

MEDICAL WOMEN'S INTERNATIONAL ASSOCIATION

MWIA



Update

No. 33 March 2008

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CONTENTS

	page
I MWIA	
1. President's Message	3
2. Requests from the Secretary-General	3
3. Letter from the President-Elect	4
4. About the dues from the Treasurer	5
5. 2007-2010 Executive Committee	6
6. News from the VPs and their Regions	7
7. Information about the Committees and Projects	12
8. Calendar of Forthcoming Events	13
9. National Associations and Individual Members	15
10. Special Interest Group for Young Doctors and Med Students	16
11. Donations and Bequests	16
12. 28th MWIA Congress in Munster, Germany	16
13. MWIA Members in the News	17
II ORGANIZATIONS	
1. World Health Organization (WHO)	19
2. United Nations	21
3. Global Call to Action to Prevent Cervical Cancer	25
4. World Medical Association (WMA)	25
5. European Women's Lobby (EWL)	25
6. International Consortium for Emergency Contraception	26
7. Family Health International	26
8. Bone and Joint Decade	27
9. Women's World Summit Foundation	28
10. UN Agencies to Eradicate FGM	29
11. The Stories Women Tell	29
12. Arlene Blum	29
13. American Women's Hospital Service	30
III ANNOUNCEMENTS	30

MEDICAL WOMEN'S INTERNATIONAL ASSOCIATION



1. PRESIDENT'S MESSAGE

Dr. Atsuko Heshiki, Japan

I hope that 2008 has started as a wonderful year for all of you.

The Secretariat of MWIA, headed by Dr. Shelley Ross as Secretary General, has been working actively to organize the office and send up-to-date information to the member country organizations. I hope all of you are receiving the newest information and news through your vice presidents.

Dr. Gabrielle Casper is Chair of the Website committee and is always looking for ways to improve the website.

I was in New York to attend the annual meeting of the Commission on the Status of Women at the United Nations, where MWIA held a side event on February 29th, from 10:00 to 11:30 at Church Center, entitled "Ready, Willing and Able to work for Gender, Equality and the Empowerment of Women, But Where is the Funding?" The main theme of this year's CSW is Funding.

In Japan, the government is funding many programs to promote ongoing education and re-training of medical women after child birth and/or leave of absence for child care.

Dr. Kyung-Ah Park was a guest speaker in one of the medical women's group meetings which discussed how to promote higher career achievement and improve the working conditions.

In April this year, I shall be delivering the keynote speech at the American College of Physician's Japan Chapter meeting about leadership. The topic is "Empowering women physicians; improving working conditions and enhancing leadership opportunities." I would like to emphasize my own experience as well the activities of MWIA.

Please let us know news of your association in your countries and let us share your good work with other members around the world!

2. REQUESTS FROM THE SECRETARY- GENERAL

Dr. Shelley Ross, Canada

Thank you to all MWIA members who keep in touch with the Secretariat. We are interested in hearing about country and individual activities.

I am pleased to announce that the **Hong Kong Medical Women's Association** has joined MWIA. They will join the Western Pacific Region. Although the final ratification will come from the General Assembly in 2010, we welcome them to participate in our activities.

I had the opportunity to attend the **Commission on the Status of Women** at the United Nations in New York. Thank you to Dr. Satty Gill Keswani and Dr. Mini Murthy for organizing a side event on February 29, 2008, entitled: "Ready, Willing and Able to Work

for Gender Equality and the Empowerment of Women but Where is the Funding? I was pleased to sit on the panel in addition to Dr. Atsuko Heshiki, Dr. Akinyele Dairo from UNFPA. Ms. Linda Reid from the Rockefeller Foundation, Dr. Kimberley Templeton, an orthopedic surgeon, Dr. Gayatri Devi from New York, Dr. Eleanor Nwadinobi from Nigeria, and Drs. Keswani and Murthy, our UN representatives in New York.

On the weekend of the 7-9 of March, I was able to attend the annual meeting of the **American Medical Women's Association** in Anaheim. Congratulations to Dr. Diana Galindo for an excellent year as president and welcome to Dr. Claudia Morrissey as she takes over the presidency for this coming year.

MWIA was pleased to join forces with the **World Medical Association** and issue a joint press release for International Women's Day on March 8th. The press release appears later in the newsletter and speaks of the issue of prevention of cervical cancer, one of our projects for this triennium.

Should anyone wish to attend the **World Health Assembly** of the World Health Organization as part of the delegation from MWIA, please let me know.

Please look at the upcoming meeting dates listed in this newsletter and mark your calendars, as there are many interesting meetings planned. Please plan to attend our next **international congress** in Munster, Germany, July 27-31, 2010.

Please be reminded that the deadline is March 31st for the **Women's World Summit Foundation Prize** for women's creativity in rural life. This prize honours creative and courageous women and women's organizations working to improve the quality of life in rural communities around the world. Information can be found at the website www.woman.ch or email to wrwd.wwsf.ch.

Thank you all for your ongoing work for MWIA. It is always greatly appreciated. Your dues can be paid either in US dollars or Euros. Please contact me for further details. Please remember that MWIA's fiscal year is July 1 to June 30.

The contact information for the Secretariat is:

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website: www.mwia.net

3. GREETINGS FROM THE PRESIDENT-ELECT

Dr. Afua Hesse, Ghana

Visit to Sierra Leone

During a visit to Sierra Leone to attend the 48th Annual Scientific Conference of the West African college of Surgeons in Sierra Leone from 9th-15th February 2008, I took the

opportunity to visit with the Sierra Leonean Medical Women's Association. A colleague from the SGWMDP Dr Gladys Amponsah and I were invited to dinner and very warm hospitality at the house of Dr Yinka Koko-Thomas who is in family practice. We met the President of the Association Dr Olabisi Claudius-Cole, also in family practice, a very brave woman who has been at the end of medical practice herself having undergone 4 major joint replacements in the USA recently. Other members who were present included Dr Marcella Davies, a retired Public Health physician and Dr Dinah Jarrett who is still practicing her specialty of obstetrics and gynaecology and is still the only female OBGYN in her country. All three doctors attended the past Congress of MWIA in Accra in August 2007 and had fond memories of the meeting and their visit.

Indeed Sierra Leone as a country just emerging from a brutal internal war, has a long way to go to modernize her systems especially the health systems.

As a country with only 67 doctors for a population of 5 million, the 'quack doctor' business as we were told is thriving and booming. The colleagues recounted many harrowing tales of ordeals patients had to go through at the hands of these quacks mainly as a result of ignorance and poverty. We endeavoured to encourage them in their tasks. They lamented about the lack of interest of young female doctors in the Association which is the experience of a number of other countries but we encouraged them to persevere.

Dr Olabisi Claudius-Cole mentioned their current project of documenting the prevalence of type II diabetes in a particular region of the country which is to be revived after a temporary halt.

Colleagues are encouraged to remember those from Sierra Leone who are working in the face of enormous difficulties all round.

Many thanks to my dear Sierra Leonean colleagues for their very warm welcome and hospitality!!!

4. ABOUT THE DUES FROM THE TREASURER

Dr. Gail Beck, Canada

It is my pleasure to send greetings in this edition of the MWIA Update. I realize that many will skip over the greeting, thinking, "Oh, the Treasurer, that will be boring." This is always my concern, as well.

