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We encourage you to share the newsletter with your friends & colleagues.
BOOKS

The Global Gender Gap Report 2012

by Ricardo Hausmann, Laura D. Tyson, Saadia Zahidi
World Economic Forum, October 2012


The report quantifies the magnitude of gender-based disparities in areas like education, health, politics and the economy and tracks the surveyed countries over time. The 2012 report shows that progress in closing the gender gap has been slow, with persistent inequalities both across and within regions. The Nordic countries continue to dominate the top five positions and Yemen remains the lowest-ranking country, coming in at 135th of the 135 countries covered. The rankings are designed to create greater awareness among a global audience of the challenges posed by gender gaps and the opportunities created by reducing them.

* * *

Epilepsy across the Spectrum: Promoting Health and Understanding

Editors Mary Jane England, Catharyn T Liverman, Andrea M Schultz et al.
Committee on the Public Health Dimensions of the Epilepsies
Institute of Medicine, National Academies Press; March 2012


Throughout this report, the committee emphasizes the ways in which epilepsy is a spectrum disorder. Epilepsy comprises more than 25 syndromes and many types of seizures that vary in severity. Additionally, people who have epilepsy span a spectrum that includes men and women of all ages and of all socio-economic backgrounds and races/ethnicities, who live in all areas of the United States and across the globe. This report aims to provide evidence and impetus for actions that will improve the lives of people with epilepsy and their families.

* * *

World disasters report 2012: Focus on forced migration and displacement

Editor: Roger Zetter
International Federation of Red Cross and Red Crescent Societies (IFRC), 2012

310 pp. 8.5 MB: http://www.ifrc.org/PageFiles/99703/1216800-WDR%202012-EN-LR.pdf

The report aims to widen and sharpen the focus on the complex causes of forced migration and the diverse consequences and impacts for both affected populations and humanitarian actors. It shows that the complex nature of disasters and conflicts is accompanied by the enormous potential to uproot large numbers of people. Other factors, such as population growth, rapid urbanisation, increasing poverty and inequality, hazardous and environmentally contaminated sites, climate change and new technological
hazards all combine to accentuate vulnerability and increase the propensity for forced displacement to occur.

ONLINE PUBLICATIONS

Global Health

**Negative health system effects of Global Fund’s investments in AIDS, tuberculosis and malaria from 2002 to 2009: systematic review**

by Josip Car, Tapio Paljärvi, Mate Car et al.
J R Soc Med Sh Rep 2012;3:70

14 pp. 1.3 MB:
[http://shortreports.rsmjournals.com/content/3/10/70.full.pdf#page=1&view=FitH](http://shortreports.rsmjournals.com/content/3/10/70.full.pdf#page=1&view=FitH)

By using the Global Fund as a case example, the authors aim to critically evaluate the evidence generated from 2002 to 2009 for potential negative health system effects of Global Health Initiatives (GHI). This study shows that much of the currently available evidence generated between 2002 and 2009 on GHIs potential negative health system effects is not of the quality expected or needed to best serve the academic or broader community. The majority of the reviewed research did not fulfil the requirements of rigorous scientific evidence.

* * *

**Combating healthcare corruption and fraud with improved global health governance**

by Tim K Mackey and Bryan A Liang
BMC International Health and Human Rights 2012, 12:23 (22 October 2012)

14 pp. 327 kB:
[http://www.biomedcentral.com/content/pdf/1472-698X-12-23.pdf](http://www.biomedcentral.com/content/pdf/1472-698X-12-23.pdf)

Corruption is a serious threat to global health outcomes, leading to financial waste and adverse health consequences. Yet, forms of corruption impacting global health are endemic worldwide in public and private sectors, and in developed and resource-poor settings alike. Allegations of misuse of funds and fraud in global health initiatives also threaten future investment. Current domestic and sectorial-level responses are fragmented and have been criticized as ineffective. In order to address this issue, the authors propose a global health governance framework calling for international recognition of "global health corruption" and development of a treaty protocol to combat this crucial issue.

* * *

**Who cares about health inequalities? Cross-country evidence from the World Health Survey**

by Nicholas B King, Sam Harper and Meredith E Young

14 pp. 794 kB:
Reduction of health inequalities within and between countries is a global health priority, but little is known about the determinants of popular support for this goal. From this study the authors conclude that individuals living in healthier, wealthier countries are more likely to place a higher priority on reducing health inequalities. Individuals living in low- and middle-income countries tend to place a higher priority on overall health improvement than reducing health inequalities. Global health policy may face a conflict between maximizing distributive justice and ensuring procedural justice with regards to health systems improvement.

**HIV - AIDS - STI**

**Dose reduction of antiretrovirals: a feasible and testable approach to expand HIV treatment in developing countries**

by Sandro Vento, Massimiliano Lanzafame, Emanuela Lattuada et al.
Tropical Medicine & International Health; Article first published online: 24 October 2012


The authors of this article advocate for dose reduction of different antiretrovirals to be urgently explored as one possible option to help sustain ART roll-out in developing countries, based on previous examples of dose reduction, as well as the estimated reduction in cost. In addition, dose reduction could decrease the number of adverse events, improve tolerability and favour adherence to treatment.

* * *

**Evolution of an HIV glycan-dependent broadly neutralizing antibody epitope through immune escape**

by Penny L Moore, Elin S Gray, C Kurt Wibmer et al.


The study describes how a unique change in the outer covering of the virus found in two HIV infected South African women enabled them to make potent antibodies which are able to kill up to 88% of HIV types from around the world. The discovery, described as “groundbreaking” provides an important new approach that could be useful in making an AIDS vaccine, according to the researchers.

* * *

**HIV in the Workplace Toolkit: Staying positive and healthy in the workplace**

Southern Africa HIV and AIDS Information Dissemination Service (SAfAIDS), October 2012

SAfAIDS has developed a comprehensive and integrated SRHR/MCH/HIV/TB workplace wellness Toolkit, as part of its regional initiative to sup-

HESP-News & Notes - 23/2012 - page 6
port companies and organisations to set up and implement their workplace wellness programmes in Africa. The toolkit is available in English and Portuguese.

English version: http://safaids.net/content/hiv-in-the-workplace-toolkit
Portuguese version: http://safaids.net/pt-pt/content/hiv-workplace-toolkit-portuguese

For more information and to access other materials on HIV in the workplace capacity development, visit: http://safaids.net/category/policy/workplace-policies-0

* * *

eToolkit on HIV Prevention in Zimbabwe

http://www.k4health.org/toolkits/zimbabwe-hiv-prevention

The Zimbabwe HIV Prevention eToolkit is a collection of various publications from different organizations and individuals. The materials are on Behavior Change Communication (BCC), Family Planning and HIV Service Integration, Male Circumcision (MC), Multiple and Concurrent Partnerships (MCPs), Prevention of Mother to Child Transmission (PMTCT) and Voluntary Counselling and Testing (VCT).

