



WHEC UPDATE

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

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Before and After Issue

Once again we bring you our Before & After edition. It's one of our favorites to publish and – you tell us – one of your favorites to read, year after year. And, frankly, how could it not be? Before & After should remind us – what could be; not what is. The opportunity to go behind the scenes of various developing project and programs you see on these pages each month and witness a step-by-step transformation from unremarkable to inspired, is simply irresistible. Privilege brings responsibility. Each generation has two choices: either live off what you have, or reinvest and create a future. There are countless reasons why people get involved in social development or what moves them. Whatever the motivation, we are grateful that someone, somewhere, experienced a moment of not-so-divine discontent and decided to turn that vision into reality. There are widening disparities in health status between countries and among population groups within countries; the gaps between the developing and the least developed countries in respect of life expectancy at birth and infant mortality rates have widened during the last twenty years. We hope to bring about further improvements in global health status and greater equity in health, thus bridging the health development gap between countries and between different population groups within countries. Our focus is on improving equity of access to *health* and not merely to *health care* as the basis for public health policy for future. If we consider how best to invest in health, school health programs emerge as very good investment. Not all schools – whether in developing or developed countries – have resources to support health as well as education. To turn the world's schools into "Health-Promoting Schools", we will need to work together. Indeed, it will require the mobilization of people and resources at local, national and international levels to work in a concerted effort to bring about change.

Our future depends to a large extent on being adequately informed. Reliable health information is demanded not only by health professionals, politicians and business people who need to meet the various responsibilities of their jobs, but by individuals and families in every walk of life. Readers find strong arguments in these pages of **WomensHealthSection.com**, both for confidence and for anxiety about the state of the world's health and affairs. The need for global cooperation and coordination is also becoming daily more urgent as both the dangers and positive powers of technology relentlessly increase. Ethical issues such as those surrounding access to health care, reproductive health, biotechnology, the safety of new drugs and vaccines, or the options for dying with dignity make this abundantly clear. Here again, the indispensable common factor is timely and accurate information. The world already has the tools to prevent most of today's biggest killers. Yet while knowledge and technology continue to advance, fairness is lost when their benefits are distributed. As a result, today's world health situation is characterized by widening gaps in health status between countries and among population groups within countries. My hope is that both the encouraging facts and the harsh ones reported here will strengthen the determination of all those involved in health care, to bridge the gap, between what has been achieved so far and what we need to and can achieve.

Incomplete Complete;
Imperfect Perfect.

Rita Luthra MD

Your Questions, Our Reply:

What are the various challenges in designing and implementing health financing policy towards universal coverage?

Towards Universal Coverage: How health systems 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 coverage, i.e. essential health services and interventions provided at a cost affordable for all. 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. Universal coverage implies equity of access and financial risk protection; the health policy goal clearly should impose important demands on those responsible for health system financing.

The key components of health financing policy are: revenue collection, risk pooling and allocation of financial resources to provide or purchase health services. Various mixes of tax funding with social, community and private health insurance provide alternative institutional frameworks. Governments' roles in exercising overall stewardship in the transition to universal coverage are essential to influence development of workable health financing systems. The issues of equity and efficiency merit particular attention. The lack of risk-sharing's impact on the poor and on equity in access to health interventions in various countries is different. Mature universal coverage systems in developed countries also need to address problems of inequality and to monitor the impact of policies that increase household's direct payments or co-payments for services.

The appropriate design of health services benefit packages and provider payment mechanisms are key instruments in the efficient use of available resources. We hope our efforts contribute important information to help policy-makers devise practical steps towards attaining the goal of universal coverage.

About NGO Association with the UN:

The Millennium Declaration, signed by world's leaders of 189 countries in 2000, established 2015 as the deadline for achieving most of the Millennium Development Goals (MDGs). The majority of MDG targets has a baseline of 1990, and is set to monitor achievements over the period 1990-2015.

