



WHEC Update

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

July 2025; Vol. 20. No. 07

Before & After Issue

In an ideal world, every mother-to-be would have access to a skilled midwife and could give birth in a safe and peaceful environment, feeling confident that she can take her newborn to a secure, warm home and provide everything the child needs. Sadly, too many women lack these assurances. Around the world, a woman dies every two minutes during pregnancy or childbirth. Some are at increased risk, including women living in remote areas with limited access to services, those who experience discrimination, and those living amid conflict or climate crises.

The Women's Health and Education Center (WHEC), is striving to achieve the ideal scenario for every woman, by investing, promoting, educating healthcare providers and midwives in training, including in emergency humanitarian situations, and by equipping maternity wards and mobile health teams – supporting women wherever they are when they need care.

The training is crucial. It helps to take fear out of childbirth. Living remotely and being part of an indigenous community are two factors that can increase discrimination and disadvantage when it comes to accessing maternal-health services. WHEC's training on human rights and leadership is designed to recognize and strengthen midwifery and obstetric care as a health specialist. Midwives are key to increasing safe births and ensuring maternal services are equitable and free from violence and discrimination.

It is estimated in Latin America, around 43% of women experience obstetric violence, the abuse and mistreatment of women during childbirth, including being forced into procedures against their will. Midwives trained by WHEC, value all women and make childbirth and maternal care human, decent and intercultural.

Providing Opportunities for Young Mothers: Nigeria is one of the world's fastest-growing countries, with a young population and a high birth rate, including teenage pregnancies. The education and training initiatives are especially key for teen mothers, the majority of whom do not return to the classroom after giving birth.

Improving Maternal Health through Education (PDF)

<http://www.womenshealthsection.com/content/heal/heal014.pdf>

Every woman has the right to choose whether or not to become a mother. But in reality, millions of women and girls face high rates of sexual violence, a lack of access to contraceptives and restrictive laws and norms constraining their reproductive autonomy. For them, the most consequential reproductive decision in their lives is no decision at all.

We call attention to the power and importance of exercising choice in the act of becoming mothers – a power afforded to too few.

A Safe Birth & A Promising Future!

A Wish for Every Mother *from* WHEC

Rita Luthra, MD



Your Questions, Our Reply

Why choice in motherhood is rooted in human rights? What are the reasons to support choice for motherhood?

Celebrate Motherhood – By Choice: Around the world, countless women and girls are unable to choose when, whether and with whom to have children – with serious consequences for them, their families and entire societies. This is true whether a woman becomes a mother without wishing to, or whether she wished to become a mother but cannot. Globally, nearly half of the pregnancies are unintended. Evidence shows that unintended pregnancies are linked to human rights violations, psychological distress, child maltreatment, delayed and decreased rates to antenatal care, breastfeeding and vaccination, and higher rates of maternal deaths from unsafe abortions. Essentially, robbing people of their reproductive agency undermines their aspirations throughout life, affecting everything from future educational and career opportunities to their mental and physical health.

Stifling reproductive choice has profound consequences for individuals, families and communities. Involuntary childlessness can have severe negative psychosocial and economic effects, especially where there are scarce options for assisted reproduction. Voluntary childlessness is met with severe stigma. Having more children than intended can lead to cycles of poverty, limited access to schooling and especially for girls and adolescents – carries a high risk of mortality.

Yet, the world is failing to prioritize women's reproductive decision-making. Here are five reasons to support motherhood by choice:

