this week, IHP+ launched its own transformation to become the unifying force for a new movement towards Universal Health Coverage: UHC2030.

The timing couldn’t have been better for P4H to publish its first Knowledge, Learning and Information Brief, comparing the state of UHC in Bangladesh, Cambodia, Kenya and Tanzania. It shows how the roads towards UHC are still as varied as the goals, and consequently the wealth of experience that the new movement can now draw upon.

Much more small scale, yet perhaps nonetheless of interest to some of you, are the Health Worker Dialogues that a German-supported health programme currently pilots in Pakistan’s Khyber Pakhtunkhwa region to improve communication, team spirit and referrals amongst different health cadres working in maternal and newborn health.

And there are many more interesting reads in this week’s News Briefing: Browse, enjoy and share widely!

Your editorial team
Dieter Neuvians, Viktor Siebert, Anna von Roenne

To keep up-to-date
- subscribe to our HESP-News Briefing, sent to you every fortnight per email: visit http://health.bmz.de/services/HESP_News_Briefing/index.php
- subscribe to our RSS feeds (for the entire news briefing or individual thematic categories) to get continuous updates brought to your newsreader
- visit us on the web at health.bmz.de/
TABLE OF CONTENTS

ONLINE RESOURCES ................................................................................................................................. 5

Healthy Developments – Germany’s commitment to health and social protection ........................................ 5

The missing link? How good financial governance helps strengthen health systems ........................................ 5
Rapid-response health team sent to Togo to counter epidemics ................................................................ 5
Health Worker Dialogues foster cooperation between health workers ...................................................... 5
Towards universal coverage in the majority world: the cases of Bangladesh, Cambodia, Kenya and Tanzania .... 6

Reproductive, maternal, neonatal, child and adolescent health & Right to health ........................................ 6
Changes in conceptions in women younger than 18 years and the circumstances of young mothers in England in 2000–12: an observational study ....................................................................................... 6
What contraception do women use after abortion? An analysis of 319,385 cases from eight countries .......... 7
Health Worker Dialogues foster cooperation between health workers ...................................................... 7
Global estimates of human papillomavirus vaccination coverage by region and income level: a pooled analysis ............................................................................................................................................. 7
Free health care for under-fives, expectant and recent mothers? Evaluating the impact of Sierra Leone’s free health care initiative ........................................................................................................... 8
Cervical cancer prevention and treatment research in Africa: a systematic review from a public health perspective ........................................................................................................................................ 8
Management of Obstetric Fistula in Burundi .................................................................................................. 9
Child mortality estimation: an assessment of summary birth history methods using microsimulation ........... 9
Empowering each other: young people who sell sex in Ethiopia ..................................................................... 9

HIV, Tuberculosis & Malaria .......................................................................................................................... 10

Consolidated guidelines on the use of antiretroviral drugs for treating and preventing HIV infection .......... 10
United Nations fails key populations .......................................................................................................... 10
Pattern, determinants, and impact of HIV spending on care and treatment in 38 high-burden low- and middle-income countries ........................................................................................................ 11
The HIV Post-Exposure Prophylaxis (PEP) Guidance Database .................................................................. 11
Sustaining the Future of HIV Counselling to Reach 90-90-90: a Regional Country Analysis ....................... 11
Circumcision of male infants and children as a public health measure in developed countries: A critical assessment of recent evidence .................................................................................................. 12
Programmatic Management of Drug-Resistant Tuberculosis: An Updated Research Agenda ..................... 12
Systematic review of risk factors for nonadherence to TB treatment in immigrant populations .................... 12
Health & Human Rights journal (special section) – Tuberculosis and the Right to Health .......................... 13
Malaria: Global progress 2000 – 2015 and future challenges ...................................................................... 13
Plasmodium vivax infection: a major determinant of severe anaemia in infancy ....................................... 14
Malaria diagnosis and treatment: A Starter Kit to develop interventions in endemic countries .................. 14
Answering key questions on malaria ......................................................................................................... 14
Towards subsidized malaria rapid diagnostic tests: Lessons learned from programmes to subsidise artemisinin-based combination therapies in the private sector: a review ........................................................................ 15
Sharp increase of imported Plasmodium vivax malaria seen in migrants from Eritrea in Hamburg, Germany ........................................................................................................................................ 15

Neglected Tropical Diseases, Other Infectious diseases & Pandemic Preparedness .................................. 16
Zika virus misinformation on the internet .................................................................................................... 16
Scabies: Advances in Noninvasive Diagnosis ................................................................................................ 16
Weekly Epidemiological Record (WER) - 17 June 2016, Vol. 91, 24 ............................................................ 16

Nutrition, Non-Communicable Diseases & Environmental Health (incl. WASH & Climate Change) ... 17
From Promise to Impact: Ending Malnutrition by 2030 ............................................................................ 17
Unequal Portions: Ending malnutrition for every last child ....................................................................... 17
Diabetes in the tropics: prevalent, increasing and a major public health problem ...................................... 18
UNODC’s 2016 World Drug Report ........................................................................................................... 18
Human Rights-Based Approaches to Mental Health: A Review of Programs ............................................ 18
Water & Risk: Water Management and Risk Communication - No. 24, June 2016 ..................................... 19
Understanding differences in the impact of deworming programmes ...................................................... 19
Drought characteristics and management in the Caribbean

Population Dynamics & Social Determinants of Health (including Gender & Education) ........................................ 20

“With Solar Sister, Forward We Go”: A Qualitative Assessment Exploring How Solar Sister Brings Light, Hope, and Opportunity to Women in Africa ......................................................................................................................... 20

Education Disrupted: Disaster impacts on education in the Asia Pacific region in 2015 .................................................................................................................. 20

Health System Governance, Health Workforce and Health Information Systems ............................................. 21

Optimising the benefits of community health workers’ unique position between communities and the health sector: A comparative analysis of factors shaping relationships in four countries .................................................................................................................. 21

Developing and Strengthening Community Health Worker Programs at Scale .......................................................................................................................... 21

Evidence-based medicine for all: what we can learn from a programme providing free access to an online clinical resource to health workers in resource-limited settings ......................................................... 21

I’ve got 99 problems but a phone ain’t one: Electronic and mobile health in low and middle income countries .................................................................................. 21

Why Most Clinical Research Is Not Useful ........................................................................................................ 22

Access to Medical Products, Vaccines and Technologies ..................................................................................... 23

Special issue of PAHO journal: Strengthening of regulatory systems for medicines in the Americas .................. 23

Industry-sponsored clinical drug trials in Egypt: Ethical Questions in a Challenging Context ............................. 23

Towards 100% voluntary blood donation: A global framework for action .......................................................... 23

Seroepidemiology: an underused tool for designing and monitoring vaccination programs in low and middle income countries ......................................................... 24

Dispensing Practices in India and United States .................................................................................................. 24

What Can We Learn About the Processes of Regulation of Tuberculosis Medicines from the Experiences of Health Policy and System Actors in India, Tanzania, and Zambia? .......................................................................................... 24

Corruption in the Pharmaceutical Sector: Diagnosing the Challenges ................................................................ 25

Management and Quality of Health Services and Facilities .................................................................................... 25

Monitoring iCCM: a feasibility study of the indicator guide for monitoring and evaluating integrated community case management .......................................................................................................................................................................................... 25

Primary Surgery (Vol. 1: Non-Trauma) .................................................................................................................. 26

Applying for, reviewing and funding public health research in Germany and beyond ........................................ 26

Universal Health Coverage, Health Financing and Social Health Protection .................................................... 27

How a universal health system reduces inequalities: lessons from England ..................................................... 27

Voluntary health insurance in Europe: Role and regulation ............................................................................... 27

Voluntary health insurance in Europe: Country experience ............................................................................. 27

Health insurance subscription among women in reproductive age in Ghana: do socio-demographics matter? ...... 28

Brazil - Africa knowledge sharing on social protection and food and nutrition security ....................................... 28

Towards universal coverage in the majority world: the cases of Bangladesh, Cambodia, Kenya and Tanzania .... 29

Old Age, Unemployment and Occupational Injuries Protection ........................................................................... 29

World Elder Abuse Awareness Day .................................................................................................................. 29

Financial access to health care for older people in Cambodia: 10-year trends (2004-14) and determinants of catastrophic health expenses .............................................. 29

Social Transfers ..................................................................................................................................................... 30

Community-Based Conditional Cash Transfers in Tanzania: Results from a Randomized Trial ...................... 30

Cash-Based Approaches in Humanitarian Emergencies: A Systematic Review ................................................ 30

Making Change with Cash? Impact of a Conditional Cash Transfer Program on Girls’ Education and Age of Marriage in India .................................................................................................................. 31

Making Change with Cash? Impact of a Conditional Cash Transfer Program on Age of Marriage in India ........ 31

The effects of conditionality monitoring on educational outcomes: evidence from Brazil’s Bolsa Família programme .......................................................................................................................... 31

Inclusion of People with Disabilities .................................................................................................................... 32