Millennium Development Goal (MDG) 7: Ensure Environmental Sustainability

TARGET: Integrate the principles of sustainable development into country policies and programs and reverse the loss of environmental resources. Deforestation continues, especially in biologically diverse regions – From 1990 to 2005, the world lost 3 per cent of its forests, an average decrease of 0.2 per cent a year. Deforestation, primarily due to the conversion of forests to agricultural land in developing countries, continues at an alarming rate – about 13 million hectares a year. The rate of loss has been fastest in some of the world's most biologically diverse regions, including South-Eastern Asia, Oceania, Latin America, and sub-Saharan Africa. In addition to the loss of biodiversity, between 18 and 25 per cent of greenhouse gas emissions each year are associated with deforestation, making it a key factor in climate change. The planting of trees, restoration of degraded lands and the natural expansion of woodlands – especially in Europe, parts of North America and Eastern Asia – have increased forested areas in these regions, particularly in recent years. As a result, the net decrease in forest cover over the period 2000-2005 is about 7.3 million hectares a year – down from 8.9 million hectares a year from 1990 to 2000. Still, forested areas totaling about 200 square kilometers – an area twice the size of Paris – are being lost every day. Recent efforts to curb deforestation – in Brazil, for example – are positive signs. In parts of the African Sahel, where desertification is contributing to poverty, the decentralization of authority to manage and benefit from local resources also shows promise of reversing earlier forest losses. Tree plantations increase while old-growth forest ecosystems continue to be lost. Maintaining the integrity of the world's forests and other ecosystems plays an important role in biodiversity conservation. More than a third (36 percent) of the world's forests remain largely undisturbed by human activity. Yet these primary forests were lost at a rate of about 6 million hectares a year between 2000 and 2005, because of selective logging and other human interventions. Over this same period, forest plantations increased by about 2.8 million hectares a year, mainly due to large-scale tree-planting schemes in China. Forest plantations represent less than 5 per cent of the world's total forest area. Slightly more than three quarters of all plantations are intended for harvesting, primarily of timber and fiber, while the remaining quarter are protective plantations, established mainly for the conservation of soil and water.

Growing greenhouse gas emissions continue to outpace advances in sustainable energy technologies. According to the Intergovernmental Panel on Climate Change, the science is now unequivocal: Human activities are driving changes in the Earth's climate, with subsequent risks to livelihoods and human well-being. Mean global surface temperatures have increased by about 0.5 degrees Celsius since 1970. One expected result is an increase in severe weather patterns in many parts of the world. Shortages of fresh water – perhaps our most precious but degraded natural resource – are also likely to be exacerbated. In regions such as sub-Saharan Africa, where climate models predict less rainfall, the resulting drop in crop yields and the critical decline in food, shelter materials and water could prove catastrophic. The primary contributor to climate change is carbon dioxide (CO₂), released by the burning of fossil fuels. Carbon dioxide emissions reached 29 billion metric tons in 2004 and continue to rise, as evidenced by increasing concentrations of CO₂ in the atmosphere. In South-Eastern Asia and Northern Africa, emissions more than doubled between 1990 and 2004. Yet, on a per capita basis, developing regions continue to emit far less CO₂ than developed regions. In 2004, developed regions accounted for about 12 tons per person on average. Western Asia, the highest per capita emitter among developing regions, produced less than half that amount. An individual in sub-Saharan Africa accounts for less than one tenth of the CO₂ produced by an average person in the developed world. As global energy consumption continues to expand – an increase of 20 per cent since 1990 – progress has been made in the development and use of cleaner energy technologies. Energy from renewable resources, such as hydropower and bio-fuels, now accounts for more than 12 per cent of total energy use. The development of more modern renewable, which have no negative impact on people's health or the environment, has increased tenfold over the last several decades. However, these newer technologies, including those that rely on wind, solar, wave and geothermal energy, still account for only 0.5 per cent of total energy consumption. A continuing reliance on fossil fuels is likely for some time to come. Stronger international action is needed to accelerate the transition to cleaner and more efficient energy sources.

Collaboration with World Health Organization (WHO):

Public Health, Innovation and Intellectual Property

Despite enormous progress in the prevention, diagnosis and treatment of disease, developing countries still remain largely excluded from the benefits of modern science. Caught in a cycle of poverty and disease, people in the hardest-hit countries are facing shorter life expectancies and economic decline. The issue of better access to healthcare products for poor populations has been the subject of many World Health Assembly resolutions. In May 2006, Member States asked WHO to establish an Intergovernmental Working Group on Public Health, Innovation and Intellectual Property (IGWG). The Working Group's mandate is to prepare a global strategy and plan of action on essential health research to address conditions affecting developing countries disproportionately. The resulting global plan of action will be presented to the World Health Assembly in mid-2008. The Secretariat for Public Health, Innovation and Intellectual Property was established in September 2006 to facilitate the functioning of the IGWG. The Working Group, composed of WHO Member States, held its first session on 4-8 December 2006, in Geneva. Draft global strategy on public health, innovation and intellectual property. 3 May 2008: http://www.who.int/phi/documents/IGWG_Outcome_document03Maypm.pdf

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Collaboration with UN University (UNU):

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

Measurement and Explanation of Inequality in Health and Health Care in Low-Income Settings

