



WHEC Update

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

May 2023; Vol. 18. No. 05

Sustainable Development

One Health is an integrated, unifying approach that aims to sustainably balance and optimize the health of people, animals and ecosystems. It recognizes the health of humans, domestic and wild animals, plants, and wider environment (ecosystems) are closely linked and inter-dependent. The Women's Health and Education Center (WHEC) promotes a One Health approach as part of agrifood system transformation for the health of people, animals, plants and environment. This involves a spectrum of actors and work on sustainable agriculture, animal, plant and forest, and aquaculture health, food safety, antimicrobial resistance (AMR), food security, nutrition and livelihoods. Ensuring a One Health approach is essential for progress to anticipate, prevent, detect and control diseases that spread between animals and humans, tackle AMR, ensure food safety, prevent enforcement-related human and health threats, as well as combating many other challenges. A One Health approach is also critical for achieving the Sustainable Development Goals (SDGs).

Our Role: WHEC works with partners and UN System, to promote health systematically, and focuses on eliminating hunger, promoting food security, food safety, and healthy diets, preventing and controlling transboundary diseases, zoonoses, and AMR, to protect the livelihoods of farmers from the impacts of plant and animal diseases, and to increase the sustainability and resilience of agrifood systems, with One Health benefits.

Registered Water Action Agenda (WAA); #SDGAction49770; and #SDGAction5061

Title: [Water & Sanitation: Essential for Maternal, Newborn and Child Health](#)

Title: [Water, Sanitation and Hygiene \(WASH\) Implementation for Schools and Healthcare Facilities](#)

WHEC supports its partners and Member States to build and implement effective collaborative One Health Strategies and capacities, simultaneously addressing the health of people, animals, plants and the environment. Its approach is used to design and implement programs, biosecurity initiatives, enabling policies, and where relevant, regulatory frameworks to ensure health security from communities to national and international level. Good One Health planning, communication, collaboration and response efforts occur when government officials, researchers and workers across sectors at the local, national, regional and global levels join forces.

Facts: 60% of all human infectious diseases are zoonotic in origin and some 75% jump species; High-impact diseases affect crucial livestock-derived foods, which contribute 33% of protein and 17% of calorie intake of diets, high-impacts diseases affect the availability and quality of terrestrial animal source foods; A One Health approach can reduce potential threats at the human-animal-environment interface, while protecting biodiversity; UN Members support One Health approach – many have established multisectoral working groups on antimicrobial resistance; supporting good agricultural practices is essential to prevent, mitigate and manage plant diseases, ensuring that harvest can feed all people; Good practices from farm to plate represent a One Health approach to food safety; and In a high-impact scenario, AMR will shave 3.8% off global annual GDP by 2050.

With an estimated 600 million cases of foodborne illnesses annually, unsafe food is a threat to human health and economies globally. Therefore ensuring food safety is a public health priority and an essential step to achieving food security. Share you projects and programs on WHEC Global Health Line (WGHL) Create an account.

Water & Sanitation – Essential to Improve Maternal and Child Health

Rita Luthra, MD



Your Questions, Our Reply

What is food safety? Why is food safety important? How does food safety help to achieve the Sustainable Development Goals (SDGs)?

Science in Food Safety: Food safety is a science-based discipline, process or action that prevents food from containing substances that could harm a person's health. Food safety aims to have food that is safe to eat. Food is the third most basic human need, after air and water. Only when food is safe can it contribute to our food security and health. When food is not safe, people cannot thrive, hunger and poverty cannot be alleviated, and a healthy life is not possible. If it is not safe – it is not food.

Everyone who produces, processes, transports, stores, prepares, serves and consumes food needs use practices that keep foods safe – everyone ensures food safety. Governments play a key role in developing legislation, implementing policies, conducting inspections, enforcing regulations, educating and communicating with the public, as well as responding to food safety incidents and emergencies when they happen. As the slogan of World Food Safety Day goes, "Food safety is everyone's business."

