



## WHEC Update

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

December 2025; Vol. 20. No. 12

### *A Grand Collaboration*

### Happy Holidays from us all @ WHEC

As 2025 draws to a close, and as **WHEC Update** (Our monthly Newsletter) celebrated its 20<sup>th</sup> anniversary this year, we would like to extend our sincere thanks to you for your loyal readership and for continuing to follow Women's Health and Education Center's (WHEC's) efforts in promoting sustainable development goals (SDGs) for all.

Achieving and sustaining better health for women and children requires increased, long-term and scaled up investment. Since the launch of Women's Health and Education Center's (WHEC's) launch of Global e-Learning, e-Health and e-Government platform, <http://www.WomensHealthSection.com> on 24 October 2002, the global community has made real progress in finding the extra resources needed to improve maternal and child health. This is a global effort involving a wonderful array of partners, from governments to grassroot groups, from medical professionals to aid workers, from conscientious corporations to caring citizens. Now is the time for all to step up their involvement. Together, we can protect the health of our world's women and children, and enable them to help secure our common future.

This Global Strategy for women's and children's health and its roadmap, is a hopeful moment and platform for the international community. After years of working to lower the world's alarming death rates among women and children, an inspiring multi-stakeholder partnership promised to accelerate action against this terrible injustice. 16 million lives ... what does it mean to save even one? An accountability framework has been developed. Networks around the world are bringing together different players, generating new technologies and new business models. These actions are combining to save lives. The number of mothers dying from pregnancy and childbirth-related causes is decreasing, and the number of children surviving beyond their 5<sup>th</sup> birthday has grown.

This update on progress outlines what has already been achieved through this unprecedented leadership effort. It underlines the corresponding need for a continued, ambitious and united push to improve the health of women and children worldwide. All partners are accountable for the promises they make and the health policies and programs they design and implement. Tracking resources and results of public health spending are critical for transparency, credibility and ensuring that much-needed funds are used for their intended purposes and to reach those who need them the most. These commitments are ambitious, but achievable. They include training more midwives, health professionals, improving access to emergency obstetric care, extending access to life-saving medication and vaccines and preventing mother-to-child transmission.

In the last two decades, a wide range of new partners have joined together to advance these efforts. These have pledged to reduce the preventable deaths of women and children through strengthened national efforts. Existing partners are already implementing past-commitments and making new ones. Technological advances provide remarkable opportunities to improve high-quality, affordable and appropriate care for women and children across the world. **WHEC is encouraging exciting new developments not only in harnessing technology but also in innovative business models and partnerships. These successes must be expanded and extended.**

Building Momentum and Securing Results

**Rita Luthra, MD**



## Your Questions, Our Reply

What are the key factors in achieving the goals of improving maternal and child health? What are the challenges now to expand and extend initiatives with life-saving potential?

**More Funding for Health:** Governments hold the ultimate responsibility for the health of their citizens. Our initiatives illustrates that all partners have an important role to play. By harnessing skills and expertise from all sectors and encouraging new partnerships, a broad coalition has been forged. Members of civil society from across the globe – NGOs, healthcare providers, researchers and academics – have championed the cause of women's and children's health nationally and internationally, ensured communities have a voice in shaping agenda, and by harnessing technology and innovation, improved the delivery of care on the ground.

Driving improvement in the health of women and children requires resources, knowledge and expertise from around the world. Women's Health and Education Center (WHEC) is catalyzing new results focused on partnerships. Countdown to Zero is a new global plan to eliminate new HIV infections among children and reduce AIDS-related maternal deaths. World leaders making a decisive move to tackle global health challenges, the Scaling Up Nutrition Movement (SUN) has brought together over 20 countries and more than 100 local, national, and international stakeholders to support households – and women in particular – to improve their own and their children's nutrition. SUN aims reduce the stunting of young children and nutrient deficiencies in women and children, improving or saving millions of lives and decreasing the risk of non-communicable diseases such as diabetes later in life.

There is no single format for commitments. Examples include:

1. Policy Commitments – that put women and children at the center, mobilize political support and improve accountability.
2. Service Delivery Commitment – that ensure women and children have access to life-saving prevention, quality treatment and care when and where they it.
3. Financial Commitments – that increase domestic resources or support governments and other key actors in a country.