As you all know, this is a very difficult time to find the funds to continue with the excellent projects that we all have developed. I know from my travels to Regional Congresses that all our branches are struggling with this and we are struggling with this at MWIA as well. Seeking grants from governments and foundations for specific projects is one way that our national organizations can fund their own work. For those of you interested in this kind of project work, I would like to know if there is any interest in finding the people to run a grant-seeking workshop at our Regional Congresses in the next year. If there is enough interest, I will undertake this with the assistance of the finance committee.

I do also want to call your attention to the fact that our website is always in need of up to date material. We have only just begun to develop this very important member resource. We need each National Association's assistance in providing us with material on their organization and activities. We also need individual members' ideas to keep this resource vital and interesting.

Finally, I must encourage all National Associations to remember that developments such as the Website are only realized through your support in the full payment of your Annual Dues. Project Funding that we raise cannot be used to fund our operations and so your dues help us to provide services to you, your members, and to individual members who work alone in their regions. To those National Associations who support us fully with their dues, I send thanks on behalf of MWIA. I also want to thank individual members for their support and to ask them to let us know how we can help them to develop their own projects or even National Associations.

5. 2007-2010 EXECUTIVE COMMITTEE

President	Dr. Atsuko Heshiki from Japan
Secretary-General	Dr. Shelley Ross from Canada
Immediate Past President	Dr. Gabrielle Casper, Australia
President-Elect	Dr. Afua Hesse from Ghana
Treasurer	Dr. Gail Beck from Canada
Finance Chair	Dr. Kyung Ah Park from Korea
Vice Presidents:	
Northern Europe	Dr. Olof Sigurdardottir from Iceland
Central Europe	Dr. Waltraud Diekhaus from Germany
Southern Europe	Dr. Gwenaelle Vidal-Trecan from France
North America	Dr. Shirley Hovan from Canada
Latin America	Dr. Ruth Guillen de Maldonado from Bolivia
Central Asia	Dr. Manju Mataliya from India
Near East & Africa	Dr. Frida Kazembe from Zambia
Western Pacific	Dr. Winnie Yang from Taiwan (ROC)
Chair of Finance	Dr. Kyung Ah Park from Korea
Chair Ethics and Resolutions	Dr. Shirley Hovan from Canada
Chair Scientific and Research	Dr. Olof Sigurdardottir from Iceland
MWIA's Representatives at the UN and WHO United Nations and Department of Public Information in New York	
Dr. Satty Gill Keswani	
Dr. Mini Murty	

World Health Organization in Geneva
Dr. Elizabeta Dulic
Dr. Elisabeth Blocklinger
Dr. Claudia Landerer

United Nations in Vienna
Dr. Iris Habitzel

6. NEWS FROM THE VPs AND THEIR REGIONS

Northern Europe

Denmark, Finland, Iceland, Norway, Sweden, The Netherlands, United Kingdom

Dr. Olof Sigurdardottir, Vice President for Northern Europe, Iceland

Denmark

The Danish Medical Women held a meeting about women in prostitution in January. In April, they have planned a meeting to talk about the strength of the female.

The Secret Pain, the Danish film about female genital mutilation will soon be available in English, French, Arabic, Kiswahili, and Kreol, the language of Sierra Leone. The Danish Medical Women are working with the organization, EuroNet-FGM to develop Action Plans for FGM.

Iceland

We are proud to announce that the Icelandic Association of Women Entrepreneurs presented Guðrún Agnarsdóttir, one of our founding members, with *The 2008 Award of recognition* in appreciation for her work. Guðrún studied medicine at the University of Iceland and virology and immunology at the Hammersmith hospital and Royal Postgraduate Medical School in London. Her lifetime achievements have been exceptional. To mention only a few, she has been the executive director of the **Icelandic Cancer Society for 16 years now. One of the roles of the Society is to organize national cancer screening programs in Iceland. She was a member of the Icelandic Parliament for the Women's Party in 1983 to 1990.** Her contribution to the establishment of a national rape centre in 1994 was key in operationalizing it. Guðrún enjoys her family and forestry in her private time, has now 10 (soon to be 11) grandchildren and we join in the appreciation, wishing her all the best in the future.

On a more informal note, in January we arranged a seminar within a medical congress here in Iceland presenting results of a study our society has supported. Its focus is on physicians' health and wellbeing at work, called the HOUPE study (see www.houpe.no for more information). This project is organized in four university hospitals in four countries and one of the aims is to evaluate the effect of gender on health and wellbeing at work.

Sweden

The Swedish Medical Women are having a spring meeting in Jonkoping on April 25th. The program can be found at www.kvinnligalakare.se

Please remember that the Northern European Regional Congress will be held in Malmö, Sweden. Early registration closes June 1, 2008. The topic is Bridge the Gender Gap. Registration information can be found at www.malmokongressbyra.

United Kingdom

The Medical Women's Federation has a project, entitled **MakingPart-time Work**.

Dr. Jane Sampson has a **mission hospital in Pakistan** at the foot of the Himalayas and is looking for volunteer doctors. For more information, contact admin.mwf@btconnect.com

For the travelling woman doctor, log onto www.bitecard.co.uk for 20% discount on food outlets at airports and train stations in the UK.

For the traveling woman doctor log onto www.bitecard.co.uk for 20% discount on food outlets at airports and train stations.

International conference on Doctor's Health, 17-19th November 2008, BMA House, London.

Call for papers concerned with work-life balance, issues surrounding doctor's physical and mental health, professionalism and the effects of complaints and litigation and adverse incidents on doctors' health. The closing date for abstracts on www.bma.org.uk/doctorshealthmatters is February 7th 2008.

Central Europe

Austria, Bulgaria, Czech Republic, Georgia, Germany, Hungary, Poland, Romania, Switzerland

Dr. Waltraud Diekhaus, Vice President Central Europe, Germany

Austria

The Central European Regional Meeting will be held in Vienna in May, 2009. Plans are underway for the program and venue.

On November 22, 2008, there will be a meeting in Vienna, with plans for a workshop on gender mainstreaming in health.

In cooperation with the four medical universities in Austria, plans are underway to provide a scientific award for either a female medical student or newly-graduated female doctor.

Every two months, the association holds a meeting in different parts of the country, which is also open to interested members, the latest being in Innsbruck in March.

There is a scientific study underway about leading female doctors in Austria.

Switzerland

The Swiss Medical Women are preparing for their annual meeting the end of May, with the subjects to be Resilience and Burnout Syndrome.

Other seminars are planned on Rhetoric, coaching and career planning.

Southern Europe

Belgium, France, Greece, Israel, Italy

Dr. Gwenaëlle M Vidal-Trécan, Vice President Southern Europe, France

The French Medical Women are already busy organizing the Southern European Regional Meeting in Paris for May, 2010. This will be around the time of the World Health Assembly in Geneva.

North America

Canada, United States of America

Dr. Shirley Hovan, Vice President North America, Canada

Please mark your calendars for the North American Regional Meeting to be held on board ship for one week beginning September 12, 2009. The ship will sail from Boston to Montreal. Details will follow in the June newsletter. The theme will be **Taking Care of the Caregiver**, namely women in medicine.

