

Creating a healthy workplace improves mental wellbeing and productivity – UN

10 October 2017 – People spend a large proportion of time at work, where experiences there factor into their overall wellbeing, the United Nations said on World Mental Health Day, noting that depression and anxiety disorders are common mental disorders that have an impact on our ability to work, and to work productively.

“Employers and managers who put in place workplace initiatives to [promote mental health](#) and to support employees who have mental disorders see gains not only in the health of their employees but also in their productivity at work,” said the World Health Organization ([WHO](#)), placing mental health in the workplace as the theme of World Mental Health Day 2017.

On the other hand, WHO added that “a negative working environment, may lead to physical and mental health problems, harmful use of substances or alcohol, absenteeism and lost productivity.”

On Twitter, [Secretary-General](#) António Guterres said [we can and must eliminate the stigma](#) that prevents people from speaking freely and seeking treatment for mental illness.”

“Globally, more than 300 million people suffer from depression, the leading cause of disability. More than 260 million are living with anxiety disorders. Many of these people live with both” points out WHO.

A recent WHO-led study estimates that [depression and anxiety disorders](#) cost the global economy one trillion dollars each year in lost productivity.

The UN health agency cited as risks to mental health inadequate health and safety policies; poor communication and management practices; limited participation in decision-making or low control over one’s area of work; low levels of support for employees; inflexible working hours; and unclear tasks or organizational objectives.

To create a healthy workspace, WHO suggests, among other things, the importance of understanding the opportunities and needs of individual employees; interventions and good practices that protect and promote mental health in the workplace; and becoming aware of how the workplace environment can adapt to promote better mental health for employees and support sources where people can find help.

“Mental health interventions should be delivered as part of an integrated health and well-being strategy that covers prevention, early identification, support and rehabilitation,” stresses WHO.

World Mental Health Day is observed on 10 October every year, with the overall objective of raising awareness of mental health issues and mobilizing efforts in support of better mental health.

Leaders ‘not interested’ in finding solution to Yemen crisis, UN envoy tells Security Council

10 October 2017 – Parties to the conflict in Yemen are eroding the path to peace while the country’s people suffer amid a man-made humanitarian catastrophe, said today a senior United Nations official, urging Security Council member countries to use their political and economic powers to pressure warring sides to commit to a path of peace.

“In Yemen, [there are no winners](#) on the battlefield. The losers are the Yemeni people who suffer by this war,” stated Ismail Ould Cheikh Ahmed, the Special Envoy of the UN Secretary-General for Yemen, briefing the Security Council.

“The people [of Yemen] are getting poorer while influential leaders get richer. They are not interested in finding solutions, as they will lose their power and control in a settlement,” he warned.

Noting that an agreement on securing humanitarian access remains essential, it cannot replace a solution which is a part of a larger comprehensive peace deal, Mr. Ould Cheikh Ahmed explained that he has had meetings with both Yemeni and international officials and that he is discussing a proposal that includes humanitarian initiatives to rebuild trust as well as bringing the parties back to the negotiations table.

“We hope this commitment will translate into action and deepen their engagement with me on the basis of these initiatives in order to reach a peaceful political solution,” he said, noting that the UN will continue to utilize all its political, logistical, administrative, and advisory facilities to support the country but only the warring parties could bring peace.

“They are accountable for a failure. I reiterate that the only viable path for the future of Yemen is a negotiated settlement,” he added.

Also briefing the Security Council today, John Ging, the Director of Operations at the UN Office for Coordination of Humanitarian Affairs ([OCHA](#)) said the relief plan for the country continues is still short of funds.

The \$2.3 billion [Yemen Humanitarian Response Plan](#) to reach 12 million people in need of humanitarian support and protection this year has received only 55 per cent of the resources needed.

“Despite the complexity of the response, this year, humanitarians have [already reached seven million people](#) with direct assistance. We therefore encourage [UN] Member States to directly support our efforts and to do more

through the response plan,” said the UN relief official.

In his briefing, Mr. Ging also called for an urgent resumption commercial flights at Sana’a airport as well as imports into the country.

“Any significant decline in imports due to bureaucratic delays risks making the threat of famine a reality,” he warned.

