



WHEC Update

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

August 2021; Vol. 16. No. 08

Leadership Development Series

“A handful of patience is worth more than a bushel of brains.” *Dutch proverb.* We can choose how to respond to a given event, rather than being hijacked by our emotions. In this way, patience is like a keel on a boat – it allows us to keep our stability in the stormiest of seas while continuing to move in the direction we desire. Patience also gives us the ability to put up graciously with obstacles in our path, to respond to life's challenges with courage, strength, and optimism. A business failure, disappointment in love, a serious disability, money woes – these are just a few of the trials that we might be faced with over the course of a lifetime. Being patient in these circumstances doesn't mean that we have to like the curve balls that get hurled at us. But we recognize that they come with being alive and so we don't add the additional suffering of bitterness, revenge, or hopelessness to the mix. Rather than whining or complaining, we roll up our sleeves and tackle the task at hand.

Patience in the form of acceptance also allows us to have empathy for others, because we recognize that as human beings, we all have limitations. It gives us the emotional resilience to respond with kindness, to feel compassion. Through the acceptance of others as they are, and of life as it is showing up right now, we prove our true strength and beauty as human beings. It is easy to be accepting when all is well. But when we are patient when things aren't going the way we want, we truly shine as heroes.

Take a moment to reflect on a time when you employed the power of patience. What were the circumstances? Did you calm an otherwise volatile situation? Treat someone you care about better than if you had blown your stack? How did it feel? What helped you to act patiently? What happened as a result?

Now think about the time when someone was patient with you. How did he or she treat you? How did you feel? What were you able to do or learn as a consequence?

It is because patience is so valuable that all religions offer us models to follow. Buddhists are taught that practicing the patience of the Buddha is one of the ways to reach enlightenment, while patience is one of the 99 divine attributes of God in the Koran. In the Old Testament, Job is the epitome of patience, which Christians are inspired by the life and sacrifice of Jesus Christ.

Impatience is a habit; so is patience. To change a habit, we need strong motivation, which comes from knowing the rewards that comes from the new behavior. With patience, we are in the driver's seat of our own lives. Patience plants us firmly in the ground of our being, content with who and where we are. Patience makes us happier, it leads us to success, and it gives us greater peace of mind every day. It is my hope and prayer that our *Leadership Series* help you grow the patience that is in your heart, and that your efforts and mine will ripple out into the world to create a tidal wave. For if we as a community of human souls harness the power of patience, there is no problem we cannot solve – eventually.

Patience helps us make better decisions. Patience helps us make better decisions because it keeps us out of scary stories that cloud our judgment. As Mark Twain once said, “The worst troubles I've had in my life are the ones that never happened.” We all have spent a great deal of time fretting over things that never came to pass, because we were not able to wait calmly to see how things turned out. So it's been a great relief to me to find that the more I develop my patience, the calmer I feel. And the calmer I feel, the better I am able to gather the data before spiraling into unnecessary worry and panic.

The Power of Acceptance (That's OK)

Rita Luthra, MD



Your Questions, Our Reply

Does practicing patience brings the ability to make better decisions, particularly in crisis? What is the power of patience and hope?

Patience is the art of hoping: The life of Nelson Mandela is one of the greatest examples of the power of patience. After 10 thousand days, at the age of 71, Nelson Mandela was finally freed and went on to guide South Africa to true democracy, without the wholesale slaughter of whites by blacks and minority white population feared. With calm persistence, he helped bring about a miracle not only for himself, but also for the 43 million other blacks and who inhabit South Africa. In his presidential inaugural speech, he praised the “ordinary, humble people of this country. You have shown such a calm, patient determination to reclaim this country as your own.”

Under extreme duress, Nelson Mandela was able to tap into something profound in the human spirit: our capacity to hope, which allows us to work patiently toward a goal that we may never see. “if we hope for what we don’t see, we wait for it with patience,” says Romans 8:25. With hope, we have the patience to work for what we want in our lives – to study for the test, write the book, make the quilt, plant the garden – because we trust in the possibility of a good outcome. Without hope, we would try nothing, do nothing, because we wouldn’t have the emotional and spiritual wherewithal (ability) to apply the necessary elbow-grease and wait upon the results.