Sexual & Reproductive Health

Sex Work and the Law in Asia and the Pacific

Laws, HIV and human rights in the context of sex work

by John Godwin
UNDP Asia-Pacific Regional Centre and UNFPA Asia Pacific Regional Office, UNAIDS and Asia Pacific Network of Sex Workers (APNSW), October 2012

226 pp. 10.9 MB: http://www.snap-undp.org/elibrary/Publications/HIV-2012-SexWorkAndLaw.pdf

The report is intended to provide an evidence-base for: policy makers working in government, regional and multilateral organizations; parliamentarians; members of the judiciary; civil society organizations; donor agencies; and sex workers and their organizations engaged in advocacy to improve the legal and policy enabling environment for HIV responses. The study focuses on 48 countries of the Asia-Pacific region, with an emphasis on low and middle-income countries.

* * *

Family Planning: Francophone West Africa on the Move - A Call to Action

Ouagadougou Partnership, 2012


Although family planning use is increasing in the majority of developing countries, West Africa is lagging behind. Fertility rates among the French-speaking countries of the region remain high with an average of 5.5 births per woman, and 28 percent of women of reproductive age have an unmet need for family planning - one of
the highest rates of any region globally. The report presents targeted areas of investments in family planning to spur progress in the region, and provides recommendations for strengthening services, mobilizing political commitment and resources, and coordinating actions.

* * *

**Governmental Coercion in Reproductive Decision Making: See It Both Ways**

by Sneha Barot
Guttmacher Policy Review, Fall 2012, Volume 15, Number 4


Forcing a woman to terminate a pregnancy she wants is wrong, and so is forcing her to continue a pregnancy that she does not want, concludes this new policy analysis. Each case violates women’s basic human rights: the right to decide freely whether and when to bear a child and the right to have that decision respected by the government. Reproductive rights advocates have long stood for the principle that coercion in reproductive decision making - whether to prevent childbearing or to compel it - is unacceptable and should be unequivocally condemned.

* * *

**Addressing Sexual Violence and HIV in Department of Correctional Services**

A Guide for Working with Members of the Department of Correctional Services

by Sasha Gear, Cynthia Totten, Zithulele Dlakavu et al.
Sonke Gender Justice Network and Just Detention International, June 2012


The main purpose of this guide is to build skills and capacity of trainees who will be responsible for facilitating skills development for others and who will be developing programmes that will contribute to change in South Africa's correctional centres. It is designed to foster positive action and change and empower participants to become change agents in their own lives and in the correctional centres in which they work.

* * *

**Marrying too Young: End Child Marriage**

by Edilberto Loaiza and Sylvia Wong
United Nations Population Fund (UNFPA), 2012


This report is a clarion call to decision makers, parents, communities and to the world to end child marriage. It documents the current scope, prevalence and inequities associ-
ated with child marriage and highlights that by 2020, Some 142 million girls will be married by their 18th birthday if current trends continue. Girls living in rural areas of the developing world are twice as likely to be married before age 18 as their urban counterparts, and girls with no education are over three times more likely to do so than those with secondary or higher education.

* * *

**The life-history trade-off between fertility and child survival**

by David W. Lawson, Alexandra Alvergne, Mhairi A. Gibson
Proc. R. Soc. B published online 3 October 2012

11 pp. 808 kB:
http://rspb.royalsocietypublishing.org/content/early/2012/10/11/rspb.2012.1635.full.pdf+html

Evolutionary models of human reproduction argue that variation in fertility can be understood as the local optimization of a life-history trade-off between offspring quantity and ‘quality’. Child survival is a fundamental dimension of quality in these models as early-life mortality represents a crucial selective bottleneck in human evolution. By compiling demographic survey data, the authors demonstrate robust negative relationships between fertility and child survival across 27 sub-Saharan African countries.

* * *

**Training Resource Package for Family Planning**

http://www.fptraining.org/

USAID, WHO, UNFPA, September 2012

The Training Resource Package for Family Planning (TRP) contains curriculum components and tools needed to design, implement, and evaluate training. It offers essential resources for family planning (FP) and reproductive health trainers, supervisors, and program managers. The entire package is designed to support up-to-date training on family planning and reproductive health.

**Maternal & Child Health**

**Single-Visit Approach to Cervical Cancer Prevention**

Clinical Standards of Practice and Counseling Guide

by Shumet Adnew, Paul D. Blumenthal, Fredrik F. Broekhuizen et al.
Pathfinder International, May 2012

39 pp. 1.3 MB:

The single-visit approach (SVA) to cervical cancer prevention (also referred to as the “See-and-Treat” approach) currently involves visual inspection of the cervix with acetic acid wash (VIA) and treatment of precancerous lesions with cryotherapy. The Guide is designed to be used by physicians, nurses, midwives, and health officers who provide cervical cancer prevention services using the single-visit approach.
WHO Recommendations for the Prevention and Treatment of Postpartum Haemorrhage

by A. Metin Gürmezoglu, João Paulo Souza, Matthews Mathai et al.
World Health Organization, 2012

48 pp. 640 kB:  
http://apps.who.int/iris/bitstream/10665/75411/1/9789241548502_eng.pdf

Postpartum Haemorrhage (PPH) is commonly defined as a blood loss of 500 ml or more within 24 hours after birth. PPH is the leading cause of maternal mortality in low-income countries and the primary cause of nearly one quarter of all maternal deaths globally. The primary objective of this guideline is to provide a foundation for the strategic policy and programme development needed to ensure the sustainable implementation of effective interventions for reducing the global burden of PPH.

* * *

Quality of sick child care delivered by Health Surveillance Assistants in Malawi

by Kate E. Gilroy, Jennifer A. Callaghan-Koru, Cristina V. Cardemil et al.
Health Policy and Planning 2012;1-13 - First published online: October 13, 2012

13 pp. 1.3 MB:  
http://heapol.oxfordjournals.org/content/early/2012/10/13/heapol.czs095.full.pdf#page=1&view=FitH

Malawi’s community case management of childhood illness (CCM) programme is a promising strategy for increasing coverage of sick child treatment, although there is much room for improvement, especially in the correct assessment and treatment of suspected pneumonia and the identification and referral of sick children with danger signs. However, Health Surveillance Assistants (HSAs) provided sick child care at levels of quality similar to those provided in first-level health facilities in Malawi, and quality should improve if the Ministry of Health and partners act on the results of this assessment.