Since the launch The Global Strategy for Women's and Children's Health can point to inspiring progress. It has come to life and is being implemented around the world. Resources have been allocated, policies and programs put in place, and new partnerships have been established. Along with traditional philanthropic giving through product of financial donations, we are seeing companies marry market-based strategies and resources to tackle specific health problems.

### Global Impact

The increased focus provided has led to remarkable commitments for women's and children's health. Improving accountability and transparency helps ensure commitments are met in full and on time. These are critical to achieving the objectives of this effort. By encouraging all stakeholders to take ownership for monitoring resources and progress, our initiatives are building a strong foundation for accountability that will keep women's and children's health on national agendas beyond 2030.

The most important part of making promises is keeping them. And we are encouraging all others to do the same.



## United Nations at a Glance

### Saudi Arabia became UN Member State on 24 October 1945



**Saudi Arabia**, officially the **Kingdom of Saudi Arabia (KSA)**, is a country in West Asia. It covers the bulk of Arabian Peninsula and has a land area of about 2,150,000 km<sup>2</sup> (830,000 sq. mi), making the 5<sup>th</sup> largest country in Asia, the largest in the Middle East, and 12<sup>th</sup> largest in the world. It is bordered by the Red Sea to the west; Jordan, Iraq, and Kuwait to the north; the Persian Gulf, Bahrain, Qatar and the United Arab Emirates to the east. Saudi Arabia is the only country with a coastline along both the Red Sea and the Persian Gulf, and most of the terrain

consists of arid desert. Capital: Riyadh; Official language: Arabic; Ethnic group: 90% Arab; Religion: Islam; Population (2022) 32,175,224; Currency: Saudi Riyal.

Shortly before the advent of Islam, apart from urban trading settlements (such as Mecca and Medina), much of what was to become Saudi Arabia was populated by nomadic pastoral tribal societies. The Islamic prophet Muhammad was born in Mecca in about 570 CE. In the early 7<sup>th</sup> century, Muhammad united the various tribes of the peninsula and created a single Islamic religious polity. Following his death in 632, his followers expanded the territory under Muslim rule beyond Arabia, conquering territory in the Iberian Peninsula in the west parts of Central and South Asia in the east in a matter of decades. Arabia became a more politically peripheral region of the Muslim world as the focus shifted to the newly conquered lands.



By 1976, Saudi Arabia has become the largest oil producer in the world. Khalid's reign saw economic and social development progress at an extremely rapid rate, transforming the infrastructure and educational system of the country; in foreign policy, close ties with the US were developed.

Saudi Arabia is an absolute monarchy; however, according to the Basic Law of Saudi Arabia adopted by royal decree in 1992, the king must comply with Sharia (Islamic law) and the Quran, while the Quran and the Sunnah (the traditions of Mohammad) are declared to be the country's constitution. No political parties or national elections are permitted. *The Economist* ranked the Saudi government 150<sup>th</sup> out of 167 in its 2022 Democracy Index, and Freedom House gave it its lowest "Not Free" rating, giving it a score of 8 out of 10 for 2023.

Saudi Arabia is divided into 13 regions. The regions are further divided into 118 governorates. Saudi Arabia joined the UN in 1945 and is a founding member of Arab League, Gulf Cooperation Council, Muslim World League, and the Organization of the Islamic Conference. It plays a prominent role in the International Monetary Fund and the World Bank, and in 2005 joined the World Trade Organization.

Since 1960, as a founding member of OPEC, its oil pricing policy has been generally to stabilize the world oil market and try to moderate sharp price movements so as not to jeopardize the Western economies. Saudi Arabia and the United States are strategic allies, and Saudi Arabia is considered to be pro-Western. China and Saudi Arabia are major allies, with the relationship between the two countries growing significantly in recent decades. In 2017, as part of its nuclear power program, Saudi Arabia planned to extract uranium domestically, taking a step towards self-sufficiency in producing nuclear fuel.

Details: <https://sdgs.un.org/statements/saudi-arabia-10137>

# Collaboration with World Health Organization (WHO)

## WHO | Saudi Arabia



### Health Situation

The population of the country has increased by 45.8% in the past 25 years, reaching 30 million in 2022. It is estimated that 17.5% of population lives in rural setting, 17.2% of the population is between the ages 15 to 24 and life expectancy at birth is 76 years. The literacy rate for youth (15 – 24) is 99.2%; for total adults for adult females (91.4%). The burden of disease (2022) attributable to communicable diseases is 12.6%; non-communicable diseases 78% and injuries 9.4%. The share of out-of-pocket expenditure was 19.8% in 2020 and the health workforce density is 26.5 physicians and 53.73 nurses and midwives

per 10,000 population (2022).

