



## WHEC Update

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

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## *Shaping the Future*

Traditional, health system performance assessments have focused on evaluating the health system itself, with less concern about the broader impacts of improved population health beyond the sector. However, in today's interconnected world, health is intricately linked with the environment, sociocultural dynamics, geopolitical and the economy, among others. In this edition, we conceptualize social and economic well-being from the perspective of the health system's contribution to it. We break down well-being into three societal goals – social cohesion, environmental sustainability and economic development.

To better understand the contribution of health systems to broader societal well-being, such goals need to be adequately conceptualized use and measured. Well-being is not captured by standard economic measures such as gross domestic product (GDP), which primarily focus on economic growth and fail to reflect income distribution, sustainability practices, non-market transactions and health and education outcomes, many of which contribute to societal well-being. Newer, more holistic measurement approaches to well-being, for example the Organization for Economic Co-operation and Development (OECD) well-being framework attempt to quantify well-being through various factors such as health, education, employment, housing, security, gender equality and social connections.

We break down well-being into three societal goals:

1. Social cohesion;
2. Environmental sustainability; and
3. Economic development.

The health system contributes to all these three objectives through actions that primarily serve to achieve its own goals such as improving population health, equity, people-centeredness or resilience. Therefore, achieving health system goals lead to considerable contributions to societal goals. More broadly, these three goals relate to societal well-being as a proxy measure of quality of life, withing a resilient and healthy community.

Every goal within society, while significant on its own in the context of health system performance, does not encompass or support alone the complex needs of society. For instance, the attainment of social cohesion hinges upon a foundation of trust and solidarity, prompting a community to embrace behaviors that promote health and solidarity, which in turn lay the groundwork for economic growth. Rather, social cohesion acts as a precursor for economic development. Social solidarity play an important role in the beliefs and attitudes around climate mitigation strategies or conservation efforts. Environmental sustainability requires collective, community action. The intricate relationship between social and environmental factors underscores the need for a holistic approach. Achieving equity necessitates active participation, a core principle of environmental justice movements. Engaging people, communities and civil society in the decision-making process fosters fairness and strengthens social cohesion and sustainability.

Women's Health and Education Center's (WHEC's) recommendations are – health policy-makers evaluating their system's performance should recognize that achieving certain health system goals can considerably enhance overall societal wellbeing. WHEC and its partners make an initial effort to advance the discussion in its various publications, to advance the discussion on this important topic.

The Societal Goals and Health Systems

**Rita Luthra, MD**



## Your Questions, Our Reply

Do the health systems foster social cohesion? Does health system contribute to economic growth and development?

**Conceptualizing Social and Economic Well-being:** Social cohesion is the bond that holds a society together, manifesting in trust, solidarity and a collective commitment to shared values and objectives. The health system fosters social cohesion by ensuring equitable access to health care, involving communities in health initiatives, reducing inclusivity – key aspects of people-centered care. The health system goals of people-centeredness and equity promote trustworthiness. By building trust necessary care will be readily available for everyone, a sense of fairness and social responsibility is created in the community, leading to stronger social cohesion. For example, community health initiatives that involve participatory approaches for health promotion and disease prevention can enhance community ties and mutual support, leading to better health outcomes and lower mortality rates over time.

Social cohesion also contributes to local community-development, which often depends on a community's ability to agree on common goods to be created for the benefit of its community members. More specifically, inclusive community health initiatives involve members of vulnerable and marginalized groups in the planning and implementation of health strategies with aims for eliminating discrimination, reducing income inequality, reducing barriers and ensuring equal access to healthcare services.

This societal goal encompasses processes that enhance living standards, create jobs and spur innovation – elements that standard economic metrics fail to capture. This dimension is vital for providing necessary resources for health and improving overall quality of life.

