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BOOKS

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**Children and Youth in Crisis: Protecting and Promoting Human Development in Times of Economic Shocks**
Editors Mattias Lundberg and Alice Wuermli

318 pp. 2.6 MB: https://openknowledge.worldbank.org/bitstream/handle/10986/9374/702600PUB0EP10067902B09780821395479.pdf?sequence=1

Motivated by the need to understand how crises affect human development in diverse segments of the population, this book explores how individuals and households cope with the changes and stresses induced by economic crises. It examines how these impacts and coping mechanisms differ across cultural and institutional contexts and looks at how best to protect the most vulnerable from lasting harm and the degradation of human capital.

* * *

**The Health of Nations**
by Gavin Mooney

To order online go to: http://zedbooks.co.uk/paperback/the-health-of-nations

The Health of Nations analyses how power is exercised both in health-care systems and in society more generally. In doing so, it reveals how too many vested interests hinder efficient and equitable policies to promote healthy populations, while too little is done to address the social determinants of health. Instead, the author argues, health services and health policy more generally should be returned to the communities they serve.

* * *

**Social Protection for Older Persons: Social Pensions in Asia**
Edited by Sri Wening Handayani and Babken Babajanian
Asian Development Bank 2012


This book examines the effectiveness and relevance of non-contributory or social pensions in supporting older persons in Asia. It discusses the political economy and financial sustainability of social pension reform, implications for gender equity and social rights, and design and implementation challenges. Case studies from Bangladesh, Nepal, Thailand, Viet Nam, and South Caucasus and Central Asia provide key lessons for informing development policy and practice in Asia and the Pacific.
**Where There Is No Dentist**

by Murray Dickson

updated and expanded with information about HIV and AIDS by Richard Bebermeyer, Martin Hobdoll and Gene Stevenson

Hesperian, 15th printing (updated), July 2012

248 pp. 11.9 MB (!):


The 2012 edition of Where There Is No Dentist features a new section on how to do Atraumatic Restorative Treatment (ART), a permanent way to fill cavities without the use of a dental drill that was first pioneered in Tanzania in the mid-80s and is now used by health workers and dental workers in many parts of the world. Also updated was the information on other training materials, resources, and where to get dental supplies. This book is an important companion to the 2011 printing of Where There Is No Doctor.

**ONLINE PUBLICATIONS**

**Global Health**

**The Global Fund to Fight AIDS, Tuberculosis, and Malaria**

Draft Background paper prepared for the Working Group on Value for Money: An Agenda for Global Health Funding Agencies

by Denizhan Duran, Rachel Silverman, Victoria Fan et al.

Global Health Policy Program, Center for Global Development - Draft: July 17, 2012

45 pp. 1.4 MB:

[Link](http://www.cgdev.org/doc/blog/Global_Fund_background_paper_July17.pdf)

This is a draft background paper on the Global Fund, with particular emphasis on its resource flows, framework for funding decisions, incentive structure, and oversight mechanisms. While the ongoing reform of the Global Fund is focused on the fiduciary and financial audit measures that came as a response to press reports on misuse of funds, the organization still faces major challenges that threaten the Fund’s vision, impact on disease, and fundraising potential and must be addressed head-on by the new Executive Director.

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**Roadmap on Shared Responsibility and Global Solidarity for AIDS, TB and Malaria Response in Africa**

African Union - Union Africaine - União Africana
Addis Ababa, Ethiopia, July 2012

22 pp. 131 kB:

[Link](http://www.au.int/en/sites/default/files/Shared_Res_Roadmap_Rev_F%5B1%5D.pdf)

This Roadmap presents a set of practical African-sourced solutions for enhancing shared responsibility and global solidarity for AIDS, TB and malaria responses in Africa
on a sustainable basis by 2015. The solutions are organized around three strategic pillars: diversified financing; access to medicines; and enhanced health governance. The Roadmap defines goals, results and roles and responsibilities to hold stakeholders accountable for the realization of these solutions between 2012 and 2015.

**Together we will end AIDS**

Joint United Nations Programme on HIV/AIDS (UNAIDS), July 2012


The report contains the latest data on numbers of new HIV infections, numbers of people receiving antiretroviral treatment, AIDS-related deaths and HIV among children. It highlights new scientific opportunities and social progress which are bringing the world closer to UNAIDS vision of zero new HIV infections, zero discrimination and zero AIDS-related deaths. The report also gives an overview of international and domestic HIV investments and the need for greater value for money and sustainability.

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**The strategic use of antiretrovirals to help end the HIV epidemic**

World Health Organization, 2012

54 pp. 1.6 MB: [http://apps.who.int/iris/bitstream/10665/75184/1/9789241503921_eng.pdf](http://apps.who.int/iris/bitstream/10665/75184/1/9789241503921_eng.pdf)

This document is a discussion paper, prepared for the 2012 International AIDS Conference in Washington DC, United States of America. It highlights key issues that confront the global community, policy-makers and national programme planners as they seek to make optimal use of antiretroviral drugs (ARVs) as part of the broader response to HIV. It also discusses how ARVs could contribute to eventually ending the HIV epidemic.

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**Speed Up Scale-Up: Strategies, Tools and Policies to Get the Best HIV Treatment to More People, Sooner**

Médecins Sans Frontières (MSF) and UNAIDS, July 2012


This report outlines some of the strategies, tools and policies that have supported the scaling up of treatment during the past decade as well as those that can address persistent or new challenges. The results are presented from a 23-country survey of how consistently these strategies are being implemented. The findings demonstrate encouraging progress by some health ministries in adopting many of the enabling policies needed to facilitate scale-up and improve care. Nevertheless, the adoption and implementation of
these strategies, tools and policies are lagging in some countries.

* * *

AIDS: Ushering in a new era of shared responsibility for global health

by Kent Buse and Greg Martin
Globalization and Health 2012, 8:26 (19 July 2012)


For the first time since AIDS erupted as worldwide emergency, global leaders, the scientific community, activists and people living with HIV are venturing to speak about the end to the pandemic. Signs of hope abound: over 8 million people are receiving life-saving treatment, the number of new infections is on significant decline, the remarkable evidence of treatment’s impact on preventing new infections and the aspiration of zero new HIV infections among children is firmly within grasp. This editorial explores five areas that require specific attention.