Take charge! A Reproductive Health Guide for Women with Disabilities ............................................................ 32

A Health Handbook for Women with Disabilities ................................................................................................. 32

#CostingEquity: How education financing falls short for learners with disabilities .................................................. 32

Ensuring Quality and Accessible Care for Children with Disabilities and Complex Health and Educational Needs: Workshop in Brief ............................................................................... 33

Active Participation: Key to Inclusion .................................................................................................................. 33
<table>
<thead>
<tr>
<th>Health Systems Strengthening in German Development Cooperation</th>
<th>34</th>
</tr>
</thead>
<tbody>
<tr>
<td>German Development Cooperation’s Contribution to Global Health</td>
<td>34</td>
</tr>
<tr>
<td>Brexit: a confused concept that threatens public health</td>
<td>34</td>
</tr>
<tr>
<td>BRICS countries and the global movement for universal health coverage</td>
<td>35</td>
</tr>
<tr>
<td>The economics of global health: an assessment</td>
<td>35</td>
</tr>
<tr>
<td>Health policy in emerging economies: innovations and challenges</td>
<td>36</td>
</tr>
</tbody>
</table>

Miscellaneous

- The new Africa Health app is available to download
- UNHCR Projected Global Resettlement Needs 2017
- Danger Every Step of the Way: A harrowing journey to Europe for refugee and migrant children
- OCHA Annual Report 2015
- Journal of Microbiology and Infectious Disease - Volume 06, Number 02 (2016)

CONFERENCES & TRAINING

- What Works Global Summit (WWGS): Putting Evidence to Work
- World Health Summit 2016
- Annual Meeting of the German Society of Tropical Medicine and International Health (DTG)
- Free Course: Medicines in Health Systems Working toward Universal Health Coverage (Self-Paced)
- Advanced Summer Courses at KIT

CARTOON

- TIPS & TRICKS
  - Is it plugged in? Is It Turned On?
  - Microsoft Edge Ask Cortana

IMPRINT
ONLINE RESOURCES

Healthy Developments – Germany’s commitment to health and social protection

The missing link? How good financial governance helps strengthen health systems

Expert talk, GIZ Bonn, 20 April 2016

Strengthening health systems for better health outcomes requires more domestic investment in health but also improvements in how funds are managed and spent. Yet good financial governance and health systems specialists have often talked past each other. How can we change this?

Rapid-response health team sent to Togo to counter epidemics


Germany and the Togolese Republic will expand their cooperation in the health sector. On 9 June, Federal Development Minister Gerd Müller and Togolese President Faure Gnassingbé agreed at their meeting in Berlin that Germany, in cooperation with the Bernhard Nocht Institute for Tropical Medicine (BNITM), will support the Togolese national reference laboratory in Togo. Only three months ago, Togo confirmed two cases of Lassa fever, a disease that is very similar to the Ebola virus. Only two months ago, two more cases of Lassa fever were detected in Togo.

Health Worker Dialogues foster cooperation between health workers


What can be done when the quality of maternal and neonatal health services suffers because the different health cadres who provide it don’t collaborate? The Reproductive, Maternal and Newborn Health Project in Pakistan currently pilots Health Worker Dialogues - an innovative intervention aimed at improving communication, collaboration and team spirit amongst them.
Towards universal coverage in the majority world: the cases of Bangladesh, Cambodia, Kenya and Tanzania


With this first of a series of P4H Knowledge-Learning-Innovation briefs, the research unit Equity and Health of the Institute of Tropical Medicine, Antwerp, provides an update on the state of the art of universal health coverage in four P4H partner countries, namely Bangladesh, Cambodia, Kenya and Tanzania. The brief draws upon peer-reviewed literature as well as on working documents which P4H partners shared on the P4H intranet. Each country section discusses how the UHC principles are realised in the given country.

Reproductive, maternal, neonatal, child and adolescent health & Right to health


by Alison Hadley, Venkatraman Chandra-Mouli, Roger Ingham
Journal of Adolescent Health xxx (2016) 1e7 (Article in press)
7 pp. 545 kB

The UK Government’s 10-year Teenage Pregnancy Strategy for England is an example of a nationally led, locally implemented program with associated reduction in rates. This article analyzes the strategy against the WHO-ExpandNet framework and identifies key lessons which are applicable to low- and middle-income countries.

Changes in conceptions in women younger than 18 years and the circumstances of young mothers in England in 2000-12: an observational study

by Kaye Wellings, Melissa J Palmer, Rebecca S Geary et al.
The Lancet - Published Online: 23 May 2016
10 pp. 320 kB

In 2000, a 10-year Teenage Pregnancy Strategy was launched in England to reduce conceptions in women younger than 18 years and social exclusion in young parents. The authors conclude that a sustained, multifaceted policy intervention involving health and education agencies, alongside other social and educational changes, has probably contributed to a substantial and accelerating decline in conceptions in women younger than 18 years in England since the late 1990s.
What contraception do women use after abortion? An analysis of 319,385 cases from eight countries

by Janie Benson, Kathryn Andersen, Dalia Brahmi et al.
Global Public Health: An International Journal for Research, Policy and Practice - Published online: 18 May 2016
16 pp. 1.5 MB
http://www.tandfonline.com/doi/pdf/10.1080/17441692.2016.1174280

Contraception is an essential element of high-quality abortion care. However, women seeking abortion often leave health facilities without receiving contraceptive counselling or methods, increasing their risk of unintended pregnancy. The findings of this study demonstrate high contraceptive uptake when it is delivered at the time of the abortion, a wide range of contraceptive commodities is available, and ongoing monitoring of services occurs. Improving availability of long-acting contraception, strengthening services in hospitals, and increasing access for young women are areas for improvement.

Health Worker Dialogues foster cooperation between health workers


What can be done when the quality of maternal and neonatal health services suffers because the different health cadres who provide it don’t collaborate? The Reproductive, Maternal and Newborn Health Project in Pakistan currently pilots Health Worker Dialogues - an innovative intervention aimed at improving communication, collaboration and team spirit amongst them.

Global estimates of human papillomavirus vaccination coverage by region and income level: a pooled analysis

by Laia Bruni, Mireia Diaz, Leslie Barrionuevo-Rosas et al.
11 p. 13.7 MB

Since 2006, many countries have implemented publicly funded human papillomavirus (HPV) immunisation programmes. However, global estimates of the extent and impact of vaccine coverage are still unavailable. The authors conclude that many women from high-income and upper-middle-income countries have been vaccinated against HPV. However, populations with the highest incidence and mortality of disease remain largely unprotected. Rapid roll-out of the vaccine in low-income and middle-income countries might be the only feasible way to narrow present inequalities in cervical cancer burden and prevention.
Free health care for under-fives, expectant and recent mothers? Evaluating the impact of Sierra Leone’s free health care initiative

by Ijeoma Edoka, Tim Ensor, Barbara McPake et al.
Health Economics Review 2016 6:19 - Published: 23 May 2016
15 pp. 935 kB

This study evaluates the impact of Sierra Leone’s 2010 Free Health Care Initiative (FHCI). The results suggest that children affected by the FHCI have a lower probability of incurring any health expenditure in public, non-governmental and missionary health facilities. However, a proportion of eligible children are observed to incur some health expenditure in participating facilities with no impact of the policy on the level of out-of-pocket health expenditure. Utilisation of informal care is observed to be higher among non-eligible children while in expectant and recent mothers, the authors find substantial but possibly transient increases in the use of key maternal health care services in public facilities following the implementation of the FHCI.

Cervical cancer prevention and treatment research in Africa: a systematic review from a public health perspective

by Sarah Finocchario-Kessler, Catherine Wexler, May Maloba et al.
BMC Women's Health 2016 16:29 – Published: 4 June 2016
25 pp. 1.2 MB

Women living in Africa experience the highest burden of cervical cancer. Research and investment to improve vaccination, screening, and treatment efforts are critically needed. The authors systematically reviewed and characterized recent research within a broader public health framework to organize and assess the range of cervical cancer research in Africa. They conclude that cervical cancer research in African countries has increased steadily over the past decade, but more is needed. Tertiary prevention (i.e. treatment of disease with effective medicine) and quality of life of cervical cancer survivors are two severely under-researched areas. Similarly, there are several countries in Africa with little to no research ever conducted on cervical cancer.
Management of Obstetric Fistula in Burundi

The experience from a multidisciplinary approach over five years
by Geert Morren, Wilma van den Boogaard and Eva Dominguez
Médecins sans Frontières (MSF) Project in Gitega Province, May 2016
36 pp. 1.5 MB
http://fieldresearch.msf.org/msf/bitstream/10144/610799/5/MSF_Fistula+in+Burundi_EN-WEB.pdf

In 2009, Médecins Sans Frontières (MSF) set up Gitega Fistula Centre (GFC) within the Regional Hospital of Gitega (RHG), Burundi. Justification for the centre was underpinned by the high burden of obstetric fistula (OF) in Burundi and the absence of any national center dedicated to providing care and treatment for OF. The aim of GFC was to provide high quality, multi-disciplinary care, free of charge, all year round. This report aims to reflect on the MSF experience of setting-up, running and handing over a fistula project like GFC.