The healthcare system contributes to economic growth and development through maintaining a healthy workforce, reducing absenteeism, burnout, promoting productivity and addressing health inequalities to enable full economic participation. Notably, with a healthy workforce, the health sector's proportion of GDP for OECD countries was reported at around 9.2% in 2024 (Source: WHO), representing a significant share of economy. A health system of financial protection helps to protect individuals from catastrophic health expenditures through mechanisms such as prepayment and pooled resources, which protects them from falling into poverty due to healthcare costs. This protection is linked to economic contributions are maintained without the financial burden of health expenses. Consequently, a health system goal of health improvement boosts overall economic productivity and growth.

The health sector's growth has implications for the overall economic health of nations, especially given its size and expansion rate. By addressing health inequalities, marginalized and vulnerable members of the community can participate more fully in the economy. In essence, the health system acts as a recipient of economic resources and as an active player in shaping the economic landscape, fostering societal well-being.

Environmental sustainability describes responsible interactions with the planet to preserve its resources. Climate change is expected to considerably influence health system usage and the need for service transformation, as the health sector's negative impact on the ecological footprint is now recognized. In 2019, a study estimated that, if healthcare were a country, it would be the fifth largest emitter of carbon emissions worldwide. (source: WHO). As a result, health system contributions to environmental sustainability have begun through the optimization of health service resources, as well as greening initiatives that reduce its carbon footprint and other environmental impacts. Additionally, the health system has adopted services and structures to better respond to emerging climate-related issues, such as an increased number of catastrophic events or vector-borne diseases.

The health system goal of efficiency is a means of contributing to environmental sustainability through ongoing efforts to optimize resource use, reduce waste and adapt to the changing needs of a population in climate crises, to provide care more efficiently.



## United Nations at a Glance

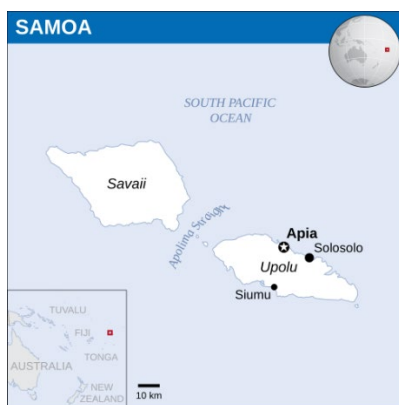
**Samoa became UN Member State on 15 December 1976**



**Samoa**, officially the **Independent State of Samoa**, and until 1997 known as **Western Samoa**, is a Polynesian island country consisting of two main islands (Savaii and Upolu; two smaller, inhabited islands (Manono and Apolima) , and several smaller, uninhabited islands, including Aleipata Islands. Samoa lies south of the equator, about halfway between Hawaii and New Zealand in the Polynesian region of Pacific Ocean.

Samoa is a unitary parliamentary democracy with 11 administrative divisions. It is a sovereign state and a member of the Commonwealth of Nations. The capital and largest city is Apia; official language: Soman and English; Religion: 98% Christianity; Area: total 2,831 km<sup>2</sup>; population: (2022): 205,557; Currency: Tala (WS\$).

Samoa was discovered and settled by the Lapita people (Austronesian people who spoke Oceanic languages), who travelled with Island Melanesia. The earliest human remains found dated to between roughly 2,900 and 3,500 years ago. Because of Soman's seafaring skills, pre-20<sup>th</sup>-century European explorers referred to the entire island group, including American Samoa, as the " Navigator Islands." The country was the colony of the German Empire from 1899 to 1915, then came under a joint British and New Zealand colonial administration until 1 January 1962, when it became independent. Today, all of Samoa is untied under its two principal royal families: The Sa Malietoa of the ancient Malietoa lineage that defeated the Tongans in the 13<sup>th</sup> century; and the Sa Tupua, Queen Salamasina's descendants and heirs who ruled Samoa in the centuries that followed her reign. Within these two principal lineages are the four highest titles of Samoa – the elder titles of Malietoa and Tupua Tamasese of antiquity and the newer Mata'afa and Tumalealiifano titles, which rose to prominence in 19th century wars that preceded the colonial period.