Scientific research has confirmed the connection between hope and patience. Students who score high on a hope index do better as college freshmen than their low-hope peers, though they have the same range of intellectual abilities. The reason has to do with persistence – hope gave them the willingness to keep on trying. In another study, high- and low-hope students were given a hypothetical situation: you were aiming for a B in this course. On your first test, which represents 30% of your final grade, you got a D. Now what do you do? The high-hope students came up with all kinds of ideas to raise their grade; low-hope students gave up.

Author Iyanla Vanzant encourages us to remember “that a delay is not a denial.” What is your heart’s desire? Is it worth hoping for? With patience, we nurture hope in the darkness of our waiting, so that one day our heart’s desire may burst forth, fully realized.

Patience helps us live longer and more stress-free. Research demonstrates that angry folks are one and a half times more likely to get cancer than others and have a four to five times higher risk of heart disease. The biological effects of anger and stress include increased heart rate, surging blood pressure, and more stomach acid, whether you suppress or express your feelings.

Given our current lifestyles, we could be experiencing fight-or flight almost all the time – in traffic, under a tight work deadline, in spats with loved ones – which puts a great deal of strain on our bodies. That is why cultivating patience is one of the best things we can do for our health. The more we can easily roll with the punches of life and tolerate the quirks of other human beings, the less stress we will experience. And if that means one less day a week at the gym, won’t that be a gift!

Patience helps us waste less time, energy and money. Impatience can hurt us physically too. It takes awareness to buck the fastness trend. Remember the old adage “Haste makes waste.” It is as true now as the day it was coined. Given the hurry-up way we all live, perhaps we would do well to change that old adage into one I heard recently from a wise woman, “Make haste – slowly.”

Patience gets us more of what we want.



HIGH-LEVEL POLITICAL FORUM ON SUSTAINABLE DEVELOPMENT

July 6 – 15, 2021
July 13 – 16, 2021

The programme of the HLPF 2021 focused on the theme of the forum “Sustainable and resilient recovery from the COVID-19 pandemic that promotes the economic, social and environmental dimensions of sustainable development: building an inclusive and effective path for the achievement of the 2030 Agenda in the context of the decade of action and delivery for sustainable development”. It included the thematic reviews of Sustainable Development Goals 1, 2, 3, 8, 10, 12, 13, 16 and 17, and the voluntary national reviews (VNRs) to be conducted by Member States.

Program: <https://sustainabledevelopment.un.org/hlpf/2021#programme>

The HLPF on sustainable development is the core United Nations platform for follow-up and review of the 2030 Agenda for Sustainable Development and its 17 Sustainable Development Goals.

Ministers and other participants explored various aspects of the response to the COVID-19 that puts us on track to realize the 2030 Agenda. They discussed the kind of policies and international cooperation that can control the pandemic and its impacts.

You will be pleased to read the Written Statement of mine got published by 2021 ECOSOC High-Level Segment; Agenda Item # 5; which was held last month at UN, New York

NGO list is in alphabetical order; WHEC is # 375 and its statements on 540 and 541.

UN Document: E/2021/NGO/XX

Title: COVID-19: One War That Must Be Fought Together

<http://www.womenshealthsection.com/content/documents/2021-WHEC-Statement-ECOSOC-Resolution-1996-31-COVID-19.pdf>

The HLPF will adopt a Ministerial Declaration as the outcome of its session. COVID-19 is deepening divides in education and access to other services, as access to digital technologies become a prerequisite for economic and social inclusion with the potential to set back an entire generation of children.

Ensuring good health and well-being, reducing inequality, and promoting peaceful, just and inclusive societies are interconnected processes where strong synergies can be leveraged and trade-offs mitigated across the 2030 Agenda. The health challenges imposed by the pandemic can directly affect inequality, crime and trust in institutions. Existing inequalities, social and economic exclusion, and fragile health systems, including a lack of universal health coverage and adequate social protection floors in many parts of the world worsened the impacts of the global pandemic.

These are the opportunities to be realized (and pitfalls to be avoided) in the immediate and medium terms towards international cooperation support.

Join the efforts!