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Financing the Response to AIDS in Low- and Middle- Income Countries: International Assistance from Donor Governments in 2011

by Jennifer Kates, Adam Wexler, Eric Lief et al.
Kaiser Family Foundation and UNAIDS, July 2012

19 pp. 394 kB: http://www.kff.org/hivaids/upload/7347-08.pdf

Donor government assistance for AIDS in low- and middle- income countries rose sharply from 2002 through 2008, the period just before the onset of the economic crisis. It then began to flatten and, last year, for the first time, disbursements declined. The current report finds that although funding has gone back up, it remains at 2008 levels. If such trends continue, reaching the UN Political Declaration investment target of US$ 22-24 billion needed by 2015 could be at risk.

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Engaging to End the Epidemic: Seven Essential Steps Toward an AIDS-Free Generation

Journal of Acquired Immune Deficiency Syndromes, August 1, 2012 - Volume 60 - Supplement 2; pp. S19-S47

Read/download all 8 articles for free at: http://journals.lww.com/jaids/toc/2012/08012

In the articles of this supplement, key symposium leaders address seven core topics at the heart of the future global AIDS response - areas that must be addressed if we are to close the book on the epidemic. Each of these articles provides a unique assessment of progress and a specific plan for moving forward. Together, the authors have created not only a valuable reference for the global AIDS response, but, most importantly, a provocative foundation for ongoing dialogue.

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**Lancet Series: HIV in Men Who Have Sex with Men**


This Lancet series explores the unique aspects of the HIV epidemic in Men Who Have Sex with Men (MSM), showing that it is factors such as the biology of anal sex, the characteristics of MSM networks, and known behavioural factors that are driving the epidemic in this population. The Series addresses the unique challenges faced by black MSM around the world, and discusses initiatives that reduce infectiousness of HIV - such as treatment-as-prevention and pre-exposure prophylaxis - that could have a huge impact in curbing the HIV epidemic in MSM and other populations.

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**More than the virus: HIV prevention and men who have sex with men living with HIV**

The Asia Pacific Coalition on Male Sexual Health (APCOM) and Institute of Development Studies (IDS), 2012


The brief examines current best practice and guidance for men who have sex with men (MSM) programming in Asia and the Pacific, and provides specific policy recommendations to ensure they meet the needs of MSM+ HIV prevention. It highlights that HIV prevention programmes have mostly ignored the wide spectrum of prevention needs of MSM who are living with HIV, and argues that it is time to shift thinking away from the ‘vectors of transmission’ framework to a ‘shared responsibility’ framework, which encompasses a much wider view of the important role that MSM+ play in HIV prevention.

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**Virginity testing and HIV/AIDS: Solution or human rights violation?**

by Nicola Hugo
Consultancy Africa Intelligence (16 July 2012)


This article discusses virginity testing as a growing trend in KwaZulu-Natal (KZN), South Africa. The revival of virginity testing, and the social interest in virginity being promoted by these tests, needs to be understood in the context of communities hard hit by HIV/AIDS. While this article explores the rationale behind testing as a ‘culturally appropriate’ strategy for managing the pandemic, it also addresses the ways in which these tests infringe on the human rights of girls and perpetuate female oppression through strict monitoring and control of female sexuality.

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Publication of PrEP Trial Data Provides Clear Evidence that PrEP Works for Men and Women
AVAC Lays out Priorities to Ensure Access
by Kay Marshall
Global Advocacy for HIV Prevention (AVAC), July 2012

2 pp. 226 kB:
http://www.avac.org/ht/a/GetDocumentAction/i/44812

Publication of data from three trials of pre-exposure prophylaxis (PrEP) for HIV – including the pivotal Partners PrEP trial – in the New England Journal of Medicine provides strong evidence that HIV-negative men and women who consistently take a daily antiretroviral (ARV) pill (either TDF/FTC, brand name Truvada, or TDF, brand name Viread) can significantly reduce their risk of HIV infection.

Guidance on oral pre-exposure prophylaxis (PrEP) for serodiscordant couples, men and transgender women who have sex with men at high risk of HIV
Recommendations for use in the context of demonstration projects
by Kevin O’Reilly, Ying-Ru Lo, Florence Koechlin et al.
World Health Organization, July 2012

19 pp. 164 kB:
http://apps.who.int/iris/bitstream/10665/75188/1/9789241503884_eng.pdf

Although the evidence of effectiveness is strong, it remains unclear how PrEP may best be implemented and scaled up in settings where its use might be most beneficial. Therefore, experience with using PrEP outside the context of controlled clinical trials is needed. For this, WHO is encouraging countries to undertake demonstration projects and will offer advice on key questions and areas that could be addressed to facilitate understanding of the safety, effectiveness and sustainability of daily oral PrEP and its use as an addition to existing HIV prevention efforts.

Preexposure Prophylaxis for HIV Infection among African Women
by Lut Van Damme, Amy Corneli, Khatija Ahmed et al.

12 pp. 604 kB:

Preexposure prophylaxis with antiretroviral drugs has been effective in the prevention of human immunodeficiency virus (HIV) infection in some trials but not in others. The authors report the primary results of the Preexposure Prophylaxis Trial for HIV Prevention among African Women (FEM-PrEP), a randomized, double-blind, placebo-controlled trial of once-daily oral TDF–FTC among high-risk women in Africa. The study was stopped early, on April 18, 2011, because of a lack of efficacy.