Leading Practice in Malaria Control

by Naomi Roberts and Dick Mayon-White
A study conducted by Sentinel Consulting, commissioned by Rio Tinto and facilitated by GBCHealth

27 pp. 2.7 MB:  

This study compares and contrasts implementations of malaria interventions across different businesses and regions, with the purpose of highlighting and sharing leading practice from different contexts. Analyzing data from 18 programmes run by ten different companies the study identified key characteristics that the best programmes share. The
report found that the most successful malaria programs were managed by highly-skilled teams of specialists received strong support, advocacy and resources from corporate management and delivered healthcare services directly.

* * *

**Health Costs and Benefits of DDT Use in Malaria Control and Prevention**

by Brian Blankespoor, Susmita Dasgupta, Abdelaziz Lagnaoui et al.
The World Bank, September 2012

32 pp. 618 kB:

The Millennium Development Goal of achieving near-zero malaria deaths by 2015 has led to a re-examination of wider use of DDT (dichloro-diphenyl-trichloro-ethane) in indoor residual spraying as a prevention tool in many countries. However, the use of DDT raises concerns of potential harm to the environment and human health, mainly because of the persistent and bio-accumulative nature of DDT and its potential to magnify through the food chain. This paper quantifies the adverse effects of DDT on human health based on treatment costs and indirect costs caused by illnesses and death in countries that use or are expected to re-introduce DDT in their disease vector control programs.

* * *

**Salt, Sugar, and Malaria Pills: How the Affordable Medicine Facility-malaria endangers public health**

by Mohga M. Kamal-Yanni, Philippa Saunders, Emma Seery et al.
Oxfam Briefing Paper, 24 October 2012

28 pp. 475 kB:

The Affordable Medicine Facility-malaria has shown no evidence that it has saved the lives of the most vulnerable or delayed drug resistance. Rather, this global subsidy has incentivised medicine sales without diagnosis and shown no evidence that it has served poor people. It poses a risk to public health and could skew investment away from effective solutions. Evidence shows that a public-public partnership between community health workers and primary health care facilities can fight malaria and deliver on other public health outcomes. But will donors listen to the evidence?

* * *

**Mitigating the threat of artemisinin resistance in Africa: improvement of drug-resistance surveillance and response systems**

by Ambrose O Talisuna, Corine Karema, Bernhards Ogutu et al.
The Lancet Infectious Diseases, Vol. 12, Issue 11, pp. 888-896, November 2012

9 pp. 496 kB:
http://download.thelancet.com/pdfs/journals/laninf/PIIS1473309912702414.pdf

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Artemisinin-resistant Plasmodium falciparum malaria has emerged in western Cambodia and has been detected in western Thailand. Artemisinin resistance is a major threat to global public health, with the most severe potential effects in sub-Saharan Africa. The authors propose strategies that should be adopted by malaria-endemic countries in Africa: resource mobilisation to reactivate regional surveillance networks, establishment of baseline parasite clearance profiles to serve as benchmarks to track emerging artemisinin resistance, improved data sharing to allow pooled analyses to identify rare events, modelling of risk factors for drug resistance, and development and validation of new approaches to monitor resistance.

* * *

**Intermittent Preventive Treatment of malaria in pregnancy using Sulfadoxine-Pyrimethamine (IPTp-SP)**

Updated WHO Policy Recommendation (October 2012)

2 pp. 100 kB: [http://www.who.int/malaria/iptp_sp_updated_policy_recommendation_en_102012.pdf](http://www.who.int/malaria/iptp_sp_updated_policy_recommendation_en_102012.pdf)

All possible efforts should be made to increase access to intermittent preventive treatment of pregnant women (IPTp) for malaria with Sulfadoxine-Pyrimethamine (SP) in all areas with moderate-to-high transmission in Africa, as part of antenatal care services. Based on new evidence these updated recommendations are provided.

* * *

**Parasites and vectors carry no passport: how to fund cross-border and regional efforts to achieve malaria elimination**

by Cara Smith Gueye, Alexandra Teng, Kelvin Kinyua et al.
Malaria Journal 2012, 11:344 (11 October 2012)

18 pp. 307 kB: [http://www.malariajournal.com/content/pdf/1475-2875-11-344.pdf](http://www.malariajournal.com/content/pdf/1475-2875-11-344.pdf)

Tremendous progress has been made in the last ten years in reducing morbidity and mortality caused by malaria, in part because of increases in global funding for malaria control and elimination. Today, many countries are striving for malaria elimination. However, a major challenge is the neglect of cross-border and regional initiatives in malaria control and elimination. This paper seeks to better understand Global Fund support for multi-country initiatives.

* * *

**Do malaria parasites manipulate mosquitoes?**

by Lauren J. Cator, Penelope A. Lynch, Andrew F. Read et al.
Trends in Parasitology, Vol. 28, Issue 11, 466-470, 08 October 2012


Malaria parasites have been suggested to alter the behavior of mosquito vectors to increase the likelihood of transmission. Some empirical evidence supports this hypothesis, yet the role of manipulation is ignored in most epidemiological models, and behavioral differences between infected and uninfected females are not considered in the development or implementation of control measures. The authors review and discuss the
current evidence for manipulation, explore its potential significance for malaria transmission, and suggest ways to move this hypothesis forward from theory to potential application in malaria control.

* * *

**FIND malaria strategy**

by David Bell
Foundation for Innovative New Diagnostics (FIND), September 2012

44 pp. 5.1 MB:

Having the right diagnostic tools in place will be essential to achieving current goals in reducing childhood mortality, and reducing and eliminating malaria. The improved targeting of resources enabled by the information that good diagnosis provides can lower the overall costs of other interventions, reducing wastage and mis-treatment. Diagnostics development is a relatively low-cost, high impact investment. This investment can deliver measurable outcomes in a relatively short time, whilst greatly increasing the value of investment in other anti-malarial interventions.

* * *

**Content Analysis of Primary and Secondary School Textbooks Regarding Malaria Control: A Multi-Country Study**

by Daisuke Nonaka, Masamine Jimba, Tetsuya Mizoue et al.
PLoS ONE 7(5): e36629 (4 May 2012)

7 pp. 478 kB:
http://www.plosone.org/article/fetchObjectAttachment.action;jsessionid=C1DFA7474E9EC97C9353558062F279FF?uri=info%3Adoi%2F10.1371%2Fjournal.pone.0036629&representation=PDF

In tropical settings, malaria education at school is potentially useful, but textbook content related to malaria education has so far received little attention. This study aimed to examine whether school textbooks contain sufficient knowledge and skills to help children in primary and lower secondary schools and their family members to cope with malaria. The authors conclude that textbooks rarely included knowledge and skills that are crucial to protect schoolchildren and their families from malaria. This study identified the need for improvement to textbook contents regarding malaria.