United Nations at a Glance

Libya, officially the **State of Libya**



Member State of the United Nations since 14 December 1955

Libya is a country in the Maghreb region in North Africa bordered by the Mediterranean Sea to the north, Egypt to the east, Sudan to the southeast, Chad to the south, Niger to the southwest, Algeria to the west and Tunisia to the northwest. The sovereign state is made of three historical regions: Tripolitania, Fezzan and Cyrenaica. With an areas of almost 1.8 million square kilometers (700,000 sq. mi), Libya is the fourth largest country in Africa and is the 16th largest country in the world. Capital: Tripoli; Official language: Arabic; Religion: Islam; Government: Unitary provisional government; Population (2018): 6,871,287; Currency: Libyan dinar. Libya has the 10th largest proven oil reserves of any country in the world.

Libya is a member of United Nations (since 1955), the Non-Aligned Movement, the Arab League, OIC and OPEC. The country's official religion is Islam, with 96.6% of the Libyan population being Sunni Muslim.



Libya and UN

After the General Assembly adopted Resolution 66/1, the Permanent Mission of Libya to the United Nations formally notified the United Nations of the announcement of the National Transitional Council on August 3, 2011, to change the official name of the Libyan Arab Jamahiriya, to "Libya", as well as to change the Libyan national flag.

On 17 March 2011, the UN Security Council passed Resolution 1973, with a 10-0 vote and five abstentions including Russia, China, India, Brazil and Germany.

The resolution sanctions the establishment of a no-fly zone and use of "all means necessary" to protect civilians within Libya (no-fly zone over Libya shown in the map).

Libya has emerged as a major transit point for people trying to reach Europe. Libya is included in the European Union's European Neighborhood Policy (ENP) which aims at bringing EU and its neighbors closer. Libyan authorities rejected European Union's plans aimed at stopping migration from Libya. In 2017, Libya signed UN treaty on the Prohibition of Nuclear Weapons.

Libya continues to be a major mixed-migration route in the region. Refugees and asylum-seekers comprise part of the mixed movements, the management of which is made more complex by the absence of a national asylum system. At the end of August 2012, the total number of refugees and asylum-seekers registered with UNHCR stood at approximately 10,000. Libyan authorities on the matter, no formal agreement has been reached, and UNHCR's status in the country remains unsettled. Meanwhile, the Office seeks to expand the protection space for people of concern, including by helping the Libyan authorities to develop protection-sensitive migration policies.

Pending the signing of a country agreement with the authorities to formalize UNHCR's presence and activities in Libya, the comprehensive requirements for the operation have been halved from USD 314 million in 2012 to USD 16.6 million in 2013. Near 70% of refugee children and other children of concern aged 5-13 would not have access to primary education.

<http://www.libyanmission-un.org/>

Collaboration with World Health Organization (WHO)

WHO | Libya



The WHO Representative's Office in Libya supports the Government and health authorities at central and local level in strengthening health services, addressing public health issues and supporting and promoting emergency response. WHO experts provide appropriate technical support upon the request or acceptance of national authorities.

Libya is designated as a grade 2 emergency country, WHO is coordinating and working closely with Libyan counterparts to ensure alignment with national health priorities and response efforts planned for Libya. Health system reform, institutional capacity-building, and health workforce development remain priorities for a number of years in Libya. Other priorities include mental health and psychosocial support, post-conflict rehabilitation and trauma care, prevention and control of communicable and management of non-communicable diseases.

WHO coordinates efforts with essential stakeholders and partners to assess the health system and to initiate the process of health system strengthening in close consultation with the Ministry of Health and the European Union.

Key Humanitarian Priority Needs

1. Protection. Protection challenges for Libyans and foreign nationals in Libya are a grave concern, primarily driven by exposure, vulnerability and inability to cope with conflict and violence, human violations and rights abuses, contamination from explosive hazards in urban centers, breakdown of rule of law, and major challenges related to impediments to access critical services and essential goods and commodities.
2. Access to crucial services. Public healthcare services, schools and WASH facilities in Libya have been heavily impacted by the crisis due to ongoing hostilities, insecurity, and governance failures.
3. Access to basic household goods and commodities. The crisis in Libya has resulted in major economic challenges for both Libyans and non-Libyans in Libya, to access basic households goods and commodities is a major problem in Libya.