HESP-News & Notes - 16/2012 - page 9
**WHO HIV drug resistance report 2012**

by Silvia Bertagnolio, Michael R. Jordan, Jhoney Barcarolo et al.  
World Health Organization, July 2012

84 pp. 1.9 MB:  
http://apps.who.int/iris/bitstream/10665/75183/1/9789241503938_eng.pdf

This report reviews data on HIV drug resistance in low- and middle-income countries between 2003 and 2010. More widespread use of ARVs to treat HIV infection has led to drug resistance in low- and middle-income countries (LMICs), but the level is not steep enough to cause alarm. In LMICs, drug resistance stood at 6.8 percent in 2010. Drug resistance surveillance continues to provide important information on the effectiveness of ART programmes and services.

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**Vijana Tunaweza Newala: Findings from a Participatory Research and Action Project in Tanzania**

by Jennifer McCleary-Sills, Zayid Douglas, Annagrace Rwehumbiza et al.  
International Center for Research on Women (ICRW), 2011

44 pp. 2.5 MB:  

The publication describes a participatory research and action project (Vitu Newala) that aimed to both understand and respond to girls’ HIV-related vulnerabilities. The project was conducted in Newala, Guinea. The report describes the research processes contributing to the project: study design, the formative research, the intervention design, peer education programme development, and the project assessment.

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**HIV-Infektionen und AIDS-Erkrankungen in Deutschland**

Bericht zur Entwicklung im Jahr 2011 aus dem Robert Koch-Institut

Epidemiologisches Bulletin, 16. Juli 2012 / Nr. 28

20 pp. 717 kB:  


* * *
**HIV and Family Planning Integration in Tanzania**

by Janet Fleischman  
Center for Strategic and International Studies (CSIS), July 2012  

20 pp. 1.5 MB:  

The President’s Emergency Plan for AIDS Relief (PEPFAR) is well positioned to serve as a foundation for other global health programs, building on its health infrastructure, training, and systems. To fulfill that potential in the vital area of women’s health will require integrating HIV/AIDS services with family planning and reproductive health services. The results from U.S. health investments in Tanzania indicate that this is a feasible and cost-effective strategy to combat the AIDS epidemic and promote the health of women and girls, and through them their families and communities.

* * *

**Beyond ICPD and MDGs: NGOs Strategising for Sexual and Reproductive Health and Rights in the Asia-Pacific Region**

Kuala Lumpur Call to Action, 3 May 2012; Kuala Lumpur, Malaysia  

4 pp. 162 kB:  
http://arrow.org.my/APNGOs/KL_Call_to_Action.pdf

121 cross-generation activists, advocates and representatives of NGOs from diverse social movements from 27 countries in Asia and the Pacific, have gathered in Kuala Lumpur, Malaysia, to revitalise the sexual and reproductive health and rights (SRHR) agenda for sustainable development in the region, drawing from the commitments made in the Programme of Action of the International Conference on Population and Development (ICPD PoA) and the Millennium Development Goals (MDGs). They call for the inclusion and prioritisation of women and young people’s SRHR in new development frameworks that take stock of current consensus documents and move beyond them to fully achieve their human rights.

* * *

**Social Entrepreneurship for Sexual Health (SESH): A New Approach for Enabling Delivery of Sexual Health Services among Most-at-Risk Populations**

by Joseph D. Tucker, Kevin A. Fenton, Robert Peckham et al.  

6 pp. 94 kB:  
http://www.plosmedicine.org/article/fetchObjectAttachment.action?uri=info%3Adoi%2F10.1371%2Fjournal.pmed.1001266&representation=PDF

Social entrepreneurship is “the innovative use of resource combinations to pursue opportunities at the creation of organizations and/or practices that yield and sustain social benefits”. Increasingly limited public resources, alongside persistent demand for high-quality sexual health services, require a reconsideration of strategies and innovative models for delivery. New point-of-care testing technology and increased community-based organization capacity suggest how a SESH approach could accelerate sexual
health testing, linkage, and retention in care. The SESH approach will not replace the dominant service delivery system, but may prove effective in reaching and sustaining engagement with individuals who may be impossible to reach using a conventional delivery system.

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**Good Practices in Essential Supplies for Family Planning and Maternal Health**

United Nations Population Fund (UNFPA), 2012

42 pp. 1.6 MB:

UNFPA is intensifying strategic support to voluntary family planning through its Global Programme to Enhance Reproductive Health Commodity Security. Countries participating in the Global Programme are now reporting their own success stories backed by measurable results. This publication shares numerous examples of activities in countries participating in the Global Programme to Enhance Reproductive Health Commodity Security as of 2011.

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**Dry, tight and warm: Dry sex practices in Central and Southern Africa**

by Nicola Hugo
Consultancy Africa Intelligence, 16 May 2012

Read online at:

A preference for a dry, tight vagina during sexual intercourse has been identified in several Central and Southern African countries. Understanding the social and cultural influences driving the practice of dry sex, the methods used and their impact on sexual health is important for sexual health campaigns and the development of safe sex techniques. This paper highlights some of the physical, cultural, and social aspects of dry sex by discussing four studies conducted in the Southern and Central African regions.

**Maternal & Child Health**

**Child Development Index 2012: Progress, Challenges and Inequality**

by Alex Cobham, Nuria Molina, Maricar Garde et al.
The Save the Children Fund, 2012

36 pp. 1.9 MB:
http://resourcecentre.savethechildren.se/rb?q=cmis/browser&id=workspace://SpacesStore/01bbf851-0954-4993-8260-3ec047c67c90/1.11

The 2012 edition of the Child Development Index highlights the impressive progress the world has made in reducing child mortality and ensuring millions more children go to school. At the same time it warns of the impact of the failure to tackle child undernutrition on children’s overall well-being. Drawing on data on stunting and wasting, it looks at the disastrous effects of the food and financial crises on children. Finally, it makes a se-
ries of recommendations to developing-country governments and to donors on tackling
hunger and undernutrition.

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The Impact of Daycare Programs on Child Health, Nutrition and Development in Developing Countries: A Systematic Review

by Jef L Leroy, Paola Gadsden, Maite Guijarro
The International Initiative for Impact Evaluation (3ie), September 2011

46 pp. 1.3 MB:
http://www.3ieimpact.org/media/filer/2012/05/07/SR%20007_Web.pdf

Early childhood is an important period in the development and well-being of a person. It
is in this phase that we form cognitive and social skills that last through an entire life
span. But more than 200 million children under the age of five in developing countries
are not growing or learning to their full potential. The study systematically reviews evi-
dence from impact evaluations of programmes in Latin America providing formal out-of-
home care for children under the age of five.