**Global Tuberculosis Report 2012**

by Hannah Monica Dias, Dennis Falzon, Christopher Fitzpatrick et al.
World Health Organization, October 2012

282 pp. 3.6 MB:
http://www.who.int/iris/bitstream/10665/75938/1/9789241564502_eng.pdf

This is the seventeenth global report on tuberculosis (TB) published by WHO in a series that started in 1997. It provides a comprehensive and up-to-date assessment of the TB epidemic and progress in implementing and financing TB prevention, care and control at
global, regional and country levels using data reported by 204 countries and territories that account for over 99% of the world’s TB cases.

* * *

**Diagnostic accuracy of same-day microscopy versus standard microscopy for pulmonary tuberculosis: a systematic review and meta-analysis**

by J Lucian Davis, Adithya Cattamanchi, Luis E Cuevas et al.
The Lancet Infectious Diseases, Early Online Publication, 23 October 2012

8 pp. 238 kB: [http://download.thelancet.com/pdfs/journals/laninf/PIIS1473309912702323.pdf](http://download.thelancet.com/pdfs/journals/laninf/PIIS1473309912702323.pdf)

To inform policy recommendations by a WHO-convened Expert Group, the authors aimed to assess the accuracy of sputum smear examination with strategies for obtaining sputum on 1 day compared with strategies for obtaining sputum over 2 days. They conclude that same-day sputum smear microscopy is as accurate as standard smear microscopy. Data from tuberculosis programmes are needed to document the changes required in the health system to successfully implement the strategy and understand its effects.

* * *

**Challenges and Controversies in Defining Totally Drug-Resistant Tuberculosis**

by Peter Cegielski, Paul Nunn, Ekaterina V. Kurbatova et al.
Emerg Infect Dis [Internet] November 2012

Read online at: [http://wwwnc.cdc.gov/eid/article/18/11/12-0526_article.htm](http://wwwnc.cdc.gov/eid/article/18/11/12-0526_article.htm)

There is no evidence that proposed totally resistant TB differs from strains encompassed by extensively drug-resistant (XDR) TB. Susceptibility tests for several drugs are poorly reproducible. Few laboratories can test all drugs, and there is no consensus list of all anti-TB drugs. Many drugs are used off-label for highly drug resistant TB, and new drugs formulated to combat resistant strains would render the proposed category obsolete. Labelling TB strains as totally drug resistant might lead providers to think infected patients are untreatable. These challenges must be addressed before defining a new category for highly drug-resistant TB.

* * *

**Intensified regimen containing rifampicin and moxifloxacin for tuberculous meningitis: an open-label, randomised controlled phase 2 trial**

by Rovina Ruslami, A Rizal Ganiem, Sofiati Dian et al.
The Lancet Infectious Diseases, Early Online Publication, 25 October 2012

9 pp. 297 kB: [http://download.thelancet.com/pdfs/journals/laninf/PIIS1473309912702645.pdf](http://download.thelancet.com/pdfs/journals/laninf/PIIS1473309912702645.pdf)

Intensified antibiotic treatment might improve the outcome of tuberculous meningitis. The authors assessed pharmacokinetics, safety, and survival benefit of several treatment regimens containing high-dose rifampicin and moxifloxacin in patients with tuberculous meningitis in a hospital setting. The data of this study suggest that treatment containing a higher dose of rifampicin and standard-dose or highdose moxifloxacin during the first 2 weeks is safe in patients with tuberculous meningitis, and that high-dose intra-
venous rifampicin could be associated with a survival benefit in patients with severe disease.

Screening for HIV among tuberculosis patients: a cross-sectional study in Sindh, Pakistan

by Jamshed Hasnain, Ghulam Nabi Memon, Ashraf Memon et al.
BMJ Open 2012;2:e001677

5 pp. 156 kB:
http://bmjopen.bmj.com/content/2/5/e001677.full.pdf#page=1&view=FitH

The study investigated the feasibility of HIV screening among tuberculosis (TB) patients registered for treatment at selected TB centres in Sindh province of Pakistan. It demonstrates the feasibility of acceptance of screening large number of TB patients for HIV. Prevalence of HIV among TB population is threefold higher as compared with general population. The overwhelming majority of HIV-infected TB patients detected were men.

Neglected tropical diseases: survey and geometry of randomised evidence

by Shanthi Kappagoda and John P A Ioannidis
BMJ 2012;345:e6512 (Published 22 October 2012)

15 pp. 1.0 MB:
http://www.bmj.com/content/345/bmj.e6512.pdf%2Bhtml

The objective of the study was to assess the quantity and distribution of evidence from randomised controlled trials for the treatment of the major neglected tropical diseases and to identify gaps in the evidence with network analysis. The authors conclude that there is considerable variation in the amount of evidence from randomised controlled trials for each of the 16 major neglected tropical diseases. Even in diseases with substantial evidence, such as leishmaniasis and geohelminth infections, some recommended treatments have limited supporting data and lack head to head comparisons.

Effectiveness of an oral cholera vaccine in Zanzibar: findings from a mass vaccination campaign and observational cohort study

by Ahmed M Khatib, Mohammad Ali, Lorenz von Seidlein et al.
The Lancet Infectious Diseases, Vol. 12, Issue 11, pp. 837-844, November 2012

8 pp. 567 kB:
http://download.thelancet.com/pdfs/journals/laninf/PIIS1473309912701962.pdf

Zanzibar, in east Africa, has been severely and repeatedly affected by cholera since 1978. The authors assessed the effectiveness of oral cholera vaccination in high-risk populations in the archipelago to estimate the indirect (herd) protection conferred by the vaccine and direct vaccine effectiveness. They conclude that the oral cholera vaccine offers both direct and indirect (herd) protection in a sub-Saharan African setting.
oral cholera immunisation campaigns have the potential to provide not only protection for vaccinated individuals but also for the unvaccinated members of the community and should be strongly considered for wider use.

