The anniversary of our movement reflects on the progress we have made to improve maternal and child health, worldwide. On April 12th, The Women’s Health and Education Center (WHEC) celebrates its 16th birthday. I hope it gives voice to all women and all children everywhere in the world – forever. A good start. Let us make it a reality. My special thanks to the Working Group of WomensHealthSection.com | WHEC Global Health Line – none of this would have happened, without your efforts and dedicated service. Driven by your energy and our commitment to those we serve – the promise of universal access to the quality care worldwide will be a reality, someday. I hope a bright new day will surely dawn!

We have seen a host of great moments in the history of global health, but we have never seen one quite like ours. We all are living in a moment of unprecedented achievements. Building on these achievements of Millennium Development Goals (MDGs), we have a chance, together, to be part of the greatest global health triumph in human history. On 25 September 2015, leaders of all Member States of the United Nations (193 countries) gathered at the United Nations and declared their commitment to an ambitious new set of 17 Sustainable Development Goals (SDGs). Our initiative and our partnership with the United Nations, #SDGAction1212, is making a difference in this movement.

Available @ https://sustainabledevelopment.un.org/partnership/?p=1212

This new agenda is a promise by leaders to all people everywhere. These 17 ambitious goals adopted by global leaders included eliminating extreme poverty by 2030. We have seen important moments in the history of global health that have prepared us for this one. The vision, which we had launched in 2001, was hard to imagine. With political will and priority, success of our initiative came. Science, technology and partnerships that resulted in real collaboration, gave our initiative “a front row seat”.

In 2010, the indictors for both maternal and child health goals were seriously lagging, and in a clear example of political will and priority, science and technology, partnerships and collaboration, the UN Secretary-General launched the Global Strategy for Women’s and Children’s Health to accelerate progress and the Every Woman Every Child initiative to implement the Global Strategy. One of the keys to this was a focus on evidence-based interventions. It is my pleasure to report we serve 13 – 14 million subscribers in 227 countries and territories, every year. And our popularity is growing fast. The shift in attention to human rights brought about by the International Conference on Population and Development in Cairo was of great importance to sexual and reproduction health. The key component of the Cairo-declaration and guiding principle for our work moving forward includes: States should take all appropriate measures to ensure, on a basis of equality of men and women, universal access to health-care services, including those related to reproductive health care, which includes family planning and sexual health. Reproductive healthcare programs should provide the widest range of services without any form of coercion.

Scaling up innovation in a sustainable way will be key, as will having an agenda for strengthening advocacy and investing in multi-partner platforms for action. People cannot benefit from innovations they do not experience and that is where we are challenged. Our partnership, which has been forged, will provide the real collaborations needed to realize the full potential of our wonderful moment. The women, children, and adolescents we serve will be the beneficiaries of what will be the global health triumph of our life-times. Connect the dots and get the big picture.

A mission of hope.
Great Moments of Our Movement
Rita Luthra, MD
Your Questions, Our Reply

How can we organize and manage future efforts? How do we put these life-saving interventions into place, where it is needed the most?

**Target Maternal and Child Health:** Let us revisit the importance of effective interventions for maternal health. In 1987, with the launch of the *Safe Motherhood Initiative*, we had more political will than we had seen to that point, but we fell far short of achieving our objectives in part because the interventions we targeted did not include some that mattered most. It was not until landmark studies like those from the Initiative for Maternal Mortality Programme Assessment (IMMPACT) and Averting Maternal Death and Disability (AMDD) that it was clear we needed to assure emergency obstetric and newborn care services to achieve MDGs, and that we needed to strengthen health systems for implementing those proven life-saving services.

Literacy is a human right and can be considered a tool of personal empowerment: a means for social and human development. Health literacy and e-Health are valuable tools in empowering women and communities to improve their health status and achieve sustainable development by reaching the indicators of the MDGs. In today's world, the local and global are inextricably linked. Action on one cannot ignore the influence of or impact on the other.

**e-Health is a global phenomenon.** WHEC's strategy on e-Health focuses on strengthening health systems in countries; fostering public-private partnerships in information and communication technologies (ICT) research and development for health; supporting capacity building for e-Health application worldwide; and the development and use of norms and standards. Long-term government commitment, based on a strategic plan, is a prerequisite for the successful implementation of e-Health activities. Health is both a fundamental human right and a sound social investment.