Canada

The Federation of Medical Women has been in the news with their work on cervical cancer, particularly with the vaccine to prevent cervical cancer. In addition, they have been interviewed regarding their survey on menopause. The Federation is about to launch a survey on women's knowledge about cardiovascular disease, known as the LIPSTICK survey.

United States of America

The American Medical Women's Association's Annual Meeting was held March 7-8, 2008, at the Doubletree Inn in Anaheim, CA. This meeting was held in conjunction with the Women's Healthcare Forum and was well attended and addressed many topics of interest in women's health

The Foundation for the History of Women in Medicine is housed at Drexel University College of Medicine in Philadelphia. For information, contact fhwim@burkhargroup.com. The website is www.fhwim.org.

Latin America

Argentina, Bolivia, Brazil, Colombia, Ecuador, Mexico, Nicaragua, Panama, Peru

Dr. Ruth Buillen de Maldonado, Vice President Latin America, Bolivia

The regional meeting for Latin America is the first regional meeting for 2008. It will be held in Puerto Rico from July 9-13, 2008. See further details under Meetings.

Bolivia

The Medical Women's Association in Bolivia has two meetings planned. The first is March 27-29, with the theme being "Woman Protagonist of XXI Century." The second will be in August with the theme "Woman Educator and Base of the Society."

Brazil

The Brazilian Women Medical Association - section of São Paulo works in consortium with the São Paulo Medical Association (SPMA) in São Paulo City.

In June, they held a meeting on The Medical Residency: Technical and Genders Sights. They have launched the Mission of Brazilian Women Medical Association to be: "Take care of yourself in order to better to take care of others".

On April 8' 2008, a meeting is planned about "Violence Against Woman: the new Brazilian Legislation: the Maria da Penha Law." This will be in collaboration with the "Women Of Truth Movement", with participation of several authorities from the São Paulo State.

Brazilian Women Medical Association Pioneers

Dr. Verônica Rapp de Eston is a former President of the Brazilian Women Medical Association(BWMA) and she is a retired Professor of Medical School of University of São Paulo too. She was 90 years old in last February 21. The date was commemorated by many women doctors, including Dr. Berta Sbrighi who was 96 years old last November 12 and who is another former President of BWMA . Both these women are Members of Honour of BWMA by their excellent and usefull contribution to our Association since its foundation in the sixties.

Mexico

The Mexican Medical Women are holding the 12th Congress of the Association of Medicas Mexicanas from April 16 to 19, 2008, at the Araiza Inn in Mexical, Baja California, Mexico.

Peru

Dr. Richelle Douglas, an Obstetric and Gynaecology Registrar from Australia, is currently living in Peru. She is interested in conducting socio-cultural research to address key issues important for the introduction of the HPV vaccine in Cerro Candela, Lima. She is working in a new medical clinic run at social prices in one of the poorest districts in Lima. It serves approximately 10, 500 people, most of whom live without electricity, running water, and garbage collection.

Near East and Africa

Cameroon, Egypt, Ghana, Kenya, Nigeria, Sierra Leone, South Africa, Tanzania, Uganda, Zambia

Dr. Frida Kazembe, Vice President Near East and Africa, Zambia

Egypt

The Egyptian Medical Women's Association has been participating with international organizations in the area of health and population and is active on committees discussing ethical research and women's participation in development and political life. A meeting of the Population Council discussed the end of ten years of research into improving reproductive health. The maternal mortality ratio was reduced by 50% due to measures recommended as a result of health system research.

The Egyptian Medical Women are currently responsible for a big project carried out by medical students and supported by UNICEF and WHO for youth education.

EMWA is enjoying its liaison with WHO, and wasin attendance at the annual meeting of the Eastern Mediterranean Region.

EMWA is active on many committees with the National Council of Women. The Council celebrated the golden anniversary of Egyptian women in parliament and produced a book. Dr. Shafika Nasser and the late Zeinab Alsobki were highlighted and it was noted that more political involvement would be beneficial.

Kenya

Our Kenyan colleagues are in our thoughts as the recent civil unrest continues to settle.

Nigeria

The first meeting of the 2007-2009 executive committee was held February 1, 2008, at Owerri, Imo State. A total of twelve out of the twenty-two branches of the Nigerian Medical Women were represented and over forty members attended the meeting proper. The theme of the conference was Maternal Health—A National Challenge. The state commissioner for health opened the scientific conference, which was attended by hundreds of people from all walks of life, including representatives of the state legislature, judiciary and other allied medical professionals. The keynote address was on Reproductive Rights Issues by the Honorable Justice Ijeoma Agugua. Other topics were the male perspective of maternal health, teenage pregnancy and MDG5—AN Achievable goal?

Uganda

Reproductive Health in Emergencies Conference 2008 will take place from June 18-20 2008 in Kampala, Uganda. For more information, please visit <http://www.rhinemergenciesconference.org/2008>. Dr. Christine Biryabarema will present a paper on behalf of MWIA.

Central Asia

India, Thailand

Dr. Manju Mataliya, Vice President Central Asia, India

India

Mumbai

The Bombay Branch encourages participation of the younger members through the **Shirin Mehtaji Scientific Paper Competiton** that is held at the Cama and Albless Hospital. Prizes for the best papers are awarded in the categories of surgery, obstetrics and general medicine.

Dr Mandakini Megh, Immediate Past Chairman of AMWI attended the 4th Central Asia Regional Congress from India. She spoke on the topic of Child Rearing Practices: Belief and Cultural differences in gender perspectives and on Domestic Violence.

Calcutta

The West Bengal Branch of the Association of Medical Women in India continues to run the Mission Hospital in Calcutta. Donations of both money and medical supplies are always welcome. Please contact the MWIA Secretariat for contact details.

Thailand

The Thai Medical Women's Association had a strategic planning workshop for their five year plan. The two main areas of activity will be the women's health program that includes the life cycle approach on preventing risk factors, and the program on supporting and promoting women medical doctors especially in their medical practices.

The administrative board of the TMWA also agreed to accept women medical students as members, without membership fees until they graduate.

Western Pacific

Australia, Japan, Korea, Mongolia, New Zealand, Philippines, Taiwan (ROC)

Dr. Winnie Yang, Vice President Western Pacific, Taiwan (ROC)

Australia

The MWIA Western Pacific Regional meeting will be held in Melbourne October 17-19, 2008. The theme will focus on health, human rights, gender and leadership. Come and hear about carbon footprints, sustainability, climate change and health, and world poverty. The Australian Medical Women welcome medical women around the world to join the conference.

Hong Kong

Welcome to the Hong Kong Medical Women's Association, as they join MWIA.

Korea

Dr. Kyung Ah Park, MWIA's Finance Chair, was recently awarded the Professor of the Year award for Yonsei University, College of Medicine. As an almost unheard of event, this is the second time that Dr. Park has received this award, the first being in 1994.

Taiwan

The Chinese Medical Women's Association recently held their annual meeting. They discussed career planning for young medical women.

They held a press conference in Taichung, a city in mid Taiwan, on March 8, announcing a donation of HPV vaccine to 200 high risk women.

