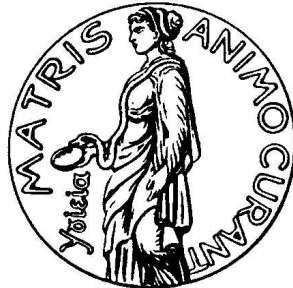


MEDICAL WOMEN'S INTERNATIONAL ASSOCIATION

MWIA



Update

No. 22 November 2004

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I. MWIA



1. PAST PRESIDENT'S NOTE

by Dr. Shelley Ross

World Health Day 2005

World Health Day is Thursday, April 7, 2005. WHO has announced that this year's focus is maternal and child health. The slogan will be "Make Every Mother and Child Count."

With one of MWIA's aims being to improve the health of all in the communities in which we work, this will be a good opportunity to plan an event in your community. The Training Manual for Gender Mainstreaming in Health would give you a good basis from which to plan an event and use cases involving the health of mother and child.

2. LETTER FROM THE SECRETARY- GENERAL

by Dr. Waltraud Diekhaus

Dear all,

From time to time I like to send you the following story:

Whose job?

This is a story about four people named Everybody, Somebody, Anybody and Nobody.

There was an important job to be done and Everybody was sure that
Somebody would do it.

Anybody could have done it but Nobody did it.

Somebody got angry about that because it was Everybody's job.

Everybody thought Anybody could do it but Nobody realized that

Everybody wouldn't do it. It ended up that Everybody

blamed Somebody when Nobody did what

Anybody could have done!

As we want to be there for all of you, please tell us your wishes, your worries, your complaints, what we can do for you etc., but please also inform us on what you are doing, which experiences you have made and what you can report to MWIA to make our newsletter *Update* a real centre of information and communication for our members.

In the past three months I participated in the conference on Gender and Democracy in Berlin, organised by the German Women's Council, I furthermore attended the General Assembly of the European Women's Lobby in Brussels (see my report under EWL), and I visited the Czech Republic and Syria where I met with local medical women. Both countries have become enthusiastic about MWIA and will try to form national associations in order to become affiliated associations of MWIA. Kosovo is also on its way to form a national association. This contact was born at the conference in Berlin.

Seven women's association in Dortmund invited me to hold a lecture and a workshop on Gender Mainstreaming. They thanked me by each of them donating 250 Euro to MWIA in order to support our work, especially Gender Mainstreaming.

For the third time, Dr. Zehnter, a colleague in Dortmund whom I met at a lecture, made a donation to MWIA to support our work, which he finds very impressive and important.

As you may probably are already aware of, MWIA's financial situation – like the ones of other organisations - is not the best since we have to cover all costs from incoming membership fees. Therefore, any financial support - and it does not matter how small the amount will be -, is most welcome. But even more important than the financial aspect is that the people who are supporting us can have a feeling of solidarity for people who suffer from psychological, physical or social violence. At any rate, MWIA is very grateful for any support we receive for our work.

Our finance committee is eagerly at work to find ways to improve our financial situation. Nevertheless, any donation we receive from you or maybe even of a friend of yours who likes to support our work, will be received most gratefully.

Messages from the Secretariat

Website

The newsletters and other documents, such as the manuals on Gender Mainstreaming and Adolescents Health, can be downloaded from our website at <http://www.mwia.net>, check under Archives.

Addresses

Please remember to let us know any address changes. This will facilitate our work greatly. As e-mail is becoming a preferred method of communication in our organization, please do not forget to let us know your e-mail address(es).

Notification

The MWIA Secretariat will be closed from 20 December till 31 December 2004.

3. CALENDAR OF FORTHCOMING EVENTS

MWIA AND INTERNATIONAL ORGANIZATIONS - CONGRESSES AND MEETINGS

2004

16 – 20 November 2004 – Mexico City, Mexico

8th Annual Forum of the Global Forum for Health Research

Theme: The health research necessary to achieve the Millennium Development Goals

For further information please look at <http://www.globalforumhealth.org>.

2005

27 – 30 January 2005, Washington D.C., USA

89th Annual Meeting of the American Medical Women's Association Inc (AMWA)

Venue: Capitol Hilton Hotel in Washington, DC.