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**Use of Fecal Occult Blood Tests as Epidemiologic Indicators of Morbidity Associated with Intestinal Schistosomiasis during Preventive Chemotherapy in Young Children**

by Martha Betson, José Carlos Sousa-Figueiredo, Narcis B. Kabatereine et al.
Am J Trop Med Hyg 2012 Vol. 87 No. 4 694-700

7 pp. 562 kB: [http://www.ajtmh.org/content/87/4/694.full.pdf+html](http://www.ajtmh.org/content/87/4/694.full.pdf+html)

There is a need for field-applicable markers to assess morbidity associated with intestinal schistosomiasis, especially in the context of preventive chemotherapy in young children. The authors investigated whether fecal occult blood (FOB) point-of-care tests could be used to assess intestinal pathology over a 12-month period in a cohort of under-five children. There were tendencies for prevalence of FOB to decrease in children who became egg negative and increase in those who became egg positive. FOB seems useful for assessing dynamics of intestinal morbidity in young children at the community level and monitoring changes in morbidity after mass chemotherapy.

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**Estimating and Mapping the Population at Risk of Sleeping Sickness**

by Pere P. Simarro, Giuliano Cecchi, José R. Franco et al.


In this paper, a Geographic Information System was used to delineate areas at different levels of risk. To this end, accurate data on the spatial distribution of HAT cases (period 2000–2009) were collated and combined with maps of human population. A total of 70 million people are estimated to be at risk of contracting sleeping sickness in Africa. This population is distributed over a surface of one and a half million square kilometres, an area six times that of the United Kingdom. Half of the people and of the areas at risk are found in the Democratic Republic of the Congo.

### Non-communicable Diseases

**The power of health information - the use of cohort monitoring in managing patients with chronic non-communicable diseases**

by Dermot Maher
Tropical Medicine & International Health; Article first published online: 11 October 2012
Despite their huge burden of morbidity and mortality, chronic non-communicable diseases (NCDs) in low- and middle-income countries have often been neglected, with a largely unstructured primary care approach to their management and a lack of systematic follow-up and monitoring of care. A model of systematic evaluation of management of NCDs through cohort monitoring draws on experience of scaling up interventions for two chronic infectious diseases, tuberculosis and HIV. Cohort monitoring involves registering all the patients diagnosed with a certain condition within a particular catchment area over a period of time and reporting regularly on standard clinical outcomes. This model is a key element of a structured, programmatic framework for NCD management in primary care.

Food & Nutrition

**Infant and Young Child Feeding**

by Nune Mangasaryan, Christiane Rudert, Mandana Arabi et al.  
Nutrition Section, United Nations Children’s Fund (UNICEF), May 2011

173 pp. 3.6 MB:  

This Programme Guidance contains detailed programming information on Infant and Young Child Feeding (IYCF), including breastfeeding, complementary feeding and infant feeding in general and in especially difficult circumstances including in the context of HIV and in emergencies. It also briefly addresses maternal nutrition. The “key action areas” for these components are detailed at the different levels, including national policy/strategy level, health services, and community. The document provides strategic programme recommendations for priority IYCF actions and their operationalization that will support achievement of MDGs 1 and 4, among others.

Essential Medicines

**Bringing Medicines to Low-income Markets**

A guide to creating inclusive business models for pharmaceutical companies

by Solveig Haupt and Aline Krämer  
Deutsche Gesellschaft für Internationale Zusammenarbeit (GIZ), January 2012

70 pp. 3.0 MB:  

1.7 billion people have either no access to important medicines and health services or only at high prices. For them, even simple illnesses involve a high risk of poverty or perhaps death. The study shows ways that the availability of medicines can be improved in developing and emerging countries. One solution is the 4 A’s+1 approach (acceptance, awareness, availability, affordability and actors). Using this business model it is possible to understand the challenges of this market and meet them with promising approaches.

* * *
Consumers trust doctors to act in the best interests of their patients. However, most consumers are largely unaware of the influence of the pharmaceutical industry’s marketing on the very health professionals they rely on. This report seeks to highlight the marketing practices in emerging and developing economy markets by leaders in the pharmaceutical industry. Since direct-to-consumer advertising (DTCA) is banned in most countries health professionals are the primary targets for the sales tactics of the drug companies. Consequently, the scope of this report focuses on doctor-directed promotion.

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Pharmacoeconomics and its implication on priority-setting for essential medicines in Tanzania: a systematic review

by Amani Thomas Mori and Bjarne Robberstad
BMC Med Inform Decis Mak. 12: 110 (27 September 2012)

Due to escalating treatment costs, pharmacoeconomic analysis has been assigned a key role in the quest for increased efficiency in resource allocation for drug therapies in high-income countries. The extent to which pharmacoeconomic analysis is employed in the same role in low-income countries is less well established. This systematic review identifies and briefly describes pharmacoeconomic studies which have been conducted in Tanzania and further assesses their influence in the selection of essential medicines.

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Open Source Drug Discovery in Practice: A Case Study

by Christine Årdal, John-Arne Røttingen
PLoS Negl Trop Dis 6(9): e1827 (20 September 2012)

Open source drug discovery offers potential for developing new and inexpensive drugs to combat diseases that disproportionally affect the poor. The concept borrows two principle aspects from open source computing (i.e., collaboration and open access) and applies them to pharmaceutical innovation. By opening a project to external contributors, its research capacity may increase significantly. To date there are only a handful of open source R&D projects focusing on neglected diseases.
The International Drug Price Indicator Guide
Management Sciences for Health (MSH), 2012


The International Drug Price Indicator Guide contains a spectrum of prices from pharmaceutical suppliers, international development organizations, and government agencies. The Guide aims to make price information more widely available in order to improve procurement of medicines of assured quality for the lowest possible price. Comparative price information is important for getting the best price, and this is an essential reference for anyone involved in the procurement of pharmaceuticals.

Social Protection

Impact of national health insurance for the poor and the informal sector in low- and middle-income countries

by Arnab Acharya, Sukumar Vellakkal, Fiona Taylor et al.
EPPI-Centre, Social Science Research Unit, Institute of Education, University of London, July 2012


The document concludes that there is no strong evidence to support widespread scaling up of social health insurance schemes as a means of increasing financial protection from health shocks or of improving access to health care. The health insurance schemes must be designed to be more comprehensive in order to ensure that the beneficiaries attain desirable levels of healthcare utilisation and have higher financial protection. At the same time, the non-financial barriers to access to healthcare, such as awareness and distance to healthcare facilities, must be minimised.

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Social protection and basic services in fragile and conflict-affected situations

by Samuel Carpenter, Rachel Slater and Richard Mallett
Secure Livelihoods Research Consortium (SLRC), October 2012


Places affected by fragility and conflict perform consistently worse against a range of development indicators compared to their more stable counterparts. In an effort to generate better understanding and to identify useful lessons and findings for researchers and decision makers working on and in fragile and conflicted-affected situations, this review synthesises and assesses the available evidence on social protection and basic services (health, education and water) in fragile and conflict-affected situations.