Dr. Winnie Yang was the only female recipient of the 15 doctors receiving the honour of Best Doctors of Taipei City 2007 awarded by Taipei Medical Association .

7. INFORMATION ABOUT THE COMMITTEES AND PROJECTS

MWIA has **three standing committees**: Finance, Scientific and Research, and Ethics and Resolutions. Please email the Secretariat if you would like to serve on any of these committees.

The **Chair of the Finance Committee** is **Dr. Kyung Ah Park**. Vice Chairs are Dr. Eleanor Nwadinobi and Dr Caroline Jehu-Appiah. The **Chair of the Scientific & Research Committee** is **Dr. Olof Sigurdardottir**. Vice chairs are Dr. Ruth Guillén de Maldonado, Dr. Gwenaelle Vidal-Trecan and Dr. Winnie Yang. The **Chair of the Ethics**

& Resolutions Committee is **Dr. Shirley Hovan**. Vice chairs are Dr. Susanne Close and Dr. Deborah Colville.

PROJECTS

MWIA has decided on a number of projects in addition to the **ongoing work with:**

1. Gender and health.
2. Adolescent sexuality
3. Pink Collar Profession and Human Resource Planning
4. Prevention of Mother to Child Transmission in HIV AIDS Plus
5. Gender Culture Intersect in Health
6. Leadership for Women Physicians

The **new projects for the 2007- 2010 triennium** are:

1. Cervical Cancer including HPV and HPV vaccine
2. Gender based violence including trafficking and female genital mutilation
3. Primary Health Care
4. Gender perspective to Diabetes Mellitus

Please e-mail the Secretariat if you wish to serve on any of the committees or work on any of the projects. Please note that this is volunteer work and there is no financial compensation. A functioning e-mail address is necessary for successful communication for the committee work.

8. CALENDAR OF FORTHCOMING EVENTS

MWIA AND INTERNATIONAL ORGANIZATIONS - CONGRESSES AND MEETINGS



2008

1. **May 9, 2008** – Belfast, Northern Ireland
Medical Women's Federation of the UK 2008 spring meeting
Culloden Hotel and Spa
What Makes Women Sick?
<http://www.medicalwomensfederation.org.uk/meetings/index.htm>
2. **May 18-28, 2008** – Geneva, Switzerland
World Health Assembly of WHO
For further information contact www.who.int. Contact the MWIA Secretariat if you wish to attend.
3. **June 18-20, 2008** –Kampala, Uganda
Reproductive Health in Emergencies Conference
Visit <http://www.rhinemergenciesconference.org/2008>

4. **June 22-23, 2008** – Calgary, Alberta, Canada
Federation of Medical Women of Canada Annual Meeting
Inspiring and Creating Change, Leadership and Advocacy Workshops
www.fmwc.ca
5. **July 9-13, 2008** - Puerto Rico
MWIA Latin American Regional Meeting
Holiday Inn Isla Verde in Puerto Rico : **787- 253-9000**
For further information contact mirepint@yahoo.com.mx
Alianza Panamericana de Medicas Inc.
HC-1 Buzon 11043
Carolina, Puerto Rico 00987-9600
6. **September 3-6, 2008** - Malmö, Sweden
MWIA Northern European Regional Congress
Bridge the Gender Gap
Contact info@malmokongressbyra.se, phone +46 40 258550
Deadline for early registration is June 1st
7. **September, 2008** - Malmo, Sweden
European Social Forum
8. **September 12-14, 2008** – Stockholm, Sweden
3rd International Congress of Gender Medicine
Contact gim-office@charite.de
9. **September 29-October 1, 2008** – Calgary, Alberta, Canada
The 8th world Indigenous Women and Wellness Conference
Building on Traditional Knowledge and Wisdom
For further information and updates please visit our website:
www.awotaan.org.ca or contact us by email: awotaan@awotaan.org or phone:
(403) 561–1610
10. **October 17-19, 2008** - Melbourne, Australia
MWIA Western Pacific Regional Meeting
For further information, contact medicalwomen2008@tourhosts.com.au
11. **October, 2008** – Seoul, Korea
World Medical Association
For further information contact www.wma.org
12. **November 17-19, 2008** – London, UK
International Conference on Doctors' Health
Visit www.bma.org.uk/doctorshealthmatters

2009

1. **July 13-17, 2009** - Dar Es Salaam, Tanzania
MWIA Near East & Africa Regional Meeting

Health and the Developing World
Towards the 2015 Millennium Development Goals
Further details will appear in subsequent updates

2. **September 12-19, 2009** – Cruise from Montreal to Boston
MWIA North American Regional Meeting
Further details will appear in the June Update
3. **May, 2009** – Vienna, Austria
Central European Regional Meeting
Further details will follow
4. **October 21-25, 2009** Washington, DC, USA
Annual Global Meeting of the Bone and Joint Decade.
Visit www.usbjd.org

2010

1. **May, 2010** – Paris, France
Southern European Regional Meeting
2. **July 27-31, 2010** The Residence in Munster, Germany
28th International Congress of MWIA
Theme is Networking in Changing Times/World

9. NATIONAL ASSOCIATIONS AND INDIVIDUAL MEMBERS

With the relocation of the Secretariat, this is an excellent time for all the national associations and individual members to update their contact information. Please send to the Secretariat at secretariat@mwia.net the following:

1. The name of your President and National Coordinator with mailing and email addresses, phone and fax numbers
2. The website of your national association. You will find below a list of websites for the national associations. Please update the information.

Websites of National Associations

Austria	www.aerztinnenbund.at
Australia	http://www.afmw.org.au
Belgium	http://www.mwab.be
Canada	http://www.fmwcc.ca
Denmark	http://www.quindoc.dk
Finland	http://www.suomennaislaakariyhdistys.com
France	http://affm.affinitesante.com
Germany	http://www.aerztinnenbund.de
Iceland	http://www.fkli.is

Italy	http://www.donnemedico.org
Japan	http://www.jade.dti.ne.jp/jmwa
Korea	http://www.kmwa.org or www.kmwa.or.kr
Mongolia	gerontocenter@mongol.net
Sweden	www.kvinnligalakare.se
Switzerland	http://www.medicalwomenSwitzerland
The Netherlands	vnvemail@vnva.nl
Uganda	http://www.auwmd.org
United Kingdom	http://www.medicalwomensfederation.org.uk
United States of America	http://www.amwa-doc.org

10. Formation of the Special Interest Group for Young Doctors and Medical Students

Please remember that MWIA has a Special Interest Group for Young Doctors and Medical Students. Please nominate a young woman under the age of 40 to represent your country.

The committee contacts are through the Secretariat and are:

Chairperson: Dr. Inke Doench, Germany
 Vice chair: Dr. Adjoa Duker, USA
 Secretary: Dr. Jane Mba, Nigeria.

11. Donations and Bequests

In addition to paying your dues on time and in full, please consider MWIA at the time of year when you make charitable donations and when you are updating your will. We have had a number of such donations over the years and are happy to publicly acknowledge your contribution if you wish to make a bequest or donation.