For further information contact AMWA at e-mail info@amwa-doc.org or check the website at www.amwa-doc.org

28 – 11 March 2005, New York, USA

49th Session of the Commission on the Status of Women (CSW)

2 – 5 March, 2005, Acapulco Guerrero, Mexico

XXVII Congress of the Pan American Medical Women's Alliance and 4th Regional Meeting of the MWIA Latin American Region

Theme: Equity in Health, Nations Process

Venue: Hotel Emporio Continental Acapulco, www.hotelesemporio.com,

e-mail: reservaciones@hotelesemporio.com.

Contact persons in Mexico: Dr. Mireya Pintos Garcia Mier, e-mail: mirepint@yahoo.com.mx or Dr. Maria Arredondo at mariaarredondo@prodigy.net.mx.

26 – 28 July 2005 - USA

5th International Conference & Exhibition on Traditional Medicine at the Minneapolis Convention Center

Theme: "Integrative Medicine in Women's Health"

For further information please look at <http://www.africa-first.com/5thICTM.asp>

12th – 15th September 2005, Bucharest, Romania

WHO Regional Meeting for Europe

28th September – 3rd October 2005, Iceland

15th Northern European Regional Congress of MWIA, Iceland

Venue: Grand Hotel, Sigtun, Reykjavik

For further information please contact the Congress Secretariat at e-mail mail@iii.is

October 2005 – Latin America

56th General Assembly WMA. For further information please look at <http://www.wma.net>.

10 – 12 November 2005 - Philippines

8th Western Pacific Congress and 56th Annual Convention of the Philippines Medical Women's Association

Theme: "Golden Health Care towards the Silvering Years"

Venue: The Manila Hotel, Roxas Boulevard, Manila

For further information please contact the Philippines MWA at e-mail pmwa2004@yahoo.com

2006

Planned

Near East and Africa Regional Congress of MWIA, Zambia

September 2006 - Copenhagen

WHO Regional Meeting for Europe

October 2006 – South Africa

57th General Assembly of the WMA. For further information please look at <http://www.wma.net>.

2007

XXVII. MWIA International Congress, Accra, Ghana

October 2007 - India

58th General Assembly of the WMA. For further information please look at <http://www.wma.net>.

4. NEWS FROM THE VP'S AND/ OR THEIR REGIONS



Northern Europe (Denmark, Finland, Iceland, Norway, Sweden, United Kingdom)

News from the UK by Dr. Dorothy Ward, National Coordinator Medical Women's Federation

The Council of the Medical Women's Federation met in Birmingham 14,15 May 2004. The venue was the campus of the University.

The new President, Selena Gray, from Bristol was installed as President and Clarissa Fabre from Brighton became the new Honorary Secretary. Professor Bhu Sandhu continues as Treasurer and Dorothy Ward as National Co-ordinator

The main business of Council was a debate – at times heated – on the new MWF Constitution. This was thoroughly discussed with all local associations expressing their views. As the constitution was drawn up in 1917 there will be some important changes!. It was agreed that the Association will no longer be a federation but an association of members. The Council will be at least a 1/3rd of its present size and will be referred to as the Representative Council – this will be the governing body. There will be no Executive Committee. There will be an annual meeting which will include an AGM, business meeting and a scientific meeting. All members will be invited to attend this meeting and the scientific meeting will be open to all women doctors and other health professionals. The National Co-ordinator will be a member of the Representative Council. It is likely that the President will now be elected by all members rather than Council. MWIA is considered to be a very important organisation in the future of the new “MWF”

The Executive Committee and the MWF Officers will now draw up the new constitution together with the lawyers of the Cranfield Association and present it to the Council Meeting in London, November,2004. Local associations will again have an opportunity to comment/change/ratify the new constitution which will then be sent to every member and be presented at the Annual General Meeting in May 2005. The new constitution will, of course, be sent to MWIA Secretariat.

A scientific meeting followed on from the Council meeting and this was open to all women doctors. The topic discussed was *Gender, Genes and Genito-urinary Gems*.

A fascinating lecture was received on prenatal diagnosis and counselling followed by small group work on genetic cases. A Sexual Health Presentation was given by the Programme Director HIV and Sexual health in the West Midlands followed by a talk on Caring for HIV positive women. The difficulties experienced by two midwives in the Birmingham Maternity Hospital on Female Genital Mutilation gave us an insight into the problems this causes in the UK.