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Poster: 21 Dangers of Infant Formula

World Alliance for Breastfeeding Action, July 2012

2 pp. 4.0 MB:

The poster shares information on the effects that Formula companies do not want you to
know about. The evidence based references and sources of information are presented
on the back of the poster.

* * *

Reduction of Malaria Prevalence by Indoor Residual Spraying: A Meta-
Regression Analysis

by Dohyeong Kim, Kristen Fedak and Randall Kramer

8 pp. 886 kB:
http://www.ajtmh.org/content/87/1/117.full.pdf+html

Indoor residual spraying (IRS) has become an increasingly popular method of insecti-
cide use for malaria control, and many recent studies have reported on its effectiveness
in reducing malaria burden in a single community or region. The meta-regression analy-
sis indicates that IRS is more effective with high initial prevalence, multiple rounds of
spraying, use of DDT, and in regions with a combination of Plasmodium falciparum and
P. vivax malaria.

* * *
Subsidizing artemisinin-based combination therapies: a preliminary investigation of the Affordable Medicines Facility – malaria

by Roger Bates, Kimberly Hess, Richard Tren et al.
Research and Reports in Tropical Medicine 2012:3 1-6 (10 July 2012)

6 pp. 261 kB:
http://www.fightingmalaria.org/pdfs/subsidizingACTs_Bate_etal.pdf

The Affordable Medicines Facility – malaria (AMFm) is a subsidy mechanism to lower the price of, and hence increase access to, the best antimalarial medicines, artemisinin-based combination therapies (ACTs). While the AMFm stipulates that only quality-approved products are eligible for subsidy, it is not known whether those products, when actually supplied, are of good quality and comport with established pharmacopeial guidance on formulation and content of active ingredients. This study aimed to assess price and quality of AMFm ACTs, to compare AMFm ACTs with non-AMFm ACTs and artemisinin monotherapies, and to assess whether AMFm ACTs have been pilfered and diverted to a nearby country.

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Independent Evaluation of the Affordable Medicines Facility - malaria (AMFm) Phase 1

Preliminary Report submitted to The Global Fund to Fight AIDS, Tuberculosis and Malaria by ICF International and The London School of Hygiene and Tropical Medicine, July 18, 2012

675 pp. 8.2 MB:
http://www.theglobalfund.org/documents/amfm/AMFm_2012IEPhase1FullPreliminary_Report_en/

The goal of AMFm is to improve access to artemisinin-based combination therapies (ACTs), the most effective anti-malaria treatment, saving lives and delaying the onset of widespread resistance to this class of medicines. The AMFm pilot phase is set out to increase availability, particularly through private outlets where most people seek their treatments, and drive down the price of ACTs through a factory-gate global subsidy of ACTs combined with country-level measures to support its implementation. The AMFm pilot phase currently operates in seven countries: Ghana, Kenya, Madagascar, Niger, Nigeria, Tanzania, and Uganda. The independent evaluation assessed the program in each of the pilot countries.

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The Global Health Group publishes malaria-eliminating country briefings

The Global Health Group launched a series of 36 malaria-eliminating country briefings which, for the first time, provide a comprehensive yet succinct overview of the history and current malaria situations in malaria-eliminating countries. The briefings are designed for researchers, policy makers, donors, malaria programs and implementers, as well as other stakeholders interested in malaria elimination.

* * *
Effect of Early Detection and Treatment on Malaria Related Maternal Mortality on the North-Western Border of Thailand 1986-2010

by Rose McGready, Machteld Boel, Marcus J. Rijken et al.
PLoS ONE 7(7): e40244 (18 July 2012)

10 pp. 584 kB:

Frequent antenatal screening has allowed doctors to detect and treat malaria in its early stages on the border of Thailand and Myanmar, dramatically reducing the number of deaths amongst pregnant women. In an analysis of 25 years’ worth of data, in 50,981 women, from antenatal clinics at the Shoklo Malaria Research Unit, researchers found that the number of deaths from Plasmodium falciparum malaria fell from an estimated 1,000 deaths per 100,000 pregnant women before the introduction of screening to zero in 2005.

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Overdiagnosis and mistreatment of malaria among febrile patients at primary healthcare level in Afghanistan: observational study

by Toby Leslie, Amy Mikhail, Ismail Mayan et al.
BMJ 2012;345:e4389 (Published 24 July 2012)

13 pp. 507 kB:
http://www.bmj.com/content/345/bmj.e4389.pdf%2Bhtml

Despite a much lower incidence of malaria in Afghanistan than in Africa, fever was substantially misdiagnosed as malaria in this south Asian setting. Inaccuracy was attributable to false positive laboratory diagnoses of malaria and the clinicians’ disregard of negative slide results. Rare but potentially fatal cases of falciparum malaria were not detected, emphasising the potential role of rapid diagnostic tests. Microscopy increased the proportion of patients treated with antibiotics producing a trade-off between overtreatment with malaria drugs and probable overtreatment with antibiotics.

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Estimating the potential public health impact of seasonal malaria chemoprevention in African children

by Matthew Cairns, Arantxa Roca-Feltrer, Tini Garske et al.
Nature Communications 3, Article Nr. 881 - Published 06 June 2012

9 pp. 698 kB:

The authors assess seasonality in malaria incidence data and define a predictor of seasonality based on rainfall. They then use spatial rainfall, malaria endemicity and population data to identify areas likely to have highly seasonal malaria incidence, and estimate the population at risk and malaria burden in areas where seasonal malaria chemoprevention would be appropriate.
Tuberculosis

Short-course untargeted isoniazid preventive therapy in South Africa: time to rethink policy?

by Stephen D. Lawn and Robin Wood
Int J Tuberc Lung Dis 16(8):995-996, (1 August 2012)

The current rapid scale-up of isoniazid preventive therapy (IPT) in South Africa under national guidelines is not being targeted in patients who will benefit, and is being given for too short a duration that will not provide durable prevention. This policy is inefficient use of scarce health care resources. Current scientific evidence suggests that if the intervention is to be appropriately tailored to the local epidemiological situation, it should be given to patients who are confirmed to be tuberculin skin testing-positive, and on a long-term basis.