1. Because a lack of choice is harmful to equality, health and economic well-being. educated girls and women are likely to access healthcare, understand their rights and have the self-confidence to act on them. Extreme poverty, as well as violence and many levels of coercion, including transactional sex, limit many girls options, especially in the least developed countries.
2. Because the ability to choose on an individual level leads to gains on a global level. The cost of childbearing while employed can be onerous for women especially, as pregnancy can require a temporary exit from the workforce, reduced working hours and the potential loss of skills that can discourage employers from investing further in staff.
3. Because protecting the right to choose parenthood is essential to securing gender equality. The ability to choose motherhood is intrinsically linked to gender equality: When individuals, particularly women, have control over their reproductive lives, they can participate more fully in society and exercise their right to bodily autonomy. Gender unequal norms are also forcing women to choose between having the children they desire or having the future they aspire to.
4. Because women are people with autonomy, not birthing machines that influence population dynamics. As a result of these inequalities, many women are having more children than they want, while others want more children than they are having. Yet when conversations about birth rates and fertility arise, women's desires for their family size are all too often ignored.
5. Because it affirms the rights to bodily and reproductive autonomy – for everyone. The right to choose to become pregnant is linked with so many others: the right to be the owner of one's body and future, the right to obtain healthcare, the right to raise children in a safe and healthy environment. When getting a family planning method in a clinic, most females still in 2025, need consent from their partners. Sometimes, it is a case of supply versus demand that determines a family's fate – in most cases, contraceptive options are determined by availability, instead of choice.

WHEC believes supporting for women's empowerment and choice can advance the flourishing of all people. We see this in the growing inclusiveness of grassroots movement, and in the links being forged between feminist, LGBTQIA+ and racial justice groups.

WHEC Participation @ 2025 High-Level Political Forum (HLPF)



The High-Level Political Forum (HLPF) is the central United Nations Platform for the follow up and review of the **2030 Agenda for Sustainable Development** and its 17 **Sustainable Development Goals (SDGs)**. The Forum is convened annually under the auspices of the Economic and Social Council (ECOSOC) for eight days, including a three-day ministerial segment. The HLPF brings together ministerial and high-level representatives of governments, as well as wide range of expertise and stakeholders, including heads of UN entities, academics and other experts, and representatives of major groups and other stakeholders. The Forum under the auspices of ECOSOC

and the ECOSOC High-Level Segment adopt a negotiated ministerial declaration.

2025 HLPF: <https://hlpf.un.org/2025>

Theme: “*Advancing sustainable, inclusive, science- and evidence-based solutions for the 2030 agenda for Sustainable Development and its Sustainable Development Goals for leaving no one behind.*”

2025 HLPF will be convened from Monday, 14 July, to Wednesday, 23 July 2025.

Women’s Health and Education Center’s Participation @ 2025 HLPF Offsite / Virtual Side Event

Creating A Thriving World through Education and Health

Wednesday 16 July 2025; 10am to 11:15am EDT; New York Time

Objectives:

1. To track global digital cooperation - Need for an ethical, and transformative framework for generative artificial intelligence (AI) that is not extractive, exploitive, centralized and corporatized, but embodying values of a humane and transformative paradigm based on democratic and distributive integrity.
2. To track on innovation and development – A dedicated, multilateral hub – linked to regional and national nodes and mechanisms.
3. Technical and policy capabilities for future-ready innovation ecosystems – training policy makers on an ongoing basis.
4. Lessons learned from the shortcomings of the technology access for the Least Developed Countries (LDCs);
5. The financing track for innovation and frontier technology and science impetus.

Announcement / Invitation / Flyer

<http://www.womenshealthsection.com/content/documents/2025-HLPF-Flyer.pdf>

Concept Note

<http://www.womenshealthsection.com/content/documents/2025-HLPF-Side-Event-Concept-Note.pdf>

Speakers’ List / Agenda and Details will be Available @

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

Join the Movement! Thank you!



United Nations at a Glance

Saint Kitts and Nevis became UN Member State on 23 September 1983



Saint Kitts and Nevis, officially the **Federation of Saint Kitts and Nevis**, is an island country consisting of two inlands of Saint Kitts and Nevis, both located in the West Indies, in the Leeward Islands chain of the Lesser Antilles. With 261 sq. kilometers (101 sq. mi.) of territory, and roughly 50,000 inhabitants, it is the smallest sovereign state in the Western Hemisphere, in both areas and population, as well as the world's smallest sovereign federation. The country is a Commonwealth realm, with Charles III as King and Heald of the State.