A workshop was held on cases from the MWIA Gender Mainstreaming Manual.

The annual Hilda Rose Lecture was given by Dr Fay Wilson who related “Her Experiences of Medical Politics and Working as an Inner –City General Practitioner.

The winners of the student essay competition in 2004 presented their projects. There were two winners – a male and female Both receive a cheque and a year’s membership of MWF. The male student was requested to give his membership to his favourite women student.

At the Council Dinner there was time for networking and to enjoy a prominent after –dinner speaker who was a former Central Television producer.

Jean Lawrie, a former MWF Honorary Secretary, Past President, MWF and also a former National Corresponding Secretary and chairman of the MWIA Resolutions, Committee was presented with a bouquet of flowers on the occasion of her 90th birthday.

North America (Canada, United States)

News from Canada by Dr. Shelley Ross, Immediate Past President, MWIA

Dr. Mary Hallowell, a long-time member of the Federation has been awarded a 2004 CMA Senior Member Award. Dr. Mary Hallowell is a pediatrician who practised in New Westminster, BC.

Dr. Heidi Oetter, a member of the FMWC from Vancouver, has been selected to be a deputy registrar of the College of Physicians and Surgeons of British Columbia.

Dr. Christine Davies and Dr. Mary Goodfellow, long time members of the Federation of Medical Women of Canada, were honoured in October, 2004, when they received the New Brunswick Red Cross humanitarian Awards. for their community work in Saint John, New Brunswick.

Western Pacific (Australia, Japan, Korea, Mongolia, Philippines, Taiwan ROC)

News from Japan by Dr. Mitsuko Shimomura, Member, Japan Medical Women's Association

"ViVi: Lifetime Medicare Center for Women" is Japan's first comprehensive female-specific medical clinic.

The all-female staff at ViVi helps the patients achieve complete wellness of body and mind.

A comprehensive medical facility for individual female patients, ViVi aspires to offer a medical service very different from the traditional organ-based medical care.

ViVi offers a custom-made medical care that takes into account the patient's body and mind, relationship with family and friends, workplace environment, career and passion, personal history and future.

As part of Genki Plaza Medical Center for Healthcare, ViVi has access to the latest diagnostic technology such as CT and MRI scans and is able to provide a reliable service based on accurate diagnosis and treatment, network with other medical institutions, immediate referral to hospitals when hospitalization is necessary, tight-knit communication and information provision, and post-surgery follow-up and aftercare.

5. WEBSITES OF NATIONAL ASSOCIATIONS

Websites of National Associations

Australia	http://www.afmw.org.au
Belgium	http://www.mwab.be
Canada	http://www.fmwca.ca
Denmark	http://www.quindoc.dk
France	http://www.affm.org
Germany	http://www.aerztinnenbund.de
Iceland	http://www.icemed.is
Italy	http://www.donnemedico.org
Japan	http://www.jade.dti.ne.jp/jmwa
Korea	http://www.kmwa.org or www.kmwa.or.kr
New Zealand	http://www.nzmedicalwomens.co.nz
Sweden	http://www.klf.se
Switzerland	http://www.vsae.ch or http://www.asfm.ch
Uganda	http://www.auwmd.org
United Kingdom	http://www.medicalwomensfederation.co.uk
United States of America	http://www.amwa-doc.org

6. DONATIONS AND BEQUESTS

MWIA would like to thank the following women's organisation in Dortmund for their generous donation in the amount of Euro 1700: **Soroptomist, Zonta, Inner Wheel Club, German Medical Women's Association, German Association of Women Lawyers, Lions Club Fluxus**

MWIA would like to thank **Dr. Zehnter**, a gastroenterologist in Dortmund, Germany, for his continuous support and donation in the amount of Euro 400,00.

MWIA would also like to thank **Dr. Shajia Kahn** (Canada) for her donation in the amount of 30,000.00 YEN (Euro 220,00).

7. OBITUARY

Mrs. Hertha Dax
Executive-Secretary of MWIA, 1968 – 1982
Member of Honour 1982

It is with sadness that MWIA announces the demise of Mrs. Hertha Dax who passed away on 20 January, 2004, at the age of 87. Hertha Dax was Executive Secretary of MWIA from the time of the congress in Vienna in 1968 to the congress in Manila in 1982. She, together with the then President Dr. Lore Antoine, built up the Secretariat in Vienna after it had been moved there from Geneva.