Safe food requires managing risk from farm to table. Food can become unsafe at any point in the supply chain. Contaminants may enter food commodities from the soil, water, air or equipment used during production and processing. Storing food improperly, unhygienic handling of food and transporting it at the wrong temperature can make it unsafe to eat. The consumer can also make food unsafe by not cooking it thoroughly. The SDGs call for everyone, in particular the poor and vulnerable, to have access to safe, nutritious, and sufficient food all year round. Food safety is a fundamental part of food security (SDG 2) and contributes to human health (SDG 3). Food safety also contributes to economy-related and other Goals, too. One Health is an integrated approach for preventing and mitigating health threats at the animal-human-plant-environment interfaces. Food safety has a significant impact on human health, and food, which is essential for human survival, comes from plants and animals. Food safety is a core tenet of One Health.

Studies of microbiology, toxicology, chemistry, epidemiology, biology, genetics and many other scientific disciplines provide evidence of food safety hazards and their risks, and help select ways (policies, standards, practices) to manage them. Climate change is increasing the risk of consumer exposure to foodborne hazards, whether from land or sea. The changes in climate have a direct impact on biological (pathogens and parasites) and chemical (heavy metals, pesticides, mycotoxins and algal biotoxins) hazards by changing their occurrence, distribution or virulence.

Climate change is also affecting the quality of water globally by exacerbating conditions that lead to algal blooms, which are worsening along coastlines and in lakes. An overabundance of fertilizer application combined with more frequent and intense precipitation are among the factors leading to increased eutrophication in waterbodies and algal blooms.

National authorities, scientists and the research community have the responsibility of engaging in effective communication with the public in order to foster an environment where people make more climate-sensitive decisions based on the best available knowledge about climate change.

WHEC's publications are aimed at a broad range of audience, and it is hoped the everyone who reads this comes away with a realization of the complexity of the issues at stake and an appreciation of the work that lay in front of us.



8th Multi-stakeholder Forum on Science, Technology and Innovation (STI) for the Sustainable Development Goals

<https://sdgs.un.org/tfm/STIForum2023>

the 8th annual Multi-Stakeholder Forum on Science, Technology and Innovation (STI) Forum will be held from 3 to 4 May 2023.

Women's Health and Education Center's (WHEC's) Participation

STI 2023 Policy-Brief Abstract: **science and Technology to Educate Sustainable Development**
http://www.womenshealthsection.com/content/documents/2023_STI_Forum_Policy_Brief_Abstract.pdf

Virtual Side Event

Open Science Initiatives To Transform Health and Education Systems

3 May 2023; 8:30 am to 9:45 am (EDT, New York Time)

<http://www.womenshealthsection.com/content/whec/sti.php3>

Open science is essential to transform health and education systems, and will help us to achieve the United Nations 2030 Agenda. The objectives of this Virtual Side Event, is to share:

1. The experiences of various technological solutions, in improving the affordability and accessibility of quality education and healthcare services for all .
2. The Experts and Speakers, will highlight, how to best apply technology in the learning process. It is the poor and marginalized in our society and in our world, who have the most to gain, from the advances in science, technology, innovation, and e-Health/e-Learning—sadly—at this point, they are often the groups, who benefit the least.
3. STI Solutions for the Least Developed Countries (LDCs) – Lessons Learned from Pandemic.
4. Countries should take rapid actions towards *Broad Band Internet* connectivity to their population.
5. Women's Health and Education Center (WHEC) with its partners, will continue to support country actions, and strengthen inclusive digital learning platforms and high-quality information worldwide.

Sponsor: Women's Health and Education Center

Speakers / Presenters: World Health Organization (WHO);
Carnegie Mellon University(Pittsburgh, USA and Africa)

Concept Note:

http://www.womenshealthsection.com/content/documents/2023_STI_Side_Event_Concept_Note.pdf

Announcement / Invitation / Flyer:

http://www.womenshealthsection.com/content/documents/8th_Multi_Stakeholder_Side_Event_Invitation_2023.pdf

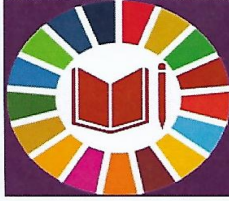
Speakers' List / Agenda

http://www.womenshealthsection.com/content/documents/2023_STI_Forum_Speakers_List.pdf

