

WHEC UPDATE

Briefings of worldwide activity of Women's Health and Education Center (WHEC) December 2011: Vol. 6. No. 12

A Grand Collaboration

Happy Holidays from all of us @ Women's Health and Education Center (WHEC)

Our love-hate relationship with money is remarkable. Money - we want more of it, we love it and all that it affords. Yet, it can be root of some of life's most devastating experiences - divorce, bankruptcy, foreclosure and destitution. However, money isn't the problem. Just like guns don't kill people, people with guns kill people; the same misplaced blame is applied to money. Money isn't the problem; your relationship with money and what you do (or don't do) with it is the problem. This month. I want to alter your mindset about this all-important force in our lives. Take this five letter word money and cross it out. Now replace it with value. Stop thinking about money as money, and start understanding it as value. That's all money is: paper that denotes value. How do you get more money? Create more value. Period. That's it. Therein lays the secret to money. Money is just a tool to exchange value. The only way to obtain tons of money is to create tons of value. And tons of value is what we have in store for you in WomensHealthSection.com. While the downloading is free, the information and advice you discover hopefully helps you to further increase your value (thus, your wealth) is, well - precious. Focusing on reader / user growth is the most important thing we can do to get our message across and develop helpful projects and programs in women's and children's health worldwide. Women's Health and Education Center (WHEC) embraces the tremendous diversity of people, religions, and cultures around the world. In support of this belief, WHEC has established academic and cultural focus at iconic institutions to nurture our common interests and potential. By supporting research in women's health, open dialogue and objective analysis, the WHEC lays the groundwork for mutual understanding among nations.

People think of the future as something other people do. But there is something weirder about a society where people do not think about the future. Sure, there is more to life than building financial wealth. Money isn't the most important thing in life, but it is reasonably close to oxygen on the "gotta have it" scale. We have all heard the expression, *Money can't buy happiness*. Or can it? Some of the most successful people in their fields reveal; the best investment a person can make are the ones that don't just add to your bottom line, but makes you a richer and happier person. These are the most important investments and count in real life. We polled a handful of experts, in fields ranging from food to finance, and asked them to talk about ways you can spend your hard earned money to achieve prosperity – not just the cash-in-your-pocket kind that comes from a profitable business, but also the kind of abundance that enriches your life and feeds your soul. And once again when you get right down to it, isn't that the kind that really matters. So spread the wealth – share your research and knowledge with our readers all around the world on WHEC Global Health Line / WHEC Net Work, and make this world a better place to live. Live wealthier, happier and more fulfilled life.

We are determined to build a bridge of communication between east and west, north and south, to achieve a comprehensive tolerance beyond the geographic boundaries. We are the sponsors of tomorrow.

The Digital Dividend

Rita Luthra, MD

# Your Questions, Our Reply

Does the Internet needs governing? How can one use governance to facilitate access to and development of new uses of this medium?

"First, Do No Harm": There is an old expression that was once used to describe the behavior of a governmental regulatory body: "If all you have is a hammer, everything looks like a nail". If we are not careful, we may fall into the trap by trying to develop overly simple definitions for what is really a very complex question. It is fair to ask whether the Internet needs governing. Celestial mechanics deals with the motions of the planets. Their orbits are said to be governed by the laws of physics. A great deal of what the Internet does is governed, in that sense, by the standard protocols that all players in the Internet environment agree to use. These are, practically speaking, the "technical rules of the Internet road". For the most part, the Internet has evolved openly, freely, and without great deal of governmental or other oversight because these rules are developed openly and adopted voluntarily. Standards allow for interoperability, and that feature is a principal reason that the Internet has grown in scale and functionality. The very openness of the Internet design has contributed greatly to its evolution as participants in its use, operation and development have been able to contribute fresh ideas for new applications and functionality.