8. MISCELLANEOUS

Request/Inquiry

From Dr. Aivi Puloka from Tonga
E-mail: vkpuloka@kalianet.to

Would anyone be willing to offer us a used colposcope with therapeutic pieces like, cryotherapy, ball diathermy, vaginal speculum with suction and punch biopsy forceps? I'm trying to start a colposcopy service in order to advertise more pap smears. We would be most grateful for any assistance.

Announcement of a healthcare event

From Agnes Davids
E-mail: adavids@iir.co.za, Website: <http://www.iir.co.za>

We are hosting a Healthcare event and would like to invite your members to this prestigious event in January 2005. The event will provide them with up-to-the-minute information regarding the latest developments in the healthcare industry by way of influential speakers from African countries. The networking opportunities that will be made available to them at this event are unrivalled. They will be given the opportunity to interact and exchange details and ideas with leaders in the healthcare industry and like-minded contemporaries from across Africa. I would greatly appreciate it if you send me their contact details, postal or email in order to send the invites. Should you like to form a partnership with us for this event, feel free to contact me.

Announcement

16 Days of Activism Against Gender Violence Campaign – Center of Global Leadership

The 16 Days of Activism Against Gender Violence is an international campaign originating from the first Women's Global Leadership Institute sponsored by the Center for Women's Global Leadership in 1991. Participants chose the dates, November 25, International Day Against Violence Against Women and December 10, International Human Rights Day, in order to symbolically link violence against women and human rights and to emphasize that such violence is a violation of human rights. This 16-day period also highlights other significant dates including December 1, which is World AIDS Day, and December 6, which marks the Anniversary of the Montreal Massacre. The 16 Days Campaign has been used as an organizing strategy by individuals and groups around the world to call for the elimination of all forms of violence against women by various initiatives. Since 1991, approximately 1,700 organizations in 130 countries have participated in the 16 Days Campaign.

For more information about the 16 Days of Activism Against Gender Violence, please contact:

Center for Women's Global Leadership, Rutgers, The State University of New Jersey, 160 Ryders Lane, New Brunswick, NJ 08901-8555 USA; ph: (1-732) 932-8782; fax: (1-732) 932-1180; e-mail: cwgl@igc.org, website: <http://www.cwgl.rutgers.edu>.

II. ORGANISATIONS

1. UNITED NATIONS (UN)



Reports and Extracts from Publications

Report of the 48th Session of the UN Commission on the Status of Women (CSW)

by Dr. Shelley Ross

Along with Dr. Satty Gill Keswani, MWIA's representative at the UN in New York, I attended the 48th Session of the United Nation's Commission on the Status of Women.

There were two themes for this session, namely:

- * The Role of Men and Boys in Achieving Gender Equality and
- * Women's Equal Participation in Conflict Prevention, Management and Conflict Resolution in Post-conflict Peace-building.

In contrast to last year's session, where the theme on Preventing Violence Against Women did not pass at the CSW, both of these themes were well accepted by the member nations.

Dr. Angela King is finishing her term as Assistant Secretary-General and Special Adviser on Gender Issues and the Advancement of Women. It is her office that is in charge of the CSW.

Dr. Wariara Mbugua, formerly of UNFPA, now works for this department.

There were a number of important resolutions, including one urging governments to empower women to protect themselves from HIV infection and to provide equal access to treatment for both women and men.

Showing the relevance of our Training Manual for Gender Mainstreaming in Health, the Commission expressed its concern at the remaining constraints on the full implementation of gender mainstreaming into all policies and programmes of the United Nations system.

Next year, the CSW will be examining Beijing + 10. There will be a critical appraisal of the accomplishments since the International Conference on Women was held in Beijing in 1995. In addition, there will be a need to integrate a gender perspective in the implementation and review of the Millennium Declaration.

Not a minute more: Ending violence against women Extract from the UNIFEM newsletter – November 2004

Violence against women is arguably the world's most prevalent, pervasive, and systemic problem. It is a problem without borders, a universal scourge on women and their families that knows no boundaries of geography, culture or wealth. It has grown to epidemic proportions around the world, devastating lives, fracturing communities and prohibiting development. At least one in three women worldwide will be beaten, coerced into sex, or otherwise abused in her lifetime -- with the abuser usually someone known to her.