Child mortality estimation: An assessment of summary birth history methods using microsimulation

by Andrea Verhulst
56 pp. 4.0 MB

Two types of indirect methods for estimating child mortality rates from summary birth histories (number of children ever born and children dead) are currently available to users: model-based methods derived from the pioneering work of Brass and empirically based methods developed more recently at the Institute for Health Metrics and Evaluation (IHME). This study suggests that the maternal age variant of the IHME cohort-derived method is the best option for estimating child mortality from past censuses. For future censuses, it would be worthwhile adding an extra question on date of first birth.

Empowering each other: young people who sell sex in Ethiopia

A case study from the Link Up project
by Frehiwot Abebe, Arran Abdo, Daniel Gudeta et al.
International HIV/AIDS Alliance, 2016
12 pp. 1.8 MB
http://www.aidsalliance.org/assets/000/002/138/2015_Alliance_Case_Study_Link_Up_Ethiopia_SW_Full_online_original.pdf?1453290691

Sex workers are amongst those most affected by HIV and sexual and reproductive health and rights (SRHR) issues in Ethiopia. Stigma and discrimination towards sex workers affects
their ability to access SRHR information, education and services. In 2014, the Link Up project in Ethiopia implemented a model of peer education and outreach to empower young people who sell sex (aged 15 – 24 years) and increase their access to HIV and SRHR services.

**HIV, Tuberculosis & Malaria**

**Consolidated guidelines on the use of antiretroviral drugs for treating and preventing HIV infection**

Recommendations for a public health approach - Second edition
by Paul Garner, Nandi Siegfried, David Sinclair et al.
World Health Organization, June 2016
480 pp. 10.3 MB

http://apps.who.int/iris/bitstream/10665/208825/1/9789241549684_eng.pdf?ua=1

These guidelines provide guidance on the diagnosis of human immunodeficiency virus (HIV) infection, the use of antiretroviral (ARV) drugs for treating and preventing HIV infection and the care of people living with HIV. They are structured along the continuum of HIV testing, prevention, treatment and care. This edition updates the 2013 consolidated guidelines on the use of antiretroviral drugs following an extensive review of evidence and consultations in mid-2015, shared at the end of 2015, and now published in full in 2016.

**United Nations fails key populations**

International HIV/AIDS Alliance, 23 June 2016

http://www.aidsalliance.org/news/759-united-nations-fails-key-populations

The fourth United Nations High-Level Meeting on Ending AIDS has set back the global fight against the AIDS epidemic and left the world’s most at-risk groups facing a future of further stigma and discrimination. High hopes for the UN High-Level Meeting (HLM) on Ending AIDS ended in disappointment with a Political Declaration which failed to meet the needs of men who have sex with men, people who use drugs, sex workers and transgender people. With reference to these key populations removed from significant parts of the document, the Declaration effectively reversed years of struggle for recognition by groups representing people living with HIV. Given the exceptionally high levels of new HIV infections in key populations, their exclusion also mitigates against the UN achieving its stated target of ending the AIDS epidemic by 2030.
To fast-track the HIV response and end AIDS by 2030, the Joint United Nations Programme on HIV/AIDS (UNAIDS) called for 90-90-90 targets for 2020. Achieving these targets has resource implications—it will require increases in spending and efficient utilization of HIV funding and lead to savings by preventing illness, deaths, and new HIV infections. Thus, how countries decide to allocate and prioritize their HIV funding will directly impact whether end of AIDS is achieved. This article examines the pattern, source, determinants, and impact of HIV spending on care and treatment from 2009 to 2013 in 38 low- and middle-income countries (LMICs), which are home to 73% of people living with HIV (PLHIV).

The AIDSFree HIV Post-Exposure Prophylaxis (PEP) Guidance Database

AIDSFree, 2016
https://aidsfree.usaid.gov/resources/guidance-data/pep

The AIDSFree HIV Post-Exposure Prophylaxis (PEP) Guidance Database provides continuous access to the most up-to-date country guidelines. The PEP Guidance Database is organized by country and patient population. The patient populations are determined by what is in each country’s national guidance. Once you click through to the specific country page of interest, you can view the guidance on any device, download or e-mail a summary of the guidance, or view the original country guidance documents.

Sustaining the Future of HIV Counselling to Reach 90-90-90: a Regional Country Analysis

by Marielle Bemelmans, Saar Baert, Eyerusalem Negussie et al.
11 pp. 333 kB
http://fieldresearch.msf.org/msf/bitstream/10144/610595/1/Bemelmans_et_al+-+2016+-+Sustaining+the+future+of+HIV+counselling+to+reach+90-90-90+a+regional+country+analysis.pdf

Counselling services are recommended by the World Health Organization and have been partially adopted by national HIV guidelines. In settings with a high HIV burden, patient education and counselling is often performed by lay workers, mainly supported with international funding. There are few examples where ministries of health have been able to absorb lay counsellors into their health sys-
tems or otherwise sustain their work. The authors document the role of lay cadres involved in HIV testing and counselling and adherence support and discuss approaches to sustainability.

**Circumcision of male infants and children as a public health measure in developed countries: A critical assessment of recent evidence**

by Morten Frisch & Brian D. Earp
Global Public Health: An International Journal for Research, Policy and Practice, Published online: 19 May 2016
16 pp. 1.6 MB
http://www.tandfonline.com/doi/pdf/10.1080/17441692.2016.1184292

In this article, the authors provide a brief scientific and conceptual analysis of the CDC’s assessment of benefit versus risk of male circumcision, and argue that it deserves a closer look. Although they set aside the burgeoning bioethical debate surrounding the moral permissibility of performing non-therapeutic circumcisions on healthy minors, the authors argue that, from a scientific and medical perspective, current evidence suggests that such circumcision is not an appropriate public health measure for developed countries such as the United States.

**Programmatic Management of Drug-Resistant Tuberculosis: An Updated Research Agenda**

by Carole D. Mitnick, Carly A. Rodriguez, Marita L. Hatton et al.
16 pp. 4.4 MB
http://journals.plos.org/plosone/article/asset?id=10.1371%2Fjournal.pone.0155968.PDF

There are numerous challenges in delivering appropriate treatment for multidrug-resistant tuberculosis (MDR-TB) and the evidence base to guide those practices remains limited. The authors present the third updated Research Agenda for the programmatic management of drug-resistant TB (PMDT), assembled through a literature review and survey.

**Systematic review of risk factors for nonadherence to TB treatment in immigrant populations**

by Stephanie Lin and G.J. Melendez-Torres
13 pp. 830 kB
http://trstmh.oxfordjournals.org/content/110/5/268.full.pdf#page=1&view=FitH

Foreign-born populations carry a significant TB burden in low-prevalence countries, composing over half of all cases in parts of Europe and North America. This study
systematically reviewed evidence of risk factors for nonadherence to TB drug therapy in this group. The authors conclude that unknown or undocumented immigration status was the risk factor most consistently correlated with nonadherence.

**Health & Human Rights journal (special section) - Tuberculosis and the Right to Health**

https://www.hhrjournal.org/

This special section of Health and Human Rights Journal focuses much-needed attention on tuberculosis (TB) and human rights — particularly the right to health. Even as TB has surpassed HIV as the top infectious disease killer in the world and the global threat from multidrug-resistant TB (MDR-TB) continues to grow, approaches to fighting the disease remain primarily biomedical and public health-based. These traditional approaches dominate global and national TB programs and research on the disease, and they largely ignore the underlying social, economic, and structural factors driving the epidemic and drug resistance. All the while, the highest TB burdens exist where vulnerability and marginalization increase the risk of infection and disease and erect barriers to accessing testing and treatment services.

**Malaria: Global progress 2000 - 2015 and future challenges**

by Richard E. Cibulskis, Pedro Alonso, John Aponte et al.

Infectious Diseases of Poverty 2016 5:61 - Published: 9 June 2016
8 pp. 1.9 MB


2015 was the target year for malaria goals set by the World Health Assembly and other international institutions to reduce malaria incidence and mortality. A review of progress indicates that malaria programme financing and coverage have been transformed since the beginning of the millennium, and have contributed to substantial reductions in the burden of disease. Investments in malaria programmes can not only reduce malaria morbidity and mortality, thereby contributing to the health targets of the Sustainable Development Goals, but they can also transform the well-being and livelihood of some of the poorest communities across the globe.
Plasmodium vivax infection: a major determinant of severe anaemia in infancy
by Enny Kenangalem, Muhammad Karyana, Nicholas M. Douglas, et al.
10 pp. 1.2 MB

Despite comparatively low-level endemicity, malaria is associated with a significant proportion of all cases of community anaemia in southern Papua. Contrary to its benign reputation, P. vivax is an important and preventable risk factor for anaemia during infancy - a probable consequence of relapsing disease prior to the development of immunity.