Join Zoom Meeting Link

<https://us06web.zoom.us/j/7092187692?pwd=Z09sdzRUVCs4cWp4Zk9jK2FkWmQ3Zz09>

Join Us! All Are Welcome



10 – 14 April 2023



United Nations . New York

56th
Session

Population, education and
sustainable development

www.unpopulation.org

**Commission
on Population and
Development**

VIRTUAL SIDE EVENT

DATE: 13 APRIL 2023 TIME: 8:30 TO 9:45 AM EDT

TOWARDS QUALITY EDUCATION & COMMON GOOD

*A Roadmap for Transformation of
Education & Health*

Sponsored by:
56th Session of Commission on Population and Development (CPD)
10 – 14 April 2023

Priority Theme: Population, education and sustainable development
<https://www.un.org/development/desa/pd/events/CPD56>

The Women's Health and Education Center's Participation Virtual Side Event; 13 April 2023

8:30 am – 9:45 am EST (New York Time)

Towards Quality Education & Common Good
A Roadmap for Transformation of Education & Health
<http://www.womenshealthsection.com/content/whec/cpd.php3>

Summary:

Knowledge and learning are humanity's greatest renewable resources for responding to challenges and inventing alternatives. We recognize that success in education and health can be achieved by thinking together – so we can act together for the futures we want. The goal of the side event is to generate discussion and action on the role of education, knowledge and learning in view of predicted, possible and preferred future of humanity and the planet. **Access:** Motivated by our significant achievements in expanding access to evidence-based health information on our global platform and *WHEC Global Health Line* <http://www.WomensHealthSection.com> for the last two decades – we will ensure the provision of access to the Least Developed Countries (LDCs) of free, publicly-privately funded, equitable quality primary and secondary education, of which at least 10 years are compulsory, leading to relevant learning outcomes.

The event was a success and we have heard glowing reviews from our side event. We recognize that the success of the Education requires sound policies and planning as well as efficient implementation arrangements. Our Common Agenda!

YouTube Video Program
<https://www.youtube.com/watch?v=Fa06b93UQcU>



United Nations at a Glance

Myanmar became UN Member State on 19th April 1948



Myanmar, officially the **Republic of the Union of Myanmar**, formerly known as **Burma**, is a country in Southeast Asia. It is the largest country in Mainland Southeast Asia, and has a population of about 54 million as of 2019. Myanmar is bordered by Bangladesh and India to its northwest, China to its northeast, Laos and Thailand to its east and southeast, and the Andaman Sea and Bay of Bengal to its south and southwest. The country's capital city is Naypyidaw, and its largest city is Yangon (Rangoon). Official language: Burmese; Ethnic groups: 68% Bamar, 9% Sharn, 2% Indians and rest others. Religion Buddhism (88%), Christianity (6.2%), 4.3% Islam. Government: Unitary assembly-independent republic under a military junta. Total area: 261,227 sq. mi (676,570 km²). Currency: Kyat.

The early 19th century Konbaung dynasty ruled over an area that included modern Myanmar and briefly controlled Manipur and Assam as well. The British East India Company sized control of the administration of Myanmar after three Anglo-Burmese Wars in the 19th century, and the country became a British colony. After a brief Japanese occupation, Myanmar was reconquered by the Allies and gained independence in 1948. Following a coup d'état in 1962, it became a military dictatorship under the Burma Socialist Program Party. For most of its independent years, the country has been engulfed in rampant ethnic strife and its myriad ethnic groups have been involved in one of the world's longest-running ongoing civil wars.



Myanmar is divided into seven states and seven regions, formerly called divisions. Regions are predominantly Bamar (that is, mainly inhabited by Myanmar's dominant ethnic group). States, in essence, are groins that are home to particular ethnic minorities. The administrative divisions are further subdivided into districts, which are further subdivided into townships, wards, and villages.

Myanmar's slow economic growth has contributed to the preservation of much of its environment and ecosystems. Forests, including dense tropical growth and valuable teak in lower Myanmar, cover over 49% of the country, including areas of acacia, bamboo, ironwood and Magnolia champaca.

The major political parties are the National League for Democracy and the Union Solidarity and Development Party. Though the country's foreign relations, particularly with Western nations, have historically been strained, the situation has markedly improved since the reforms following the 2010 elections. After years of diplomatic isolation and economic and military sanctions, the United States relaxed curbs on foreign aid to Myanmar in November 2011, and announced the resumption of diplomatic relations on 13 January 2012. **Thant**, known honorifically as **U Thant**, was a Burmese diplomat and the third secretary-general of the Untie Nations from 1961 to 1971, the first non-Scandinavian to hold the position. He held the office for a record 10 years and one month.