### Health Policies and Systems

The National Transformation Program 2025 identifies interventions for health system strengthening, health promotion and control of non-communicable diseases, control of communicable diseases, health security, and improving partnerships for health development. In addition, the National Transformation Program 2025 aims to improve the planning, production and management of the health workforce. It has also prioritized the growing private sector with a focus on better regulation and public-private sector partnerships. Promoting health in all policies and greater intersectoral collaboration at national and international levels have been identified as national priorities for the current planning cycle.

The Ministry of Health provides the primary health care services through a network of health care centers, hospitals and primary health care facilities. The network of health infrastructure has improved the access of populations in the remote areas to health services and a referral system provides the access to curative care. The national agency for accreditation of healthcare institutions oversees mandatory accreditation of all hospitals and the improved quality and safety of services; this is being extended to primary health care centers. The country is introducing a corporate approach to the health sector by transferring the responsibility for health care provision to a network of public companies that compete both against each other and against the private sector. The country's National Transformational Plan 2030 is promoting the following:

- Ensuring full integration of non-communicable diseases into primary care;
- Ensuring state of the art primary health care;
- Introducing competition; and
- Result-based financing to incentive the private sector.

The Ministry has invested in an electronic-data capturing system and has established a strong e-health unit to ensure that facilities are linked and the information flow is efficient and timely. The Ministry collects cause-specific mortality from all sectors and procedures an annual statistical report. However, the data only comes from the public sector's tertiary level.

### Cooperation for Health

The Kingdom has provided WHO with humanitarian funds to support its work in different countries (US 48 million in 2015 for Iraq, US 15 million to Yemen in 2015, US 10 million to Somalia and US 2 million to Syria). And has expressed its willingness to strengthen this cooperation and contributions.

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



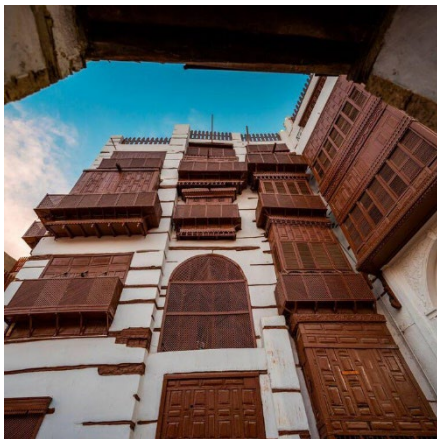
**Saudi Arabia is UNESCO Member since 1946**



**The Cultural Landscape of Al-Faw Archaeological Area**

Lying at a strategic point of the ancient trade routes of the Arabian Peninsula, the property was abruptly abandoned around the 5<sup>th</sup> century. Nearly 12,000 archaeological remains have been found, spanning from prehistoric times to the Late pre-Islamic era, testifying to the successive occupation of three different populations and their adaptation to the evolving environmental conditions. Archaeological features include the Paleolithic and Neolithic tools of early people, tapered structures, cairns and circular constructions, the sacred mountain of Khashm Qaryah, rock carvings, funerary tumuli and cairns in the valley, forts/caravanserai, the oasis and its ancient water management system, and the vestiges of the city of Qaryat al-

Faw. It is located at the junction of the Empty Quarter Desert and the Wajid sandstone outcrops of Jabal Tuwayq Plateau and escarpment in the south of Saudi Arabia. It is an exceptional physical testimony to the successive human occupations from the Paleolithic to the Late pre-Islamic era.



**Historic Jeddah, The Gate to Makkah**

Historic Jeddah is situated on the eastern shore of the Red Sea. From the 7<sup>th</sup> century AD it was established as a major port for Indian Ocean trade routes, channeling goods to Mecca. It was also the gateway for Muslim pilgrims to Mecca who arrived by sea. These twin roles saw the city develop into a thriving multicultural center, characterized by a distinctive architectural tradition, including tower houses built in the late 19<sup>th</sup> century by the city's mercantile elites, and combining Red Sea Coastal coral building traditions with influences and crafts from along the trade routes. The style is characterized by the imposing tower houses decorated by large wooden Roshan built in the late 19<sup>th</sup> century by the city's mercantile elites, and also by lower coral stone houses, mosques, ribat-s, suqs and small public squares that together composes a vibrant space. It has strict association with the Muslim annual

pilgrimage (Hajj) gave Historic Jeddah a cosmopolitan population where Muslims from Asia, Africa and the Middle East resided and worked.