Malaria diagnosis and treatment: A Starter Kit to develop interventions in endemic countries
ACT Consortium, 2016
4 pp. 1.5 MB

The artemisinin-based combination therapy (ACT) consortium developed, piloted, delivered and evaluated training resources in different countries and contexts. They have compiled them into a Starter Kit which they are now sharing to help guide your own work in malaria endemic countries. If you wish to adapt these resources to your intervention and its context, or design your own tools, this document explains aspects of the design process for you to consider.
Access the starter kit at:

Answering key questions on malaria
ACT Consortium research from 2007 to 2015...and future directions
by David Schellenberg and Sarah Staedke
ACT Consortium Secretariat, 2015
24 pp. 5.0 MB

Over the past decade, enormous strides have been made in the fight against malaria. But much remains to be done. Results from the artemisinin-based combination therapy (ACT) consortium contribute to the evidence base to guide further improvements in malaria control through enhanced
access, targeting, safety and quality of ACTs, and better malaria and fever case management. This booklet summarises the key results of dozens of projects, the product of the efforts of hundreds of committed people over the past decade.

Towards subsidized malaria rapid diagnostic tests. Lessons learned from programmes to subsidise artemisinin-based combination therapies in the private sector: a review

by Cristina Lussiana
Health Policy Plan. (2015), First published online: April 9, 2015
12 pp. 921 kB
http://heapol.oxfordjournals.org/content/early/2016/06/22/heapol.czv028.full.pdf+html

Overall the private sector subsidy programmes of artemisinin-based combination therapies (ACTs) have been effective in increasing availability of ACTs in the private sector and driving down average prices but struggled to crowd out antimalarial monotherapies. Among the interventions recently proposed, a subsidy of rapid diagnostic tests (RDTs) in the private sector has been recommended by governments and international donors to cope with overtreatment with ACTs and to delay the emergence of resistance to artemisinin. The results obtained from this ambitious strategy should inform policy makers in the designing of future interventions aimed to control malaria morbidity and mortality.

Sharp increase of imported Plasmodium vivax malaria seen in migrants from Eritrea in Hamburg, Germany

by Louise Roggelin, Dennis Tappe, Bernd Noack et al.
Malaria Journal, December 2016, 15:325 - First online: 17 June 2016
5 pp. 1.1 MB

Since 2014, a considerable increase in Plasmodium vivax malaria has been observed in Germany. The majority of cases was seen in Eritrean refugees. The authors conclude that countries hosting Eritrean refugees need to be aware of vivax malaria occurring in this group and the risk of autochthonous cases due to local transmission by indigenous, vector competent Anopheles species.
Neglected Tropical Diseases, Other Infectious diseases & Pandemic Preparedness

Zika virus misinformation on the internet

by Anand Venkatraman, Dhruvika Mukhija, Nilay Kumar et al.
Travel Medicine and Infectious Disease (2016) xx, 1e2
2 pp. 176 kB

The recent outbreak of Zika virus infections in South and Central America has led to significant sustained media coverage. As with previous epidemics which captured global attention, such as Ebola, misinformation has been spread about the disease, its pathophysiology, prevention and treatment. The internet has become a favoured mechanism for the spread of misinformation. The authors aimed to investigate the nature of misinformation about the Zika virus on the internet, and to compare the degree of misinformation on Google.com (Alphabet Inc.) and Bing.com (Microsoft Corporation), the two most popular search engines.

Scabies: Advances in Noninvasive Diagnosis

by Giuseppe Micali, Francesco Lacarrubba, Anna Elisa Verzì et al.
13 pp. 5.0 MB
http://journals.plos.org/plosntds/article/asset?id=10.1371%2Fjournal.pntd.0004691.PDF

The standard diagnostic technique of scabies consists of mites’ identification by microscopic examination of scales obtained by skin scraping. This is a time-consuming and risk-associated procedure that is also not suitable to a busy practice. In recent years, some advanced and non-invasive techniques such as videodermatoscopy, dermatoscopy, reflectance confocal microscopy, and optical coherence tomography have demonstrated improved efficacy in the diagnosis of scabies. Their advantages include rapid, non-invasive mass screening and post-therapeutic follow-up, with no physical risk. A greater knowledge of these techniques among general practitioners and other specialists involved in the intake care of overcrowded populations vulnerable to scabies infestations is now viewed as urgent and important in the management of outbreaks, as well as in consideration of the recent growing inflow of migrants in Europe from North Africa.

Weekly Epidemiological Record (WER) - 17 June 2016, Vol. 91, 24

Weekly epidemiological record
Relevé épidémiologique hebdomadaire
World Health Organization
12 pp. 392 kB

hesp-news-briefing Issue 13/2016
New momentum in prevention, control and elimination of cholera in Africa: priority actions identified by affected countries

Fact sheet on Zika virus disease (updated on 2 June 2016)

Nutrition, Non-Communicable Diseases & Environmental Health (incl. WASH & Climate Change)

From Promise to Impact: Ending Malnutrition by 2030

by Lawrence Haddad, Corinna Hawkes, Emorn Udomkesmalae et al.
International Food Policy Research Institute, 2016
182 pp. 5.5 MB

The only independent and comprehensive annual review of the state of the world’s nutrition, the Global Nutrition Report is a multipartner initiative that holds a mirror up to our successes and failures at meeting intergovernmental nutrition targets. It documents progress on commitments made on the global stage, and it recommends actions to accelerate that progress. The Global Nutrition Report aims to be a beacon, providing examples of change and identifying opportunities for action. This year’s report focuses on the theme of making — and measuring — SMART commitments to nutrition and identifying what it will take to end malnutrition in all its forms by 2030.

Unequal Portions: Ending malnutrition for every last child

Save the Children, 16 June 2016
by Marie Rumsby, Katherine Richards, José Manuel Roche et al.
Save the Children, UK, 2016
89 pp. 2.4 MB
http://reliefweb.int/sites/reliefweb.int/files/resources/Unequal_Portsions.pdf

The publication presents the findings of new research into what makes some children more vulnerable to malnutrition than others. It analyses data from a range of sources to show how a deadly combination of poverty and discrimination is robbing certain groups of children – girls, children from ethnic minorities, those in disadvantaged regions of their country, disabled children, and children affected by war – of the healthy, balanced diet they need to survive and thrive. Drawing on new findings and analysis, this report identifies a series of measures to ensure no child is left behind. And it calls on world leaders to address exclusion and ensure every last child gets the nutrition they need.
Diabetes in the tropics: prevalent, increasing and a major public health problem

by Ranjit Unnikrishnan and Viswanathan Mohan

http://trstmh.oxfordjournals.org/content/110/5/263.full.pdf#page=1&view=FitH

Diabetes mellitus is no longer confined to the developed nations of the temperate zone, but has attained epidemic proportions in the developing nations of the tropics as well. The latter group of nation’s unique challenges include low rates of disease detection and limited access to preventive and therapeutic measures. Lessons learned from the experiences of the developed world need to be appropriately adapted and applied to these populations in order to prevent the spread of the diabetes epidemic in a cost-effective manner in developing countries of the world where 80% of all people with diabetes currently live.

UNODC’s 2016 World Drug Report

by Coen Bussink, David Macdonald, Chloé Carpentier et al.

United Nations Office on Drugs and Crime (UNODC), May 2016
174 pp. 9.6 MB


Around five per cent of the adult population, or nearly 250 million people between the ages of 15 and 64, used at least one drug in 2014, according to the latest World Drug Report released by UNODC. Although substantial, this figure has not grown over the past four years in proportion to the global population. However, it suggests that the number of people suffering from drug use disorders has increased disproportionally for the first time in six years.

Human Rights-Based Approaches to Mental Health: A Review of Programs

by Sebastian Porsdam Mann, Valerie J. Bradley, and Barbara J. Sahakian

Read online at:
https://www.hhrjournal.org/2016/05/human-rights-based-approaches-to-mental-health-a-review-of-programs/

The incidence of human rights violations in mental health care across nations has been described as a “global emergency” and an “unresolved global crisis.” The relationship between mental health and human rights is complex and bidirectional. Human rights violations can negatively impact mental health. Conversely, respecting human rights can improve mental health. This article reviews cases where an explicitly human rights-based approach was used in mental health care settings.
With the rapid changes that our societies are facing, water management is becoming more and more a critical issue. We are calling for more drinking water for our growing populations, and also the growing agricultural demands are leading to an increase of water abstraction. We are still trying to get a better understanding about the complexity of water and risks. While data are gathered, models developed and knowledge is generated, we are still far away from understanding all processes that affect us. But this gives rise to optimism, that we will be able to provide you with more news about the research on water and risk.

Understanding differences in the impact of deworming programmes

by Birgit Nikolay
South African Centre for Epidemiological Modelling and Analysis (SACEMA) - Published on March 10, 2016
2 pp. 385 kB


Soil transmitted helminths infections can have a negative impact on the health of children affecting nutritional status and development. Therefore, most endemic countries have started implementing mass chemotherapy programmes through school infrastructures. The success of a national deworming programme may be influenced by environmental conditions or the access to water, sanitation and hygiene. The question is which of these factors lead to success or failure of a programme. The authors therefore tried to get a better understanding of the determinants of geographical variations in programme impact in Kenya.