Our health promotion @ WHEC, is guided by the following principles:

1. Health as a fundamental human right and sound social investment;
2. Equity and social justice in health promotion;
3. Social responsibility of the public and private sectors in promoting health;
4. Partnerships, networking and alliance building for health;
5. Individual and community participation as a prerequisite;
6. The individual has a social responsibility over their own health;
7. Empowerment of the individual and communities for health promotion;
8. Development of infrastructure for health promotion;
9. Integration of health promotion activities across sectors;

We hope our efforts help to create groundbreaking initiatives at various levels (partnering with local, national and international stakeholders) in many countries throughout the world. Language, socio-political, economic and cultural barriers and time constraints pose challenges to health care providers. Together we must work to build a healthier world – a world where information and communication technologies help support and enhance health care services and are available for all.

We strongly believe planning, developing and building e-Health Foundations is the way forward.

You are welcome to join our efforts!
In The News

HERstory: A celebration of leading women in the United Nations

A celebration of women’s achievements has been taking place at United Nations Headquarters in New York this month, through photography.

The exhibition: HERstory: A Celebration of Leading Women in the United Nations highlights a host of women’s “firsts” at the UN – such as the first woman to be appointed Deputy Secretary-General, Louise Frechette and the first woman to be appointed Special Representative of the Secretary-General (SRSG) for a peacekeeping operation, Margaret Anstee.

Women in Leadership at UN

“The United Nations shall place no restriction on the eligibility of men and women to participate in any capacity and under conditions of equality in its principal and subsidiary organs.” – Charter of the United Nations, Article 8

Since the 1950s, women have held prominent roles in the Organization.

In 1951, Anna Figueroa Gajardo (Chile) was the first chairwoman of a major UN Committee. Two years later, Vijaya Lakshmi Pandit (India) was the first woman to be elected President of the General Assembly and in 1958, Agda Rössel (Sweden) was the first female permanent representative to Sweden.

Women in human rights

“I’ll ask you, of all the rights you have, which do you think are too many for women? What is too much?” – Bodil Bøgtrup, first chairwoman of the United Nations Commission on the Status of Women, 1946.

Eleanor Roosevelt (United States) was the First Chair of the Human Rights Commission in 1949. At Minerva Bernardino’s insistence, Article II of the Universal Declaration of Human Rights uses language explicitly in defense of the rights of women.

The **Czech Republic**, also known by the short name **Czechia**, is a nation state in Central Europe bordered by Germany to the west, Austria to the south, Slovakia to the east and Poland to the northeast. The Czech Republic covers an area of 78,866 square kilometers (30,450 sq. mi.) with mostly temperate continental climate and oceanic climate. It is a unitary parliamentary republic, has 10.5 million inhabitants and the capital and the largest city is Prague, with over 1.2 million residents. The Czech Republic includes the historical territories of Bohemia, Moravia, and Czech Silesia.

The Czech state was formed in the late 9th century as the Duchy of Bohemia under the Great Moravian Empire. After the fall of the Empire in 907, the center of power transferred from Moravia to Bohemia under the Přmyslid dynasty. In 1004, the duchy was formally recognized as part of the Holy Roman Empire, becoming the Kingdom of Bohemia in 1198 and reaching its greatest territorial extent in the 14th century. Besides Bohemia itself, the king of Bohemia ruled the lands of the Bohemian Crown, he had a vote in the election of the Holy Roman Emperor, and Prague was the imperial seat in periods between the 14th and 17th century. In the Hussite wars of the 15th century driven by the Bohemian Reformation, the kingdom faced economic embargoes and defeated five crusades proclaimed by the leaders of the Roman Catholic Church.

The Czech Republic joined NATO in 1999 and the European Union (EU) in 2004; it is a member of the United Nations, the OECD, the OSCE, and the Council of Europe. It is a developed country with an advanced, high income economy and high living standards. The UNDP ranks the country 14th in inequality-adjusted human development. The Czech Republic also ranks as the 6th most peaceful country, while achieving strong performance in democratic governance. It has the lowest unemployment rate in the EU.

**July 17 is the day which the States Parties to the Rome Statute have designated as the Day of International Criminal Justice**

The Czech Republic remains committed to supporting the international criminal justice and to promoting global peace. In this regard, the Czech Republic wishes to express its support especially to the rights of victims and the prevention of crimes which threaten the rule of law in the world.

The Rome Statute of the International Criminal Court has been adopted on 17 July 1998. Four years later, the International Criminal Court, started to investigate and prosecute individuals for the most serious crimes under international law, i.e. war crimes, crimes against humanity, genocide and in future also the crime of aggression, if states are unable or unwilling to conduct their own prosecutions (principle of complementarity).