12. 28th MWIA Congress in Munster, Germany July 27 to 31, 2010. Theme is Networking in Changing Times/World

In each MWIA Update, the organizing committee of the 2010 MWIA International Congress in Munster, Germany, wants to bring you some information about Munster. In this issue, they want you to hear the story of the famous swan, Petra, who swims on Lake Aasee, in the heart of Munster.

Where Did the Love Go? The story about the famous German Swan, Petra

It was a summer romance, which survived two summers and a winter. Petra, a love struck black swan, has been happily paddling behind a big plastic swan-shaped pedal boat since May 2006. But now it seems that Petra has found her real love.

Black swan Petra started her media stardom as Peter, since she'd been originally mistaken for a guy. After all, what woman could possibly be silly enough to keep chasing a completely heartless boat -- no matter how impressive it might look when

compared to the real swans paddling around on Lake Aasee in the western German town of Münster.

With winter approaching, the boat had to be removed from the lake but the owner didn't have the heart to separate the two. She was so in love that the people of Münster had to send Pedal along when Petra had to go to her winter domicile in the city's zoo.

So both the boat and Petra were taken to a pond in Münster zoo for the winter. The project was financed by local residents for whom Petra has become a celebrity. She has seemed unperturbed by the journalists and TV crews who have been crowding into other less attractive boats and pedalling after the odd couple.

Now during her second winter turn at the zoo, Germany's most famous swan seems to have lost interest in her long-time lover. Till now any attempts to get her interested in a more lively kind of companion failed miserably -- until a beautiful white swan, let's call him Max, appeared out of nowhere and started to court Petra last December. Petra and Max have been swimming next to each other and showed up jointly at feeding time. Pedal, on the other hand, has been keeping his countenance and does not seem too heartbroken over the adulterous behaviour of his mate.

The boat's patience might be paying off: One week later Max flew to a different pond in the zoo. It's unclear whether he'll be able to find his way back to Petra -- or whether he actually even wants to do that.

After all, mute swans are known to be monogamous -- and what man wants to listen to his girlfriend's endless stories about how great her first love used to be?

13. MWIA Members in the News

Dr. Kyung Ah Park, MWIA's Finance Chair, was recently awarded the Professor of the Year award for Yonsei University, College of Medicine. As an almost unheard of event, this is the second time that Dr. Park has received this award, the first being in 1994.

Dr. Winnie Yang was the only female recipient of the 15 doctors receiving the honour of Best Doctors of Taipei City 2007, awarded by Taipei Medical Association .

Dr. Gail Beck, MWIA's Treasurer, was awarded Physician of the Year for the City of Ottawa, for her work on the funding of HPV vaccine by the Canadian government.

Dr. Elinor Christiansen, previous National Coordinator for the American Medical Women's Association, was awarded the Elizabeth Blackwell Award, granted to a woman physician who has made the most outstanding contribution to the cause of women in the field of medicine.

Dr. Omega Silva, a past president of the American Medical Women's Association, was awarded the Bertha Van Hoosen Award, granted to a woman, in honour of the founder and first president of AMWA, who was demonstrated exceptional leadership and service to AMWA.

Dr. Clarita Herrera, received the Presidential Recognition Award for her passion for AMWA's future.

Dr. Eileen Cambon, a past National Coordinator for Canada, has finished a book about The First 100 years of Women in Medicine in British Columbia, Canada.

Dr. Christine Whittington has written a book about hemochromatosis. It can be purchased from the Canadian Hemochromatosis Association or the e-book at www.ironic-health.com.

II. ORGANIZATIONS

1. WORLD HEALTH ORGANIZATION (WHO)



Report on the 122nd session of the executive board at WHO, 21-26 January 2008

Three delegates of MWIA were invited as observers to the above mentioned meeting. The main goals of the meeting were – apart from financial, management and staffing matters – clarifications on important items from the list of strategic objectives 2008-2009. These objectives are developed from the 8 UN Millennium Development Goals that should be achieved until 2015.

Strategic objective 1	To reduce the health, social and economic burden of communicable diseases
Strategic objective 2	To combat HIV/AIDS, tuberculosis and malaria
Strategic objective 3	To prevent and reduce disease, disability and premature death from chronic non-communicable conditions, mental disorders, violence and injuries
Strategic objective 4	To reduce morbidity and mortality and improve health during key stages of life, including pregnancy, childbirth, the neonatal period, childhood and adolescence and improve sexual and reproductive health and promote active and healthy ageing for all individuals
Strategic objective 5	To reduce the health consequences of emergencies, disasters, crises and conflicts, and minimize their social and economic impact
Strategic objective 6	To promote health and development, and prevent or reduce risk factors for health conditions associated with use of tobacco, alcohol, drugs and other psychoactive substances, unhealthy diets, physical inactivity and unsafe sex
Strategic objective 7	To address the underlying social and economic determinants of health through policies and programmes that enhance health equity and integrate pro-poor, gender-responsive, and human rights-based approaches
Strategic objective 8	To promote a healthier environment, intensify primary prevention and influence public policies in all sectors so as to address the root causes of environmental threats to health
Strategic objective 9	To improve nutrition, food safety and food security, throughout the life-course, and in support of public health and sustainable development
Strategic objective 10	To improve health services through better governance, financing, staffing and management, informed by reliable and accessible evidence and research

Strategic objective 11	To ensure improved access, quality and use of medical products and technologies
Strategic objective 12	To provide leadership, strengthen governance and foster partnership and collaboration with countries, the United Nations system, and other stakeholders in order to fulfil the mandate of WHO in advancing the global health agenda as set out in the Eleventh General Programme of Work

Table 1: The 12 strategic objectives of the WHO proposed programme budget 2008-2009

The important matters for MWIA were the technical and health matters; the discussion was focused on certain health issues as enlisted in the following table. Out of these we found some topics especially important so that we will focus this report only on them.

Issue 1	Climate change and health
Issue 2	Pandemic influenza preparedness: sharing of influenza viruses and access to vaccines and other benefits
Issue 3	Poliomyelitis: mechanism for management of potential risks to eradication
Issue 4	Eradication of dracunculiasis
Issue 5	Implementation of the International Health Regulations (2005)
Issue 6	Prevention and control of non-communicable diseases: implementation of the global strategy
Issue 7	Strategies to reduce the harmful use of alcohol
Issue 8	Health of migrants
Issue 9	Public health, innovation and intellectual property: draft global strategy and plan of action
Issue 10	Health technologies
Issue 11	Global immunization strategy
Issue 12	Female genital mutilation
Issue 13	International migration of health personnel: a challenge for health systems in developing countries

Table 2: technical and health issues on the agenda of the 122nd executive board meeting of WHO

As to the topic “Female genital mutilation” we got an insight of the direction WHO intends to take, due to the fact that the rate of progress towards a significant decline in the practice of genital mutilation is slow. The Executive Board therefore recommends to the 61st World Health Assembly the adoption of a resolution which was in final preparation during our stay and thus not yet available.

WHO Headquarters, Geneva

MWIA has been pleased to work with **Dr. ‘Peju Olukoya** and her team in the Department of Gender, Women and Health at WHO Headquarters in the area of integrating gender into public health. Following the completion of MWIA’s Manual on Gender Mainstreaming in Health, MWIA has been involved in the development of the

WHO manual on gender and health. MWIA looks forward to continuing this collaboration.