Drought characteristics and management in the Caribbean

by Mohamed Bazza, Lystra Fletcher-Paul, Adrian Trotman et al.
Caribbean Institute for Meteorology and Hydrology and Food and Agriculture Organization of the United Nations (FAO), 2016
93 pp. 2.0 MB

http://reliefweb.int/sites/reliefweb.int/files/resources/Drought%20characteristics%20and%20mgmt%20in%20the%20Caribbean.pdf

Climate change is expected to increase the intensity and frequency of droughts in the Caribbean, so countries must enhance their capabilities to deal with this and other climate related challenges to ensure food security and hunger eradication. The Caribbean faces significant challenges
in terms of drought, this new FAO study says. The region already experiences drought-like events every year, often with low water availability impacting agriculture and water resources, and a significant number of bush fires. The most pressing need is for countries to develop strong national initiatives. According to this report, currently policy-making and planning regarding drought is hindered by weak governance, lack of finance and poorly coordinated land management.

Population Dynamics & Social Determinants of Health (including Gender & Education)

“With Solar Sister, Forward We Go”: A Qualitative Assessment Exploring How Solar Sister Brings Light, Hope, and Opportunity to Women in Africa

by Lizzette Soria, Kathryn Farley, Allie Glinski
International Center for Research on Women (ICRW), 2016
24 pp. 2.1 MB

The International Center for Research on Women (ICRW) conducted an assessment of “Solar Sister”, whose goal is to eradicate energy poverty by empowering women with economic opportunity and access to energy in rural Africa. Solar Sister currently has operations in Tanzania, Uganda and Nigeria. In order to achieve its objective, Solar Sister’s business model deliberately creates women-centered direct sales networks through women’s enterprise development and capacity building.

Education Disrupted: Disaster impacts on education in the Asia Pacific region in 2015

by Sarah Ireland
Save the Children, April 2016
42 pp. 2.6 MB
http://reliefweb.int/sites/reliefweb.int/files/resources/education_disrupted_save_the_children_full_report.pdf

This report seeks to shine a light on the continuing impact that disasters have on education by profiling five specific events that struck the Asia-Pacific region in 2015 – the earthquakes in Nepal, floods in Indonesia and Myanmar, Typhoon Koppu in the Philippines, and Cyclone Pam in Vanuatu. Some of the profiles are of large disasters such as that in Nepal, while others are recurring disasters that force children out of school on an annual or semi-annual basis, such as the typhoons in the Philippines or floods in Indonesia. Many of these are not identified as major disasters by any national or international declaration. As part of its regional initiative “Education Safe from Disasters”, Save the Children’s ambition is for zero children killed or injured in schools and zero days of schooling lost when a disaster strikes in Asia and the Pacific.
Optimising the benefits of community health workers’ unique position between communities and the health sector: A comparative analysis of factors shaping relationships in four countries

by Maryse C. Kok, Hermen Ormel, Jacqueline E. W. Broerse et al.
Global Public Health: An International Journal for Research, Policy and Practice, Published online: 30 April 2016
29 pp. 2.7 MB
http://www.tandfonline.com/doi/pdf/10.1080/17441692.2016.1174722

Community health workers (CHWs) have a unique position between communities and the health sector. The strength of CHWs’ relationships with both sides influences their motivation and performance. This qualitative comparative study aimed at understanding similarities and differences in how relationships between CHWs, communities and the health sector were shaped in different Sub-Saharan African settings. The study demonstrates a complex interplay of influences on trust and CHWs’ relationships with their communities and actors in the health sector.

Developing and Strengthening Community Health Worker Programs at Scale

A Reference Guide and Case Studies for Program Managers and Policymakers
by Henry Perry, Lauren Crigler, Steve Hodgins et al.
United States Agency for International Development (USAID), 2014
468 pp. 10.5 MB
http://www.chwcentral.org/sites/default/files/MCHIP_CHW%20Ref%20Guide.pdf

This guide is a long and detailed volume that is not intended to be read from cover to cover but rather to be used as a document that can be referred to as specific issues or questions arise. In this sense, you will find some repetition. The authors have also tried to refer the reader to other chapters where appropriate because many topics and issues are covered in various ways in different chapters. This tool is designed to support national and local decision-makers through the design, planning, and scale-up of Community Health Worker (CHW) programs.

Evidence-based medicine for all: what we can learn from a programme providing free access to an online clinical resource to health workers in resource-limited settings

by Yannis K Valtis, Julie Rosenberg, Sudip Bhandari et al.
10 pp. 2.0 MB
UpToDate is an online evidence-based clinical decision support tool. UpToDate hires experts on thousands of medical topics to write data-driven articles and guidelines on how to diagnose and treat disease. What makes UpToDate special is that authors are expected to keep their information current by reading the literature and incorporating any new evidence into their discussion of a particular disease every few months. The programme demonstrates that there are barriers to evidence-based clinical knowledge in resource-limited settings we can help remove. Some assumed barriers to its expansion (poor internet connectivity, lack of training and infrastructure) might pose less of a burden than subscription fees.

I've got 99 problems but a phone ain't one: Electronic and mobile health in low and middle income countries

by Pratap Kumar, Chris Paton, Doris Kirigia
Arch Dis Child Online First, published on June 13, 2016
7 pp. 670 kB
http://adc.bmj.com/content/early/2016/06/13/archdischild-2015-308556.full.pdf#page=1&view=FitH

Mobile technology is very prevalent in Kenya - mobile phone penetration is at 88% and mobile data subscriptions form 99% of all internet subscriptions. While there is great potential for such ubiquitous technology to revolutionise access and quality of healthcare in low-resource settings, there have been few successes at scale. Implementations of electronic health (e-Health) and mobile health (m-Health) technologies in countries like Kenya are yet to tackle human resource constraints or the political, ethical and financial considerations of such technologies. This paper makes a case for continued and increased investment in social enterprises that bridge academia, public and private sectors to deliver sustainable and scalable e-Health and m-Health solutions.

Why Most Clinical Research Is Not Useful

by John P. A. Ioannidis
10 pp. 205 kB
http://journals.plos.org/plosmedicine/article/asset?id=10.1371%2Fjournal.pmed.1002049.PDF

Practicing doctors and other health care professionals will be familiar with how little of what they find in medical journals is useful. Waste across medical research (clinical or other types) has been estimated as consuming 85% of the billions spent each year. The author has previously written about why most published research is false and how to make more of it true. In order to be useful, clinical research should be true, but this is not sufficient. Here he describes the key features of useful clinical research and the current state of affairs and suggests future prospects for improvement.
Access to Medical Products, Vaccines and Technologies

Special issue of PAHO journal: Strengthening of regulatory systems for medicines in the Americas

A special issue of the Pan American Journal of Public Health published by the Pan American Health Organization (PAHO) with the support of the U.S. Food and Drug Administration (FDA), provides the latest scientific evidence on the regulation of medicines and other health technologies. This new information will help regulatory authorities to make informed decisions, broaden regulatory scope, and learn from the experiences of others.

Industry-sponsored clinical drug trials in Egypt: Ethical Questions in a Challenging Context

Edited by Berne Declaration, Centre for Research on Multinational Corporations (SOMO), Wemos Foundation, the Egyptian Initiative for Personal Rights and Shamseya for Innovative Community Healthcare Solutions, June 2016
60 pp. 2.4 MB


This study brings new evidence that unethical practices occur in industry-sponsored clinical trials conducted in Egypt, and that drugs tested in Egypt are not systematically available to and mostly unaffordable for the Egyptian population.

Towards 100% voluntary blood donation: A global framework for action

Editors: Jan Fordham, Neelam Dhingra, Noryati Abu Amin et al.
World Health Organization and International Federation of Red Cross and Red Crescent Societies, 2010
138 pp. 7.8 MB

http://www.who.int/entity/bloodsafety/publications/9789241599696_eng.pdf?ua=1

This document aims to provide information and guidance on the vital role of voluntary blood donors in assuring the availability of stable and sufficient supplies of safe blood for transfusion; and propose a series of interlinking strategies and suggestions for concrete action at national and community levels to scale up voluntary blood donor programmes with heightened commitment and support from governments, partners and other stakeholders.
Seroepidemiology: an underused tool for designing and monitoring vaccination programs in low and middle-income countries

by Felicity T. Cutts, and Matt Hanson
Tropical Medicine & International Health, (Accepted, unedited articles published online and citable)
24 pp 220 kB

Seroepidemiology, the use of data on the prevalence of bio-markers of infection or vaccination, is a potentially powerful tool to understand the epidemiology of infection before vaccination and to monitor the effectiveness of vaccination programs. Global and national burden of disease estimates for hepatitis B and rubella are based almost exclusively on serological data. Seroepidemiology has helped in the design of measles, poliomyelitis and rubella elimination programs, by informing estimates of the required population immunity thresholds for elimination. It contributes to monitoring of these programs by identifying population immunity gaps, and evaluating the effectiveness of vaccination campaigns. Despite these potential uses, technological, time and cost constraints have limited the widespread application of this tool in low-income countries.