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Social Safety Nets have been an essential component in the fight against poverty. Initially focused only on protection goals, they are now increasingly combining promotional goals too. Over the years, Bangladesh has introduced a plethora of safety net programmes. However, such growth has often been ad hoc and lacking a systematic overview. The need for a comprehensive and strategic framework within which to consolidate social safety nets has emerged as an increasing preoccupation within the wider policy community. To address such a need, PPRC, with support from UNDP, undertook a comprehensive Study of social safety nets in operation in Bangladesh.

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Access to health care: the role of a community based health insurance in Kenya

by Judy Wanja Mwaura & Sathirakorn Pongpanich

Out-of-pocket payments create financial barriers to health care access. There is an increasing interest in the role of community based health insurance schemes in improving equity and access of the poor to essential health care. The aim of this study was to assess the impact of Jamii Bora Health Insurance (JBHI) on access to health care among the urban poor in Kenya. The article concludes that utilisation and take up of the JBHI benefits was high. Overall, JBHI favoured the members in the lower income quintiles who were more likely to use health care services covered by the JBHI scheme.

Human Resources

Our Side of the Story: A policy report on the lived experience and opinions of Ugandan health workers

by Patricia Thornton, Stephen Nock, Diane Milan et al.
VSO Uganda and Coalition for Health Promotion and Social Development (HEPS-Uganda), 2012

The Valuing Health Workers research and advocacy project is an initiative of VSO International. It recognises that health workers’ voices must be heard and acted on to improve access to healthcare and so help to achieve the Millennium Development Goals.
VSO will support local partners to use the research findings to advocate for health workers in their countries, and will gather the research evidence to advocate on a global level.

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

by Alun Michael, Nigel Crisp, Hugh Bayley et al.
All-Party Parliamentary Group on Global Health, 2012

30 pp. 3.9 MB: [http://www.who.int/workforcealliance/knowledge/resources/AlltheTalents_fullReport.pdf](http://www.who.int/workforcealliance/knowledge/resources/AlltheTalents_fullReport.pdf)

The report looks at how innovations in the skill mix of health workers can improve the quality and availability of health services and reduce costs. The primary recommendation is that professionals, governments and institutions alike must give much higher priority to creating the right workforce and developing and supporting the talents of health workers and others so that they can achieve their potential and play their full part in healthcare.

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**Health Systems & Research**

**Do guidelines influence the implementation of health programs? - Uganda’s experience**

by Juliet Nabyonga Orem, Juliet Bataringaya Wavamunno, Solome K Bakeera and Bart Criel
Implementation Science 2012, 7:98 (15 October 2012)

28 pp. 1.2 MB: [http://www.implementationscience.com/content/pdf/1748-5908-7-98.pdf](http://www.implementationscience.com/content/pdf/1748-5908-7-98.pdf)

A guideline contains processes and procedures intended to guide health service delivery. However, the presence of guidelines may not guarantee their implementation, which may be a result of weaknesses in the development process. This study was undertaken to describe the processes of developing health planning, services management, and clinical guidelines within the health sector in Uganda, with the goal of understanding how these processes facilitate or abate the utility of guidelines.

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**Innovative financing for health: what are the options for South Africa?**

by Robert J. Fryatt


The paper assesses the options for additional innovative financing that could be considered in South Africa, covering both raising new funds and linking funds to results. But all innovations would require rigorous monitoring and evaluation to assess whether in-
tended benefits are achieved and to look for unintended consequences.

Information & Communication Technology

**Online Health: Untangling the Web**

by David McDaid and A-La Park
London School of Economics and Political Science for The British United Provident Association Ltd, January 2011

32 pp. 1.1 MB:  

This report in a series of three looks at the role that the internet, including social media, plays in healthcare. It looks at how and why people search for online health information and how they transact with healthcare professionals.

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**Accessing BioMed Central from mobile devices**


BioMed Central now supports access from mobile devices, such as smartphones and tablets. BioMed Central portals and journal websites have been updated so that users on smartphones or tablets have an enhanced experience when viewing full text articles, making better use of small screen sizes and touch-screen functionality. Improving the experience when reading fulltext articles is the first priority, but they will be rolling out further mobile optimizations in the coming months. BioMed Central’s blog network (see above URL) is already optimized for mobile.

Education

**Youth and Skills: Putting Education to Work**

EFA Global Monitoring Report 2012

by Pauline Rose, Kwame Akyeampong, Manos Antoninis et al.  
United Nations Educational, Scientific and Cultural Organization (UNESCO), October 2012

480 pp. 8.4 MB:  
[http://reliefweb.int/sites/reliefweb.int/files/resources/218003e%20%281%29.pdf](http://reliefweb.int/sites/reliefweb.int/files/resources/218003e%20%281%29.pdf)

Despite significant progress in some regions, few are on track to meet the six Education for All (EFA) goals set in 2000, and some are a long way behind. The report looks in depth at youth skills, one of the least analysed of the EFA Goals. It shows that acquiring a lower secondary education is a minimum today for young people to gain the foundation skills they need to find decent jobs. Yet there are 250 million children of primary school age today who cannot read or write, whether they are in school or not, and 71 million teenagers are out of secondary school, missing out on vital skills for future employment.

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Technology, e-learning and education in Africa

by Shannon Rupp
Consultancy Africa Intelligence (Pty) Ltd, 16 October 2012


This paper discusses the broad developments in e-learning technology which is spreading across Africa. It focuses specifically on how information and communications technology and e-learning are changing and shaping education. The benefits of e-learning and the challenges to advancement and implementation of new educational technologies in Africa are also briefly outlined. It is argued that increasing access to e-learning programmes for students, teachers and businesses is key to furthering continental development and growth.

* * *

Equity and Inclusion for All in Education

by Peter Grimes, Sunit Bagree, Charlotte Gill et al.
Global Campaign for Education UK, 2012


Addressing the lack of education for girls and women is entirely appropriate. Yet there are other important groups who face severe disadvantage in accessing and completing quality education, such as disabled people, ethnic and religious minorities and people living in certain vulnerable locations. This research focuses on these groups. This report advocates that DFID dedicate adequate resources to tackling the exclusion of all marginalised groups from education in a strategic manner, to achieve universal primary education, the Education for All (EFA) goals and international human rights instruments such as the Convention on the Rights of the Child.