WHO has a **Primary Health Care Task Force**, which is looking at the future of primary health care. MWIA is interested in how the task force will view women's health.

2. UNITED NATIONS

a. International Women's Day: 8 March 2008

MWIA in conjunction with the **World Medical Association** issued the following joint press release in honour of International Women's Day.

CALL FOR EQUAL ACCESS TO CERVICAL CANCER TREATMENT FOR ALL WOMEN AND GIRLS

A comprehensive prevention strategy for reducing the threat of cervical cancer has been called for by the World Medical Association and the Medical Women's International Association.

In a joint statement to mark international women's day tomorrow (March 8), the two organisations demand action for women and girls around the world to have equal access to the highest quality prevention and treatment options for cervical cancer and say that such a strategy should include screening and vaccination.

Dr. Shelley Ross, Secretary-General of the Medical Women's International Association, said: 'Cervical cancer is the second most common cancer among women. But it is now preventable due to the availability of a vaccine against human papillomavirus (HPV)'.

She said that every year, cervical cancer affected 500,000 women and took the lives of a quarter million worldwide. Women in poor countries were the most affected, with 80 per cent of the deaths from cervical cancer due to extremely limited screening and treatment availability.

Dr. Ross added: 'When reflecting back on major advances in women's health in years to come, HPV vaccine will be listed as one of the major breakthroughs. It is urgent that governments across the world start prioritizing cervical cancer with sustainable political and financial commitments. Not doing so means losing lives. It means also not granting to women and girls in poor countries the right to equal access to life-saving technologies'.

Four of the common types of HPV could be prevented through vaccination although there was currently no treatment available which could cure an HPV infection. HPV vaccine therefore had the potential to substantially reduce the prevalence of cervical cancer, although not to eradicate it.

Dr. Jon Snaedal, President of the WMA, said 'Medical associations have a key role to play in this strategy in making information on HPV vaccine available to physicians and to encourage physicians to alert their patients on this innovation'.

'Cost must not be a barrier to making the vaccine available to women and girls worldwide. We are calling for a strong mobilisation of decision-makers, international organisations, international donor community and development partners, as well as medical associations, civil society and industry to act now for a change, to stop cervical cancer'.

International Women's Day, celebrated internationally each year on 8 March, has for a theme this year "Investing in Women and Girls," with a strong focus on financing for gender equality at the country level.

International Women's Day has been celebrated since the early 1900s. In 1977 the UN General Assembly adopted a resolution inviting Member States to proclaim a United Nations Day for Women's Rights and International Peace – **International Women's Day**– to be observed on any day of the year in accordance with their historical and national traditions. Since then, the United Nations has observed March 8th as International Women's Day, which serves to highlight the fact that securing peace and social progress and the full enjoyment of human rights and fundamental freedoms require the active participation, equality and development of women; and to acknowledge the contribution of women to the strengthening of international peace and security.

UNFPA

In her message in observance of the Day, United Nations Population Fund ([UNFPA](#)) Executive Director, Thoraya Ahmed Obaid, said, "It is good to invest in women and girls, and it pays to do so. This year, on International Women's Day, UNFPA reaffirms that investing in women and girls is one of the best investments governments can make.

"Investing in women means investing in families, communities, and nations. When women have resources, they tend to spend them on education and health for their children, who then face better employment and life prospects. In every region, increased women's participation and earnings result in reduced poverty and faster economic growth.

"If we want to achieve the Millennium Development Goals, we need more investments in women and girls. Whether we are looking at it from a human rights, political or economic point of view, the conclusion is the same: It makes sense to invest in women. The returns are high for women themselves and for the world at large." The full statement is available [online](#).

UNHCR

To commemorate IWD, [UNHCR](#) launched its Handbook for the Protection of Women and Girls on 6 March in Geneva. A number of events will take place in the field. UNHCR Harare is organizing in the Tongogara refugee camp activities from 10-13 March on issues ranging from HIV and AIDS and reproductive health advocacy, life skills development for equipping teenagers with necessary skills for their self-reliance, gender

based violence (GBV) sensitization, and a day of drama, music and poetry to highlight the need to combat GBV and to empower women.

b. Commission on the Status of Women

Meeting from 25 February to 7 March 2008, the 52nd session of the Commission on the Status of Women (CSW) considered one priority theme: [Financing for gender equality and the empowerment of women](#) and examined one emerging issue: Gender perspectives on climate change. The [report of the Secretary-General](#) on financing for gender equality and the empowerment of women (E/CN.6/2008/2) guided the work of the Commission. It identifies and discusses key issues in financing for gender equality and the empowerment of women and suggests policy recommendations. A second report of the Secretary-General (E/CN.6/2008/5) assesses the extent to which financing for gender equality and the empowerment of women is mainstreamed in policies and programs at the national level.

The 52nd session of the CSW included a high-level roundtable on financing for gender equality and the empowerment of women. Interactive expert panels were also held, two of them addressed the priority theme, a third one, held on 28 February, focused on the emerging theme gender and climate change, and on 29 February, an interactive dialogue evaluated progress in the review theme “Women’s equal participation in conflict prevention, management and conflict resolution and in post-conflict peacebuilding.” A number of informal events were also held. On 5 March NGLS co-hosted with [UNIFEM](#) a side event entitled “From Beijing to Doha: Financing MDG 3.” NGLS and UNIFEM also led a series of “Economic Literacy Workshops” designed to improve the capacity of grassroots women’s groups in national and international finance and budgetary discussions. The CSW officially observed International Women’s Day during the morning of 6 March with a commemorative event that included a high-level panel.

Further information on the 52nd session of the CSW is available [online](#). A large number of NGO side events were also scheduled. A comprehensive listing of these events is available [online](#).

MWIA held a side event entitled “Ready, Willing and Able to Work for Gender Equality and the Empowerment of Women but Where is the Funding? The panel consisted of Dr. Atsuko Heshiki, Dr. Shelley Ross, Dr. Akinyele Dairo from UNFPA. Ms. Linda Reid from the Rockefeller Foundation, Dr. Kimberley Templeton, an orthopedic surgeon, Dr. Gayatri Devi from New York, Dr. Eleanor Nwadinobi from Nigeria, and Drs. Keswani and Murthy, our UN representatives in New York.

c. SG’s Multi-year campaign to end violence against women

Speaking during the opening of the [52nd session of the Commission on the Status of Women](#) on 25 February 2008, UN Secretary-General Ban Ki-moon launched a [multi-year campaign](#) to end violence against women that will continue until 2015, to coincide with the target date for the [MDGs](#). The [campaign](#) aims to mobilize public opinion to ensure that policy makers at the highest level work to prevent and eradicate violence against women and to secure political will and increased resources from governments, international institutions, UN entities, the private sector and other donors for policies and programs to combat the problem. The campaign seeks to harness the existing

momentum in the General Assembly and the Security Council to take action against all forms of violence against women, including rape in conflict and post-conflict situations and builds upon decades of work by women activists, women's groups and other civil society organizations who continue to lead the struggle to expose and counter violence. Further information is available online: <http://endviolence.un.org>.