Dispensing Practices in India and United States

by Avinash Darekar, Isha Patel, Marilee Clemons et al.
Journal of Pharmacy Practice and Community Medicine, 2016, 2(3):60-64
5 pp. 339 kB

Physician dispensing refers to the legal practice where physicians directly supply their patients with medication bypassing the need for patients to use a community pharmacy to fill their prescription. This practice is common in India where 80% of all physicians are legally allowed to dispense medications. Physician dispensing has negatively impacted community pharmacy relationships by taking away their business and forcing them to close. Regulations, such as those in United States, that prohibit physicians from receiving profits based on the number of medications they dispense should be created in India to reduce conflicts of interest and prevent community pharmacies from going out of business.

What Can We Learn About the Processes of Regulation of Tuberculosis Medicines from the Experiences of Health Policy and System Actors in India, Tanzania, and Zambia?

by Kabir Sheikh and Mukund Uplekar
Int J Health Policy Manag 2016, 5(7), 403-415
13 pp. 911 kB
http://ijhpm.com/pdf_3175_f61be66b1144f58a76683769b6f6f6b.html
The unregulated availability and irrational use of tuberculosis (TB) medicines is a major issue of public health concern globally. Governments of many low- and middle-income countries (LMICs) have committed to regulating the quality and availability of TB medicines, but with variable success. Regulation of TB medicines remains an intractable challenge in many settings, but the reasons for this are poorly understood. The objective of this paper is to elaborate processes of regulation of quality and availability of TB medicines in three LMICs – India, Tanzania, and Zambia – and to understand the factors that constrain and enable these processes.

**Corruption in the Pharmaceutical Sector: Diagnosing the Challenges**

by Jillian Clare Kohler, Leslie Dan, Martha Gabriela Martinez et al.

Transparency International, 2016

58 pp. 2.1 MB


The launch of the Sustainable Development Goals in September 2015 signals a more comprehensive global development agenda. This plan specifies that all governments must fight corruption. For the health sector, this will mean integrating good governance into policy making and implementation to reduce the risk of corruption. Within the health sector, pharmaceuticals stands out as sub-sector that is particularly prone to corruption. There are abundant examples globally that display how corruption in the pharmaceutical sector endangers positive health outcomes.

**Management and Quality of Health Services and Facilities**

**Monitoring iCCM: a feasibility study of the indicator guide for monitoring and evaluating integrated community case management**

by Timothy Roberton, Dyness Kasungami, Tanya Guenther et al.


8 pp. 156 kB

http://heapol.oxfordjournals.org/content/31/6/759.full.pdf+html

The iCCM Task Force has developed a list of recommended indicators for monitoring iCCM, with globally agreed definitions and methodology. The data needed to calculate many of these routine monitoring indicators are already being collected through existing iCCM monitoring systems, though some of the indicators, in their current form, may be overly difficult to measure and need revising. Routine monitoring of iCCM will be more feasible, effective and efficient if countries are encouraged to measure a smaller set of high-value indicators that are easy to implement, reliably interpreted and useful for both global stakeholders and frontline health workers themselves.
Primary Surgery (Vol. 1: Non-Trauma)

Primary Surgery has established itself as the most used and most useful text for the medical practitioner in poor-resource settings who is obliged to manage surgical cases. It is particularly adapted for those whose surgical experience is basic or minimal. Importantly, it has extensive advice about pitfalls to avoid, and what to do if things go wrong. It is written in simple style, particularly for those whose mother tongue is not English. It is not a text which discusses the latest up-to-date technology, but it is not out-of-date being a synthesis of the best advice from a myriad of surgeons practicing for many years in low- and middle-income countries.

This new edition builds and expands on the success of Maurice King’s seminal first edition.

Applying for, reviewing and funding public health research in Germany and beyond

Public health research is complex, involves various disciplines, epistemological perspectives and methods, and is rarely conducted in a controlled setting. Often, the added value of a research project lies in its inter- or trans-disciplinary interaction, reflecting the complexity of the research questions at hand. This creates specific challenges when writing and reviewing public health research grant applications. Therefore, the German Research Foundation (DFG), the largest independent research funding organization in Germany, organized a round table to discuss the process of writing, reviewing and funding public health research. The aim was to analyse the challenges of writing, reviewing and granting scientific public health projects and to improve the situation by offering guidance to applicants, reviewers and funding organizations.
Universal Health Coverage, Health Financing and Social Health Protection

How a universal health system reduces inequalities: lessons from England

by Miqdad Asaria, Shehzad Ali, Tim Doran et al.

J Epidemiol Community Health 2016;70:637-643 - Published Online 19 January 2016
7 pp. 586 kB
http://jech.bmj.com/content/70/7/637.full.pdf+html

Provision of universal coverage is essential for achieving equity in healthcare, but inequalities still exist in universal healthcare systems. Between 2004/2005 and 2011/2012, the National Health Service (NHS) in England, which has provided universal coverage since 1948, made sustained efforts to reduce health inequalities by strengthening primary care. The authors provide the first comprehensive assessment of trends in socioeconomic inequalities of primary care access, quality and outcomes during this period.

Voluntary health insurance in Europe: Role and regulation

by Anna Sagan and Sarah Thomson

The European Observatory on Health Systems and Policies, 2016
122 pp. 4.0 MB
http://www.euro.who.int/__data/assets/pdf_file/0005/310838/Voluntary-health-insurance-Europe-role-regulation.pdf?ua=1

If public resources were unlimited, there would be no gaps in health coverage and no real need for voluntary health insurance (VHI). Most health systems face fiscal constraints, however, and VHI is often seen as a way to address these pressures. This study draws from the experiences of 34 countries to assess VHI’s contribution to health spending and to understand its role in Europe and in relation to publicly financed coverage. It looks at who sells VHI, who purchases it and why. It also reviews public policy on VHI at the national and European Union (EU) levels and the related national policy debates.

Voluntary health insurance in Europe: Country experience

Edited by: Anna Sagan and Sarah Thomson

The European Observatory on Health Systems and Policies, 2016
161 pp. 2.5 MB
http://www.euro.who.int/__data/assets/pdf_file/0011/310799/Voluntary-health-insurance-Europe-country-experience.pdf?ua=1

No two markets for voluntary health insurance (VHI) are identical. All differ in some
way because they are heavily shaped by the nature and performance of publicly financed health systems and by the contexts in which they have evolved. This volume contains short, structured profiles of markets for VHI in 34 countries in the WHO European Region. These are drawn from European Union Member States plus Armenia, Iceland, Georgia, Norway, the Russian Federation, Switzerland and Ukraine. The book is aimed at policy-makers and researchers interested in knowing more about how VHI works in practice in a wide range of contexts.

Health insurance subscription among women in reproductive age in Ghana: do socio-demographics matter?

by Hubert Amu and Kwamena Sekyi Dickson
8 pp. 459 kB

Premised that health insurance schemes in Africa have only been introduced recently and continue evolving, various concerns have been raised regarding their effectiveness in improving utilisation of orthodox health care and the reduction of out-of-pocket expenditures for their population, particularly women. The findings of this study underscore the need for the National Health Insurance Authority to carry out more education in association with the National Commission for Civic Education and the Information Services Department to recruit more urban dwellers, nulliparous women, those with no or low levels of education, African traditionalists and the poor unto the scheme.

Brazil–Africa knowledge-sharing on social protection and food and nutrition security

by Cristina Cirillo, Lívia Maria da Costa Nogueira, Fábio Veras Soares
International Policy Centre for Inclusive Growth (IPC-IG), June 2016
34 pp. 8.4 MB
http://www.ipc-undp.org/pub/eng/WP143_Brazil_Africa_knowledge_sharing_on_Social_Protection.pdf

Within the framework of the project ‘Brazil & Africa: Fighting Poverty and Empowering Women via South–South Cooperation’, the International Policy Centre for Inclusive Growth (IPC-IG) promoted an exchange of experiences of cooperation between Brazil and African countries on social protection and food and nutrition security. Here the authors present a summary of the major achievements and challenges of this process, as well as some suggestions from the participants on how to make this learning exchange more effective in the future.
Towards universal coverage in the majority world: the cases of Bangladesh, Cambodia, Kenya and Tanzania


With this first of a series of P4H Knowledge-Learning-Innovation briefs, the research unit Equity and Health of the Institute of Tropical Medicine, Antwerp, provides an update on the state of the art of universal health coverage in four P4H partner countries, namely Bangladesh, Cambodia, Kenya and Tanzania. The brief draws upon peer-reviewed literature as well as on working documents which P4H partners shared on the P4H intranet. Each country section discusses how the UHC principles are realised in the given country.