Major areas of concern include the under-representation of women, domestic violence and poor prison conditions. Homosexual acts are illegal in Samoa. The country has no formal defense structure or regular armed forces. It has formal defense ties with New Zealand, which is required to consider any request for assistance from Samoa under the bilateral Treaty of Friendship of 1962. Climate is an equatorial climate, with an average annual temperature of 26.5°C (79.7°F) and main rainy season from November to April, although heavy rain may fall in any month.

The UN has classified Samoa as an economically developed country since 2014. As of 2017 Samoa's GDP in purchasing-power parity was estimated at \$1.13 billion US Dollars, ranking the country 204<sup>th</sup> in the world. The Samoan government provides 8 years of primary and secondary education that is tuition-free and is compulsory through age 16. Education in Samoa has proved to be effective as a 2012 UNESCO report stated that 99% of Samoan adults are literate. The country is also home to several branches of multi-national University of South Pacific and the Oceania University of Medicine.

Details: <https://sdgs.un.org/statements/samoa-12744>

# Collaboration with World Health Organization (WHO)

## WHO | Samoa



### Health Situation

Samoa has a relatively young population; approximately 46% are 19 years and younger. The dangers of emerging and re-emerging communicable diseases, including dengue, chikungunya and Zika, are also a concern. Lymphatic filariasis remains endemic and the prevention of sexually transmitted infections (STIs) remain a challenge due to poor commodity distribution and low uptake of voluntary

counselling and testing. While HIV prevalence is low, behaviors that put people at risk of transmitting STIs and HIV are still common, confirmed by high rates of chlamydia, at 26% in 2024 and 40% among young women.

### Health Policies and Systems

In 2017, the Cabinet decided to merge the National Health Services and the Ministry of Health to improve health sector coordination and to bolster the provision of public health and primary care in rural areas. *The Strategy for the Development of Samoa 2016 – 2020* sets the targets for “an improved quality of life for all: promoting sustainable development and broadening opportunities.” *The Samoa Health Sector Plan 2008 – 2018* guides the vision of “a healthy Samoa” by addressing key priorities such as the rapidly increasing levels of non-communicable diseases (NCDs) and its impact on mortality and mortality, the health system and the economy; improving reproductive and maternal and child health for the long-term health of community; reducing risks from emerging and re-emerging infectious diseases; and reducing injury as a significant cause of death and disability.



### Cooperation for Health

In implementing the strategy, WHO and Ministry of Health will work with other government ministries, other sectors, academia, civil society, United Nations agencies, bilateral development partners, regional and global health initiatives, philanthropic foundations and others in support of planned national health priorities. Strategic priorities:

1. To strengthen health systems towards UHC;
2. To reduce avoidable disease burden and premature deaths, particularly NCDs;
3. To control communicable diseases and protect the health of women and children;
4. To protect Samoan people from public health events including disease outbreaks.

Details: <https://www.who.int/samoa/>



## Samoa became UNESCO Member State in 1981



### Le Samoa, fine mat and its cultural value

The 'le Samoa is a special finely hand-woven mat fastened at the hem with two rows of green and red feathers, and a loose fringe on one end. Traditionally woven with fine stripping of the pandanus plant, and final product is silk-like. Its shiny coppery color adds to its value as it is a testament to its age and the natural bleaching process it undergoes.

The production process involves a high level of intricacy as each woven strand is as little as one millimeter wide. Producing a single 'le Samoa can therefore take up to several months and even years. nevertheless, the 'le Samoa is more than a cultural product involving exceptional skills; its true value lies in its use as an object of exchange in traditional ceremonies and rituals that reaffirm kinship ties and strengthen community wellbeing. The 'le Samoa is displayed and exchanged at festive celebrations or on important occasions such as weddings and funerals, and its exchange contributes profoundly to the maintenance of the social structure. Today, and increasing numbers of young female weavers are involved, and even male weavers. Women and master weavers have established fine mat committees within their villages, allowing them to exchange ideas about best practice for weaving, and to boost opportunities for strengthening the transmission of the art form.