This paper describes approaches to the measurement and explanation of income-related inequality and inequity in health care financing, health care utilization and health and considers the applicability and the feasibility of these methods in low-income countries. Results from a comparative study of 14 Asian countries are used to illustrate the main issues. The structure of health finance in low-income countries, in particular the heavy reliance on out-of-pocket payments, means that the equity issues in finance are quite different from those of concern in high-income countries. Primary concern is not with the distribution of contributions to pre-payment mechanisms but with the deterrent effect of payments on utilization and the distribution of uninsured payment risks. Measurement of inequity in utilization of health care in low-income countries is constrained by the lack of reliable measures of health that can be used to standardize for need. Nonetheless, sufficient is known of the distribution

of need in many circumstances in order to make inferences about equity from inequality in health care use. The empirical analyses demonstrate that, in low-income countries, the better-off tend to pay more for health care, both absolutely and in relative terms. But they also consume more health care. Health care is financed largely according to the benefit principle. Assessing the distributional performance of health systems in low-income settings therefore requires examination of finance and utilization simultaneously.

Publisher: UNU-WIDER, Discussion Paper – 2008/04, Authors: Eddy van Doorslaer and Owen O'Donnell

(Details of the paper can be accessed from the link of UNU-WIDER on CME Page of WomensHealthSection.com)

World Trade Organization (WTO):

The World Trade Organization was established in 1995, replacing the General Agreement on Tariffs and Trade (GATT) as the only international body dealing with the global rules of trade between nations. It is not a specialized agency, but has cooperative arrangements and practices with the United Nations. The purpose of WTO is to help trade flow smoothly, in a system based on rules; to impartially settle trade disputes between governments; and to organize trade negotiations. At its heart are some 60 WTO agreements, the legal ground rules for international commerce and trade policy. The principles on which these agreements are based include: non-discrimination (the "most-favored nation" clause and the national treatment provision), free trade, encouraging competition, and extra provisions for less developed countries. One of WTO's objectives is to reduce protectionism. Since its establishment, the WTO has been the forum for successful negotiations to open markets in telecommunications, information technology equipment and financial services. It has been involved in settling more than 200 trade disputes, and continues to oversee implementation of the agreements reached in the 1986-1994 Uruguay Round of world talks. In 2001, at Doha, Qatar, the WTO launched a new round of multilateral trade negotiations known as Doha Development Agenda. The WTO has 146 member countries. Its governing body, the Ministerial Conference, meets every two years; the General Council carries out the day-to-day work. WTO's budget for 2003 was CHF 155 million. It has a staff of some 550. Headquarter: 154 Rue de Lausanne, CH-1211 Geneva 21, Switzerland.

World Intellectual Property Organization (WIPO):

The World Intellectual Property Organization was established in 1970 and became a United Nations specialized agency in 1974. Its objectives are to promote the protection of intellectual property throughout the world through cooperation among its 179 member states, and to ensure administrative cooperation among the Unions established to afford protection in the field of intellectual property.

The principal Unions so established are:

- the Paris Union; officially the International Union for the Protection of Industrial Property;
- the Berne Union, officially the International Union for the Protection of Literary and Artistic Works.

Intellectual property comprises two main branches: industrial property, chiefly inventions, trademarks, industrial designs and appellations of origin; and copyright, mainly of literary, musical, artistic, photographic and audiovisual works. WIPO administers 23 international treaties, including 16 on industrial property and 6 on copyright. WIPO's three governing bodies are: the General Assembly, comprised of WIPO member states which are members of the Paris and/or Berne Union, and which meets every two years; and the 79-member Coordination Committee, which meets every year. WIPO's program and budget are established biennially by its governing bodies. Its 2004-2005 budget is about 639 million Swiss francs. WIPO has some 950 staff members from 90 countries. Headquarters: 34 chemin des Colombettes, PO Box 18, CH-1211, Geneva 20, Switzerland.

United Nations Charter:

*We the Peoples of the United Nations United for a Better World
(Continued)*

CHAPTER X

■ THE ECONOMIC AND SOCIAL COUNCIL ■

COMPOSITION

Article 61

1. The Economic and Social Council shall consist of fifty-four Members of the United Nations elected by the General Assembly.
2. Subject to the provisions of paragraph 3, eighteen members of the Economic and Social Council shall be elected each year for a term of three years. A retiring member shall be eligible for immediate re-election.
3. At the first election after the increase in the membership of the Economic and Social Council from twenty-seven to fifty-four members, in addition to the members elected in place of the nine members whose term of office expires at the end of that year, twenty-seven additional members shall be elected. Of these twenty-seven additional members, the term of office of nine members so elected shall expire at the end of one year, and of nine other members at the end of two years, in accordance with arrangements made by the General Assembly.
4. Each member of the Economic and Social Council shall have one representative.