The capital city is Basseterre, located on the larger island of Saint Kitts. Basseterre is also the main port for passenger entry (via cruise ships) and cargo. The smaller island of Nevis lies approximately 3 km (2 miles) to the southeast of Saint Kitts, across a shallow channel called The Narrows. Saint Kitts and Nevis were among the first islands in the Caribbean to be colonized by Europeans. Saint Kitts was home to the first British and French Caribbean colonies, and thus has also been titled "The Motner Colony of the West Indies" It is also the most recent British territory in the Caribbean to become independent, gaining independence in 1983. Official language: English; Ethnic groups: 93% African 3% Europeans; Religion: 95% Christianity; Government: Federal Parliamentary constitutional monarchy; Currency: East Caribbean dollar.



Saint Kitts and Nevis

Saint Kitts and Nevis is a twin-island federation whose economy is characterized by its dominant tourism, agriculture and light manufacturing industries. Sugar was the primary export form the 1940s on, but rising production costs, low world market prices, the government's efforts to reduce dependence on it have led to a growing diversification of the agricultural sector. In 2005, the government decided to close down the state-owned sugar company, which had experienced losses and was a significant contributor to the fiscal deficit. Saint Kitts and Nevis is heavily dependent on tourism to drive its economy, a sector which has expanded significantly, since the 1970s. In the 21st century the government sought to diversity the economy via agriculture, tourism, export-oriented manufacturing, and

offshore banking.

To qualify for citizenship under the investment program, each candidate must complete a vetting process which includes several background and due diligence check, an interview, and other various legal requirements.

- An investment in designated real estate with a minimum value of US\$ 400,000, plus the payment of government fees and other fees and taxes.
- A contribution to the Federal Consolidated Fund, or to the Approved Public Benefactor, of at least US\$ 250,000, inclusive of all government fees but exclusive of due diligence fees which are the same as the real estate option.

There are 8 publicly administered high and secondary level schools in Saint Kitts and Nevis, and several private secondary schools. Education compulsory between ages of 5 and 16.

Details: <https://sdgs.un.org/statements/saint-kitts-and-nevis-14360>

Collaboration with World Health Organization (WHO)

WHO | Saint Kitts and Nevis



Health Situation

The Federation of Saint Kitts and Nevis, located in the Leeward Islands, has made strides in health having increasing life expectancy at birth, low maternal mortality ratio and decline in mortality from communicable disease. The population ages 65 years and over accounting for 7.5%. Non-Communicable Diseases (NCDs) are the main causes of mortality and morbidity. The leading causes of death are malignant neoplasms, cerebrovascular

diseases, diabetes mellitus, ischemic heart disease and intentional injuries. Programs and policies for NCDs and those with disabilities are being strengthened with special emphases on obesity and overweight since the 2011 Global School Health Survey revealed that 32.5% of adolescents were overweight and 14.4% obese. Integrating mental health into primary health care is priority of Ministry of Health and a mental health day-treatment center was constructed to support the offered services. The neonatal mortality rate of 22.2 per 1,000 live births is higher than the set target but is mainly due to early neonatal deaths which contributed to high infant and under-five mortality rates. Capacity building, technical guidelines and interventions are being implemented to address the challenges and advance achievement of sustainable development goals.

Health Policies and Systems

Health leadership and governance are guided by health policy and legislation. Financing of the health sector is challenging and new financing mechanisms being considered is a national health insurance scheme. The Ministry of Health is organized into three programs: The Office of Policy Development and information management, Community-based health services, and Institution-based health services. There are two public hospitals, seventeen public health centers and private facilities that provide health care to the population in both islands. The government is currently working on a Registry for persons with disability and also development of a policy and plan. To guide the NCD program, a NCD Plan of Action and a National Food and Nutrition security policy are in the final stages of development.