Old Age, Unemployment and Occupational Injuries Protection

World Elder Abuse Awareness Day

UN News Center, 15 June 2016
Read online at:

Marking World Elder Abuse Awareness Day, United Nations Secretary-General Ban Ki-moon emphasized that ending neglect, abuse and violence against older people is crucial as the international community continues to work together towards achieving the 17 Sustainable Development Goals and fulfill their underlying pledge to leave no one behind. World Elder Abuse Awareness Day – observed annually on 15 June since it was proclaimed by the UN General Assembly in 2011 – aims to spotlight the global social issues affecting elderly people. The commemoration also brings the attention of the international community on the safeguarding of older human beings from mistreatment and suffering.

Financial access to health care for older people in Cambodia: 10-year trends (2004-14) and determinants of catastrophic health expenses

by Bart Jacobs, Richard de Groot and Adélio Fernandes Antunes
International Journal for Equity in Health 2016 15:94 - Published: 17 June 2016
9 pp. 493 kB


Older people make up an increasing proportion of the population in low- and middle-income countries. This brings a number of challenges, as their health needs are greater than, and different from,
those of younger people. In general, these health systems are not geared to address their needs, and traditional support systems tend to erode, potentially causing financial hardship when accessing health care. This paper provides an overview of older Cambodians’ financial access to health care over time, using nationally representative data to enable the formulation of appropriate responses.

Social Transfers

Community-Based Conditional Cash Transfers in Tanzania: Results from a Randomized Trial

by David K. Evans, Stephanie Hausladen, Katrina Kosec et al.
International Bank for Reconstruction and Development/The World Bank, 2014
191 pp. 12.2 MB

https://openknowledge.worldbank.org/bitstream/handle/10986/17220/9781464801419.pdf?sequence=1

Given the success of conditional cash transfer programs elsewhere, in 2010 the Government of Tanzania launched a pilot conditional cash transfer program in three districts. The program used a model that relied on communities to target beneficiaries, monitor conditions, and deliver payments. The aim was to understand whether such a program could improve outcomes for the poor in the way more centrally administered conditional cash transfer programs have in other contexts. The authors show that, overall, households that received the conditional cash transfer program were focused on reducing risk and on improving their livelihoods rather than principally on increasing consumption. The project also had positive effects on community cohesion.

Cash-Based Approaches in Humanitarian Emergencies: A Systematic Review

by Shannon Doocy and Hannah Tappis
International Initiative for Impact Evaluation (3ie), April 2016
223 pp. 2.5 MB


The primary objective of this review was to assess and synthesize existing evidence on the effects of cash-based approaches on individual and household outcomes in humanitarian emergencies. The secondary objective was to assess the efficiency of different cash-based approaches and identify factors that hinder and facilitate programme implementation. The findings suggest that cash-based approaches can be effective means of increasing household food security among conflict-affected populations and maintaining household food security among food insecure and drought-affected populations.
Making Change with Cash? Impact of a Conditional Cash Transfer Program on Girls’ Education and Age of Marriage in India

Synthesis of Findings
by Priya Nanda, Priya Das, Nitin Datta et al.
International Center for Research on Women (ICRW), 2016
8 pp. 589 kB


ICRW evaluated the Apni Beti Apna Dhan (Our Daughters Our Wealth) CCT program to determine if an economic incentive, which provided eligible enrolled daughters a bond to be redeemed at 25,000 rupees was successful. ICRW measured whether the girls were more likely to remain unmarried until age 18, whether they were more likely to stay in school longer or to currently be studying, and whether or not the girls’ and parents’ aspirations for their daughters had increased.

Making Change with Cash? Impact of a Conditional Cash Transfer Program on Age of Marriage in India

by Priya Nanda, Nitin Datta, Elina Pradhan et al.
International Center for Research on Women (ICRW), 2016
8 pp. 527 kB


Because of some success in alleviating poverty and improving educational and health outcomes, researchers and practitioners have recently begun looking at conditional cash transfers (CCTs) as a possible strategy for delaying marriage. This brief examines the impact of a CCT program on the age of marriage for girls. ICRW evaluated the Apni Beti Apna Dhan (Our Daughters Our Wealth) CCT program to determine if an economic incentive, which provided eligible enrolled daughters a bond to be redeemed at 25,000 rupees if the girl remained unmarried at 18, was successful.

The effects of conditionality monitoring on educational outcomes: evidence from Brazil’s Bolsa Família programme

by Luis Henrique Paiva, Fábio Veras Soares, Flavio Cireno et al.
International Policy Centre for Inclusive Growth (IPC-IG), June, 2016
32 pp. 2.6 MB


Conditional cash transfer programmes have been increasingly adopted by several
low and middle-income countries. Despite this overall acceptance, conditionalities remain under scrutiny regarding their possible independent effects on educational and health indicators. This study aimed to assess whether the coverage and monitoring of the Brazilian Bolsa Família Programme’s education-related conditionality is associated with any positive changes on educational outcomes.

Inclusion of People with Disabilities

**Take charge! A Reproductive Health Guide for Women with Disabilities**

by Kennedy Healy, Judy Panko Reis, Marilyn Martin et al.
The Empowered Fe Fes, August 2015
53 pp. 2.5 MB
https://www.accessliving.org/index.php?download=lambda270

The guide is geared toward women with disabilities, healthcare providers, parents, and community organizations. “Take Charge!” offers specific advice about reproductive and sexual health, and can be used as a tool to promote overall physical and mental health.

**A Health Handbook for Women with Disabilities**

by Jane Maxwell, Julia Watts Belser, and Darlena David
Hesperian Foundation, February 2007
Read/download chapter by chapter at:

Developed with the participation of women with disabilities in 42 countries, this guide helps women to overcome the barriers of social stigma and inadequate care to improve their general health, self-esteem, and independence.

**#CostingEquity: How education financing falls short for learners with disabilities**

The International Disability and Development Consortium (IDDC), 2016
6 pp. 1.2 MB
http://iddcconsortium.net/sites/default/files/resources-tools/files/costing_equity_full_leaflet.pdf

The International Disability and Development Consortium (IDDC) is conducting research into the financing of disability-inclusive education. The research will look at the benefits of financing disability-inclusive education, the current state of education financing with regard to inclusion, and what needs to change in order for education financing to effectively support
the realisation of Sustainable Development Goal 4 and Article 24 of the United Nations Convention on the Rights of Persons with Disabilities (UN CRPD). The research will be published in a final report in September 2016, in time for the UN General Assembly. The findings will feed into a range of advocacy activities over the coming year.

Ensuring Quality and Accessible Care for Children with Disabilities and Complex Health and Educational Needs: Workshop in Brief

Board on Children, Youth, and Families; Division of Behavioral and Social Sciences and Education; National Academies of Sciences, Engineering, and Medicine, May 2016
8 pp. 258 kB
http://download.nap.edu/cart/download.cgi?record_id=23544

The goal of the workshop was to explore the needs and challenges faced by individuals and families affected by disabilities and complex conditions, as well as opportunities and innovative approaches for those conditions. Presenters and workshop participants discussed the epidemiology of disabilities, the behavioural health implications of having multiple or chronic medical conditions, early identification and interventions in different population groups, and the role of the media in shaping perceptions and misperceptions of disabilities. A special focus was how best to configure and coordinate systems of care to improve the lives of children with disabilities and complex health and educational needs.

Active Participation: Key to Inclusion

Testimonies from Humanitarian Workers with Disabilities by Valérie Scherrer
CBM Emergency Response Unit and the International Disability Alliance, 2016
24 pp. 708 kB

Publications about humanitarian work and disability generally focus on how the exclusion of persons with disabilities from emergency aid increases casualty rates, psychosocial impact, and health issues. By reading first-hand accounts, we hear how persons with disabilities, not through any particular talent or skill but from unique knowledge gained through life experience, are ideally placed to provide insights, ideas and leadership, to supply essential data, and to fill the gaps in humanitarian response that cause this exclusion.
Global Health Governance, Sustainable Development Goals & Development Cooperation

Health Systems Strengthening in German Development Cooperation

Desk Study
by Khullat Munir, Ilse Worm, Benjamin Thull et al.
The German Institute for Development Evaluation (DEval), February 2016
72 pp. 1.7 MB


Health Systems Strengthening (HSS) is gaining importance in development cooperation for health. HSS is a prominent issue on the global health agenda, and was one of the health priorities of the 2015 G7 summit. HSS is also one of three strategic directions of the German Development Cooperation (GDC) in its Sector Strategy for Health. As HSS is a broad topic encompassing a wide variety of definitions and approaches, this desk study aims to shed light on how the concept of HSS has evolved in the global health arena, and how it has been thus far evaluated in the international development community and the GDC.

German Development Cooperation’s Contribution to Global Health

Portfolio Analysis
by Khullat Munir, Markus Freund, Benjamin Thull et al.
German Institute for Development Evaluation (DEval), February 2016
44 pp. 1.5 MB


This portfolio analysis aims to give an overview of Germany’s financial contribution to global health in the period 2002–13 in order to inform the continued development of health strategies and future allocations of official development assistance (ODA) for health, and to ensure transparency to the general public. In 2013, Germany came in third overall among global health donors, and second among European DAC donors. However, regarding its economic capacity, Germany has a low performance compared with other donors in health ODA.