As this highly flexible communications infrastructure continues to evolve, it is beginning to subsume functions that have long been the subject of considerable regulation and this contributes, in part to the question whether the Internet needs more governing. Perhaps even more important than the functioning of the Internet is the use to which it is put. The Internet is, in some respects, like a piece of paper. The paper does not know what is written on it, and neither does the Internet. But like a piece of paper, the Internet accepts any digital writing and will carry it anywhere the network can reach. The Internet is unaware of the applications to which it is put. In fact this very feature has contributed mightily to its flexibility.

We believe "the Internet is for everyone". But we know we are still far from that goal. There are many places at the Internet table. It is a grand collaboration of many entities in all sectors. I think it is our task to assure that all who may benefit from the use of the Internet will have a seat at the table and an opportunity to contribute to the constructive evolution of this new medium.

## About NGO Association with the UN

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



UN chief spotlights progress on women's and children's health

Visiting health workers in Ethiopia, Secretary-General Ban Ki-moon spotlighted the progress made in improving the health of women and children, while also stressing the need to do more. "We have seen so many women and children dying needlessly from preventable diseases," <u>Mr. Ban said</u>. "Training good health workers, training good midwives can save a lot of women's and also children's lives." <u>In Nigeria</u>, he <u>commended</u> the government for investing in women's and children's health. <u>Watch the video!</u>

At the health post, Mr. Ban met with the staff providing essential services to communities previously living without ready access to such care. He also visited a larger health centre, a few kilometers away, which supports the health post by providing it with supplies and on-the-job training. There he spoke with doctors and nurses about their work, as well as with some patients.

"I hope that the Government will try to expend these posts, clinics and centers and also hospitals," said the Secretary-General, who also spotlighted maternal health when he visited Nigeria earlier this week.

At a major UN development summit in New York last September, participants adopted the Global Strategy for Women's and Children's Health, committing \$40 billion in resources to a global effort to save the lives of 16 million women and children by 2015. The strategy identifies the finance and policy changes needed, along with vital interventions to help improve health and save lives. It is expected to prevent, between 2011 and 2015, the deaths of more than 15 million children under five, as well as 33 million unwanted pregnancies and the deaths of 740,000 women from complications related to pregnancy and childbirth.

### **Collaboration with World Health Organization (WHO)**

WHO Collaborating Centers:

Over 800 institutions, in over 90 countries, are supporting WHO programs. The WHO Collaborating Centers (WHOCCs) are a highly valued mechanism of cooperation in which relevant institutions are designated by WHO to support the implementation and achievement of the Organization's planned strategic objectives at the regional and global levels; enhancing the scientific validity of its global health work; as well as developing and strengthening institutional capacity in countries and regions. A WHO Collaborating Centre is an institution designated by the Director-General to form part of an international collaborative network carrying out activities in support of the Organization's programs at all levels WHO gains access to top centers worldwide and the institutional capacity to support its work and ensure the scientific validity of global health work.

Details: http://www.who.int/collaboratingcentres/cc factsheet 2009.pdf

# Bulletin of the World Health Organization; Complete list of <u>contents</u> for Volume 89, Number 12, December 2011, 853-928

# Collaboration with UN University (UNU)

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

### Cocaine Cities

Exploring the Relationship between Urban Processes and the Drug Trade in South America

The relationship between the cocaine trade and urban land markets in South America has been overlooked by the mainstream economics and urban studies literature. This paper examines two avenues through which the cocaine trade can have a large impact on urban development in producer countries: (i) through an employment multiplier effect similar to that of other legal exports, and (ii) through money laundering using urban real estate. We test our hypotheses using the Bolivian case and find that urban growth patterns are closely related to fluctuations in cocaine production. Further, even though our estimates suggest that the cocaine trade affects urban growth through the two avenues presented in the paper, we find that formal urban employment generated by the cocaine trade has a modest effect on urban growth and most of the effect seems to be explained by money laundering using real estate and other paths.