See also: [UN Action against Sexual Violence in Conflict](#), [UNIFEM's Say NO to violence against women campaign](#), [UN Trust Fund to End Violence against Women](#), [Human Rights Watch work on sexual violence](#), [International Rescue Committee's gender-based violence programs](#), and [PeaceWomen Project](#).

d. Gender Responsive Budgeting

Gender Responsive Budgeting website is a collaborative effort between [UNIFEM](#), the [Commonwealth Secretariat](#) and [Canada's International Development Research Centre \(IDRC\)](#), which was launched in 2001. The website strives to support efforts of governments, women's organizations, members of parliaments and academics to ensure that planning and budgeting effectively respond to gender equality goals. It provides a variety of resources, assessments and training materials on gender responsive budgeting and aims to promote cross-regional information-sharing on country experiences and facilitates networking and collaboration amongst countries, civil society and international organizations.

The first issue of the Gender Responsive Budgeting Newsletter, timed to coincide with the 52nd session of CSW, is available [online](#).

e. OECD

On 7 March, the [OECD Development Centre](#) is launching a new platform for dialogue on gender equality at [OECD](#) headquarters in Paris. "Wikigender.org" is an online resource that aims to gather experts and the general public with one clear objective: sharing knowledge on issues related to gender equality for a better understanding of the situation of women around the world. E-mail: contact@wikigender.org. URL: www.wikigender.org.

f. The [President of the General Assembly](#) of the United Nations will convene a thematic debate on 1-2 April on "Recognizing the achievements, addressing the challenges and getting back on track to achieve the MDGs by 2015", to focus on the poverty, education and health MDGs. The discussions will address the most intractable problems, identify lessons learnt and possible additional measures to ensure the attainment of the goals by 2015. On 1st April, the meeting will begin with an opening session addressed by the UNGA President, the Secretary-General and two Heads of State and Government. Following the opening session there will be a panel discussion focusing on poverty and hunger in the morning, and two parallel panels focusing on education and health in the afternoon. On 2nd April, the meeting will be devoted to a thematic debate among Member States in the General Assembly. UN accredited NGO representatives are welcome to attend.

g. **New UN Website**

The UN recently launched a new website that will show how and where the world is succeeding or failing in meeting the Millennium Development Goals on ending poverty. The website is <http://www.mdgmonitor.org/>. Secretary-General Ban Ki-moon said that the site would, for the first time, present all the information on the goals in one place, allowing closer monitoring and helping identify places in need of greater attention. The site gathers statistics from around the world to give a snapshot of how each country is doing in meeting the eight goals, from cutting infant mortality to reducing hunger.

www.thelancet.com/journals/lancet/article/PIIS0140673607615724/abstract

3. GLOBAL CALL TO ACTION TO STOP CERVICAL CANCER

The Medical Women's International Association (MWIA) took an active part in the formulation of the **Global Call of Action to Stop Cervical Cancer** through participation at the London meeting of partners held in December, 2006. Subsequently, MWIA in collaboration with other partners launched the Global call during the YWCA Global Conference in Nairobi on July 6, 2007, and at the MWIA International Congress in Accra in August 1, 2007. MWIA is one of the initial signatories and is proud to stand beside other organizations who believe that women should not die from cervical cancer.

4. WORLD MEDICAL ASSOCIATION

The next meeting of the World Medical Association will be held in Seoul, Korea, in October, 2008.

Ms. Clarisse Delorme has been appointed as the Advocacy advisor for the World Medical Association, having formerly been employed by the European Women's Lobby.

5. EUROPEAN WOMEN'S LOBBY (EWL)



The European Women's Lobby is the biggest Coalition of Women's Organizations in Europe

Dr. Waltraud Diekhaus represents MWIA at the EWL and has been elected to the board for this coming term.

2008 is the **European Year of Intercultural Dialogue** (EYID), which aims to inspire Europeans to celebrate their own culture, connect with others in Europe and the wider world, on fostering tolerance and respect. Established by a joint Council-European Parliament Decision, Decision No 1983/2006/EC which does not propose any specific definition of Intercultural Dialogue, the Year will focus on some of the strategic priorities of the EU such as respecting and promoting cultural diversity, contributing to ensuring equal opportunities and non discrimination, emphasising the cultural and the educational dimension of the Lisbon Strategy and stimulating the “cultural and creative economy” in the EU.

Equality between women and men does not appear in the Decision, although it certainly is crucial in relation to the eight topics chosen to illustrate the Intercultural Dialogue: culture, education, migration, minorities, religion, multilingualism, the workplace and youth.

The **Unit for Equality Between Women and Men of the European Commission** in Brussels has a vacancy the post of Director of the European Institute for Gender Equality. For details, visit the Europa website at:
http://ec.europa.eu/dgs/personnel_administration/working_senior_mgt_en.htm .

The EWL is interested in the discussion around the reconciliation between work and private life for women and men that is taking place between the social partners and the European Commission.

6. The International Consortium for Emergency Contraception (ICEC)

Worldwide, each year 80 million unplanned pregnancies occur; 19 million women suffer unsafe abortions and Pregnancy-related causes kill at least 530,000 women.

The mission of the International Consortium for Emergency Contraception (ICEC) is to expand access to and ensure safe and locally appropriate use of emergency contraception worldwide within the broader context of family planning and reproductive health, with emphasis on developing countries. The Consortium now has over 35 member agencies represented by over 150 individuals worldwide. ICEC is currently hosted by Family Care International.

In 1996, the year The International Consortium for Emergency Contraception (ICEC) was founded, only a handful of countries had a "dedicated" Emergency Contraception (EC) product on the market. Now women in over 140 countries can buy emergency contraception - sometimes known as the morning after pill - and in 44 countries, EC is readily available over the counter.

The updated list of dedicated ECPs worldwide is now available on the EC Website:
<http://ec.princeton.edu/questions/dedicated.html>

7. Family Health International

Family Health International is pleased to announce the release of a new evidence-based advocacy package: “Long-Acting and Permanent Methods: Addressing Unmet Need for Family Planning in Africa.” The package can be accessed at:

<http://www.fhi.org/en/RH/Pubs/servdelivery/LAPM/index.htm>

This package can help inform policy-makers, program managers, and donors on the benefits of and approaches for introducing or revitalizing long-acting and permanent methods (LAPMs) within national reproductive health and family planning programs in Africa.

Despite their many advantages, LAPMs are the least accessible and least used methods of family planning in sub-Saharan Africa. This class of modern contraceptive methods is comprised of four highly effective methods for delaying, spacing, or limiting births. These include the intrauterine device (IUD), contraceptive implant, vasectomy, and female sterilization. Increasing access to high-quality LAPM services will ensure that women and men can choose from a balanced mix of contraceptive methods and fulfill their reproductive intentions.

This new advocacy package contains a set of eight briefs. These briefs describe the current status of family planning in Africa, including evidence that suggests a substantial unmet need for LAPMs in the region. They address the unique advantages of LAPMs and benefits to individuals, couples and national programs. They also provide examples of several pilot and national efforts that have incorporated both traditional and innovative approaches to improve and expand LAPM provision. Four method-specific briefs complete the package.

The complete set is available as [one file](#) (PDF, 1.74 MB) or you may download the individual briefs below. The complete package will soon be available in French as well. To request hard copies, send an e-mail to publications@fhi.org.