Human Rights, Genocide allegations and crimes against Rohingya people

The Rohingya people have consistently faced human rights abuses by the Burmese regime that has refused to acknowledge them as Burmese citizens (despite some of them having lived in Burma for over three generations) – the Rohingya have been denied Burmese citizenship since the enactment of a 1982 citizenship law. Since the democratic transition began in 2011, there has been continuous violence as 280 people have been killed and 140,000 forced to flee from their homes in the Rakhine state in 2014. A UN envoy reported in March 2013, that unrest had re-emerged between Myanmar's Buddhist and Muslim communities, with violence spreading to towns that are located closer to Yangon.

Details: <https://sdgs.un.org/statements/myanmar-15988>

Collaboration with World Health Organization (WHO)

WHO | Myanmar



Ensuring Access to Life-Saving Health Services in Myanmar amidst the crisis

Due to the ongoing COVID-19 pandemic, frontline healthcare workers have to deal with an increasing workload on a daily basis and there is a need for alternative modalities to minimize the disruptions of essential life-saving health services. In Myanmar, combined with already pressurized national health system and ongoing political instability, it has been challenging to deliver basic health services, where they are most needed and would make a big difference. In order to bridge this gap during the challenging times, particularly amidst the 3rd wave of coronavirus in Myanmar and humanitarian crisis on the other hand, WHO worked closely with the local partners to help ensure continuation of essential life – saving health services.

Journey of TB Prevention Treatment (TPT) Provision in Myanmar



In Myanmar, TPT started after the development of isoniazid prevent therapy (IPT) protocol through collaborative activity of National TB Program (NTP) and National AIDS Program (NAP) in 2008. A pilot project was health from August 2009 to June 2012 in 9 pilot sites of Mandalay and Shan. The country adopted a six-month long INH prophylaxis regimen for under 5-year-contacts of bacteriologically confirmed TB patients and PLHIV. Referencing IPT protocol, orientation to initiate “Myanmar IPT Pilot Project was held.

In 2020 October, the new Myanmar guideline of programmatic management of latent TB infection (in local Myanmar language) was developed the disseminated as a recommendation of the national level “workshop on latent TB infection treatment.” Pilot study using 3HP for 2 to 5-year-old children by NTP (Mandalay) has been conducted in 2020 – 2021, showing good results. In the near future, TPT with shorter regimen 3HP (Isoniazid and Rifapentine weekly for 3 months) will be rolled out.

WHO validates Myanmar for eliminating trachoma as public health problems

Trachoma is a preventable disease that causes irreversible blindness. It is the leading infectious cause of blindness globally. It remains a public health problem in 44 countries and is responsible for the blindness or visual impairment of an estimated 1.9 million people, most of whom are extremely poor.

Myanmar’s long road to trachoma elimination: In 1964, the Ministry of Health and Sports of Myanmar initiated its Trachoma Control Project with support from WHO and the UNICEF. Community-based interventions comprised surgery, topical antibiotic treatment and improved access to water, sanitation and hygiene (WASH), the health education promoting behavior change to decrease transmission. In 2005, trachoma was responsible for 4% of all cases of blindness in Myanmar. From 2010 to 2015, the annual period prevalence of blindness from all causes in the total population was very low in all regions and states, ranging from 0% to 0.023%. By 2018, this prevalence dropped to 0.008%.

Details: <https://www.who.int/countries/mmr/>



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

Myanmar Joined UNESCO on 27 June 1949



Pyu Ancient Cities (Myanmar), includes the remains of three brick, walled and moated cities of Halin, Beikthono and Sri Ksetra located in vast irrigated landscapes in the dry zone of the Ayeyarwady (Irrawaddy) River basin. They reflect the Pyu Kingdoms that flourished for over 1,000 years between 200 B.C. and 900 A.D. The three cities are partly excavated archaeological sites. Remains include excavated palace citadels, burial grounds and early industrial production sites, as well as monumental brick Buddhist stupas, partly

standing walls and water management features – some still in use – that underpinned the organized intensive agriculture.

Presentation of King Sejong Literacy Prize to United World Schools Myanmar



In close collaboration with the local communities in Myanmar's Shan State, the non-profit United World Schools sets up schools, and trains and supports community members to teach in the local language. This allows children from ethnic communities, many of whom do not speak any other language, to obtain an education.

