in research on the economics of AI. Society needs innovations in economic and policy understanding that match the scale and scope of the breakthrough in AI itself. Reorienting research priorities and developing a smart policy agenda can help society move toward a future of both sustained and inclusive economic growth.



### Artificial intelligence and Global Health



**The United Nations Secretary-General** has stated that the safe deployment of new technologies, including artificial intelligence (AI), can help the world to achieve the sustainable Development Goals (SDGs). The rapid diffusion of growing numbers of applications of AI large language models has generated excitement and public discourse around their potential to improve human health. However, this enthusiasm has been accompanied by concerns such as content-generative systems may be biased, produce misleading or inaccurate information, and could relinquish data privacy and ownership controls to technology firms looking to commercialize large language models and commodify data. Some have questioned whether commercial pressures have led to public releases of these technologies without adequate ascertainment of their safety and performance.

AI tools are increasingly being applied to public health priorities, and have the potential to assist with pattern recognition and classification problems in medicine – for example, early detection of disease, diagnosis and medical decision-making. The increase in sophistication of AI systems is not marked in days and weeks, as opposed to months and years. This speed outpaces the regulatory and review capacity of most agencies charged with protecting public health and providing oversight of technologies applied to health and well-being.

For AI to have a beneficial impact on global health, especially in low- and middle-income countries, ethical considerations, regulations, standards and governance mechanisms must be placed at the center of the design, development and deployment of AI-based systems. The proliferation of AI for health must take place with oversight by governments and their appropriate regulatory agencies. Improved transparency and fail-safes are needed to ensure safety, consistency and quality in AI systems for health, while promoting trust.

To this end, Women’s Health and Education Center (WHEC), has published Scientific Policy Brief and sponsored a Side Event at the UN Headquarters during the 9<sup>th</sup> Session of Science, Technology and Innovation Forum 2024 and has convened an expert group to develop additional guidance. WHEC encourages policymakers to prioritize the implementation of standards and evaluative frameworks that promote the responsible development and application of such technologies, working closely with technical experts, civil society and the private sector to identify risks, and develop mitigation strategies that preserve public health and foster trust. We should also acknowledge the sensualism of the news cycle and social media exaggerations and examine emerging capabilities and risks dispassionately and empirically.

Companies developing health-related AI should be encouraged to act as responsible stewards of public health by prioritizing the wellbeing and safety of individuals above commercial interests, implanting recommended guidance and best practices even in poorly regulated environments. In 2024, WHEC and its partners established a Focus Group on AI for health. This collaboration convened more than 200 stakeholders to develop a benchmarking framework to guide the design, development, regulation and deployment, regulation and deployment of these tools that bring health benefits to everyone, everywhere.

A multiagency global initiative on AI for health is warranted to improve coordination, leverage collective and individual agency capacity, and ensure that the evolution of AI steers away from a dystopian future towards one that is safe, secure, trustworthy and equitable.

Join our efforts!

## Art & Science

Art that touches our soul

### *The Banjo Lesson* by Henry Ossawa Tanner



***The Banjo Lesson*** is an 1893 painting by African-American artist Henry Ossawa Tanner. It depicts two African-Americans in a humble domestic setting: an old black man is instructing a young boy – possibly his grandson – to play the banjo.

This painting was Tanner's first accepted entry into the Paris Salon, and has been held by Hampton University since 1894. This may be the first painting by an African-American to paint other African Americans in a realistic, "genre" style of painting, in which scenes or events from everyday life are chosen for contemplation, including ordinary people engaged in common activities. The painting has elements of American Realism and of French Impressionism.

The painting refuted widely held stereotypes held by white people in the United States in the 1890s, by presenting African-Americans outside of those stereotypes. There was no caricature, no expectation that the subjects were trying to entertain, no hint that the people in the painting were dangerous, or fawning or lacking intelligence. This was radical for the era.

Tanner was born in Pittsburgh (USA) in 1859 and grew up in Philadelphia. His

mother may have been born a slave in Virginia; his father was a free-born black minister in the African Methodist Episcopal Church and became a bishop in 1888.

Location: Hampton University Museum. Gift to the museum by Robert C. Ogden.

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

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