The country has a National Social Protection Strategy, which includes addressing the social determinants of health. This system of social protection, which includes social security and safety net programs are complementary to universal access to healthcare services and should ensure equity and support sustainable development.

Cooperation for Health

Cooperation for Health and in health is emphasized and encouraged by the Government and will facilitate implementation of the National Health Strategic Plan and the 2030 Agenda for the sustainable development. The relationship between PAHO/WHO actualized through the Biennial Work Programme is particularly contributing to systems development and overall health improvement. Benefits were also derived from membership to regional health institutions including the Pan Caribbean Partnership against HIV/AIDS, the Global Fund and the USA President's Emergency Plan for AIDS Relief. The current GF Grant provides treatment and laboratory support, builds capacity in the areas of surveillance, and achieving elimination of mother-to-child transmission of the HIV and syphilis. Nationally, private-public partnerships continued to be cultivated. Social Security made annual donation of USD 100,000 toward equipment procurement. Several US-based charities such as Global Link, Global Faith Alliance, World Pediatric Project and Healing the Children, supply equipment and services.

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



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

Saint Kitts and Nevis UNESCO Member since 1983



Brimstone Hill Fortress National Park

Brimstone Hill Fortress National Park is an outstanding, well-preserved example of 17th and 18th centuries military architecture in a Caribbean context. Designed by the British and built by African slave labor, the fortress is testimony European colonial expansion, the African slave trade and the emergence of new societies in the Caribbean. The engineers who designed the fort, made use of the natural topography of this double-peaked, steep volcanic hill rising 230 meters.

St. Christopher (St. Kitts) as the first West-Indian Island to be colonized by Europeans, specifically the French and English, was the scene of many battles in the struggle for dominance in this region. The earliest use of Brimstone Hill for European military purpose was in 1690 when the British installed a canon to drive out the French. The Fortress evolved over the next century and served until 1853 when the British military abandoned it the dismantled many of the buildings.

The principal structures of the fortress are situated on different levels of the upper third of the hill and were constructed in dressed stone (basalt) blocks with a rubble core. Local limestone was used as a decorative element for quoins and for facing around doorways and embrasures. Quarries on the middle and lower slopes of the hill provided much of the stone. The heart of the fortress, Fort George, also known as the Citadel, dominates one of the twin peaks. Completed towards the end of 1700s, this the earliest surviving examples of “Polygonal System” of fortress design. The entire site covers approximately 15 hectares surrounded by a 1.6 km (1 mile) buffer zone.



UNESCO Caribbean Bridges Knowledge Gap on Youth, Peace, and Security in the Caribbean.

Young people in the Caribbean frequently encounter socio-economic and political challenges, including gender-based violence, limited employment opportunities, climate change, and crime and security-related issues. The lack of research often hampers the ability to tackle these problems. The case studies, developed through a multistakeholder approach, help contextualize the Youth, Peace and Security agenda in the region and highlight key frameworks and regional milestones. The insights from the fourteen case

studies provide a variety of recommendations and entry points for national governments, regional organization, and international stakeholders engaged in peace, security, youth development and sustainable development within the Caribbean context.

The coalition has the potential to serve as a platform for intergenerational and multi-sectoral partnerships, fostering collaboration and a collective vision to advance youth peace and security in the region.

Details: <https://www.unesco.org/en/countries/kn>

Education-for-All and Health-for-all

Bulletin Board

Transforming Our World: The 2030 Agenda for Sustainable Development

Adopted at the United Nations Sustainable Development Summit on 25 September 2015

.....Continued The New Agenda

Goal 5. Achieve Gender Equality and Empower All Women and Girls

5.1 End all forms of discrimination against all women and girls everywhere.

5.2 Eliminate all forms of violence against all women and girls in the public and private spheres, including trafficking and sexual and other types of exploitation.

5.3 Eliminate all harmful practices, such as child, early and forced marriage and female genital mutilation.

5.4 Recognize and value unpaid care and domestic work through the provision of public services, infrastructure and social protection policies and the promotion of shared responsibility within the household and the family as nationally appropriate.