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The Positive Impact of eLearning - 2012 Update

White Paper, Education Transformation
Intel Corporation, 2012


This paper summarizes some key research findings, to help educational leaders identify relevant eLearning benefits and make judicious decisions as they develop their eLearning strategies. To further aid in planning, the authors share findings relating to the challenges of eLearning implementation, and provide a bibliography for additional reading.

Millennium Development Goals

Positioning Health in the Post-2015 Development Agenda

HESP-News & Notes - 23/2012 - page 23
WHO discussion paper, October 2012

This note by the World Health Organization (WHO) is intended as a discussion paper on the position of health in the post-2015 agenda. The paper focuses on content, identifying a series of issues that need to be addressed in framing future health goals and discussing ways in which Universal Health Coverage might be used as a way of bringing all programmatic interests under an inclusive umbrella and explaining its relationship to the achievement of gains in healthy life expectancy. The purpose of these papers is to provoke discussion rather than present definitive positions. They will be revised and updated as the process evolves.

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Post-2015 Health MDGs

by Julian Schweitzer, Marty Makinen, Lara Wilson et al.
Results for Development Institute (R4D), July 2012

This report has been prepared with the purpose of reviewing and contributing to the evidence base concerning progress on the health Millennium Development Goals (MDGs) to 2015 and beyond. For this purpose, the evidence base comprises experience with the MDGs to date, current debates and policy developments, the aim of a post-2015 global agreement similar to the MDGs, how a global agreement might add value to national efforts, and the type of agreement that might be made, including targets and indicators.

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Post-2015 Development Agenda: Goals, Targets and Indicators

by Nicole Bates-Eamer, Barry Carin, Min Ha Lee et al.
The Centre for International Governance Innovation and the Korea Development Institute, October 2012

Some of the 11 goals the two institutes put forth in their report mimic those the MDGs measure, like gender equality and access to food and clean water. Others are different, and include:

- Quality infrastructure for access to energy, transportation and communication.
- Good health for the best possible physical, mental and social well-being.
- Security for ensuring freedom from violence.
- Empowering people to realize their civil and political rights.
- Inclusive economic growth for dignified livelihoods and adequate standards of living.

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Post-2015 Education MDGs

by Nicholas Burnett and Colin Felsman
Results for Development Institute (R4D), August 10, 2012

31 pp. 912 kB:

This report has the purpose of reviewing and contributing to the evidence base concerning progress on the education Millennium Development Goals (MDGs) and Education for All Goals (EFA) to 2015 and beyond. For this purpose, the evidence base comprises experience with the MDGs to date, current debates and policy developments, the aim of a post-2015 global agreement similar to the MDGs, how a global agreement might add value to national efforts, and the type of agreement that might be made, including targets and indicators.

Commitment to Development Index 2012

by David Roodman
Center for Global Development (CGD), October 2012

6 pp. 949 kB:

The Commitment to Development Index ranks 27 of the world’s richest countries on their dedication to policies that benefit the 5.5 billion people living in poorer nations. Moving beyond standard comparisons of foreign aid volumes, the CDI quantifies a range of rich-country policies that affect poor people in developing countries.

Council of the European Union conclusions on Social Protection in European Union Development Cooperation

Foreing Affairs - Development - Council Meeting
Luxembourg, 15 October 2012

3 pp. 102 kB:

Despite progress on the MDGs, a large number of people remain trapped in chronic poverty and vulnerability, which is increasingly associated with exclusion and marginalisation. This requires greater emphasis to be put on the sectors that relieve poverty, support investments in human development and, in the longer term, inclusive and sustainable growth and people’s ability to participate in wealth and job creation and to benefit from universal access to basic social services, such as health and education. The council confirmed that 20% of future EC Development Cooperation aid should be spent on social inclusion and human development.
85% of EU citizens believe that Europe should continue helping developing countries despite the economic crisis and around half are in favour of upping current aid levels. However, 55% think that rapidly growing emerging countries should no longer receive aid and that aid should focus instead on fragile states. It is hoped that this goodwill on the part of citizens will filter down to the new EU multi-annual budget.

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**Hitting the target? Evaluating the effectiveness of results-based approaches to aid**

by Javier Pereira and Carlos Villota
European Network on Debt and Development (Eurodad), September 2012

Results-based approaches make some or all funding conditional upon verification of progress. Donors like this because it allows them to point to tangible outcomes of aid expenditure, and, proponents argue, this will lead to more effective aid. But is this really the case? This new report assesses the potential of results-based approaches to deliver long-term and sustainable results by measuring the performance of different initiatives against widely agreed aid effectiveness principles.

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**Reducing Vulnerability and Exposure to Disasters: The Asia-Pacific Disaster Report 2012**

Editors: Shamika Sirimanne and Jerry Velasquez
Economic and Social Commission for Asia and the Pacific (ESCAP) and United Nations Office for Disaster Risk Reduction (UNISDR), 2012

The primary conviction of this report is driven by a concern that people’s exposure and vulnerability, experienced individually and collectively, continue to be twin challenges for the Asia-Pacific region. Faced with growing economic losses and increasingly vulnerable populations, this report has analyzed the drivers of risks and the strategies that are in place to deal with the growing risks.

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Research Database on Malaria, NTDs and Childhood illnesses

Malaria Consortium has launched a database of research publications on malaria control, neglected tropical diseases (NTDs) and childhood illnesses. The publications compile findings from nine countries across Africa. Visit the database at the above URL to find out more.

Development Research Crawler

This targeted search facility links to the leading development research institutes and libraries world-wide. It shall ease the knowledge exchange among development researchers and practitioners in international co-operation. The use is free and open to development professionals and policy makers as well as faculty staff and students and the public. The site was designed for low-bandwidth connections. A keyword search easily leads to most relevant results. Queries in languages other than English are possible. The Development Research Crawler is a customised Google search engine that searches more than 350 selected websites and weblogs.

A Global Village Issue 8 - October 2012

The publication offers original insights to both the Imperial College community, and external industry experts and policy-makers, and tackles a broad range of issues from energy and environment to agriculture and development, economics and finance, global health, and geopolitics.

In this issue articles on health:
- Antibiotics in Decline: The Rise of Multi Drug-Resistant Pathogens
- Multi Drug-Resistant Tuberculosis
- How to Plan a Successful Biopharma Product Rollout
- Spending the Money Wisely: Challenges of Health System Financing
- On the Benefits of Competition in Healthcare

Journal of Microbiology and Infectious Diseases

The Journal of Microbiology and Infectious Diseases has been published, its latest issue at the above URL. You are invited to visit the web site to
read/download articles and items of interest for free.