This is an issue of particular concern in Shan State, where more than 32,000 people aged 3 and older never attended school due to language barriers. Improving access to mother-tongue based early learning in Shan State thus significantly contributes to ensuring inclusive and equitable quality education and promote lifelong learning opportunities for all (SDG # 4). This year, United World Schools' work is among the projects being recognized with the UNESCO King Sejong Literacy Prize. The prize is awarded annually to initiatives promoting the development and use of mother-tongue literacy education and training. In a global event UNESCO celebrates International Literacy Day and award the laureates of the King Sejong Literacy Prize as well as of the Confucius Literacy Prize.

Media and Information Literacy (MIL) teaching strategies to be integrated in monastic and ethnic schools in Myanmar.



Media and Information literacy (MIL) will soon find into monastic and ethnic schools in Myanmar. Monastic and ethnic educational officials and teachers who participated in UNESCO's course, MIL Training of Trainers for Monastic and Ethnic Educators, which is carried out by the UNESCO Myanmar Office in Yangon, have subsequently expressed their commitment to integrating MIL strategies in their respective teaching practices. According to UNESCO Myanmar's Head of Office, monastic and ethnic

schools are natural and essential venues for religious and indigenous learning spaces, as well as the intergenerational transmission of societal values and traditions. MIL ensures that these learning spaces promote tolerance, diversity and inclusivity. Among the core learning areas covered in both courses for monastic and ethnic educators alike were Overview of MIL, MIL Ecosystem and Competencies; MIL Thematic Areas; Understanding Information disorders; and Freedom of Expression and the Issues of Hate Speech, Bias and Discrimination.

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

Education-for-All and Health-for-all

Bulletin Board



Goal 9

Build resilient infrastructure, promote inclusive and sustainable industrialization and foster innovation

FACTS & FIGURES

- Global manufacturing has rebounded from the pandemic, but Least Developed Countries (LDCs) are left behind;
- Small-scale industries lack access to financial support for recovery;
- Only 1 in 3 small manufacturers are benefitting from a loan or line of credit;
- Passenger airline industry is still struggling to recoup catastrophic losses – 2.3 billion passengers in 2021, compared with 4.5 billion in 2019;
- Higher-Technology industries are far more resilient in crises than their lower-tech counterparts;
- 1 in 3 manufacturing jobs are negatively impacted by the crisis.

Strengthening Governance and Realizing Sustainable Transport Solutions for all

The development of sustainable transport system, including large-scale adoption of sustainable transport technologies, will only happen with supportive institutional and policy innovations at global, regional, national, and local levels, as well as the involvement of various stakeholders in the decision-making process. Some of the necessary elements and Recommendations are presented here.

WHEC's Targets and Goals for SDG 9

1. **Identify Transformative Pathways.** The Challenges to achieving sustainable transport reflect broader sustainable development challenges for the coming Decade of Action and beyond. In its role as an enabler, sustainable transport can accelerate progress towards the SDGs, towards the objectives and targets of other relevant agreements, such as New Urban Agenda (NUA), and towards climate action by consciously leveraging interlinkages to manage tradeoffs and derive benefits from synergies.
2. **Applying Science, Technology and Innovation.** Sustainable transport cannot be achieved at the scale and speed required with the deployment of new technologies. Environmentally friendly fuels and engines, autonomous vehicles, and intelligent transport systems have become central features of the transport innovation landscape. However, large innovation gaps remain between countries, and between countries, and between urban and rural areas – gaps that are expected to widen unless deliberate efforts are made to close them.
3. **Regulations and Standards for Sustainable Transport.** At an institutional level, sustainability and climate change considerations must be mainstreamed into transportation planning at all levels; they must also emphasize inclusive transport options, emissions reduction, and climate change adaptation and resilience.
4. **Improving Financing.** Financing for sustainable transport comes from multilateral, public, and private sources. It can be directed towards a range of initiatives, for example, expansion of infrastructure in under-served areas and retrofitting or installation of complementary infrastructure and equipment to accelerate net-zero transitions and build resilience.
5. **Directing Capacity-building, Technology Cooperation and Data.** Gathering and analyzing sound and reliable data and statistics, and making these available for transport planning, risk assessments, and long-term monitoring, is very important. Real-time data can be very informative in terms of indicating of indicating mobility patterns and demand and also transport mode preferences.