Currently, Libya is divided between two governing authorities: the UN-backed unity government, the Government of National Accord (GNA) led by Prime Minister al-Serraj, announced in January 2016 following the Libyan Political Agreement (LPA), and the unrecognized "interim government" based in eastern Libya, backed by the House of Representatives, the last elected parliament. Important steps were taken in July 2017, when rivals Prime Minister al-Serraj and General Haftar agreed to a ceasefire and to hold elections in 2018.

The country health system is fragile and fragmented, while the technical and operational capacities of the health workforce has been affected by the protracted conflict. Internally Displaced Persons (IDPs), returnees, host communities, and refugees and migrants are among the most affected people in need of healthcare support in Libya. Overall, there are an estimated 554,000 people in need of healthcare assistance including both primary and secondary healthcare services. Of those, an estimated 54% refugees and migrants. Approximately, 31% of those identified as in need of healthcare assistance are women and girls. People with special needs, people with mental health issues, and people chronic illness are in critical need of healthcare support.

[WHO EMRO | Libya | Countries](http://www.emro.who.int/countries/lby/index.html) <http://www.emro.who.int/countries/lby/index.html>



United Nations Educational, Scientific and Cultural Organization *Collaboration with UNESCO*

Libya became UNESCO Member State on 27 June 1953



UNESCO launches the project supporting youth employment in the Mediterranean (YEM) for Libya.

Libya is one of eight beneficiary countries of the project YEM, and the UNESCO Regional Bureau for Sciences in the Arab States – Cairo is coordinating and implementing the project activities in the region in close collaboration with Headquarters. It is the cluster office for Education in Egypt, Sudan and Libya.

The inception meeting brought together a diverse group of key Libyan stakeholders from the relevant ministries (Ministry of Education and Ministry of Labour) and private sector representatives who shared the views of a variety of associations and chambers. The inception meeting also included a number of key international development partners who are active in the field of technical and vocational education and training (TVET) in Libya.

YEM is a three-year project funded by the European Union and was launched by UNESCO in 2018. The project aims to increase youth employment and entrepreneurship in the South Mediterranean region through the support to national authorities, the private sector, TVET providers and youth organizations in the design, implementation and evaluation of technical and vocational education and training policies strategies and programmes. The project seeks to achieve this through a consolidated regional and sub-regional approach, by establishing a regional platform for assessment and anticipation of skills needs.

- Learn about the YEM Project; <https://en.unesco.org/themes/skills-work-and-life/yem>
- Visit website for UNESCO Regional Bureau for Sciences in the Arab States – Cairo; <https://en.unesco.org/fieldoffice/cairo>
- Learn how UNESCO promotes skills for work and life; <https://en.unesco.org/themes/skills-work-and-life>

Global dialogue on TVET



UNESCO encourages and informs global dialogue on TVET through the UNESCO-UNEVOC International Centre which is developing cutting-edge global resources and facilitating TVET activities worldwide for its global network.

It established that TVET is a top priority in building greener societies and tackling global unemployment, and as such should be more responsive to 21st century needs.

Details: <https://en.unesco.org/countries/libya>

Bulletin Board

Healthcare Policies and Women's Health

Health across the life span: A Vision for all

The 21st century offers a bright vision of better health for all. It holds the prospect not merely of longer life, but superior quality of life, with less disability and disease. As the new millennium unfolds, the global population has never had a healthier outlook. The desire for a healthier and better world in which to live our lives and raise our children is common to all people and all generations. This means putting health high on the agenda of all countries, rich and poor, and keeping it there. It is time to realize that health is a global issue; it should be considered as an essential component of the continuing globalization process that is reshaping our world; it should be included in the growing interaction between countries that currently exists in terms of world trade, services, foreign investment and capital markets. Investing in people's health and their environment is a prerequisite for sustainable development.

Optimal utilization of healthcare resources is a challenge, which faces rich and poor countries alike. Discussions, implications, learning lessons and the articles in this section are of multinational importance. We welcome and invite the point of view; and the articles on National Health Care Policies & Women's Health for the publication. The challenge is for society to be willing to meet these needs and for governments to formulate innovative policies and programs for action to make our human settlements safe and livable. Community participation as a part of action is needed to reinvigorate the strategy for health for all. Technological progress can improve prevention, diagnosis and treatment, but cannot substitute the human resources.