The Rome Statute of the ICC has currently 124 State Parties. The Czech Republic became the 110th State Party to the Rome Statute on 1 October 2009. The Czech Republic also acceded to the Agreement on Privileges and Immunities of the ICC, which entered into force for the Czech Republic on 3 June 2011. In 2015, the Czech Republic has completed the ratification process of the Kampala amendments to the Rome Statute.

The Czech Ministry of Foreign Affairs actively supports engagement of the Czech judges in the international criminal tribunals. Ms. Ivana Hrdličková has been re-elected in 2016 as the president of the Special Tribunal for Lebanon, where she has acted as judge since 2013. Mr. Robert Fremr served as ad-litem judge at the International Criminal Tribunal for Rwanda and since 2012 he has been judge at the International Criminal Court. The Czech Republic also regularly supports the Trust Fund for Victims.
Youth delegates of Czech Republic

During the 71st UN General Assembly (2016-2017), the Czech Republic is participating for the first time in the Youth Delegate Programme. Two Czech Youth Delegates are a part of the official delegation of the Czech Republic to the 71st UN General Assembly. They participate in both, formal and informal, meetings and negotiations of the UN General Assembly and have also presented a statement on behalf of the Czech youth at a meeting of the 3rd Committee of the 71st UN General Assembly, which deals with issues of social development and human rights.

Details: http://www.mzv.cz/un.newyork

Collaboration with World Health Organization (WHO)

WHO | Czech Republic

The WHO Country Office, Czech Republic was established in Prague in 1992 in order to assist the Member State in achieving its main public health priorities. The Country Office team, consisting of 2 members, serves as the focal point for WHO activities. The Country Office responds to requests from the host country in order to support policy-making for sustainable health development.

Health information systems in focus in the Czech Republic

How to better analyze and use health information and technology for planning and political decision-making in the health system was the focus of a recent meeting between Dr Claudia Stein, Director of the Division of Information, Evidence, Research and Innovation of the WHO Regional Office for Europe, and representatives of the Czech Republic’s Ministry of Health and Institute of Health Information and Statistics (ÚZIS) on 29–30 November 2016. At the meeting, Dr Stein expressed high regard for the country’s health information system, which reports data at the national and, recently, also at the subnational levels. She also commended the significant step represented by the change in Czech law regarding the governance of health information, as well as the adoption of the Czech National Electronic Healthcare Strategy.

The Czech Republic is well on track to complete all tasks under the Biennial Collaborative Agreement (BCA) between the Ministry of Health and the Regional Office for 2016–2017. In addition, Dr Stein applauded the country for its active participation in the recent Autumn School on Health Information and Evidence for Policy-making, held in Romania in October.

Joint conclusions were adopted pursuant to the meeting. These included the possibility of the Czech Republic joining the Evidence-informed Policy Network Europe and its membership of the European Health Information Initiative, as well as further consideration of the ÚZIS application as a WHO collaborating center for certain selected areas of work. Topics for further cooperation in the context of the upcoming BCA for 2018–2019 were also discussed.

Details: http://www.who.int/countries/cze/en/
Standards of different types of articles

Guidelines for five types of articles which have been adopted by WHEC Global Health Line for publications in WomensHealthSection.com are:

1. CONSORT (Consolidated Standards of Reporting Trials) – standards for reporting randomized trials.
2. PRISMA (Preferred Reporting Items for Systematic Reviews and Meta-Analyses) – guidelines for meta-analyses and systematic reviews of randomized controlled trials.
3. MOOSE (Meta-analysis of Observational Studies in Epidemiology) – guidelines for meta-analyses and systematic reviews of observational studies.
4. STARD (Standards for Reporting of Diagnostic Accuracy) – standards for reporting studies of diagnostic accuracy.
5. STROBE (Strengthening the Reporting of Observational Studies in Epidemiology) – guidelines for the reporting of observational studies.

Investigators who are planning, conducting, or reporting randomized trials, meta-analyses of randomized trials, meta-analyses of observational studies, studies of diagnostic accuracy, or observational studies should be thoroughly familiar with these sets of standards and follow these guidelines in articles submitted for publication in WomensHealthSection.com.

We welcome everyone. Join our efforts to improve maternal and child health, worldwide.

PMNCH Database: http://www.who.int/pmnch/about/members/database/whec/en/

World Health Day 2017:

Depression: Let’s talk

Campaign at a glance

World Health Day, is celebrated on 7 April every year to mark the anniversary of the founding of the World Health Organization, provides us with a unique opportunity to mobilize action around a specific health topic of concern to people all over the world. The theme of our 2017 World Health Day campaign is depression.