5.5 Ensure women's full and effective participation and equal opportunities for leadership at all levels of decision-making in political, economic and public life.

5.6 Ensure universal access to sexual and reproductive health and reproductive rights as agreed in accordance with the Programme of Action of the International Conference on Population and Development and the Beijing Platform for Action and the outcome documents of their review conferences.

5.a Undertake reforms to give women equal rights to economic resources, as well as access to ownership and control over land and other forms of property, financial services, inheritance and natural resources, in accordance with national laws.

5.b Enhance the use of enabling technology, in particular information and communications technology, to promote the empowerment of women.

5.c Adopt and strengthen sound policies and enforceable legislation for the promotion of gender equality and the empowerment of all women and girls at all levels.

To be continued



Collaboration with UN University (UNU)

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

Analyzing the Impact of Natural Hazards in Small Economies The Caribbean Case

This study analyses the impact of natural disasters in the Caribbean. The economic impact of natural disasters in the region has been significant, resulting in widespread destruction of the productive economy. This study presents the main macroeconomic impact of disasters, e.g., a deteriorating fiscal balance, a collapse of growth and a worsening external balance, as a consequence of damage resulting from the event. By making special reference to the small-island developing state nature of many countries in the region, valuable lessons of the impact of such disasters on the capital stock can be learnt, particularly as the interruption of production of goods and services can be particularly devastating in an environment where few large sectors (agriculture, tourism) dominate the economic landscape.

The Caribbean region is characterized by great diversity. This manifests itself not only in the population size, ranging from less than 50,000 (St. Kitts and Nevis), to close to 9 million (The Dominican Republic), but also in the dispersion of income per capita, ranging from approximately US \$500 (in Haiti) to over US \$17,000 in the Bahamas. Similarly, alongside linguistic diversity, with Dutch, French, Spanish, English as well as Papiamentu, Maroon and Creole being spoken from Western Europe, North America as well as Africa and Asia. Despite this diversity, by and large economies in the region face common challenges. For one, as small countries they must overcome many disadvantages resulting from their small island developing states (SIDS) nature. These include, for example, exhibiting a high degree of specialization owing to the narrow range of resources available to them as well as the inability to take advantage of economies of scale owing to small domestic and regional markets.

The Caribbean region is extremely vulnerable to natural disasters – some have argued that it is the most vulnerable region to such events even on a global scale. In such mitigating the impact of natural disasters, is a particular relevant and important components of economic policy in the region. Mitigation can, in principle, take two possible forms. It can either take place after the occurrence of a natural disaster (ex-post), or it can take place before with a view to decreasing the overall impact of any likely event.

The extent to which small countries can realistically diversify is still an issue that needs to be addressed and has not been done so in this paper. The notion of what constitutes an economy in the region will ultimately have to be revisited as the challenges confronting such small economies may be insurmountable on an individual basis. However, the region is making great strides towards greater economic integration, which could act as an impetus to creating a more viable setting.

Publisher: UNU-WIDER; Authors: Martin Heger, Alex Julca, Oliver Paddison; Sponsor: UNU-WIDER gratefully acknowledges the contributions to its project on Fragility and Development from the Australian Agency for International Development (AusAID), the Finnish Ministry for Foreign Affairs, and the UK Department for International Development—DFID. Programme contributions are also received from the governments of Denmark (Royal Ministry of Foreign Affairs), Norway (Royal Ministry of Foreign Affairs) and Sweden (Swedish International Development Cooperation Agency—Sida).

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, June 2025

Editors' Choice – Journal Club Discussions

Fully open-access with no article-processing charges

Our friendship has no boundaries. We welcome your contributions.