According to UN Secretary-General Kofi Annan, it is "perhaps the most shameful human rights violation." Unless tackled systematically at all levels of society with zero-tolerance policies and a concerted effort by the international community and governments to make it socially unacceptable and a crime, gender-based violence will stall any real progress towards equality, development and peace.

Some progress: Two steps forward, one step back

In the last two decades, women's organizations have taken the lead in moving the issue from the shadows into the public eye, taking innovative steps to focus world attention on the problem. Numerous initiatives have led to dramatic changes in norms, laws, policies and practices in many countries.

These efforts have been supported by international standards and policies that recognize violence against women as a human rights abuse.

Today, following global and regional commitments and treaties and the tireless efforts of activists, at least 45 nations have passed new laws that explicitly prohibit domestic violence, while more than 21 countries are drafting new laws. Twenty-five countries have adopted laws and policies addressing female genital mutilation, 16 countries have passed distinct legislation on sexual assault, 14 countries have adopted laws on sexual harassment, and another 46 have incorporated provisions related to sexual harassment in non-specific legal codes. Continued advocacy and NGO-government dialogues have led to responses that directly address female survivors of violence, such as special female police stations, community policing, gender-sensitive training for law-enforcement officials and the judiciary, women's and people's courts, and one-stop crisis centres.

(For further information please go to: <http://www.unifem.org/news/currents/current200411.html>)

2. WORLD HEALTH ORGANIZATION (WHO)



Report on the 57th World Health Assembly, Geneva, May 2004

by Dr. Shelley Ross

This first World Health Assembly under the leadership of Director-General, Dr. Lee Jong-Wook, was held at the Palais des Nations in Geneva from May 17-21, 2004. Dr. Corinne Bretscher-Dutoit and I had the honour of representing MWIA.

Topping the agenda were discussions around the HIV/AIDS epidemic and methods to provide antiretroviral treatment to those living with HIV/AIDS. WHO has developed the slogan "3 by 5," which refers to providing antiretrovirals to 3 million people by the end of 2005.

Other highlights include the Strategy on diet, physical activity and health, the role of road safety and health, agreement by countries to commit to eradicate guinea-worm disease, polio and Buruli ulcer.

Former President Jimmy Carter addressed the World Health Assembly, stressing the need for people to have access to treatment for mental health disease.

This is the 10th anniversary of the Year of the Family and a resolution was adopted acknowledging that active participation of families and communities in promoting and protecting their own health has been shown to be effective.

Of particular interest to MWIA was the adoption of WHO's first strategy on reproductive health. Reproductive and sexual ill-health accounts for 20% of the global burden of ill-health for women and 14% for men. The strategy targets five priority aspects of reproductive and sexual health: improving antenatal, delivery, postpartum and newborn care; provides high-quality services for family planning, including infertility services; eliminating unsafe abortion; combating sexually transmitted infections, including HIV, reproductive tract infections, cervical cancer and other gynecological morbidities; and promoting sexual health.

The strategy works towards attaining the Millennium Development Goals (MDG's), plus those of the International Conference on Population and Development (ICPD) in 1994 and its five-year follow-up (ICPD+5). Three of the eight MDGs are directly related to reproductive and sexual health, namely, improving maternal health, reducing child mortality and combating HIV/AIDS, malaria and other diseases.

Information Point MWIA involvement with WHO

MWIA is one of 189 NGO's in official relations with WHO. This confers special privileges, namely participation in WHO meetings, committees and conferences, including the governing body and the ability to make statements at these meetings. NGO's need to establish a joint program of work and a 3-year plan with a technical department of WHO. Each NGO is assigned a technical officer as the focal point for collaboration. Our officer is Dr. Daniel Makuto.

The current principles guiding WHO/NGO relations have been in effect since 1987. In 2001, the past Director-General, Dr. Gro Harlem Brundtland, developed the Civil Society Initiative to energize WHO's relations with civil society. Ms. Eva Wallstam has been the Director of the Civil Society Initiative but will soon be Director of Gender Mainstreaming and Women's Health.

Civil society is not a familiar word but stands for organizations that are non-state, not-for-profit, voluntary organizations. NGO's are included in civil society but usually have a formal structure, offer services to people other than their members and are usually registered with national authorities.