New drugs for the treatment of tuberculosis: hope and reality

by J. H. Grosset, T. G. Singer, W. R. Bishai
Int J Tuberc Lung Dis 16(8):1005-1014 (1 August 2012)

Because of man-made multidrug resistance, successful eradication of TB requires not only new drugs and new drug regimens, but also, and just as importantly, new approaches to drug delivery and patient care management. The objective of this review is to report evidence about the efficacy and potential of currently licensed drugs and new molecules beyond pre-clinical development for improving the chemotherapy of tuberculosis.

14-day bactericidal activity of PA-824, bedaquiline, pyrazinamide, and moxifloxacin combinations: a randomised trial

by Andreas H Diacon, Rodney Dawson, Florian von Grothe-Bidlingmaier et al.
The Lancet, Early Online Publication, 23 July 2012

New drugs, but also shorter, better-tolerated regimens are needed to tackle the high global burden of tuberculosis complicated by drug resistance and retroviral disease. The authors investigated new multiple-agent combinations over the first 14 days of treatment to assess their suitability for future development. They conclude that PA-824-moxifloxacin-pyrazinamide is potentially suitable for treating drug-sensitive and multidrug-resistant tuberculosis. Multiagent early bactericidal activity (EBA) studies can con-
tribute to reducing the time needed to develop new antituberculosis regimens.

**HIV and TB in Practice for Nurses: TB symptom screening and linking to diagnosis and care**

by Theo Smart
HIV & AIDS Treatment In Practice (HATIP), 19 July 2012

8 pp. 458 kB:

This edition of HIV and TB in Practice for Nurses looks at the use of symptoms to screen patients for TB. How do healthcare workers recognise a possible case of TB in the outpatient waiting room? Do outreach teams look for TB the same way? How do we make certain that the person who may or may not have TB makes it into diagnosis and care instead of being lost in the referral process? This edition looks at the practicalities of symptom screening and keeping track of patients during the diagnostic process.

**Other Infectious Diseases**

*The detection and treatment of human African trypanosomiasis*

by Bernard Bouteille and Alain Buguet
Research and Reports in Tropical Medicine 2012:3, pp. 35-45 (11 June 2012)

11 pp. 1.1 MB:

Human African trypanosomiasis (HAT) is caused by the injection of Trypanosoma brucei (T.b.) gambiense or T.b. rhodesiense by Glossina, the tsetse fly. Suramin and melarsoprol are the only medications active against Rhodesian HAT. Staging still relies on cerebrospinal fluid examination for trypanosome detection and white blood cell counts. The author’s group has proposed the use of non-invasive ambulatory polysomnography to identify sleep-wake abnormalities characteristic of stage 2 of the disease. Only patients with abnormal sleep-wake patterns would then undergo confirmative lumbar puncture.

**Infectious diseases following natural disasters: prevention and control measures**

by Isidore K Kouadio, Syed Aljunid, Taro Kamigaki et al.

10 pp. 353 kB:
http://www.expert-reviews.com/doi/pdfplus/10.1586/eri.11.155

Natural disasters may lead to infectious disease outbreaks when they result in substantial population displacement and exacerbate synergic risk factors (change in the environment, in human conditions and in the vulnerability to existing pathogens) for disease
transmission. The authors reviewed risk factors and potential infectious diseases resulting from prolonged secondary effects of major natural disasters that occurred from 2000 to 2011.

### Non-communicable Diseases

**Physical Activity**

The Lancet - Published July 18, 2012


The Lancet publishes a Series on physical activity, including a new analysis that quantifies the global impact of physical inactivity on the world’s major non-communicable diseases. The Series will also review current levels of physical activity and trends worldwide, why some people are active and why some are not, evidence-based strategies for effective physical activity promotion, and how a multi-sector and systems-wide approach that goes way beyond health will be critical to increase population-levels of activity worldwide.

### Essential Medicines

**Untangling the Web of Antiretroviral Price Reductions**


Eight million people in developing countries are on HIV treatment today, but the number of people who need access to HIV medicines is growing. Médecins Sans Frontières’ guide to the prices of AIDS medicines is now in its 15th edition – and is also available in an online version. Stay up-to-date with the latest news on ARV prices and availability by checking [http://utw.msfaccess.org](http://utw.msfaccess.org)  

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**Two Centuries of Assessing Drug Risks**

by Jerry Avorn


The history of medicine is largely the story of medicines - a continuing tale of unfolding risks and benefits. Yet the medical world into which the Journal was born in 1812 did not systematically assess the side effects of treatments in relation to the good they did. Often, there was no understanding of the causal linkage between adverse events and the therapies that led to them.

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Anti-infective medicine quality: analysis of basic product quality by approval status and country of manufacture

by Roger Bate, Lorraine Mooney, Kimberly Hess et al.
Research and Reports in Tropical Medicine 2012:3 57-61 (13 July 2012)


Some medicines for sale in developing countries are approved by a stringent regulatory authority (SRA) or the World Health Organization (WHO) prequalification program; many of these are global brands. This study ascertains whether medicines approved by SRAs or the WHO perform better in simple quality tests than those that have not been approved by either. The results strongly indicate that approval by either an SRA or the WHO is correlated with higher medicine quality at a statistically significant level. The comparatively high failure rates among WHO-approved products suggest there may be some weakness in post-marketing surveillance of these products, especially of Chinese-made WHO-approved products.