Collaboration with UN University (UNU)

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

Climate Change and Agriculture Productivity in Myanmar

Application of a new computable general equilibrium (CGE) model

Myanmar is facing climate change (CC) induced changes to the productivity of their critically important rice sector over the coming century. Moreover, the recent five-year Myanmar's Agriculture Development Strategy (ADS) sets out a vision of achieving an '...inclusive, competitive, food and nutrition secure, climate change resilient, and sustainable agricultural system...' by 2030.

In this paper, the authors investigate the productivity pillar of the ADS strategy. Specifically, they employ a newly deployed dynamically recursive 2021 – 2040 computable general equilibrium model for Myanmar to analyze seven current and future CC scenarios for state- and region-specific paddy yield changes during the 2020s, 2050s, and 2080s, derived from IIASA and FAO's Global Agro-Ecological Zones GAEZV.3 model scenarios, allowing authors to analyze the relative importance of both rainfed and irrigation farming practices and of high input-use and low input-use technologies, and how these important agricultural technology farming decisions interact with CC-induced paddy yield changes.

These results suggest that, with Myanmar's small holders, using low input-use farming technologies, may face small or even negative economic impacts from CC-induced rice paddy yield changes, high input-use farmers, across all states and regions, will benefit from CC-induced paddy yield changes towards the end of the century, highlighting the importance of expanding access to high input-use technologies, e.g., via expanded use of extension services and by providing better access to credit for smallholder farmers.

The study also find, counterintuitively, that farming households using irrigation farming practices will benefit less from CC-induced paddy yield changes compared to households using rainfed farming practices. Finally, these results point to strong differences in CC impacts between states and regions such as the critically important Ayeyarwady region.

In conclusion, these results clearly demonstrate that CC will result in adverse outcomes for many, but it may not also provide opportunities for other smallholders to reap benefits of increased paddy farming yields. Nonetheless, these results also demonstrate that future mitigation efforts should focus on the critically important Ayeyarwady delta region, with a particular focus on mitigating negative interaction effects between irrigation paddy farming practices, on the one hand, and climate changes and increased occurrences of extreme weather events, including saline floodings of the fertile delta, coastal erosion, and inundation, etc. on the other.

Publisher: UNU-WIDER; Authors: Henning Tarp Jensen, Marcus Keogh-Brown, and Finn Tarp; Sponsors: United Nations University World Institute for Development Economics Research provides economic analysis and policy advice with the aim of promoting sustainable and equitable development. The Institute began operations in 1985 in Helsinki, Finland, as the first research and training center of the United Nations University. Today it is a unique blend of think tank, research institute, and UN agency—providing a range of services from policy advice to governments as well as freely available original research.

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

Two Articles of Highest Impact, April 2023

Editors' Choice – Journal Club Discussions

Fully open-access with no article-processing charges

Our friendship has no boundaries. We welcome your contributions.

1. **LGBTQ+ Healthcare: Building A Foundation For Better Understanding;**
<http://www.womenshealthsection.com/content/heal/heal028.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. **Learning Life Lessons: Part III;**
<http://www.womenshealthsection.com/content/gynmh/gynmh018.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

76th World Health Assembly, May 21 – 30 May 2023 Geneva, Switzerland

76th World Health Assembly (WHA) will be held in Geneva, Switzerland,
Proceedings will be webcast live from this web page. Simultaneous interpretation is available in Arabic, Chinese, English, French, Russian and Spanish.

Theme

The theme of this year's Health Assembly is: WHO at 75: Saving lives, driving health for all.

<https://www.who.int/about/governance/world-health-assembly/seventy-sixth-world-health-assembly#>

Strategic Roundtables

During the 76th World Health Assembly, a series of strategic roundtables are being held. During these sessions, WHA delegates, partner agencies, representatives of civil society and WHO experts will discuss current and future priorities for public health issues of global importance.

Documents

https://apps.who.int/gb/e/e_wha76.html

World Health Statistics 2022: Monitoring Health for the SDGs, Sustainable Development Goals

The World Health Statistics Report is the World Health Organization's (WHO) annual compilation of the most recent available data on health and health-related indicators for its 194 Member States. The 2022 edition features the latest data for 50+ indicators from the Sustainable Development Goals (SDGs) and WHO Triple billion targets. A total of 35 indicators present at least 2020 data (from comparable estimates and primary data) and 16 indicators include data between 2017 and 2019.