3. EUROPEAN WOMEN'S LOBBY (EWL)



Report on the General Assembly of the EWL by Dr. Waltraud Diekhaus

On 17-18 October I participated in the General Assembly of the European Women's Lobby. It was a historic event when seven new national women co-ordinates from new EU Member States were welcomed into full membership of the EWL (Czech Republic, Estonia, Lithuania, Malta, Poland, Slovak Republic, Turkey). This means that the EWL today includes national co-ordinations from 24 countries in Europe, as well as some 23 large international networks. At the same occasion, the EWL also elected its new President, Kirsti Kolthoff from the Swedish Women's Lobby. The EWL General Assembly took place in Brussels. The Assembly gathered a hundred delegates from member organisations across Europe to discuss the EWL's work programme, report of activities, and motions that were proposed by the membership. Delegates also met in workshops in order to discuss recommendations in relation to the EWL Beijing+10 report. The fruitful General Assembly was concluded by a reception in which 30 members of the European Parliament participated.

To join the Beijing+10 online discussion see: <http://www.un.org/womenwatch/forums/review/>

4. WORLD MEDICAL ASSOCIATION (WMA)



The World Medical Association (WMA) is a global federation of National Medical Associations representing the millions of physicians worldwide. Acting on behalf of patients and physicians, the WMA endeavours to achieve the highest possible standards of medical care, ethics, education and health-related human rights for all people. For further information please look at <http://www.wma.net> or E-mail: wma@wma.net

WMA General Assembly 6 – 9 October, 2004 by Dr. Yasuyo Takayanagi

The General Assembly of the World Medical Association was held in the Tokyo Imperial Hotel on October 6–9, 2004. There were about 500 attendees from 50 countries at the Dinner Reception put on by the Japan Medical Association, and about 200 people at the Scientific Sessions. There were two main themes of the Scientific Sessions. The theme for the first session was “Advanced Medical Technology and Medical Ethics,” and that for the second session was “Progress in Information Technology and Health Care.”

The president of the Japan Medical Association gave a keynote speech entitled "Modern Demands in Health Care." Lectures in the second session were "Coordination of Progress in Information Technology with Health Care in the 21st Century," "Transforming Health Care through Integrated Biomedical Informatics and Applied Genomics," "Medical Information and Privacy in the Information Society," and "Continuing Medical Education for Physicians and Professional Autonomy." We discussed all these themes later, and many opinions were expressed (including mine).

In 1986 I attended the World Medical Association General Assembly in the United States, and one of the themes was "The Quality of Medical Students." At that time in Japan, 50% of national medical colleges rejected color defective students. During that assembly, I described this situation in Japan from the floor, and my comments were published in the Journal of the Japan Ophthalmologists Association. For this recent assembly in Tokyo, the Japan Medical Association gave general members no information about how to register, so I registered on the Internet. The next day, the committee chairman of the Japan Medical Association called me and said I would not have any chance to express my opinion. I responded that it would be enough to talk with the foreign doctors I met during the reception and meetings.

The person sitting next to me at the reception was the representative of one prefecture's medical association, and he told me that the Japan Medical Association had requested each prefecture to send three doctors, so opportunities for general members to attend were limited.

The progress in medical technology and health care has been wonderful. One of the talks that I found most interesting was not by a medical doctor but a law professor, who said that medical information should not be monopolized by either patients or doctors, but is something that belongs to all society. However, this must be balanced with patient privacy. This is a way of thinking that I would like to see introduced in medical education.

In Japan there is a lack of ethics in general medicine. Such ethical considerations are even more important in advanced medicine. In his concluding remarks, the vice-president of the Japan Medical Association stated that our goal should be to make advanced medical treatment available to everyone. However, I do not believe this should be done at the expense of general medical treatment. The fact in Japan today is that our national health care insurance system covers fewer and fewer of the common diseases people are most likely to suffer from.

The Japan Medical Association should make greater efforts to bring young doctors to such occasions, where they can gain important knowledge and exchange opinions with leading people in the field.

5. International Labour Organisation (ILO)

ILO reports on women & employment

(published in Go Between no. 102)

Women are entering the global labour force in record numbers, but they still face higher unemployment rates and lower wages and represent 60% of the world's 550 million working poor. (International Labour Organization (ILO), March 2004).