INTERESTING WEB SITES

Open Access Week

http://www.openaccessweek.org/page/about

“Open Access” to information - the free, immediate, online access to the results of scholarly research, and the right to use and re-use those results as you need – has the power to transform the way research and scientific inquiry are conducted. It has direct and widespread implications for academia, medicine, science, industry, and for society as a whole.

Open Access Week (October 22 - 28, 2012), a global event now entering its sixth year, is an opportunity for the academic and research community to continue to learn about the potential benefits of Open Access, to share what they have learned with colleagues, and to help inspire wider participation in helping to make Open Access a new norm in scholarship and research.

TRAINING OPPORTUNITIES

Electronic Short Course on Antiretroviral Treatment (eSCART)

eSCART is a distance learning course delivered by the Institute of Tropical Medicine in Antwerp, Belgium, on the antiretroviral treatment of HIV patients in low-resource settings. eSCART targets health care professionals (physicians and clinical officers) working in low-resource settings and has been designed to increase accessibility to training in the field of antiretroviral treatment.

The next eSCART will start on 18th of February 2013 and deadline for application is end of October 2012.

For more information see:

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E-learning course: Caring for infants and children with acute malnutrition

The course was developed with the aid of funding from the Department of Health and the University of Southampton.

https://www.som.soton.ac.uk/learn/test/nutrition/courses/courselist/course3.asp?courseid=3

The course is designed to cater individualised learning for health professionals who have any responsibility for child care, especially paediatricians, nurses, medical students and nursing students.

Based on the WHO’s guidelines, the course provides standardised and interactive learning in 3 modules. In the first module you will learn the definition and classification of malnutrition, the visible and invisible changes caused by malnutrition and why malnourished children need different care from other children. In the second module you will learn how to assess and screen children for malnutrition, and in the third module how to manage children with malnutrition.
“Afrika kommt!”
An Initiative of German Industry for Future Leaders from Sub-Saharan Africa

19 leading German companies launched the “Afrika kommt!” initiative in 2008 under the patronage of the then Federal President Horst Köhler. Apart from Bayer, other global companies from different industries participating included Boehringer Ingelheim, Continental, Ruhrgas, SAP and Adolf Würth. In this way, the sponsor companies and participants laid the foundations for a lasting partnership between Africa and Germany that had not existed before.

The application process for young managers from the countries of Sub-Saharan Africa runs from October 1 until December 31, 2012. Applicants require a university degree and at least two years of professional experience.

Download the programme announcement (7 pp. 340 kB) at: 

For further information (also in English) go to: http://www.afrika-kommt.de

CONFERENCES

First Announcement for the forthcoming SAHARA 7 Conference
“Translating Evidence into Action”

7-10 October 2013, Dakar, Senegal
Social Aspect of HIV/AIDS Research Alliance (SAHARA)

Please refer to their flyer (2 pp. 1.3 MB):

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Meeting Report: Making Global Fund Money Work for Communities - Community Partnership Consultation

Pattaya, Thailand, 7-8 December 2011
by Ian Mungall
United Nations Development Programme (UNDP), 2012

This report documents the presentations and discussions made during the “Making Global Fund Money Work for Communities: Community Partnership Consultation” Meeting. It aims to draw attention to the issues associated with how current approaches to Global Fund proposals and grants management processes have hindered grantees’ abilities to inclusively develop and effectively implement rights-based programmes that best serve their communities. The report provides a wide array of recommendations for the Global Fund Secretariat, Board, Local Fund Agents and Global Fund technical partners.
31st Annual Meeting of the European Society for Paediatric Infectious Diseases - ESPID 2013

May 28-June 1, 2013; Milan, Italy
European Society for Paediatric Infectious Diseases

Abstract Submission Deadline: January 14, 2013
Early Registration Deadline: March 5, 2013

Focusing on “Paediatric Infectious Diseases: Future Prospectives”, ESPID 2013 will provide clinical practitioners, researchers and industry professionals’ unparalleled access to the latest findings and analysis in the field of paediatric infectious diseases.

For more information see: http://espid.kenes.com/

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Global Maternal Health Conference 2013

15-17 January 2013; Dar es Salaam, Tanzania

GMHC2013 is a technical conference for scientists, researchers, and policy-makers to network, share knowledge, and build on progress toward eradicating preventable maternal mortality and morbidity by improving quality of care.

For more information see: http://maternalhealthtaskforce.org/conference/conference-website

CARTOON
TIPS & TRICKS

Close Tabs with your Mouse Wheel

When you are browsing the Internet, chances are that at any given time you have got at least 6 to 10 tabs open in your browser. Obviously, you will need to close one or more of those tabs at some point, but you will also need pin-point precision to click that little “x” to do so. See here:

There is a better way!

Here is what you do. Instead of clicking the little “x” ever again, just use your mouse wheel button to close tabs. Just mouse over the tab and click with your middle mouse button. This works in Internet Explorer, Mozilla Firefox and Google Chrome, so give it a try!

* * *

Print My Fonts - Print/Preview Installed Fonts

Why is it that everyone keeps using the same few fonts over and over? Simple: No one knows what all the fonts look like. Sure, you could change the font to a random font in the list to try it, or look at the tiny preview and try to guess if that’s what you are looking for, but wouldn’t it be nice if you could just get a printout of every font with a line of text you choose as an example?

Well, her you have the freeware programme: Print My Fonts. http://www.sttmedia.com/downloads/PrintMyFonts.zip

Just like the name implies, this software allows you to print/preview your font list out using an example line of text. The software also can export this list of fonts as a JPEG image or a PDF document. The download is free, and once you unzip the file and double click PrintMyFonts.exe you will be presented with a list of your system installed fonts and a preview of each font if you click on it. You can then select in the lower right hand corner Printer or other Output Format (default is printer), then click export to print or export the document.

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What is a MIMO Wi-Fi Router?

The ever-changing advances in wireless communications have called for various technologies to increase data throughput and link range to improve performance.

One such example is MIMO (multiple input, multiple output). It is an antenna technology, which uses multiple antennas at both the source and the destination. This has led to improvements in applications of digital television, wireless local area networks, cell phone communication, and metropolitan area networks. MIMO technology has also helped Wi-Fi channels to have increased network bandwidth, range, and reliability.

MIMO Wi-Fi routers can supposedly get a range of up to 30 m indoors and 300 m outdoors. Whether you achieve this or not depends on what obstructions and/or interference there are between your computer and the router. Look for companies that have
MIMO routers with good speed, eliminating dead spots in the house and outdoors, and have simple set-ups.

Best regards,

Dieter Neuvians MD