This paper explored the connection between drug production and land markets in

Bolivia. Even though this link has been observed in several studies and different geographic locations across Latin America since the 1980s, this is the first attempt to explicitly uncover the economic processes that may explain such a link and to measure it quantitatively. The empirical results presented here reveal that Bolivia's construction activity in its main cities is largely influenced by cocaine production. Our estimates show that, between 1997 and 2007, about 50 per cent of the variation in construction fluctuations in Bolivia's main cities is explained by fluctuations in cocaine production alone. These findings provide evidence of the importance of the drug economy for Bolivia's urban economies. Interestingly, however, only a modest part of the effect of the cocaine economy on real estate markets can be explained by the number of formal sector direct and indirect jobs it creates in urban areas. On the contrary, our findings suggest that most of the effect of the drug economy on land markets might be explained by direct investments in real estate from those involved in the business, either for money laundering purposes or because real estate represents a secure investment and a symbol of status as suggested by McDonald's (2005) work in Mexican rural villages or Labaton (1989) in the case of Miami. Another possibility is that our measure of employment is not picking up the effects of employment in the informal sector which can be affected directly by cocaine exports in the form of increased commerce of smuggled goods as suggested by Hylton's (2007) perceptions about Medellin's experience. In any case, it is clear that the drug economy is fundamentally integrated with the legal construction and real estate economy in urban Bolivia, as evidenced by the finding that less than 50 per cent of the variations in fluctuations in urban construction are explained by noncocaine related economic activity.

These findings pose an extremely challenging scenario for both economic development and law enforcement policies for countries like Bolivia. On one hand, drug eradication though law enforcement policies that cut drug exports can potentially cause busts in real estate markets and cause civil unrest. On the other hand, free reign for narco-trafficking activities inflate land prices, making it harder for the poor to access urban spaces and increases violence levels. These are tough choices to make, especially in a fragile political environment like that of Bolivia.

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

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

### **Constitution Of The World Health Organization** Draft network Constitution

(Continued)

Article 6: Conditions of Membership 6.1 All members are required to pay an annual membership fee, due on the first day of the financial year established by the Treasurer.

6.2 The level of the membership fee for Full, Associate and Individual Members will be set by a majority vote of the Assembly until the creation of the Council; after the creation of the Council, the level of membership fees will be set by a majority vote of the Council.

6.3 New membership becomes formal after approval in accordance with Article 5.4 and upon full payment of membership fees.

6.4 Members must comply with the specifications of this constitution and any additional by-laws.

6.5 Full Members have the following rights:

- To have one representative serve in the Assembly
- To have one vote in the Assembly
- To participate, by means of this vote and in accordance with the terms set out elsewhere in the constitution, in decisions about the network's membership, finances and activities.

6.6 The term of membership is indefinite; members may resign or be removed in accordance with the terms of Article 16 below.

#### Article 7: Statutory bodies

7.1 The Network is governed by three statutory bodies, the Assembly of Members ("the Assembly"), the Council of the Assembly ("the Council") and the Bureau of Officers ("the Officers").

7.2 The statutory bodies are composed of representatives of Full Members.

7.3 No representative of a Member may be remunerated by the Network for his or her time spent serving in the Assembly of Members, the Council of the Assembly or the Bureau of Officers.

#### Article 8: Assembly of Members

8.1 The Assembly is composed of one representative of each Full Member.

8.2 The Assembly shall elect a non-executive Leader who will preside over the meeting, approve minutes of the meeting and ensure that the agreements of the Assembly are reported forward to the Council, the Bureau of Officers and the Secretariat.

8.3 The Assembly will meet once a year until such time as the Council is created; after the creation of the Council, the Assembly will meet once every three years.

8.4 A quorum of the Assembly is achieved when at least half of the Full Members is present in the person of its representative or by written proxy.

8.5 A Member may be represented by another Member's representative by providing that representative with a proxy in writing; no representative may vote more than two proxies in addition to his/her own vote.