The conflict in the country, now into its third year, has rendered 17 million Yemenis food insecure and over a third of the country’s district in severe danger of famine.

Furthermore, destruction of infrastructure and breakdown of public services, especially water and sanitation systems, has resulted in a devastating cholera outbreak, which has already killed more than 2,100 individuals and continues to infect thousands each week.

[UN agencies launch cholera immunization campaign for Rohingya refugees in Bangladesh](#)

10 October 2017 – In a race to prevent a cholera outbreak among the more than half a million Rohingya refugee arrivals over the past six weeks in Cox’s Bazaar, Bangladesh, United Nations agencies launched on Tuesday a massive immunization campaign.

“Emergency vaccination saves lives. The [risk of cholera is clear and present](#), and the need for decisive action apparent,” says Dr. N Paranietharan, World Health Organization Representative to Bangladesh said.

The campaign, which is led by the Ministry of Health and supported by the WHO and The UN Children’s Fund ([UNICEF](#)), is being held in Ukhiya and Teknaf, where more than half a million people have arrived from across the border since August, joining vast numbers already residing in a series of settlements and camps.

Some 900,000 doses of the vaccine have been mobilized and are being delivered by more than 200 mobile vaccination teams, making it the second largest oral cholera vaccination campaign ever, according to the UN.

“WHO is committed to mobilizing its full technical and operational capacity to support the Ministry and our partners to protect, promote and secure the health of this immensely vulnerable population,” he added.

After more than 10,292 cases of diarrhoea had been reported and treated from

across the settlements and camps over the last week, WHO warned of the potential for a cholera outbreak.

“Cholera is a dangerous disease, especially among children living in cramped, unhygienic conditions. Prevention is essential,” said Edouard Beigbeder, UNICEF Representative in Bangladesh.

The International Organization for Migration’s ([IOM](#)) Senior Regional Medical Officer for Asia and the Pacific, Patrick Duigan, welcomed the critically important initiative, but stressed, “there are still [multiple and serious public health risks](#) for this refugee population and a massive scale up of resources and the overall response is needed to mitigate further risks of life threatening illnesses.”

To help meet water, sanitation and hygiene needs, UNICEF is scaling up its interventions and communication on safe practices, and prepositioning critical supplies for case management and supporting the Ministry of Health to set up diarrhoea treatment centres, among other response-oriented interventions.

Meeting the arrival surge

In parallel, against the backdrop of Bangladesh border guards saying that more than 11,000 Rohingya refugees crossed by land on Monday alone into south-eastern Bangladesh through several points, the Office of the High Commissioner of Refugees ([UNHCR](#)) spokesperson Adrian Edwards told reporters at today’s regular press briefing in Geneva that “UNHCR is working with the Bangladesh authorities on [a transit centre for a potential refugee influx](#) over the coming days.”

UNHCR sources say that many of the new refugees came from the Buthidaung area in Myanmar’s northern Rakhine state. Some said they fled torching and killings back home; one boy was seen with a big gash across his neck. Others said they left in fear ahead of anticipated violence.

To reach Bangladesh, they walked for up to 14 days. Many were carrying children and baskets containing whatever they could pack at short notice. They waded through marshland before swimming across the Naf river that divides the two countries. Many women and children could not swim and had to ride piggyback on volunteer swimmers. Some used inflated plastic bags and UNHCR tarpaulins as makeshift flotation devices.

“The new arrivals have now been moved away from the border areas into established camps and settlements in the Kutupalong and Balukhali area. UNHCR has trucked in plastic sheets and jerry cans for water. We are also coordinating with the government and partners to provide urgent services – food, water and healthcare – to these new refugees,” flagged Mr. Edwards.

In preparation for the possible new arrivals, UNHCR’s Government counterpart, the Refugee Relief and Repatriation Commission (RRRC), will lead preparedness activities with UNHCR in coordination with partners, including UNICEF, IOM, WHO and the World Food Programme ([WFP](#)).