**Knowledge and Practices – Cultivating Khawlani Coffee Beans.**

The cultivation of Khawlani coffee beans begins by planting the seeds in mesh bags filled with soil and stored in a shaded area, for 3 to 4 months. They are then transferred to agricultural terraces that conserve water and soil. The fruit grows 2 to 3 years after planting. It is harvested by hand and laid out to dry. To extract the bean, the dried fruits are placed on a large, flat stone mill, and a cylindrical stone hulls them to prevent cracking, separating the beans from the outer shell. Coffee in Saudi Arabia is viewed as a symbol of

generosity in Saudi Arabia.

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

# Bulletin Board

## Transforming Our World: The 2030 Agenda for Sustainable Development

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

.....Continued Sustainable Development Goals (SDGs)

### Goal 10. Reduce inequality within and among countries

10.1 By 2030, progressively achieve and sustain income growth of the bottom 40 per cent of the population at a rate higher than the national average.

10.2 By 2030, empower and promote the social, economic and political inclusion of all, irrespective of age, sex, disability, race, ethnicity, origin, religion or economic or other status.

10.3 Ensure equal opportunity and reduce inequalities of outcome, including by eliminating discriminatory laws, policies and practices and promoting appropriate legislation, policies and action in this regard.

10.4 Adopt policies, especially fiscal, wage and social protection policies, and progressively achieve greater equality.

10.5 Improve the regulation and monitoring of global financial markets and institutions and strengthen the implementation of such regulations.

10.6 Ensure enhanced representation and voice for developing countries in decision-making in global international economic and financial institutions in order to deliver more effective, credible, accountable and legitimate institutions.

10.7 Facilitate orderly, safe, regular and responsible migration and mobility of people, including through the implementation of planned and well-managed migration policies.

10.a Implement the principle of special and differential treatment for developed countries, in particular least developed countries, in particular least developed countries, in accordance with World Trade Organization agreements.

10.b Encourage official development assistance and financial flows, including foreign direct investment, to States where the need is greatest, in particular least developed countries, African countries, small island developing States and landlocked developing countries, in accordance with their national plans and programmes.

10.c By 2030, reduce to less than 3 per cent the transaction costs of migrant remittances and eliminate remittance corridors with costs higher than 5 per cent.

*To be continued.....*



## Collaboration with UN University (UNU)

UNU-WIDER (World Institute for Development Economics Research)

Expert Series on Health Economics

### Remittances by Emigrants

*Issues and Evidence*

Remittances, after foreign direct investment, are currently the most important source of external finance to developing countries. Remittances surpass foreign aid, and tend to be more stable than such volatile capital flows as portfolio investment and international bank credit. Remittances are also an international redistribution from low-income migrants to their families in their home country.

Worldwide remittances are also concentrated in a group of developing countries: the top 20 recipient-countries of workers' remittances capture around 80% of total remittances by workers to the developing countries. The three main source countries of remittances are the US, Saudi Arabia and Germany, while in terms of value, the three main recipient countries are India, Mexico and the Philippines.

The international market for remittances is segmented and costly for migrants, as money transmitter operators charge high fees and use overvalued exchange rates. Commercial banks in both source and recipient countries account for only a small share of global remittances market.

Remittance from migrants are a growing and relatively stable, market-based external source of development finance. Remittances bring foreign exchange, are a complement for national savings, and provide a source of finance for capital formation (mainly small scale projects). Through these mechanisms, remittances can support economic growth in recipient countries. As remittance depend on the flows of people that are often less volatile than the capital flows as portfolio investment and international bank credit. Remittances are also an international redistribution from low-income migrants to their families in their home country. These transfers act as the international mechanism of social protection based on private transfers. The sustainability of remittances over time depends on various factors such as migration pressures in the sending countries and the evolution of migration policies in advanced economies.

Currently, remittances – after foreign direct investment – are the most important source of external finance for developing countries, and they surpass foreign aid. Remittances are relatively concentrated in a group of developing countries: the top 20 countries receiving worker remittances capture around 80% of the total worker remittances to the developing countries.