Social Protection

Living Longer in Mexico: Income Security and Health

by Emma Aguila, Claudia Díaz, Mary Manqing Fu et al.
AARP and the RAND Corporation, October 2011


Mexico is currently undergoing a significant demographic change owing to a declining birth rate and advancements in living conditions, health care, and technology that have increased life expectancy for older persons in Mexico. The present day offers a unique opportunity to reform and adapt social security, saving, health care, and employment policies before the Mexican Baby Boom Generation begins to retire in 2040. This study describes the income security, health status, and health care coverage of older persons in Mexico, and presents policy recommendations that may lead to further exploration of specific options.

Gendered Impacts of Globalization: Employment and Social Protection

by Camila Arza, Elissa Braunstein, Kristine Goulding et al.
United Nations Research Institute for Social Development (UNRISD), July 2012


The last three decades have seen remarkable changes in economic structures and policies both within and across countries, loosely captured by the term globalization. This paper reviews evidence on how key aspects of globalization processes have impacted the real economy, in terms of employment and social conditions of work for women and men across a wide range of countries.

The challenge of extending and sustaining services: UN-Water Global Analysis and Assessment of Sanitation (GLAAS) and Drinking-Water

by Bruce Gordon, Mark Hoeke, Federico Properzi et al.
UN-Water & World Health Organization, June 2012

112 pp. 6.9 MB: http://whqlibdoc.who.int/publications/2012/9789241503365_eng.pdf

“What works to effectively extend and sustain water, sanitation and hygiene (WASH) service provision?” This question becomes increasingly difficult to answer in a rapidly changing global environment. Informed decision-making is impeded by limited or no information on WASH-related national policies, institutional frameworks, domestic investments, human resources and targeting of external assistance. The report contributes to filling this information gap by summarizing the efforts and approaches of 74 low- and middle-income countries and 24 external support agencies.

Human Resources

All the Talents: How new roles and better teamwork can release potential and improve health services

All-Party Parliamentary Group (APPG) on Global Health and the Africa All-Party Parliamentary Group, July 2012

30 pp. 3.9 MB: http://www.appg-globalhealth.org.uk/cgi-bin/download.cgi

This report has a very simple message. There is enormous scope to make far better use of the potential and talents of all the people working in healthcare – and we need to do so at a time of health worker shortages and financial constraints. The document describes examples from around the world where nurses have successfully taken on tasks previously done by doctors – prescribing in the UK and caesareans and cataract operations in parts of Africa - whilst nursing assistants and community workers have carried out some simple procedures and offered advice and support to patients.

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Perceived barriers and motivating factors influencing student midwives’ acceptance of rural postings in Ghana

by Jody R Lori, Sarah D Rominski, Mawuli Gyakobo et al.
Human Resources for Health 2012, 10:17 (24 July 2012)


The objectives of this study are to determine the perceived barriers and motivators influencing final year midwifery students’ acceptance of rural postings in Ghana, West Africa. Three themes were identified through a broad inductive process: 1) social amenities; 2) professional life; and 3) further education/career advancement. Together they create the overarching theme, quality of life, we use to describe the influences on mid-
wifery students’ decision to accept a rural posting following graduation.

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**Enabling Solution, Ensuring Healthcare: Global Health Workforce Alliance - Annual Report 2011**

Global Health Workforce Alliance, hosted by the World Health Organization, July 2012

![Image](http://www.who.int/workforcealliance/knowledge/resources/ghwa_annual_report_2011.pdf)

Launched in 2006, the Global Health Workforce Alliance is a partnership dedicated to identifying and coordinating solutions to the health workforce crisis. The report details out the achievements and experiences of the Alliance in 2011. The accomplishments of 2011 illustrate the many contributions and value added by the Alliance over the past years, and are intrinsically linked to the contributions of more than 300 member and partner organizations that, together, constitute the global network of the Alliance.

**Health Systems & Research**

**Success Stories of Health Financing Reforms for Universal Coverage: Burundi**

Providing for Health (P4H) Initiative, World Health Organization, 2011

![Image](http://www.who.int/providingforhealth/PH4_Burundi_success_story.pdf)

The need to pay for health services at the time of use is widely acknowledged to discourage utilization. Despite the many drawbacks, where public budgets for health are low, many governments have chosen to rely on user fees to fill funding gaps. However, growing recognition of their harmful consequences for equity and financial protection has led several countries, including Burundi, to move away from user fees. Some, like Uganda and Zambia, have moved rapidly, while others, like Ghana, have taken a more gradual approach.

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**Universal health care and informal labor markets: the case of Thailand**

by Adam Wagstaff and Wanwiphang Manachotphong

![Image](http://www-wds.worldbank.org/external/default/WDSCContentServer/IW3P/IB/2012/07/02/000158349_20120702144251/Rendered/PDF/WPS6116.pdf)

This paper explores the possibility that universal health coverage may inadvertently result in distorted labor market choices, with workers preferring informal employment over formal employment, leading to negative effects on investment and growth, as well as reduced protection against non-health risks and the income risks associated with ill health.
Addressing attribution of cause and effect in small n impact evaluations: towards an integrated framework

by Howard White, Daniel Phillips, Catherine Robinson et al.
The International Initiative for Impact Evaluation (3ie), June 2012

72 pp. 638 kB:
http://www.3ieimpact.org/media/filer/2012/06/29/working_paper_15.pdf

There is an increasing need to demonstrate that development spending makes a difference, that it has an impact. This requirement to demonstrate results has fuelled an increase in the demand for, and production of, impact evaluations. There exists considerable consensus among impact evaluators conducting large n impact evaluations involving tests of statistical difference in outcomes between the treatment group and a properly constructed comparison group. The authors examine various evaluation approaches that could potentially be suitable for small n analysis and find that a number of them share a methodological core which could provide a basis for consensus.

Information & Communication Technology

Meeting the Information Needs of Health Care Providers, Program Managers, and Policy Makers in Low- and Middle-Income Countries


Access all articles for free at:
http://www.tandfonline.com/toc/uhcm20/17/sup2

The Journal of Health Communication has a long history of documenting the evidence on the role of information and communication in achieving health goals. This special issue contributes to this knowledge base and to the mission of the Journal by documenting evidence from field research that health information for all is a prerequisite for achieving universal access to health for all, and of course, the Millennium Development Goals.