With the increasing integration of the world economy, issues of research and development in health sector has assumed a global dimension. The Women's Health and Education Center (WHEC) focuses on three key areas:

1. Education for the health of girls and women;
2. Violence against women; and
3. Maternal morbidity and mortality.

The connection between education, health and earning capacity is better understood. As women live longer than men, the quality of their longer life becomes of central importance. Primary prevention strategies will be most effective when initiated as early as possible. The health of all peoples is considered to be fundamental to the attainment of peace and security of the world. We can pass no greater gift to the next generation than a healthier future. That is our vision. Together we can make a difference – join us to make it a reality.

Women's Health and Education Center (WHEC)

Submit a manuscript for this section:

<http://www.womenshealthsection.com/content/heal/articles.php3?s=0>



Collaboration with UN University (UNU)

UNU-WIDER (World Institute for Development Economics Research)

Expert Series on Health Economics

The Economics of Peace

How to rebuild and reconcile countries torn by war has been a dominant theme in the global debate for half a century or more. The number of conflicts in the world is going down but the need for better policy has not decreased in any way if we look at what is happening in places like Afghanistan, DR Congo, **Libya** or Syria.

This debate has mainly involved social scientists and policy makers. Economic theory came late to the academic debate in the 1990s but has gained strength in recent years. Author defines the theoretical concept as an interim phase in the transition from policy making framed by economics of war and economics of development. Further, she also provides policy recommendations based on experiences in an African country, Liberia that reached peace in 2003 after fourteen years of war.

The record of countries coming out of war is dismal: around half of them fall back into crises and there is little time for long-term policymaking. In the case of Liberia, the risk of a new conflict arising is great since the long-term growth strategy adopted by the government is not addressing urgent problems such as lack of jobs, public education, and the provision of basic services. The security situation is stable, but fragile.

The overriding objective of the economics of peace is to avoid this and therefore policymaking needs to be pragmatic and ad hoc, del Castillo notes. Many principles that should be considered during more normal times need to be set aside. This means that donors waiting for the right conditions to appear before disbursing grants need to think over their priorities once more.

Here Graciana del Castillo proposes policies similar to one she has endorsed for Afghanistan and Haiti; establishing reconstruction zones (RZs) that could jump-start the economies of conflict- and disaster-affected countries. These would be attempts to, in a limited format that is possible to manage with the help of foreign aid, ensure that there is production both for local consumption as well as for exports.

The economics of peace is certainly bringing important arguments to the debate on development and fragile states. Governance failure and conflict are perceived to be the two most important reasons for countries not reaching the Millennium Development Goals, at least according to the participants in the ReCom jobs results meeting on 8 October 2012 in Copenhagen. The audience was asked what the biggest obstacles are, and 75% answered 'governance failure' while 25% voted for 'conflict.'

WIDER Angle Blog by Carl-Gustav Lindén

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



United Nations Girls' Education Initiative (UNGEI)

The Effort to Advance the Global Strategy (continued)

Children cannot afford another year of school disruption.



As we enter the second year of the COVID-19 pandemic, and as cases continue to soar around the world, no effort should be spared to keep schools open or prioritize them in reopening plans.

Despite overwhelming evidence of the impact of school closures on children, and despite increasing evidence that schools are not drivers of the pandemic, too many countries have opted to keep schools closed, some for nearly a year.

The cost of closing schools – which at the peak of pandemic lockdowns affected 90% of students worldwide and left more than a third of school children with no access to remote education – has been devastating. The number of out-of-school children is set to increase by 24 million, to a level we have not seen in years and have fought so hard to overcome. Children's ability to read, write and do basic math has suffered, and the skills they need to thrive in the 21st century economy have diminished. Their health, development, safety and well-being are at risk. The most vulnerable among them will bear the heaviest brunt.

Without school meals, children are left hungry, and their nutrition is worsening. Without daily interactions with their peers and a reduction in mobility, they are losing physical fitness and showing signs of mental distress. Without the safety net that school often provides, they are more vulnerable to abuse, child marriage and child labor.