The international market for remittances is segmented and inefficient, as reflected by the high costs of intermediation. There is, however, room for leveraging in greater value for remittances if international money transfers were conducted at lower costs. The amount of remittances is below the socially optimal level required for a more competitive cost structure in the market for remittances. The development potential of remittances is thus diminished under current market realities.

Publisher: UNU-WIDER; Author: Andres Solimano; Sponsor: UNU-WIDER gratefully acknowledges the support to the project from the United Nations Department of Economic and Social Affairs (UN-DESA). UNU-WIDER also acknowledges the financial contributions to the 2002-2003 research programme by the governments of Denmark (Royal Ministry of Foreign Affairs), Finland (Ministry for Foreign Affairs), Norway (Royal Ministry of Foreign Affairs), Sweden (Swedish International Development Cooperation Agency–Sida) and the United Kingdom (Department for International Development).

*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, November 2025

*Editors' Choice – Journal Club Discussions*

*Fully open-access with no article-processing charges*

*Our friendship has no boundaries. We welcome your contributions.*

### 1. **Update on Asthma Management in Pregnancy;**

<http://www.womenshealthsection.com/content/obsmd/Update-on-Asthma-Management-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.

### 2. **Vitamin K Deficiency Bleeding;**

<http://www.womenshealthsection.com/content/obsnc/obsnc014.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**

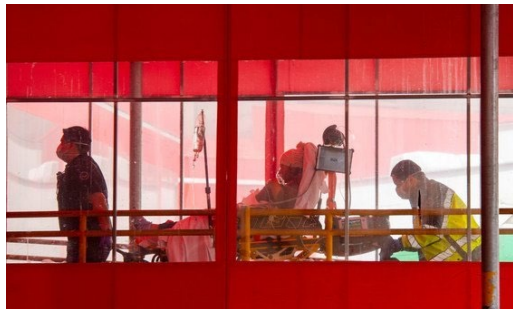
*Worldwide service is provided by the WHEC Global Health Line*



### **From Editor's Desk**

*WHEC Projects under Development*

## **Cyberattacks on Healthcare: A Global Threat that Cannot be ignored**



An alarming surge in ransomware attacks is putting the world's healthcare infrastructure at critical risk, endangering patient safety and destabilizing health systems. According to a 2021 global survey, more than one-third of responding health institutions reported at least one ransomware attack in the preceding year, and a third among them reported paying a ransom.

Ransome attacks are a form of cyber-attacks, in which a malicious actor "take over" or "locks" files on a single computer or an entire network, demanding payment in return for access. The attacks have grown in scale and sophistication over the years, with the price tag now in the tens of billions each year.

### **Issue of Life and Death**

Ransomwares and other cyberattacks on hospitals and other healthcare facilities are not just issues of security and confidentiality, they can be issued of life and death. At best, these attacks cause disruption and financial loss. At worst, they undermine trust in the health system on which people depend, and even cause patient harm and death.

The digital transformation of healthcare, combined with the high value of health data, has make the sector a prime target of cyber-criminals. Cyber-attacks also extended beyond hospitals to disrupt the broader biomedical supply chain. During the pandemic, vulnerabilities were exposed in companies manufacturing

COVID-19 vaccines, clinical trial software vendors, and laboratories. Reality is that, even when ransoms are paid, access to encrypted data is not guaranteed.

## **UN Response**

Humans are both the weakest and strongest links in cyber-security ... it is humans who perpetrate ransomware attacks, and it is humans who can stop them. In response to the WHO and other UN bodies are actively working to support nations, providing technical assistance, norms and guidelines to bolster the resilience of health infrastructure against attack,

In January, WHO published two key reports in collaboration with INTERPOL and the UN Office on Drugs and Crime (UNODC) to strengthen cybersecurity and counter disinformation. <https://www.unodc.org/> The UN health agency is also preparing new guidance on cybersecurity and digital privacy, expected next year. The importance of comprehensive approach, calling on countries to invest not only in advanced technologies for detecting and mitigating cyberattacks, but also in training and equipping staff to respond to such incidents.

## **Cooperation of Women's Health and Education Center (WHEC)**

Just as viruses and infectious diseases do not respect borders, nor do cyberattacks. International cooperation is therefore essential. The cyberattacks have encrypted thousands of computer systems, rendering electronic health records inaccessible and affecting key diagnostic services, including magnetic resonance imaging (MRIs) and computed tomography (CT) scans. These disruptions not only delays care but also increases patient risk and places an extraordinary burden on medical staff already contending with high-stress conditions.