At the same time, *Breaking Through the Glass Ceiling; Women in Management*, a separate updated analysis of trends in the efforts of women to break through the "glass ceiling," says the rate of success in crashing through the invisible, symbolic barrier to top managerial jobs remains "slow, uneven and sometimes discouraging."

"These two reports provide a stark picture of the status of women in the world of work today," ILO Director-General Juan Somavia said. "Women must have an equal chance of reaching the top of the job ladder. And, unless progress is made in taking women out of poverty by creating productive and decent employment, the Millennium Development Goals of halving poverty by 2015 will remain out of reach in most regions of the world."

Global Employment Trends for Women 2004 finds that more women work today than ever before. In 2003, 1.1 billion of the world's 2.8 billion workers, or 40%, were women, representing a worldwide increase of nearly 200 million women in employment in the past ten years. Still, the explosive growth in the female workforce hasn't been accompanied by true socio-economic empowerment for Women, the report indicates. Nor has it led to equal pay for work of equal value or balanced benefits that would make women equal to men across nearly all occupations.

"In short, true equality in the world of work is still out of reach," the report adds.

Female unemployment in 2003 was slightly higher than male unemployment for the world as a whole (6.4% for female, 6.1% for male), the ILO said, leaving 77.8 million women who were willing to work and looking for work without employment.

The report also found that women typically earn less than men. In the six occupations studied, women still earn less of what their male co-workers earn, even in "typically female" occupations such as nursing and teaching.

"Creating enough decent jobs for women is only possible if policy makers place employment at the centre of social and economic policies and recognize that women face more substantial challenges in the workplace than men," Mr. Somavia said. "Raising incomes and opportunities for women lifts whole families out of poverty and it drives economic and social progress."

Breaking Through the Glass Ceiling finds that the overall employment situation for women hasn't evolved significantly since 2001. Women's shares of professional jobs increased by just 0.7% between 1996-1999, and 2000-2002, and data shows that women are markedly under-represented in management compared to their overall share of employment. However, the study says some employers are beginning to shift attitudes and businesses now understand that family-friendly policies, improved access to training, and stronger mentoring systems encourage female staff retention and can improve productivity.

(For further information please go to: <http://www.ilo.org>)

6. INTERNATIONAL WEBSITES AND E-MAIL ADDRESSES

PUBLICATIONS- WEB SITES

Center for Women's Global Leadership

<http://www.cwgl.rutgers.edu>

UNAIDS

Global Coalition on Women and AIDS: Violence Against Women and HIV/AIDS

http://womenandaids.unaids.org/themes/theme_2.html

UNIFEM

UNIFEM Gender and HIV/AIDS Web Portal Topic on Violence Against Women and HIV/AIDS

http://www.genderandaids.org/modules.php?name=News&new_topic=9

EGM Report

The EGM Report on the role of men and boys in achieving gender equality is completed and is available online at the Division website: <http://www.un.org/womenwatch/daw>

Council of Europe publication: Violence against women and children - Vision, Innovation and Professionalism in policing, VIP Guide (2003)

Order from: <http://book.coe.int/FR/CAT/LIV/HTM/I2048.htm> (English only)

Progress of the World's Women – Volume 2, Gender equality and the Millennium Development Goals

- New report by the United Nations Development Fund for Women (UNIFEM).

Download from: <http://www.unifem.org/>

Gender and Women's Health Website

Department of Gender and Women's Health of the WHO
<http://www.who.int/gender>

Guide to resources for preventing violence

WHO has published a Guide to United Nations resources and activities for the prevention of interpersonal violence. It provides information on the work of 14 UN agencies and programmes in this area, together with contact data, a bibliography, web site addresses, and the addresses of the relevant databases.

Details and a copy of the Guide are available from bookorders@who.int

Calendar of forthcoming UN meetings

An updated calendar of UN meetings of interest to NGOs in consultative status, and other NGO-related information, is available on the NGO Section's Internet home page at the following address:
<http://www.un.org/esa/coordination/ngo>

Chart of the principal organs of the UN System

The website address is <http://www.un.org/> or <http://www.un.org/aboutun/chart.html>

Vacancies of the WHO

Current employment opportunities can be found under: <http://www.who.int/per/vacancies>

III. ANNOUNCEMENTS

The next Update will be published in February 2005.

Please send us your reports, comments or any other interesting information by 25 January 2005 at the latest.

Letters to the editor are always welcome.

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