Depression affects people of all ages, from all walks of life, in all countries. It causes mental anguish and impacts on people’s ability to carry out even the simplest everyday tasks, with sometimes devastating consequences for relationships with family and friends and the ability to earn a living. At worst, depression can lead to suicide, now the second leading cause of death among 15-29 year olds.

Yet, depression can be prevented and treated. A better understanding of what depression is, and how it can be prevented and treated, will help reduce the stigma associated with the condition, and lead to more people seeking help.
What we are trying to achieve

The overall goal of this one-year campaign, beginning on 10 October 2016, World Mental Health Day, is that more people with depression, in all countries, seek and get help.

More specifically, we are aiming to achieve the following:

- The general public is better informed about depression, its causes and possible consequences, including suicide, and what help is or can be available for prevention and treatment;
- People with depression seek help; and
- Family, friends and colleagues of people living with depression are able to provide support.

Join our efforts. We welcome you to contribute your manuscript for the Section title:

Focus of Mental Health Section; http://www.womenshealthsection.com/content/gynmh/

Collaboration with UN University (UNU)

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

Inequality and Transformation of Social Structures in Transitional Economies

The transition to a market economy in Eastern Europe and the Former Soviet Union (FSU) has been associated with greater inequality and social stratification. Living standards have fallen for the majority of people, unemployment and poverty are high, the distribution of assets and earnings has changed radically, and social benefits have fallen.

The social distance between the 'winners' and 'losers' of the reforms has widened dramatically. This paper prepared within the UNU-WIDER project on 'Income Distribution and Social Structure during the Transition' analyses trends in social stratification and their causes with the aim of drawing social policy conclusions. Social structures have been deeply affected by macroeconomic and social-sector reforms. Privatization shifted assets towards the wealthy while changes in labour markets have led to the rise in earnings inequality. In the pre-transitional socialist societies which were stratified into 'status groups' where social capital rather than economic capital – and social networks rather than market power determined a person's status. With the transition, people's prospects in life are being increasingly determined by their possession of assets, goods and income opportunities.

This study considers emerging social classes and groups – a new elite – the product of rising capitalism, and the new commercial, managerial, and professional middle classes. The large majority of the population, however, consists of blue-collar workers, farmers, and state-sector employees bearing the social costs of the transition. The bottom of the social hierarchy has enlarged due to a considerable number of socially deprived and marginalized people who fell into long-term poverty. The slowly reforming economies of the FSU have particularly high inequality and social polarization. Central Europe's transition countries have shown smaller increases in income inequality.

Many professional workers there, especially the young have successfully entered the market economy. In contrast, an extremely wealthy and powerful economic elite has emerged in Russia and some other FSU countries amidst impoverishment and deprivation of a large part of the population. Social polarization has large economic costs. Thus, a more active social policy, promoting better livelihoods and more investment in human capital, could have large economic returns. But there is also a need for more effective public transfers and income redistribution policies to alleviate and reduce poverty. Social cohesion cannot be ignored.
United Nations Girls’ Education Initiative (UNGEI)

*The Effort to Advance the Global Strategy (Continued)*

**Switzerland increases contribution to the Global Partnership for Education**

“Switzerland is an important partner in the Global Partnership for Education (GPE), and we are delighted about this increased funding,” said Alice Albright, GPE’s Chief Executive Officer. “We look forward to further strengthening our collaboration with the Swiss government.”

At the 2014 GPE replenishment conference, Switzerland had pledged CHF 6.5 million annually for the period 2015-2016. Switzerland joined GPE in 2009 and has since contributed a total of US$43.5 million. It is represented on the GPE Board of Directors and shares a seat with Belgium, Luxembourg, the Netherlands, and Russia.

**Board of Directors**

The GPE Board of Directors is the supreme governing body of the partnership and sets its policies and strategies.

The Board mirrors the wide-ranging and diverse nature of the Global Partnership and includes members from developing country governments and all development partners: donors, civil society organizations, private sector and foundations, and multilateral agencies and regional banks.

The responsibilities of the Board include: reviewing annual objectives of the Partnership, mobilizing resources, monitoring financial resources and funding, advocating for the partnership, and overseeing the secretariat budget and work plan.

Details: [http://www.globalpartnership.org/about-us/secretariat-members](http://www.globalpartnership.org/about-us/secretariat-members)

*To be Continued…….*
Two-Articles of Highest Impact, March 2017

1. Improving Maternal Health Through Education;  
http://www.womenshealthsection.com/content/heal/heal014.pdf  
UN Chronicle Publication and © UN Chronicle. We all @ WHEC thank the Working Group and the  
Physician’s Board for their contributions. A success story.