According to US' national security coordinator for security policy on cyber and emerging technologies, emphasizes the scale of ransoms threats in the health sector, citing over 1,500 incidents in US alone in 2023 alone, amounted to \$ 1.1 Billion in payments.



As long as ransoms are being paid and criminals can evade capture, particularly by fleeing across borders, the perpetrators will thrive and continue. International community, refusing to pay criminal gangs and help each other apprehend the cybercriminals, who think they can out maneuver our systems, should be captured.

### **Remain Vigilant**

With over 4.6 billion internet users around the world, digital advances continue to revolutionize human life, but "we must remain vigilant" in the face of malicious technologies that "could imperil the security of future generations," discussed in The Security Council. Engagement by the Security Council on this issue is paramount.

## **Rising Cybercrime**

By 2023, an estimated 29.5 billion networked devices will be connected to the internet, a significant increase from the 18 billion in 2017. From disinformation to deliberate network disruptions, in recent years there has been dramatic jump in malicious incidents targeting information and communication technologies (ICT) that diminish trust between States and threaten critical infrastructure that depends on it. International communities should do more to prevent it and stop it.

Online violent extremisms and trafficking have an often-overlooked differentiated impact on women, men and children, as do other ICT-related threats such as cyberstalking, intimate partner violence and the non-consensual dissemination of intimate information and images.

While ICT threats are on the rise, so too are efforts to address them. While the primary responsibility for international security lies with States, ICTs are an integral part of societies, and participants too have a role to play in securing cyberspace. Perspectives from the private sector, civil society and academia contribute a unique and important part of the collective solution to cybersecurity that the international community is seeking.

This is everyone's battle.



## 2025 WHEC Annual Highlights

*We thank our writers/editors, physician board and the contributors for making this initiative a success. We look forward to your continued support.*

**A good quality education is the foundation of health and well-being.** For people to lead healthy and productive lives, they need knowledge to prevent sickness and diseases. Education is catalyst for development and a health intervention in its own right. Education develops skills, values and attitudes that enable citizens to lead healthy and fulfilled lives, make informed decisions, and respond to local and global challenges. WHEC's goal is to support the contribution of national education sectors for ending HIV/AIDS and other sexually transmitted diseases in adolescents, and promoting better health and well-being for all children and young people. This NGO is committed to strengthening the links between education and health, reflecting growing international recognition that a more comprehensive approach to school health and coordinated action across sectors is needed. Our Editorial Board has decided to compile these 8 Reviews/Practice Bulletins in 2025:

## WHEC Participation with United Nations: Year 2025

### Side Events

1. 2025 ECOSOC Partnership Forum; Virtual Side Event; 5 February 2025
2. 63<sup>rd</sup> Commission for Social Development (CSocD63); Virtual Side Event; 13 February 2025
3. 58<sup>th</sup> Commission on Population and Development (CPD58) Virtual Side Event; 8 April 2025
4. 10<sup>th</sup> Multistakeholder 2025 Science, Technology and Innovation (STI); Side Event; 7 May 2025
5. 78<sup>th</sup> World Health Assembly (WHA); Side Event; Geneva, Switzerland; 21 May 2025
6. 2025 High-Level Political Forum (HLPF); Virtual Side Event; 16 July 2025

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

### UN Documents / Publications

1. 63<sup>rd</sup> Commission for Social Development (CSocD) Session, Written Statement: E/CN.5/2025/1
2. 69<sup>th</sup> Commission on the Status of Women (CSW), Written Statement: E/CN.6/2025/NGO/42
3. 58<sup>th</sup> Commission on Population and Development (CPD); Written Statement: E/CN.9/2025/NGO/5
4. 24<sup>th</sup> Session of Committee on Public Administration (CEPA); *Agenda Item 5; Effective Governance*
5. 2025 Session ECOSOC High Level Segment (HLS); E/C.2/2025/CRP.48; Page 133 – 134.