[Brief 1: The Case for Long-Acting and Permanent Methods](#) (PDF, 502 KB)

[Brief 2: The Benefits of Long-Acting and Permanent Methods for Individuals](#) (PDF, 252 KB)

[Brief 3: The Role of Long-Acting and Permanent Methods in National Programs](#) (PDF, 231 KB)

[Brief 4: Strategies to Improve Availability, Access, and Acceptability](#) (PDF, 189 KB)

[Brief 5: Contraceptive Implants: Safe, Effective, Long-Acting, Reversible](#) (PDF, 199 KB)

[Brief 6: IUDs: A Resurging Method](#) (PDF, 605 KB)

[Brief 7: Female Sterilization: The Most Popular Method of Modern Contraception](#) (PDF, 572 KB)

[Brief 8: Vasectomy: Safe, Convenient, Effective – and Underutilized](#) (PDF, 213 KB)

∫ Family Health International, January 2008 P.O Box 13950, Research Triangle Park, NC 27709 USA Fax: (919) 544-7261 <http://www.fhi.org>

8. The Bone and Joint Decade

The Bone and Joint Decade was begun with the endorsement of the United Nations, the World Health Organization, and the Vatican as an international initiative to raise awareness of musculoskeletal conditions. To date, 61 governments have officially endorsed this movement. The United States Bone and Joint Decade was declared by all 50 states and President Bush, to encompass the years 2002-2011. The USBJD comprises over 100 professional and patient organizations, as well as all medical schools and several colleges of medicine. The goals of the USBJD are to raise public

awareness of musculoskeletal conditions; improve public, patient, and professional education in this field; encourage young researchers to pursue research in this area; and to advocate for increased funding for research and prevention of these conditions. Although the USBJD encompasses all musculoskeletal conditions, it focuses primarily on osteoporosis, arthritis, trauma, spine and pediatric conditions. The first two of these disproportionately affect women.

The annual global meeting of the Bone and Joint Decade, bringing together patient and healthcare professional representatives from the 60-plus worldwide country networks of the Bone and Joint Decade, is scheduled to be held in Washington, D.C., on October 21-25, 2009. The past meetings have been held in Geneva, Rio de Janeiro, Berlin, Beijing, Ottawa, Durban, and Brisbane. The goal of the annual global meetings is to allow opportunities for discussion and collaboration among patients and health care providers interested in musculoskeletal conditions from around the world. As these conditions affect women and children to a large degree, the majority of attendees at these meetings are women.

The meeting in 2009 will focus on the burden of musculoskeletal disease and the importance of increased funding for research and prevention to lower this burden. The program is scheduled to include presentations and discussion on what has been done during the last few years to advance research and prevention, what needs to be done, and advancing the health policy agenda of musculoskeletal disease worldwide. To convey this message to those in government, an additional aim of the 2009 meeting will be to host a patient advocacy event, culminating with patients and health care providers from the US visiting Congressional members on Capitol Hill and those from other countries visiting their embassy representatives.

Visit the website www.usbjd.org

9. Women's World Summit Foundation

The Women's World Summit Foundation cordially invites you to submit nominations for its 15th annual **PRIZE for women's creativity in rural life**, honouring creative and courageous women and women's organizations working to improve the quality of life in rural communities around the world.

Since inception of the prize program in 1994, **331** Laureates have been honoured for their creativity with a cash donation of US\$ 500 each and US\$ 3000 for established organizations in Africa. All Laureates and their profiles are published on our web site <http://www.woman.ch/home.php> A traveling exposition is giving visibility to all the prize winners which has recently been exhibited at the United Nations in Geneva during a Human Rights Council session.

WWSF is happy to announce that the United Nations General Assembly (6 November 2007) decided to declare that 15 October of each year shall be officially proclaimed and observed as the International Day for rural women.

Your nomination should arrive no later than 31 March 2008. For details, please visit **WWSF** Women's World Summit Foundation
11 Avenue de la Paix 1202 Geneva, Switzerland
Email: wrvd@wwsf.ch www.woman.ch

10. UN Agencies Rally to End Female Genital Mutilation

Ten United Nations agencies have banded together to help eliminate the harmful practice of female genital mutilation within a generation, stressing the need for strong leadership and greater resources to protect the health and lives of millions of women and girls.

An estimated 3 million girls are at risk of undergoing the procedure which involves the partial or total removal of external female genital organs that some 140 million women, mostly in Asia, the Middle East and in Africa, have already endured.

The agencies expressed their concern about the “medicalization” of the practice, whereby it is performed by health professionals in health facilities, and the belief that it enhances a girl’s chastity and chances of marriage by controlling her sexuality.

The aim is to have a major reduction in female genital mutilation in many countries by 2015, the target date for the achievement of the global anti-poverty objectives known as the Millennium Development Goals (MDGs).

Pledging their commitment to end the practice are the Joint UN Program on HIV/AIDS (UNAIDS), the UN Development Program (UNDP), The UN Economic Commission for Africa (UNECA), the UN Educational, Scientific and Cultural Organizations (UNESCO), the UN Population Fund (UNFPA), the Office of the High Commissioner on Human Rights (UNHCHR), the UN High Commissioner for Refugees (UNHCR), the UN Children’s Fund (UNICEF), the UN Development Fund for Women (UNIFEM) and the World Health Organization (WHO).

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11. The Stories Women Tell

Linda Harrar Productions, LLC proposes a documentary feature film entitled ***The Stories Women Tell***, about the challenges faced by women around the world due to gender inequality. The stories told will focus on how gender inequality limits women’s and girls’ access to health, particularly reproductive health and family planning, and to education and economic opportunities. The stories in large measure will be related to international commitments to women promised in the Cairo Consensus of 1994 and the Millennium Development Goals. The ultimate aim of ***The Stories Women Tell*** is to galvanize a worldwide dialogue about gender inequality and to elicit a demand for change in policy priorities for women and girls.

For further information, contact JulianRob@aol.com

12. Arlene Blum

Dr. Arlene Blum is a Biophysical Chemist and a Visiting Scholar at the University of California at Berkeley. She was a keynote speaker at the recent meeting of the American Medical Women’s Association, speaking on the health hazards of fire retardants in children’s clothes. Visit <http://greensciencepolicy.org/> to see why she feels that there is a short window of opportunity to stop up to a billion pounds of unneeded

and potentially toxic fire retardant chemicals being added to the housings of consumer electronics (computers, printers, TVs, etc) worldwide each year. If you want to add your voice to those who are against this move, write to helper@arleneblum.com .

13. American Women's Hospital Service

AMHS was founded in 1917 during World War I by a group of New York physicians and patients who wanted to send an ambulance staffed by women physicians to the front in France. Today, AMHW provides essential services to numerous underserved communities in the US and overseas, including the MWIA Mission Hospital in Calcutta. Should you wish to donate contact info@amwa-doc.org.

III. ANNOUNCEMENTS

The next Update will be published in June, 2008.

Please send us your reports, comments or any other interesting information by May 31, 2008, at the latest. We are always interested to put your name and your accomplishments in the Update.

Letters to the editor are always welcome.