FUNCTIONS and POWERS

Article 62

1. The Economic and Social Council may make or initiate studies and reports with respect to international economic, social, cultural, educational, health, and related matters and may make recommendations with respect to any such matters to the General Assembly to the Members of the United Nations, and to the specialized agencies concerned.
2. It may make recommendations for the purpose of promoting respect for, and observance of, human rights and fundamental freedoms for all.
3. It may prepare draft conventions for submission to the General Assembly, with respect to matters falling within its competence.
4. It may call, in accordance with the rules prescribed by the United Nations, international conferences on matters falling within its competence.

Article 63

1. The Economic and Social Council may enter into agreements with any of the agencies referred to in Article 57, defining the terms on which the agency concerned shall be brought into relationship with the United Nations. Such agreements shall be subject to approval by the General Assembly.
2. It may co-ordinate the activities of the specialized agencies through consultation with and recommendations to such agencies and through recommendations to the General Assembly and to the Members of the United Nations.

Article 64

1. The Economic and Social Council may take appropriate steps to obtain regular reports from the specialized agencies. It may make arrangements with the Members of the United Nations and with the specialized agencies to obtain reports on the steps taken to give effect to its own recommendations and to recommendations on matters falling within its competence made by the General Assembly.
2. It may communicate its observations on these reports to the General Assembly.

Article 65

The Economic and Social Council may furnish information to the Security Council and shall assist the Security Council upon its request.

Article 66

1. The Economic and Social Council shall perform such functions as fall within its competence in connection with the carrying out of the recommendations of the General Assembly.
2. It may, with the approval of the General Assembly, perform services at the request of Members of the United Nations and at the request of specialized agencies.
3. It shall perform such other functions as are specified elsewhere in the present Charter or as may be assigned to it by the General Assembly.

VOTING

Article 67

1. Each member of the Economic and Social Council shall have one vote.
2. Decisions of the Economic and Social Council shall be made by a majority of the members present and voting.

PROCEDURE

Article 68

The Economic and Social Council shall set up commissions in economic and social fields and for the promotion of human rights, and such other commissions as may be required for the performance of its functions.

Article 69

The Economic and Social Council shall invite any Member of the United Nations to participate, without vote, in its deliberations on any matter of particular concern to that Member.

Article 70

The Economic and Social Council may make arrangements for representatives of the specialized agencies to participate, without vote, in its deliberations and in those of the commissions established by it, and for its representatives to participate in the deliberations of the specialized agencies.

Article 71

The Economic and Social Council may make suitable arrangements for consultation with non-governmental organizations which are concerned with matters within its competence. Such arrangements may be made with international organizations and, where appropriate, with national organizations after consultation with the Member of the United Nations concerned.

Article 72

1. The Economic and Social Council shall adopt its own rules of procedure, including the method of selecting its President.
2. The Economic and Social Council shall meet as required in accordance with its rules, which shall include provision for the convening of meetings on the request of a majority of its members.

To be continued...

Top Two-Articles Accessed in June 2008:

1. Improving Maternal Health through Education;
<http://www.womenshealthsection.com/content/heal/heal014.pdf>
WHEC Publications. Special thanks to UN, WHO, UNICEF and our editorial / physician's board for the priceless contributions
2. Sexual Dysfunction in Postmenopausal Women;
<http://www.womenshealthsection.com/content/gyn/gyn016.php3>
Author: Dr. Phillip M. Sarrel, Emeritus Professor of Obstetrics and Gynecology and Psychiatry, Yale University School of Medicine, New Haven, CT (USA)

News, Invitations, and Letters:

GENERAL ASSEMBLY

Sixty-second session: Informal consultations on gender will be held, as part of the General Assembly consultations on system-wide coherence, on Monday, 16 June 2008, from 10 a.m. to 1 p.m. in the Trusteeship Council Chamber. The consultations will be chaired by the Co-Chairs on system-wide coherence, H.E. Mr. Augustine P. Mahiga, Permanent Representative of the United Republic of Tanzania, and H.E. Mr. Paul Kavanagh, Permanent Representative of Ireland. The Deputy Secretary-General will attend the consultations and introduce the note on the United Nations system support to Member States on gender equality and women's empowerment, which was prepared by the Secretariat. The note was circulated to Member States by the President of the General Assembly, on Monday, 9 June, 2008.

Journal of the United Nations Programme of meetings and agenda official meetings:

<http://www.un.org/Docs/journal/En/lateste.pdf>

Special Thanks:

WHEC expresses gratitude to the Editorial Office, Bulletin of the World Health Organization for its priceless support. It is indeed a pleasure and privilege for Women's Health and Education Center (WHEC) to get involved in health development with World Health Organization. We look forward to undertake the challenging issues in reproductive health.

Beyond the numbers...

Every child comes with the message that God is not yet discouraged of man.