<https://www.who.int/publications/i/item/9789240051157>



Water & Sanitation: Essential for Maternal and Child Health



Sanitation Key Facts:

- In 2020, 54% of the global population (4.2 billion people) used a safety managed sanitation service.
- Over 1.7 billion people still do not have basic sanitation services, such as private toilets or latrines.
- Of these, 494 million still defecate in the open, for example in street gutters, behind bushes or into open bodies of water.
- In 2020, 42% of the household wastewater generated globally

was discharged without safe treatment.

- At least 10% of the world's population is continuing to consume food irrigated by wastewater.
- Poor sanitation reduces human well-being, social and economic development due to impacts such as anxiety, risk of sexual assault, and lost opportunities for education and work.
- Poor sanitation is linked to transmission of diarrheal diseases such as cholera and dysentery, as well as typhoid, intestinal worm infections and polio. It exacerbates stunting and contributes to the spread of antimicrobial resistance.

Health Problems of Poor Sanitation

Some 829,000 people in low- and middle-income countries die as a result of inadequate water, sanitation and hygiene each year, representing 60% of total diarrheal deaths. Poor sanitation is believed to be the main cause of some 432,000 of these deaths and is a major factor in several neglected tropical diseases, including intestinal worms, schistosomiasis, and trachoma. Poor sanitation also contributes to malnutrition.

In 2020, 54% of global population (4.2 billion people) used a safety managed sanitation service; 34% (2.6 billion people) used private sanitation facilities connected with sewers from which wastewater was treated; 20% (1.6 billion people) used toilet or latrines where excreta were safely disposed of in situ; and 78% of the world's population (6.1 billion people) used at least a basic sanitation service.

Diarrhea remains a major killer but is largely preventable. Better water, sanitation and hygiene could prevent the deaths of 297,000 children aged under 5 years each year.

Open defecation perpetuates a vicious cycle of disease and poverty. The countries where open defecation is most widespread have the highest number of deaths of children aged under 5 years as well as the highest levels of malnutrition and poverty, and big disparities of wealth.

Recommendations and Guidelines for Sanitation and Health and efforts of Women's Health and Education Center (WHEC):

There is further need for research on the links between sanitation and health, and on the operation of the sanitation service chain and optimal methods for implementation. Research gaps, include strategies for encouraging governments to prioritize, encourage and monitor sanitation; creating an enabling environment; improving coverage and securing correct, consistent, sustained use; estimating health impacts from sanitation interventions; reducing adverse ecological effects; elaborating the links between sanitation and animals and their impact on human health; and investigation the issues around sanitation and gender.

Below recommendations are provided for action by national and local authorities:

1. Ensure universal access and use of toilet that safely contain excreta;
2. Ensure universal access to safe systems along the entire sanitation service chain;
3. Sanitation should be addressed as part of locally delivered services and broader development programs and policies;
4. The health sector should fulfill core functions to ensure safe sanitation to protect public health.

Good Practice Actions for Enabling Safe Sanitation Service delivery



The recommendations are complementary by a set of good practice actions to help all stakeholders put the recommendations into effect:

1. Define government-led multi-sectoral sanitation policies, planning processes and coordination.
2. Ensure health risk management is properly reflected in sanitation legislation, regulations and standards.
3. Sustain the engagement of the health sector in sanitation through dedicated staffing and resourcing, and through action on sanitation withing health services.
4. Undertake local health-based risk assessment to prioritize improvements and manage system performance.
5. Enable marketing of sanitation services and develop sanitation services and business models.

Exploring the Relationship between Sanitation and Mental Health and Social Well-being:

When people *perceive* or *experience* a lack of privacy and safety, during open defecation or when using sanitation infrastructure, this can negatively influence their mental and social well-being. the authors of this study found that perceptions and experiences of privacy and safety are influenced by contextual and individual factors, such as location of sanitation facilities and user's gender identity, respectively. Privacy and safety require thorough examination when developing sanitation interventions and policy to ensure a positive influence on the user's mental and social well-being.