National eHealth Strategy Toolkit

by Najeeb Al-Shorbaji, Joan Dzenowagis, Hani Eskandar et al.
World Health Organization and International Telecommunication Union, July 2012

223 pp. 6.2 MB:

Worldwide, the application of information and communication technologies to support national health-care services is rapidly expanding and increasingly important. The Toolkit is an expert, practical guide that provides governments, their ministries and stakeholders with a solid foundation and method for the development and implementation of a national eHealth vision, action plan and monitoring framework. All countries, whatever their level of development, can adapt the Toolkit to suit their own circumstances.
Maximizing Mobile: 2012 Information and Communications for Development

by Tim Kelly, Nicolas Friederici, Michael Minges et al.
The World Bank, 2012

244 pp. 21.1 MB(!): 

This report analyzes the growth and evolution of applications for mobile phones, focusing on their use in agriculture, health and financial services, as well as their impact on employment and government. It also explores the consequences for development of the emerging “app economy”, summarizing current thinking and seeking to inform the debate on the use of mobile phones for development. It’s no longer about the phone itself, but about how it is used, and the content and applications that mobile phones open.

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Knowledge translation in healthcare: A review of the literature

by Eivor Oborn, Michael Barrett and Girts Racko
Cambridge Judge Business School, May 2010

31 pp. 301 kB: 
http://www.jbs.cam.ac.uk/research/working_papers/2010/wp1005.pdf

The rapidly expanding literature on knowledge in management research, has outlined a number of different knowledge ‘processes’ such as knowledge sharing, knowledge creation, knowledge exchange and knowledge transfer. A critical issue, often discussed in terms of enabling innovation or competitive advantage, is the need for knowledge embedded within one community or organisational group to become available or known to members in a different community.

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Accelerating the Education Sector Response to HIV
Five Years of Experience from Sub-Saharan Africa

by Donald Bundy, Anthi Patrikios, Changu Mannathoko et al.
The World Bank, 2010

132 pp. 424 kB: 

The education sector plays a key “external” role in preventing and reducing the stigma surrounding HIV/AIDS. It also plays an important “internal” role in providing access to care, treatment, and support for teachers and education staff. The education sector can also have a critically important positive effect on the future: Even in the worst-affected countries, most schoolchildren are not infected. For these children, there is a chance to live lives free from AIDS if they can be educated on the knowledge and values that can protect them as they grow up.
Health in the post-2015 UN Development Agenda: Thematic Think Piece - UNAIDS, UNICEF, UNFPA, WHO

May 2012

17 pp. 270 kB:

A recent think piece by UNAIDS, UNICEF, UNFPA and WHO outlines how health could factor in the post-2015 development agenda. The authors argue that a single high-level health goal will be needed for health to retain its place “at the apex of development,” followed by a hierarchy of sector and programme-specific goals. This report frames the issues in preparation for a UN global consultation on how to include health in a post-2015 development agenda, set to take place towards the end of this year.

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Recapturing the Narrative of International Development

by Sakiko Fukuda-Parr
United Nations Research Institute for Social Development (UNRISD), July 2012

26 pp. 189 kB:
http://www.unrisd.org/80256B3C005BCCF9/(httpAuxPages)/026AC192E40B70C
EC1257A370032E678/$file/Fukuda-Parr.pdf

The expiry of the Millennium Development Goals in 2015 presents an opportunity to set new goals that would recapture the vision articulated in the Millennium Declaration for development in the twenty-first century that would achieve greater inclusion, sustainability and equity. This paper highlights the 10 most pressing issues to be considered in this redesign, and proposes directions for drawing up a new set of global goals.

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Measure for Measure: How Well Do We Measure Development?

by Michel Aglietta, Sabina Alkire, François Bourguignon et al.
Proceedings of the 8th AFD-EUDN Conference, Paris, December 1st, 2010

242 pp. 4.2 MB:
http://www.afd.fr/webdav/site/afd/shared/PUBLICATIONS/RECHERCHE/Scientifiques/Conferences-seminaires/03-VA-Conferences-seminaires.pdf

The fact that economic growth is not necessarily synonymous with development and that GDP can grow in a country for some time without noticeable improvement in the areas of poverty, health or education has long been known. Yet development continues to be measured primarily by GDP growth and public attention continues to focus on this statistic alone. Should we define a multiplicity of indicators that describe its various aspects, ranging from access to drinking water to the quality of the judiciary system, from infant mortality to the democratic features of society, from the calorie intake of the average citizen to reported individual satisfaction or happiness?
Aid, Incentives, and Sustainability: An Institutional Analysis of Development Cooperation

by Elinor Ostrom, Clark Gibson, Sujai Shivakumar et al.
Swedish International Development Cooperation Agency (Sida) Studies in Evaluation 02/01

389 pp. 4.6 MB:

Does ‘aid’ itself create incentives that undermine sustainability? This is the provoking question underlying the present study, which explores how the incentives that arise in the system of development co-operation affect sustainable outcomes. The analysis is based on interviews of more than 175 persons within Sida and Sida supported activities and a thorough literature survey.

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Improving EU support to developing countries in mobilising financing for development


14 pp. 241 kB:
http://www.preventionweb.net/files/27767_communicationonimprov-eusupporttodev.pdf

This recommendation report proposes improvements in EU support for mobilising development finance in order to provide international support for development and promote sustainable development. It discusses EU commitments to help developing countries mobilise all sources of financing for development for achieving their development goals. An issue addressed is scaling up funding for tackling climate change and preserving biodiversity in the wider context of sustainable development.

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2012 World Population Data Sheet

Population Reference Bureau, July 2012

20 pp. 1.3 MB:

The 2012 World Population Data Sheet offers detailed information on 20 population, health, and environment indicators for more than 200 countries. This year’s data include: deaths due to non-communicable diseases, HIV/AIDS prevalence, percent of children under 5 underweight, and more.