1. **Malaria during Pregnancy;** <http://www.womenshealthsection.com/content/obsidp/Malaria-During-Pregnancy.pdf>
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. **Tuberculosis in Pregnancy;** <http://www.womenshealthsection.com/content/obsidp/TB-in-Pregnancy.pdf>
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

Peace, Dignity on a Healthy Planet – Our Children



Every child is born with the same inalienable right to a healthy start in life, an education, and a safe, secure childhood – all the basic opportunities that translate into a productive and prosperous adulthood. But around the world, millions of children are denied their rights and deprived of everything they need to grow up healthy and strong – because of their place of birth or their family of origin; because of their race, ethnicity, or gender; or because they live in poverty or with a disability.

Children and Armed Conflict

More than 20 years ago, the world united to condemn and mobilize against the use of children in armed conflict. Since then, thousands of children have been released as a result of Action Plans mandated by the UN Security Council and other actions aimed at ending and preventing recruitment and use of children by armed forces and groups. However, serious challenges for the protection of children affected by armed conflict remain.

In 2022, more than two thirds of the world's children were living in a conflict-ridden country. More than one in six living less than 50 km away from where the actual fighting took place, a 2.8% increase from the year before. Millions of children, many of whom are unaccompanied or separated from their families are being displaced by armed conflict. These children, many of whom are at a high-risk of grave violations in and around camps, and other areas of refuge. Action is urgently required to alleviate the plight of children displaced by armed conflict and UN System encourages Member States to respect the rights of displaced and refugee children and to provide them with necessary support services.

The recruitment and use of children by armed forces and armed groups remains one of the most prevalent grave violations against children during armed conflict. In 2022, 7,622 children were found to have been recruited and used by parties to conflict. In 2023, children continued to be recruited and used, whether as spies or cooks, in combat roles, or as human shields. Whatever their roles, children used by parties to conflict are exposed to unspeakable cruelty, with serious implications for their physical and psychological well-being.

Since the establishment of the Children and Armed Conflict mandate 28 years ago, more than 200,000 children have been released from armed groups and armed forces, including through the work of the United Nations. [Office of the Special Representative of the Secretary-General for Children and Armed Conflict – Children and Armed Conflict \(un.org\)](https://www.un.org/children/armed-conflict/)



Women's Health and Education Center's Efforts to support violence against children

Progress has been made unevenly and many of the most pressing issues for the world – including addressing inequalities, promoting inclusive economic growth, protecting children from violence and combat climate change – were not adopted and adequately covered in the Millennium Development Goals (MGDs). With the adoption of the new Sustainable Development Goals (SDGs) in September 2015, world leaders have committed to ending poverty by 2030. But unless accelerated efforts are made:

- Almost 52 million children may die before reaching their 5th birthday between 2025 and 2030.
- Children in sub-Saharan Africa will be 16 times more likely to die before their 5th birthday than children in high-income countries.
- 9 out of 10 children living in extreme poverty will live in sub-Saharan Africa.
- More than 60 million primary school-aged children will be out of school – roughly the same number as are out of school today. More than half will be from sub-Saharan Africa.
- More than 150 million additional girls will marry before their 18th birthday by 2030.

These vast inequalities and dangers do more than violate the rights and imperil the futures of individual children. They perpetuate intergenerational cycles of disadvantage and inequality that undermine the stability of societies and even the security of nations everywhere.

Children Everywhere have so much to say:

Many of them, active on addressing issues related to violence against children; and WHEC supports these efforts:

- They want to see more campaigns in education and raising awareness on how travel and tourism impacts violence against children. They want to be informed and empowered to face the risks of violence.
- Children want more support from their local communities and local governments to ensure sustainable and safe tourism.
- They want better laws, but they also want to see them implemented properly. They want to ensure action and accountability so Member States, institutions and the industry can be trusted.
- Children want adults to take their participation seriously. They want to see more children playing a meaningful role in addressing and preventing different forms of violence.
- Children know that poverty and vulnerabilities put them at risk of experiencing violence, and they want to see decision makers solving the root problems of violence.
- Children want to see both adults and children be educated on their rights and raise awareness about risks where their rights could be in danger.