### From Samoa to Somalia: How civil society organizations transform education

In the youthful nation of Somalia, three-quarters of the population is under 30 years of age. Most of them do not have their right to education, employment, or development fulfilled. To help meet the educational need in this country – online course on the basics of educational planning, as a grantee. Civil Society must have the capacity to fight for the rights of the younger generation.

As most civil society organizations in the course are members of Local Education Groups (LEGs) or Joint Sector Reviews, participants also had the chance to exchange about their contributions to such mechanisms and discuss related challenges - such as time for consultation, financial support, data quality, and availability, or coordination of efforts. Empowering civil society actors with the tools and knowledge needed for effective educational planning is key to advocating for better funding, ensuring that educational policies are inclusive and effective, and holding government to account.

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

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



## Bulletin Board

### *Sustainable Development Goals...continued*

#### **Goal 7. Ensure access to affordable, reliable, sustainable and modern energy for all.**

7.1 By 2030, ensure universal access to affordable, reliable and modern energy services.

7.2 By 2030, increase substantially the share of renewable energy in the global energy mix.

7.3 By 2030, double the global rate of improvement in energy efficiency.

7.a By 2030, enhance international cooperation to facilitate access to clean energy research and technology, including renewable energy, energy efficiency and advanced and clean fossil fuel technology, and promote investment in energy infrastructure and clean energy technology.

7.b By 2030, expand infrastructure and upgrade technology for supplying modern and sustainable energy services for all in developing countries, in particular least developed countries, small island developing States, and land-locked developing countries, in accordance with their respective programmes of support.

*To be Continued ...*



## **GENDER-INCLUSIVE LANGUAGE**

### **Guidelines**

<http://www.un.org/en/gender-inclusive-language>



## Collaboration with UN University (UNU)

*UNU-WIDER (World Institute for Development Economics Research)*

*Expert Series on Health Economics*

### **New Estimates of the cost of ending poverty and its global distribution**

This paper makes new estimates of the cost of ending poverty and the global distribution of both the cost and poverty itself. First, the paper discusses definitions of 'ending' poverty, arguing that there is an overemphasis (e.g. SDG1) on the extreme poverty line which is insufficient for multiple reasons. Second, we turn to the question of the location of global poverty. Although it is commonly that global poverty is increasingly located within sub-Saharan Africa and in fragile and conflict-affected states (FCAS), there is a less discussed distribution of global poverty between countries where official development assistance (ODA) matters substantially, and those countries where ODA is no longer financially relative to the recipient countries' growing economic size. A new typology of countries is presented based on the intersection of ODA importance vis-à-vis national resources and FCAS/non-FCAS countries. Finally, new estimates are made for the cost of ending global poverty and for the global distribution of that cost and at poverty itself.

The paper concludes that:

1. The goal of ending poverty ought to be set at least at the \$3.65 poverty line if not higher;
2. Approximately half of global extreme monetary poverty are located in countries where the importance of ODA is low;
3. The direct costs of ending extreme and absolute monetary poverty are not prohibitive, respectively \$67.1bn and \$324.1bn per year in current dollars or 0.12% and 0.56 of the gross national income (GNI) of advanced nations; and
4. The cost of ending global extreme and absolute monetary poverty is split respectively 50/50 between FCAS and non-FCAS countries; and split respectively 45/55 between countries where ODA matters financially versus countries where ODA is less important. The headline implication for developing cooperation is that policy coherence is as important as ODA to ending global poverty.

### **Where do the world's poor and poorest live? The global distribution of poverty**

The global poverty is increasingly focused within sub-Saharan Africa and in fragile and conflict-affected states (FCAS). In fact, in the last 20 to 30 years, there have been two bifurcations within the Global South which intersect: first, there is the oft referred-to differentiation between countries in fragile and conflict-affected situations (FCAS) and those countries which are not FCAS.

The cost of ending extreme monetary poverty annually is about a third of the annual global ODA spend. Global ODA is about 60% of the annual cost of ending global absolute poverty. It is not that simple. Getting funds to those living in poverty can be incredibly difficult logically and administratively, especially so for extreme poverty. These estimates do point towards the fact that, at a global level, the necessary funds to end global extreme monetary poverty are already available.