According to UNESCO, studies also link sanitation to attainment of primary and secondary education. The world has seen a dramatic decline in out-of-school rates for both girls and boys in developing countries. Adolescent girls in Sub-Saharan Africa and parts of Asia continue to have a higher out-of-school rate compared to their male classmates. A growing body of literature highlights how poor inaccessible sanitation at school inhibits young girls from safely and comfortably managing their menstruation which may ultimately influence their social and educational engagement, concentration, and attendance.

Protecting Groundwater

Improving sanitation management can have a profound effect on drinking-water quality from both surface and vulnerable groundwater sources, particularly when sewage or excreta contaminate drinking-water sources. Progress on safely managed sanitation needs to accelerate at least four times (many more in some regions) and include greater focus on its impact on groundwater. Efforts must include the application of safety planning, a risk-based approach for sanitation systems to assess, prioritize and manage public health risks along the entire sanitation chain (i.e. from toilet, containment-storage/onsite treatment, conveyance, treatment to end-use/disposal).

Join the efforts – Improving Sanitation and Improving Drinking Water!



In The News

Global Issue – Water



Better access to water is helping create new possibilities for people in some of the world's most remote communities. Goal 6 of the UN's Sustainable Development Goals (SDGs) is ensuring availability and sustainable management of water and sanitation for all.

WATER is at its core of SDGs and is critical for socio-economic development, energy and food production, healthy ecosystems and for human survival itself. Water is also at the heart of adaptation to climate change, serving as the crucial link between society and the environment.

Water is also a rights issue. As the global population grows, there is an increasing need to balance all of the competing commercial demands on water sources, so that communities have enough for their needs. In particular, women and girls must have access to clean, private sanitation facilities to manage menstruation and maternity in dignity and safety.

Water-Related Challenges

- 2.2 billion people lack access to safely managed drinking water services.
- Almost 2 billion people depend on healthcare facilities without basic water services.
- Over half of the global population or 4.2 billion people lack safely managed sanitation services.
- 297,000 children under 5 die every year from diarrheal diseases due to poor sanitation, poor hygiene, or unsafe drinking water.
- 2 billion people live in countries experiencing high water stress.
- 90% of natural disasters are weather-related, including floods and droughts.
- 80% of wastewater flows back into the ecosystem without being treated or reused.
- Around two-thirds of the world's transboundary rivers do not have a cooperative management framework.
- Agriculture accounts for 70% of global water withdrawal.

Progress on Water and Sanitation: The UN and Water

The UN has long been addressing the global crisis caused by insufficient water supply and sanitation to satisfy basic human needs and growing demands on the world's water resources to meet human, commercial and agricultural needs.

The 'Water for Life' International Decade for Action 2005 – 2015 helped around 1.3 billion people in developing countries gain access to safe drinking water and drove progress on sanitation as part of the effort to meet the Millennium Development Goals.

Recent milestone agreements include the 2030 Agenda for Sustainable Development, and 2015-2030 Sendai Framework for Disaster Risk Reduction, and the 2015 Addis Ababa Action Agenda on Financing for Development, and the 2015 Paris Agreement with the UN Convention Framework on Climate Change.

We commit to staying engaged to this important agenda through a dedicated and strengthened follow-up action plan that will use existing institutional arrangements and will include an annual Economic and Social Council forum on financing for development.

https://www.un.org/esa/ffd/wp-content/uploads/2015/08/AAAA_Outcome.pdf

Journey Home

The time that my journey takes is long and the way of it long.

I came out on the chariot of the first gleam of light,
and pursued my voyage through the wilderness of worlds;
leaving my track on many a star and planet.

It is the most distant course that comes nearest to thyself,
and that training is the most intricate which heads,
to the utter simplicity of a tune.

The traveler has to knock at every alien door to come to his own,
and one has to wander through all the outer worlds,
to reach the innermost shrine at the end.

My eyes strayed far and wide before I shut them and said 'Here art thou!'

The question and the cry 'Oh, where?'
melt into tears of a thousand streams and deluge the world,
with the flood of the assurance 'I am!'

- Rabindranath Tagore (1861 [Kolkata, India] - 1941 [Kolkata, India]) nickname Gurudeva, was a Bengali polymath, who shaped his region's literature and music. He became the first non-European to win the Nobel Prize in Literature in 1913.
<https://www.nobelprize.org/prizes/literature/1913/tagore/facts/>

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

<http://www.WomensHealthSection.com>