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The Shape of Things to Come - Why Age Structure Matters To A Safer, More Equitable World

by Elizabeth Leahy, Robert Engelman, Carolyn Gibb Vogel et al.

100 pp. 3.0 MB: http://populationaction.org/wp-content/uploads/2012/01/SOTC.pdf

The report is the result of more than two years of research and analysis. From this work, the authors conclude that population age structure can have a significant impact on countries’ stability, governance, economic development and the well-being of its people. Most importantly, they find that age structures are dynamic and can be influenced - and shaped - through policies that affect the demographic forces (i.e. births, deaths and migration) that determine these age structures.

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WHO Handbook for Guideline Development

World Health Organization, 2012

63 pp. 1.6 MB: http://apps.who.int/iris/bitstream/10665/75146/1/9789241548441_eng.pdf

Guidelines are recommendations intended to assist providers and recipients of health care and other stakeholders to make informed decisions. WHO has adopted internationally-recognized standards and methods for guideline development to ensure that guidelines are free from bias, meet a public health need and are consistent. This handbook provides stepwise advice on the technical aspects of developing a WHO guideline and the methods used.

ELECTRONIC RESOURCES


http://jama.jamanetwork.com/issue.aspx

The July 25, 2012, issue of JAMA is dedicated to HIV/AIDS.

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The South African Medical Journal (SAMJ) Vol. 102 No. 8

SAMJ has published its August 2012 issue online at: http://www.samj.org.za

You are invited you to review the Table of Contents and visit the website to read articles of interest.

In this month's issue:

- ‘Politically correct’ behaviour change – an HIV/pregnancy threat?
- Foreign green pastures for South African doctors
• Medical internship and community service slaves
• Challenging infective endocarditis prevention
• Allergic rhinitis guidelines
• SAGES abstracts: 50th SAGES/SASES Congress, 9 - 11 August 2012, Durban, South Africa

EUROHEALTH, Volume 18, Number 2, 2012

Quarterly of the European Observatory on Health Systems and Policies
Main Focus on Gender and Health

44 pp. 2.4 MB:

This issue of Eurohealth provides articles on the history of gender equity policies, their importance in research and policy development, and how they play out within the specific contexts of child and adolescent health, and violence against women. Other articles include: Modernising the Professional Qualifications Directive; Health capital investment; Safer hospitals in Europe; Long-term care reform in the Netherlands; Cost-containment in the French health system; and Eurohealth Monitor.

D-Lib Magazine Special Issue, Volume 18, Number 7/8; July/August 2012

http://www.dlib.org/dlib/july12/07contents.html

Digital libraries that store scientific publications are becoming increasingly important in research. They are used not only for traditional tasks such as finding and storing research outputs, but also as sources for discovering new research trends and evaluating research excellence. The papers in this issue of D-Lib Magazine were presented at the 1st International Workshop on Mining Scientific Publications. The workshop’s aim was to bring together people from different backgrounds who are interested in analysing and mining databases of scientific publications, who develop systems that enable the analysis and mining of scientific databases, and who develop novel technologies that improve the way research is being done.

Population Reference Bureau’s Interactive Map


Which countries will grow the most by 2050? Where do people live the longest? How does contraceptive prevalence vary worldwide? Find the answers in PRB’s interactive map. Browse through 17 indicators organized in six tabs, ranging from life expectancy, HIV/AIDS, family planning, health, and more. View data on global, regional, or country maps or tables. You can easily embed the map on your blog or website.
TRAINING OPPORTUNITIES

NIHES - Erasmus Summer School

Starts at 13th August 2012, Rotterdam, The Netherlands

If you are a student, researcher, executive or advisor in the health sciences, how about some à la carte research training in medicine and health?

The Erasmus Summer Programme focuses on key principles and methods of quantitative medical research. Consisting of 30 topical courses, 4 lectures, and 3 master classes in just 3 weeks, it is open to all students and health professionals, and provides essential updates across a range of applied medical and healthcare disciplines. You can enrol for 1, 2 or 3 weeks in a single discipline, or design your own individual programme by mixing and matching courses from different disciplines.

For more information see: http://erasmussummerprogramme.nl/

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E-learning course in English: Strengthening the Essential Public Health Functions

Duration and course load: 13 Weeks in 3 parts - 8-10 hours per week
       Part 2: November 21 – December 18, 2012
       Part 3: January 23 – February 19, 2013
Application deadline: August 22, 2012
Participants: (Health) Professionals
Course fee: US$ 750
Organizers: The World Bank Institute
Language: English only
General course contact: Jo Hindriks
WBI Health E-Learning: healthlearning@worldbank.org

CARTOON

“We have all the latest high-tech equipment here. Would you like to send him some E-mail?”

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TIPS & TRICKS

No to All

Have you ever been doing something in Windows that involved multiple files? If so, you have probably come across a message similar to this at one time or another:

![Confirm Folder Replace](image)

Notice how there is an option for “Yes to All”, but no button for “No to All”? What to do? You are not going to be sitting there rapidly clicking “No” all night?

The good news is that if you find yourself in this situation, all you need to do to get “No to All” is hold the Shift key when you click “No”.

* * *

Disk mounting software: Daemon Tools Lite

Have you ever purchased software on a CD-ROM, installed it on your computer and ran it, only to find that you have to keep the disk in for it to work right?

Well, there is a free programme that will solve that little problem forever. The programme is called “Daemon Tools Lite”, and it allows you to create virtual drives so you never have to hunt down those pesky disks.

After installing DTL, you can simply open the tools panel and choose “disk imaging”. From there, point the programme to your troublesome, required CD ROM and have it start copying. Daemon Tools Lite will create an exact image of the disk so you can use it whenever you want without having to actually insert the CD ever again.

Daemon Tools will create up to 4 virtual drives at once, but you can swap images between them for truly unlimited virtual disks at your disposal. Instead of having to hunt down a disk, just click the “mount’n’drive manager” and select the disk you want to use. It is as simple as that.


Best regards,

Dieter Neuvians MD