Publisher: UNU-WIDER; Authors: Andy Sumner and Arief Anshory Yusuf; Sponsors: United Nations University World Institute for Development Economics Research provides economic analysis and policy advice with the aim of promoting sustainable and equitable development

*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, August 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;** [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. **Genetic Counseling and Genetic Screening;**  
<http://www.womenshealthsection.com/content/obs/obs026.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*

## **Providing Solutions: Our projects and Our efforts**

Global e-Learning, e-Health  
and e-Government Platform  
<http://www.WomensHealthSection.com>



### **Intergenerational Dialogue**

Both younger and older women describe themselves as advocates of women's rights at 85%, and 51% of each group said they were mainly in control of their own lives. Younger women are significantly more likely to perceive their quality of life as better today than it was five years ago compared to the older group (56% vs. 47%). They are also 20 points more

likely to believe that their quality of life will improve in the next 5 years.

Younger women are more keenly aware of the obstacles they face as women compared to older women. They are 8 points more likely to see insufficient access to reproductive / sexual rights as an obstacle, 12 points more likely to regard mental as an obstacle, 10 points more likely to be concerned about domestic violence, and 7 points more likely to worry about gender inequality in general.

Younger women are more keenly aware of the obstacles they face as women compared to older women. Given the volume of responses and breadth of geographic sources, the responses present clear messages from more than 25,000 women worldwide regarding their overall view of the future. The survey allows us to analyze their views through the prism of uniquely women's concerns, personal aspirations, the overarching challenges of artificial intelligence (AI), war, and climate change, and the need for more representation of women in the corridors of power.



**Climate change, Economic insecurity, and Gender Inequality are the key issues on women's minds and are affecting them today.** Around half of the women worldwide report that climate change, economic insecurity, and gender inequality significantly affect them today. Lack of access to technology is reported as an issue by only a quarter of women globally.

**Artificial Intelligence (AI) may be positive for many.** More than twice as many women see AI as an opportunity rather than a threat, but they expect negative effects in certain areas of life. AI has mixed reviews. Overall, about twice as many (45%) view AI as an opportunity, while over 24% see it mainly as a threat, and 19% are not sure. Younger women (18-34 years old) are more inclined to see the positives in the impact of AI. 48% of them see AI as more of an opportunity than a threat, compared to 41% for older women. More positive views – about 50% - were expressed in every region except the West, where only 39% thought AI is an opportunity.

**We the women across regions.** Beyond the shared challenges and priorities, disparities across regions mostly concern the level of optimism after the future. Women from Africa are the most optimistic about their lives now and in the future, while women from Western and Eastern Europe and North Africa are the most concerned about war. Regarding the consequences of climate change, fear of natural disasters is prevalent in every region (ranging from 50% in Africa to 62% - 71% in every other region), scarcity of food is a particular concern in Latin America (48%) and Africa (45%), and loss of economic opportunity is a worry in Africa and Asia (29%).

**Women and the Sustainable Development Goals (SDGs).** Among the SDGs, women consider health and education as significant prerequisites for achieving global goals. In a record year for elections around the world, women rank living in peaceful countries, where justice prevails and institutions are strong, as one of the top three priorities. Within the 17 Sustainable Development Goals, 3 most important Goals are SDG 3 – Good Health and Wellbeing, SDG 4 – Quality Education and SDG 16 – Peace, Justice, and Strong Institutions.

**Providing Goals and Aspirations.** A majority of respondents overall (51%) say that they are “in control of my future.” The most significant is the dramatic rises in concern over climate change (9 points and war and conflict (10 points). Climate change's importance is driven by large spikes in concern in the West (46% now to 68% in the next decade) and Eastern Europe (39% to 56%).



#### **Women and Leadership.**

An impressive majority (60%) think that women's representation in leadership in their country will progress over the next decade. Only 10% overall feel it will regress and 23% are not sure. The ratios are strong in every region – 67% to 68% in Africa, 61% to 10% in Asia, 46% to 10% in Eastern Europe, 60% to 10% in Latin America, and 63% to 12% in the West.