Join the efforts!

One Giant Leap for Food Safety



The year was 1969. Final plans for travel to the moon were being fine-tuned. On the checklist was how to keep food safe for the astronauts during the spaceflights. Foodborne illnesses in the United States, and indeed worldwide, in the 1960s were not a rarity.

So in the years leading up to lift-off, NASA worked with the Pillsbury Company and the United States Army Laboratories to ensure that the astronauts, orbiting in space, would not get sick from the food prepared for the flight, a situation that could be detrimental to the emission and safety of the spacemen. The team

approached food safety and it tested engineering reliability: by checking the weak points in the system.

Food can become unsafe through a variety of “hazards” that can be biological, chemical or physical but ultimately make the food unsafe for human consumption. By assessing the hazards and knowing where the critical control points, i.e. the potential weak spots, are problems can be prevented. Prior to this approach, issues were identified solely in the end product, sometimes only once it reached the customer who often had dire consequences. This change in approach, focusing on prevention, marked a major shift in thinking and in the industry, a shift that, like space travel, has stood the test of time.

Gathering in Geneva, Switzerland, the Joint FAO/WHO Codex Alimentarius Commission endorsed a “food code” that would serve as the backbone for all hygiene-related food standards for the next 50 plus years. This body aimed to have every food business operator, whether a colossal, industrial processing facility or a vendor with a cart, implement a systemic way of preventing, controlling or removing contamination from food so that it would not make people sick. The gathering led to the creation of the **General Principles of Food Hygiene**, a document that set out to accomplish just that. <https://www.fao.org/documents/card/en/c/cc6125en> Authors: FAO (Food and Agricultural Organization of the United Nations) & WHO (World Health Organization).

Good personal hygiene practices in the manufacturing of food have been at the foundation of this work since the 60s. When hygienic standards are followed correctly, viruses or microbes harmful to humans should not spread through food manufacturing practices. Thanks to the visionary approach of Codex in those early years, scientific knowledge about how to safely prepare and handle food was turned into standards that regulatory authorities and the food industry are still using today to monitor and continually improve food hygiene.

There is one basic principle: if it is not safe, it is not food. Next time you go into your local café or restaurant, or even buy food from the grocery store, remember that these food standards are in place to keep you from getting sick. That is what Codex aims for: to ensure safe food for all people around the world, or those orbiting it too.

With allergies a growing area of concern in the world, Codex is continuing its work in this area and is in the process of strengthening its related food labelling requirements. Another important update, one that can even help address issues of water scarcity, is that the code now differentiates between acceptable water quality levels based on its intended use.

Art & Science

Art that touches our soul

An Empty Chair by Kefah Ali Deeb



Syrian artist Kefah Ali Deeb painted An Empty chair, as her vision of victims and refugees.

She left Syria after persecution during the Syrian war and has been living in exile in Berlin, Germany, since 2014.. In Germany, she has been interviewed and published her own opinion columns about the life of migrants in German news media and online projects. Since 2015, she has also been active as a museum guide for the Multaka project, an initiative of Berlin museums to convey art historical contexts to Arabic-speaking visitors. As a writer and translator she also has published several books for children in Arabic.

In Syria, Ali Deeb's paintings were shown in several collective exhibitions at the Center for Fine Arts in Latakia. In 2016, she exhibited her paintings and graphic art at the Institute française in Bonn, Germany, along fellow Syrian artists. These works included a painting of an empty chair, created while she was still living in Syria, and represented her artistic vision of Syrian victims and refugees.

"I always wanted to be a free person. But it wasn't always possible where I grew up. So I've resorted to literature and art, where I have created the world of

my own." – Kefah Ali Deeb.

Kefah Ali Deeb, is a Syrian human right activist, artists and writer. Born in 1982, in Latakia, Syria, exiled and lives in Berlin, Germany, since 2014.

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

<http://www.WomensHealthSection.com>