8.6 Decisions shall be taken by majority vote, unless specified otherwise elsewhere in this constitution.

8.7 The Chairperson of the Network (cf. Article 10) shall attend Assembly meetings but shall vote only if necessary to break a tie.

8.8 Until such time as the Council is created, the Assembly may establish committees to deal with various issues as needed; after the creation of the Council, the power to establish committees is vested in the Council.

8.9 Until such time as the Council is created, the Assembly shall approve the Secretariat's program activity plans and budgets.

8.10 Once the number of Full Members reaches 30, the Council will replace the Assembly as the chief decision-making body and will establish voting rules and meeting procedures for decisions taken by the Assembly from then onwards.

Articles 9 to 19: http://www.who.int/management/DraftResourceNetworkConstitutionENFR.pdf

## **Top Two-Articles Accessed in November 2011**

1. Medical Liability: Tort Reform;

http://www.womenshealthsection.com/content/heal/heal020.php3 WHEC Publications. The Women's Health and Education Center (WHEC) with its partners in health, has developed this curriculum which will enable and encourage medical schools and healthcare providers to include patient safety in their courses. This four part series on Medical Liability is funded by WHEC Initiative for Global Health. If you wish to contribute please contact us. Special thanks to Professor Barbara A. Noah, Professor of Law, Western New England University School of Law, Springfield, MA (USA) for expert opinions, reviewing the series on Medical Liability and helpful suggestions.

 Medical Liability: Coping With Litigation Stress; <u>http://www.womenshealthsection.com/content/heal/heal021.php3</u> WHEC Publications. The Women's Health and Education Center (WHEC) with its partners in health, has developed this curriculum which will enable and encourage medical schools and healthcare providers to include patient safety in their courses. This four part series on Medical Liability is funded by WHEC Initiative for Global Health. If you wish to contribute please contact us.

# From Editor's Desk

### **African Countries MDGs Maps**

The MDG mapper is a tool developed by the United Nations Economic Commission for Africa for dynamic mapping of comparative progress by African countries towards achieving the Millennium Development Goals. Using data provided by the United Nations Statistics Division (UNSD), it enables speedy acquisition of up-to-date information on which countries have made the most progress and which are making the least progress at current rates of progress? For countries making the least progress, the Mapper enables the calculation of the extent to which they are off target.

### View African Countries MDGs Maps

Welcome to the Knowledge Sharing Project (KSP) on Poverty Reduction Strategies and Millennium Development Goals for the exchange policy-oriented analysis and knowledge on gender, health, social integration, population and development to strengthen MDGs processes.

### View African Countries Sub-national MDGs Maps

The MDGs/Poverty Monitoring and Analysis Section is currently in the process of developing subnational level MDGs maps that outline the progresses achieved towards the MDGs in Africa. The maps outline the progresses achieved in all eight goals as per each indicator for every African country where such data is available.

The recent reviews of the progress made towards achieving the health Millennium Development Goals (MDGs) indicate that the progress made by many African countries has been slow when compared to the progress on the MDG on education (ECA, 2007, ECA, 2008, African Union Commission, 2008, Mwabu, 2008). The vast majority of African countries experienced negligible improvements in under-five mortality of 1.8% between 1990 and 2005, which translated to an annual improvement of 0.1% placing most countries significantly off track to achieving this goal (ECA, 2008). Available data also suggest very little improvements in reducing infant and maternal mortality in many African countries. Recent data published by WHO and UNAIDS shows that in most sub-Saharan Africa countries, national HIV prevalence has either stabilized or is showing signs of decline. However in spite of this positive development, AIDS remains the leading cause

of death. The trend in tuberculosis incidence, prevalence and morbidity has been on the rise in Sub-Saharan Africa and malaria is the leading cause of child mortality and of anemia in pregnant women in much of Africa.

Health MDGs Forum

### Words of Wisdom

You can only become truly accomplished at something you love. Don't make money your goal. Instead pursue the things you love doing, and then do them so well that people can't take their eyes off you.

- Maya Angelou

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