2. Depression During Pregnancy; http://www.womenshealthsection.com/content/obsmd/obsm016.php3  
WHEC Update. Special thanks to WHO for the contributions. **Funding:** The reviews to improve and  
promote Maternal and Child Mental Health are funded by WHEC Initiative for Global Health. We  
thank our partners in health for their contributions.

From Editor’s Desk

**The Post-2015 Development Agenda: Setting the Stage!**

During the 68th session of the United Nations General Assembly, the President, H.E. Dr. John W. Ashe and  
his team will work to promote greater engagement with Member States and all relevant stakeholders as we  
set the stage for defining the Post-2015 Development Agenda.

In this regard, Member States and other stakeholders will be encouraged to reflect on new and emerging development challenges and their implications for the two major objectives of the Post-2015 Development Agenda – overcoming poverty and insecurity, and ensuring sustainable development. Toward this end, the Office of the President of the General Assembly is committed to promoting dialogue and increasing engagement on the principles of the Millennium Declaration of 2000, with the purpose of reaffirming and re-energizing our commitments through 2015 and beyond.

With a view to promoting a world of increased opportunity for all peoples, a world of equity, freedom, dignity and peace, the Post-2015 Development Agenda will represent a significant evolution in the thinking of the international community. This new Agenda will underscore the interdependence of all the countries that comprise our planetary community, regardless of development levels. The Office of the President of the General Assembly believes that the time has come for the General Assembly – the supreme, deliberative organ of the United Nations to exercise its collective responsibility and begin, as a matter of urgency, the process of conceptualizing one shared vision of a sustainable future for all peoples beyond the year 2015.

During the upcoming 68th Session, many of the outcomes of the Rio+20 Conference are expected to come to fruition. The Office of the President of the General Assembly will be expected to provide the leadership, guidance, and clarity necessary to promote a meaningful dialogue among Member States – one that can lead to the articulation of the new Agenda. The Office of the President of the General Assembly is committed to assisting and supporting Member States on the journey toward a clear set of priorities, fashioned with a sense of direction, purpose and commitment, for further deliberation, as necessary, in the following 69th session of the General Assembly.

In order to encourage the global community to work toward building consensus and elaborating concrete action for the implementation of the Post-2015 Development Agenda, a number of high-level meetings and thematic debates will take place. President John W. Ashe has indicated that he will host the following three high-level events:

1. Contributions of women, the young and civil society to the post-2015 development agenda;
2. Human rights and the rule of law in the post-2015 development agenda; and
3. Contributions of North-South, South-South, triangular cooperation, and ICT for development to the post-2015 development agenda.

In addition to the above high-level events, the President and his team, while working in close collaboration with Member States and other stakeholders, will also convene three thematic debates on:

1. The role of partnerships;
2. Ensuring stable and peaceful societies; and

Each debate will be geared towards further elaboration of the chosen theme, as the Office of the President of the General Assembly seeks to provide “results-oriented outcomes” on these issues.


About the United Nations Foundation (UNF)

The United Nations Foundation (UNF) builds public-private partnerships to address the world’s most pressing problems, and broadens support for the United Nations through advocacy and public outreach.

Through innovative campaigns and initiatives, the Foundation connects people, ideas, and resources to help the UN solve global problems.

The Foundation was created in 1998 as a U.S. public charity by entrepreneur and philanthropist Ted Turner and now is supported by philanthropic, corporate, government, and individual donors.

Learn more at: www.unfoundation.org

The UN Foundation connects people, ideas, and resources with the United Nations by building expert coalitions, developing large-scale partnerships, and carrying out issue-based grassroots campaigns that make it easy for people to help the UN create a better world.

United Nations Foundation | 1750 Pennsylvania Ave - Suite 300 - NW, Washington, D.C., 20006 | Tel: 202.887.9040


The collaboration of THE WOMEN’S HEALTH AND EDUCATION CENTER (WHEC) with UNF is stated below:

http://www.everywomaneverychild.org/commitment/womens-health-and-education-center/

We all @ WHEC invite you to join our global effort, global impact, global platform and YOUTH ZONE, to achieve: Education for All & Health for All.

We welcome everyone! Together we make a difference.

We look forward to serving you
Words of Wisdom

I adore my dear mother,
I adore my dear father too;
No one loves me as much
As they know how to love me.

They tenderly teach me
To be happy and nice.
My father does his best for me;
My mother prays always for me.

- Amado Ruiz de Nervo (27 August 1870 - 24 May 1919);
  Mexican poet, journalist and educator.
  Extract from *Family Love*

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

http://www.womenshealthsection.com/