UN health agency establishes high-level commission to tackle noncommunicable diseases

10 October 2017 – The United Nations health agency today announced the establishment of a high-level global commission on noncommunicable diseases (NCDs) to identify innovative ways to curb the world's biggest causes of death and extend life expectancy for millions of people.

“We urgently need new approaches and action on a dramatically different scale if we are to stop people [dying unnecessarily](#) from noncommunicable diseases,” said Tedros Adhanom Ghebreyesus, Director-General of the World Health Organization ([WHO](#)), in a statement.

“I am committed to engaging the very best people in the world to address our health challenges,” he added.

The commission will be chaired by Sania Nishtar, a prominent global advocate for action against [noncommunicable diseases](#), former Federal Minister of the Government of Pakistan and civil society leader. She has also previously served as co-chair of the [WHO Commission on Ending Childhood Obesity](#).

NCDs – including cardiovascular disease, cancers, diabetes and respiratory disease, as well as suffering from mental health issues and the impacts of violence and injuries – kill about 40 million people globally each year, accounting for 70 per cent of all deaths.

About 15 million of those deaths are in people between the ages of 30 and 69. Low- and middle-income countries account for more than 80 per cent of all deaths from NCDs. Violence and injuries take an overwhelming toll on young people, particularly boys.

In 2015, world leaders committed to reduce premature deaths from the diseases by one third by 2030 as part of the Sustainable Development Goals. Recent WHO reports indicate that the world will struggle to meet that target.

Later this month, ministers and other health leaders from around the world will review progress on this target at the WHO Global Conference on Noncommunicable Diseases in Montevideo, Uruguay.

Governments and other stakeholders will meet again at the third United Nations High-level meeting on noncommunicable diseases in 2018.

[Disaster risk outpaces resilience in Asia-Pacific, warns UN regional commission](#)

10 October 2017 – Disaster risk is outpacing resilience in Asia-Pacific and putting people in this most disaster-prone region at risk of being pushed back into poverty, the latest report from a United Nations regional commission has revealed.

Disasters can very quickly strip poor people of their livelihoods bringing deeply [disruptive impacts](#) that push them back into absolute poverty or trap them in an intergenerational transmission of poverty, said Shamshad Akhtar, Executive Secretary of the UN Economic and Social Commission for Asia and the Pacific ([ESCAP](#)), as she launched the report in Bangkok today.

Asia-Pacific Disaster Report 2017 shows that the greatest impacts of disasters are in countries which have the least capacity to prepare or respond to these events. Between 2000 and 2015, the low- and lower middle-income countries in the region experienced almost 15 times more disaster deaths than the region's high-income countries.

Beyond the human costs, ESCAP research indicates that between 2015 and 2030, 40 per cent of global economic losses from disasters will be in Asia and the Pacific, while the region accounts for around 36 per cent of global gross domestic product (GDP).

The greatest burden of the losses as a proportion of GDP will be borne by small island developing States with average annual losses close to 4 per cent of their GDP while the least developed countries will have annual losses of around 2.5 per cent of GDP.

Related story: [UN agencies aid millions affected by flooding, landslides in South Asia](#)

Ms. Akhtar said that action on early warning systems is critical, and called for cost-effective financing that is needed to decrease the existing resilience gaps.

The absence of an institutionalized insurance culture and adequate post disaster financing threaten our extraordinary economic and developmental achievements. Promoting more, and deeper, collaboration among countries in the region on disaster risk financing will be an ESCAP priority, she added.

In recent months, the region has seen Typhoon Hato unleash large scale damage in Hong Kong, and Macau, that stretched all the way to Vietnam, along with torrential monsoon rains in Bangladesh, India and Nepal that claimed more

than 900 lives and affected another 41 million people.

ESCAP argues that measures for disaster risk reduction should take account of the shifting risks associated with climate change, especially in risk hotspots where a greater likelihood of change coincides with a higher concentration of poor, vulnerable or marginalized people.

The report presented at the opening of the ESCAP Committee on Disaster Risk Reduction during the first ESCAP Disaster Resilience Week aims to assist policymakers, in both public and private sectors, to better understand disaster risk and take action in the context of the [2030 Agenda](#) on Sustainable Development and the [Sendai Framework for Disaster Risk Reduction](#).