That's why closing schools must be a measure of last resort, after all other options have been considered. Assessing the risk of transmission at the local level should be a key determinant in decisions on school operations. Nationwide school closures must be avoided whenever possible. Where there are high levels of community transmission, where health systems are under extreme pressure and where closing schools is deemed inevitable, safeguarding measures must be put in place. This includes ensuring that children who are at risk of violence in their homes, who are reliant upon school meals and whose parents are essential workers are able to continue their education in their classrooms.

In case of lockdowns, schools must be among the first to reopen once authorities start lifting restrictions. Catch-up classes should be prioritized to ensure that children who have been unable to learn remotely are not left behind. If children are faced with another year of school closures, the effects will be felt for generations to come.

Education: From Disruption to recovery

UNESCO is supporting countries in their efforts to mitigate the immediate impact of school closures, particularly for more vulnerable and disadvantaged communities, and to facilitate the continuity of education for all through remote learning.

11 million. That is the number of girls who might not return to school this year due to COVID-19's unprecedented education disruption. This alarming number not only threatens decades of progress made towards gender equality, but also puts girls around the world at risk of adolescent pregnancy, early and forced marriage, and violence. For many girls, school is more than just a key to a better future. It's a lifeline.

Girl's education is our future.

To be continued....

Two Articles of Highest Impact, July 2021

Editor's Choice – Journal Club

Fully open-access with no article-processing charges

Our friendship has no boundaries. We welcome your contributions.

1. Homelessness, Health and Human Services;
<http://www.womenshealthsection.com/content/heal/heal027.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.
2. Healthy Ageing: A Call for Global Action;
<http://www.womenshealthsection.com/content/heal/heal026.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

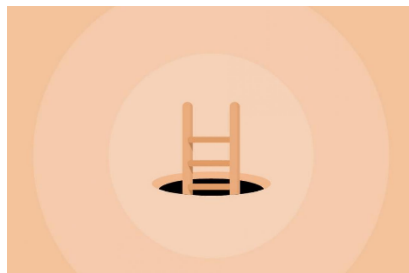


From Editor's Desk

WHEC Projects under Development

Emerging Stronger and Better

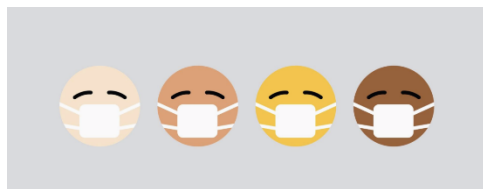
Sixteen months, sixteen lessons from the pandemic: Facts save lives; Be Fast; Be Global; Everything is connected; We are not all treated equally; That needs to change; Progress can be precarious; Biodiversity is keeping us alive; Women's leadership is needed more than ever; Many hands make light work – even if some are not human; Migrants are the future; More work we know; More effectively we can act; The SDGs are more vital than ever; A crisis is also an opportunity; We are in this together.



COVID-19 meant human development took a pummeling for the first time since we began measuring it. We need extra action and commitment to protect hard-won gains of the past 30 years, particularly in economic opportunities, health and education. The Women's Health and Education Center (WHEC) in collaboration with UNDP (United Nations Development Program) will continue its vital stabilization work in countries in conflict and crisis, where the pandemic has worsened already dire situation.

COVID-19 recovery needs a feminist lens to get to a gender-equal world. More attention must be paid to the role women bring to crisis recovery and renewal, and the benefits that will flow from removing the structural inequalities they face in the labor market and easing the massively disproportionate role they play as unpaid caregivers and housekeepers.

The virus has highlighted the vital role that migration plays in the health of societies, a lesson that we need to truly learn if we are to develop just and equitable societies in the face of climate change and global instability. Migrants not only labored on the front lines of the coronavirus response as health workers and first responders, but they also played an important role in developing the vaccine that is saving untold lives.



As countries were dealing with incoming waves of the pandemic, recession and depleted financial resources, WHEC Update – open access and multi-sourced COVID-19 Data Futures Platform allowed users to see what interventions would cost and evaluate their impact. Gathering data from the UN, as well as public and private sources, WHEC is enabling real-time

country-specific information on COVID-recovery, social services and progress. With the vaccine roll-out, there is some light at the end of the tunnel.

COVAX – the global vaccine equity mechanism – has started delivery around the world, including to some of the lowest income countries. Unfortunately, many low-income countries have not yet received a single dose, while wealthier-countries are on track to vaccinating their entire population. The global vaccination campaign represents the greatest moral test of our times. It is also essential to restart the global economy – and help the world move from locking down societies to locking down the virus.