Available @: <http://www.womenshealthsection.com/content/whec/publications.php3>

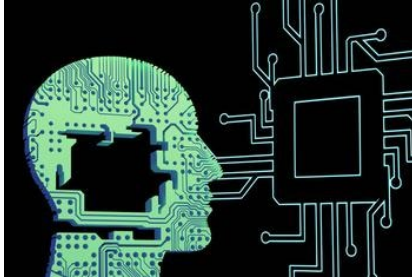
We welcome you all to contribute and share your opinions. Please contact Dr. Rita Luthra, at [rita@womenshealthsection.com](mailto:rita@womenshealthsection.com) if you wish to contribute and/or get involved in this project.

***Education-for-All and Health-for-All***



## In The News

### The Promise and Peril of Runaway Technological Advances



The dual-edged nature of rapid technological advancements - ranging from artificial intelligence (AI) – highlighting both groundbreaking solutions and emerging technologies and their risks to global peace and security is a reality.

#### Future of Global Security

Quantum computing will unlock a new era for AI by enabling computation of models that cannot currently be run on even the most powerful computers. This profound shift would have far-reaching consequences throughout society. Urgent action to anticipate both ant threats and opportunities passed by these technologies is needed.

#### Neurotechnology: Reconnecting brain and body

Cutting-edge neurotechnological advancements with potential to transform lives, while raising critical ethical and security concerns. Digital bridge between the brain and spinal cord – a technology that enables paralyzed patients to walk again by by-passing spinal cord injuries. The spinal cord controlling leg movement is intact, just disconnected from the brain. By implanting electrodes in both the brain and spinal cord, and using AI to decode brain signals this system restores natural movements.

#### Opportunities and Ethical Challenges

This progress in neurotechnology will have a significant impact on the lives of many people, including young athletes who have suffered injuries, soldiers returning from combat paralyzed, or civilians who are collateral victims. Beyond individual benefits, the widespread application of neurotechnology would also ease social and economic burdens. However, brain-machine interfaces, like those used in these research, could be exploited for non-therapeutic or military purposes. The patients can already control drones with their thoughts. Such a capabilities could be used by healthy individuals for non-medical purposes, potentially raising new security risks.

The rapid development of neurotechnology also introduces vulnerabilities. Devices like the "digital bridge" are susceptible to disruptions from electromagnetic fields or hacking, which could compromise critical neurological data. We are at a key moment in history. What was a science fiction a few decades ago is gradually becoming reality. It is our collective responsibility to shape this new era in an ethical and safer manner, which opening the doors to life-changing advances.

#### A New Agenda for Peace

The post-Cold War period is over, and we are moving towards a new global order and a multipolar world. Geopolitical tensions, grave human rights violations, distrust in public institutions, new conflicts, terrorism, and the weaponization of emerging technologies. Insecurity is being stoked by a rising threat of nuclear war and growing skepticism towards multilateralism. The New agenda for Peace outlines an extensive and ambitious set of recommendations that recognize the inter-linked nature of many of these challenges. The brief is framed around the core principles of trust, solidarity, and universality that provide the foundation of the UN Charter and of a stable world.

#### Policy Briefs:

<https://www.un.org/en/common-agenda/policy-briefs>

## Art & Science

*Art that touches our soul*

### Frontispiece to *A Christmas Carol*



1843 – *A Christmas Carol*, a novella by **Charles Dickens** about the miser Ebenezer Scrooge and his transformation after being visited by ghosts, was published.

*A Christmas Carol* captured the zeitgeist of the early Victorian revival of the Christmas holiday. Dickens acknowledged the influence of the modern Western observance of Christmas and later inspired several aspects of Christmas, including family gatherings, seasonal food and drink, dancing, games and a festive generosity of spirit.

Published on 19 December 1843; more than 180 years ago, the First Edition sold out by Christmas Eve; by the end of 1844 thirteen editions had been released. Most critics reviewed the novella favorably. This book has never been out of print and has been translated into several languages; the story has been adapted many times for film, stage, opera, and other media.

Dickens wrote *A Christmas Carol* during a period when the British were exploring and re-evaluating past Christmas traditions, including carols, and newer customs such as

cards and Christmas trees. He was influenced by the experiences of his own youth and by the Christmas stories of other authors, including Washington Irving and Douglas Jerrold. The treatment of poor and ability of a selfish man to redeem himself by transforming into a more sympathetic character are the key themes of the story. There is discussion among academics as to whether this is a fully secular story, or if it is a Christian allegory.

Illustrator: John Leech; Author: Charles Dickens; Country: England; Publisher: Chapman & Hall.

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

<http://www.WomensHealthSection.com>