#### **The Unfinished Business of Our Time.**

Women and girls represent half of the world's population and therefore also half of its potential. Unfortunately, there is still a long way to go to achieve full equality of rights and opportunities between men and women. Therefore, it is of paramount importance to end the multiple forms of gender violence and secure equal access to quality education and health, economic resources and participation in political life for both women and girls, men, and boys. It is also essential to achieve equal opportunities in access to employment and to positions of leadership and decision-making at all levels.

**Prevent violence against women** by changing social norms that justify violence in the family. Support survivors to thrive with universal, quality, multi-sectoral services. Ensure women's access to justice and hold perpetrators to account.

Our Efforts: <http://www.womenshealthsection.com/content/vaw/>



**“Progress of the world’s women”** is UN Women’s periodic investigation of progress made towards a



world where women, girls, and gender-diverse people live free from inequality, poverty, and violence. Provocative and insightful, this series is the product of multi-year research, in-depth analyses, and data findings that build upon the expertise of leading organizations, activists, and academics. 9<sup>th</sup> edition is published in 2025, and provides a comprehensive analysis of two of the most pressing challenges facing the world

today: the rapidly accelerating heating of the planet and stalled progress for the world’s women and girls.

Women’s Health and Education Center’s (WHEC’s) collaboration with this program will provide a comprehensive analysis of two of the most pressing challenges facing the world today: the rapidly accelerating heating of the planet and the stalled progress for the world’s women and girls. WHEC has embarked on an ambitious program of work that will make the case that public action based on a framework of feminist climate justice holds the key to addressing these challenges.

The program of work includes the development of a conceptual framework on feminist climate justice , innovative data analysis on the impacts of climate change on women’s rights and gender equality, and robust evidence on how cross-sectoral policies can be leveraged to mitigate these impacts and ensure a gender-just tradition to environmental sustainability. It will also map the approaches needed to finance these policies and identify the routes to translating social mobilization into transformative, accountable, and sustainable change.

### **Families in a changing world**

Families around the world look, feel, and live differently today. Families can be “make or break” for women and girls when it comes to achieving their rights. They can be places of love, care and fulfillment but, too often, they are also spaces where women’s and girls’ rights are violated, their voices are stifled, and where gender inequality prevails. In today’s world, laws and policies need to be based on the reality of how families live. At a critical juncture for women’s rights, we propose a comprehensive family-friendly policy agenda to advance gender equality in diverse families. A package of policies to deliver this agenda is affordable for most countries, according to a costing analysis included. When families are places of equality and justice, economies and societies thrive and unlock the full potential of Sustainable Development Goals (SDGs).

### **Violence against Women and Girls**

- Globally 1 in 5 ever-partnered woman aged 15 to 49 have been subjected to intimate partner violence in the previous 12 months.
- 137 women across the world are killed by a member to their own family every day.
- 650 million women and girls in the world today were married before age 18.
- At least 200 million women and girls alive today have undergone female genital mutilation.
- 45 countries have lo laws specifically protecting woman from domestic violence.

Join our efforts!

## The Tide Rises, The Tide Falls

The tide rises, the tide falls,  
The twilight darkens, the curlew calls;  
Along the sea-sands damp and brown  
The traveler hastens toward the town,  
And the tide rises, the tide falls.

Darkness settles on roofs and walls,  
But the sea, the sea in darkness calls;  
The little waves, with their soft, white hands  
Efface the footprints in the sands,  
And the tide rises, the tide falls.

The morning breaks; the steeds in their stalls  
Stamp and neigh, as the hostler calls;  
The day returns, but nevermore  
Returns the traveler to the shore.  
And the tide rises, the tide falls.

- Henry Wadsworth Longfellow (1807 – 1882); was and American poet and educator. Longfellow authored many lyric poems known for their musicality and often presenting stories of mythology and legend. He became the most popular American poet of his day and had success overseas.

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

<http://www.WomensHealthSection.com>