COVID-19 vaccines must be seen as global public good. The world needs to unite to produce and distribute sufficient vaccines for all, which means at least doubling manufacturing capacity around the world. Only together can we end this pandemic and recover.

That effort must start now.

Only together can we revive our economies.

And then, together, we can all get back to the things we love.



The Integrated Sustainable Development Goals are the plans we need to build a sustainable future. Achieving the Sustainable Development Goals will reduce poverty and inequality, while driving sustainable economic growth. They are inter-connected and nature dependent. We must restrict the expansion of land for agriculture, and reduce unsustainable trade, production and consumption to protect our future. WHEC is committed to working with countries as they take this opportunity to create better social protection, improve digital connectivity and reach, delivery governance that works for everybody, and transitions away from fossil fuels towards a green energy future.

A crisis is also an opportunity

COVID-19 has revealed the high cost of our dysfunctional relationship with nature. It has shown that everything about how we live and do business must change. But by showing us what 'business as usual' really costs, it has also given us a gift. We have learned the true value of nature. We have the capabilities to prevent future pandemics, but we are not using them to their fullest.

WHEC has a renewed impetus to create just social and economic change that protects the earth, the people and all life on it.

Dumped Used Cars on Developing Nations, Driving Up Pollution



Used vehicles exported from richer countries are contributing to increased air pollution in developing nations and hindering efforts to mitigate the effects of climate change, according to a report published by the UN Environment Program (UNEP).

The study – the first-ever of its kind – found that some 14 million used cars, van and minibuses were exported worldwide from Europe, the United States

and Japan between 2015 and 2018. Around 80%, went to low- and middle-income countries, with more than half going to Africa.

Cleaning up the global vehicle fleet is a priority to meet global and local air quality and climate targets. Over the years, developed countries have increasingly exported their used vehicles to developing countries; because this largely happen unregulated, this has become the export of polluting vehicles.

Globally, the transport sector is responsible for nearly a quarter of all energy-related greenhouse gas emissions.

Vehicle emissions are a significant source of the fine particulate matter and nitrogen oxides that are major causes of urban air pollution.

The report is based on an in-depth analysis of some 146 countries. The authors found that two-thirds have “weak” or “very weak” policies to regulate the import of vehicles past their prime. Poor quality second-hand autos also lead to more road accidents.

Developed countries must stop exporting vehicles that fail environment and safety inspections and are no longer considered road-worthy in their own countries, while importing countries should introduce stronger quality standards.

The road ahead: Used Vehicles and the Environment – A Global Overview of Used Light Duty Vehicles: Flow, Scale and Regulation calls for action by both sides to adopt harmonized minimum quality standards. UNEP, with the support of the UN Road Safety Trust Fund, is part of an initiative towards this goal.

The focus initially will be on Africa, where several countries already have implemented minimum quality standards, including Morocco, Algeria, Côte d'Ivoire, Ghana and Mauritius. More have expressed interest in joining.

Details: <https://www.unep.org/resources/report/global-trade-used-vehicles-report>

Art & Science

Art that touches our soul

American Royalties

Caroline Schermerhorn Astor (September 21, 1830 – October 30, 1908)



Also known as Mrs. William Astor was a prominent American socialite of the second half of the 19th century. Born into a wealthy family in New York City's Dutch aristocracy, she married William Backhouse Astor Jr. in 1853.

The Astor family has made a fortune through fur trading and real estate. Mrs. Astor became a leading member of the exclusive New York aristocratic society of inherited wealth; by the end of the 19th century she was known as *the* Mrs. Astor.

Adjacent Astor family that she had occupied at different times on Fifth Avenue became the first Waldorf – Astoria hotel, and later the site of the Empire State Building. The Astors also maintained a grand “summer cottage” in Newport, Rhode Island, called Beechwood, which had a ballroom large enough to fit “The 400” – the most fashionable socialites of the day.

Painted in Paris, this painting was placed prominently in Mrs. Astor's house. She would stand in front of it when receiving guests for reception.

Painting by Carolus-Duran, in 1890; Now held by: Metropolitan Museum of Art.

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

<http://www.WomensHealthSection.com>