Brexit: a confused concept that threatens public health

by Martin McKee and Michael J. Galsworthy
3 pp. 88.9 kB

http://jpubhealth.oxfordjournals.org/content/38/1/3.full.pdf+html

Brexit: a confused concept that threatens public health
The United Kingdom (UK) voted in a referendum to decide whether it remained a member of the European Union (EU) or left, in what would be termed ‘Brexit’, short for ‘British exit’. Leaving the EU likely will make Britain more vulnerable to disease, as the public health risks of exiting are plentiful. Its stunning decision will exclude Britain from European research, disease control, and drug and food safety networks. And it will cause an environmental health backslide, Martin McKee, a professor at the London School of Hygiene and Tropical Medicine predicts, citing the loss of European regulations on clean air and water. As for possible public health benefits of Brexit: McKee said “none whatsoever.”

**BRICS countries and the global movement for universal health coverage**

by Fabrizio Tediosi1, Aureliano Finch, Christina Procacci et al.
12 pp. 493 kB

http://heapol.oxfordjournals.org/content/31/6/717.full.pdf+html

This article explores BRICS’ (Brazil, Russia, India, China and South Africa) engagement in the global movement for Universal Health Coverage (UHC) and the implications for global health governance. The findings suggest that BRICS are unlikely to be a unified political block that will transform global health governance. Yet the documented involvement of BRICS in the global movement supporting UHC, and their focus on domestic challenges, shows that BRICS individually are increasingly influential players in global health.

**The economics of global health: an assessment**

by Andrew W. K. Farlow
Oxford Review of Economic Policy, Volume 32, Number 1, 2016, pp. 1–20
20 pp. 404 kB

http://m.oxrep.oxfordjournals.org/content/32/1/1.full.pdf

The international community, through the Millennium Development Goals and now the Sustainable Development Goals, has long recognized the critical role of improved global health in achieving social and economic development. This edition of the Oxford Review of Economic Policy explores whether this importance has been mirrored in the field of economics. It does so by bringing together the voices of 28 economists working on widely varying aspects of global health economics to confront three key policy questions: how do we build better, more equitable health systems? how are ‘global commons’ health problems to be overcome? and how might we improve evaluation and priority setting in global health?
Health policy in emerging economies: innovations and challenges

The latest issue of the Policy in Focus magazine features 16 inspiring articles that revolve around the challenges facing the construction of public policies and interventions towards greater equity, a pressing issue on the global health agenda. The recognition that universal access to health care and to medicines has an impact on poverty and social inclusion has led to the formulation and implementation of diverse interventions to improve the provision, access and quality of health services and products.

Miscellaneous

The new Africa Health app is available to download


You can now read the latest edition and archived editions of Africa Health on the go. The team at Africa Health are pleased to announce the launch of the new Africa Health app, available for both iPhone and Android via the app store. The app and its content is completely free to download from the app store.

UNHCR Projected Global Resettlement Needs 2017

With a multitude of conflicts and crises causing record displacement around the world, resettlement has become an increasingly vital part of UNHCR’s efforts to find solutions and advocate for fairer responsibility-sharing for refugees. The report says that despite increased resettlement quotas from some countries, expansion in global resettlement capacity, and increases in submissions, the projected number of people in need of resettlement in 2017 will pass 1.19 million. In response, UNHCR expects to submit 170,000 refugees for resettlement next year, based on the expected global quotas from resettlement states.
Danger Every Step of the Way: A harrowing journey to Europe for refugee and migrant children

by Sarah Crowe, Christophe Boulierac, Chris Tidey et al.
12 pp. 2.6 MB
http://reliefweb.int/sites/reliefweb.int/files/resources/Child_Alert_Final_PDF.pdf

More than 9 out of 10 refugee and migrant children arriving in Europe this year through Italy are unaccompanied, prompting UNICEF to warn of the growing threats of abuse, exploitation and death facing them. In this report UNICEF says that 7,009 unaccompanied children made the crossing from North Africa to Italy in the first five months of the year, twice as many as last year. The report documents the appalling risks adolescents take in their flight to escape conflict, despair and poverty.

OCHA Annual Report 2015

UN Office for the Coordination of Humanitarian Affairs (OCHA), June 2016
77 pp. 28.8 MB
http://reliefweb.int/sites/reliefweb.int/files/resources/Annual%20Report%202015.pdf

The sheer scale of humanitarian suffering over-stretched OCHA as well as responders across the humanitarian community. While working in five level-three emergencies in the Central African Republic, Iraq, South Sudan, Syria, and Yemen as well as in two sudden onset natural disasters in Nepal and Vanuatu, many protracted crises, including the complex mixture of violence and environmental degradation in the Lake Chad Basin continued to require intensive advocacy, coordination and resource mobilisation. OCHA dedicated mounting attention to the impact of one of the worst El Niño phenomena on record, with droughts devastating lives across eastern and southern Africa and Central America.

Journal of Microbiology and Infectious Disease - Volume 06, Number 02 (2016)

http://www.jmidonline.org

The new issue of "Journal of Microbiology and Infectious Diseases" has been released at the above URL. You are invited you to read the Table of Contents and then visit the web site to read articles and items of interest.
CONFERENCES & TRAINING

What Works Global Summit (WWGS): Putting Evidence to Work

26-28 September 2016, London, UK

The Global summit will share experiences from around the world and across sectors on measuring policy impact, experiences in the use of evidence, promoting policy uptake, knowledge translation, and critical appraisal of evidence, as well as discussions of new evidence and study methods. Pre-conference capacity building workshops are being organised 24-25 September.

For more information see: https://www.wwgs2016.org/

World Health Summit 2016

Science - Innovation - Policies
8th World Health Summit
October 09-11, 2016
Berlin, Germany

The summit’s central topics include:

- Migration and Refugee Health: From Care to Policy
- Technological Innovation for Health: Improving Healthcare Delivery
- Women, Empowerment and Health: Equality and Agency
- Translational Research: Advancing Innovative Treatment
- Infectious Diseases: Lessons Learned from Ebola to Zika
- Sustainable Development Goals: Transforming the Health Agenda

Held once a year, the WHS has grown into the world’s most prominent forum for addressing global health issues. It brings together key leaders from academia, politics, civil society, and the private sector to address the most pressing health-related challenges on the planet.

For more information see: http://www.worldhealthsummit.org/the-summit.html

Annual Meeting of the German Society of Tropical Medicine and International Health (DTG)

October 7 – 8, 2016 - University Bonn, Germany

Topics:
- Neglected tropical diseases
- Host-Pathogen Interactions
- Refugee Medicine
- Malaria
- Dermatology in the Tropics
- Women’s health in the Tropics
- Pediatrics in the Tropics

Deadline for abstract submission is July 22nd, 2016
For more information see: http://tropenmedizin-dtg-bonn2016.de/home-en.html

Free Course: Medicines in Health Systems Working toward Universal Health Coverage (Self-Paced)

To enrol go to:
https://olc.worldbank.org/content/medicines-health-systems-working-toward-universal-health-coverage-self-paced

Many countries are reforming their health systems working toward universal health coverage (UHC). These reforms can be harnessed to increase equity in medicines access, affordability, and appropriate use of medicines. However, they also have the potential to decrease the effectiveness of prescribing and dispensing, increase unnecessary use of medicines, and derail systems from a path toward sustainable universal coverage. The goal of the Medicines in Health Systems course is to strengthen the capacity of practitioners working toward universal health coverage in low- and middle-income country health systems to design, implement, and monitor evidence-informed pharmaceutical policy and management strategies.

Advanced Summer Courses at KIT

A few places left in their summer courses! Visit the website http://www.kit.nl/health/study/ for more information, and apply directly with the online application system.

- Advanced course on Monitoring and Evaluation: Innovations in a dynamic health systems environment
  Course dates: 15-8-2016 to 26-8-2016
  Gain a deeper understanding of the role M&E plays in all aspects of the health system, including the institutional, political, financial, managerial, human resource, inter-sectoral and public health dimensions.

- Towards Universal Health Coverage, Advanced course on Health Sector Reforms and Financing
  http://www.kit.nl/health/training/advanced-course-health-sector-reforms-financing-towards-achieving-universal-health-coverage/
  Course dates: 15-8-2016 to 26-8-2016
Learn more about the most important topics in health policy, planning and financing, their effects on equity and efficiency and their relation to poverty reduction and development.

**CARTOON**

Damn it, all these household appliances are more intelligent than me....

Future has begun.....

**TIPS & TRICKS**

Is it plugged in? Is it turned on?

Many years ago, a wise engineer gave me the best tech-support advice I have ever received. He said that if something isn’t working, always ask yourself two things: “Is it plugged in? Is it turned on?”

This sounds ridiculously simple, but, I have found it to be the most useful piece of advice I have ever received.

First of all, is it plugged in? Check to make sure the plug is actually securely plugged into the wall or power strip. If you are plugged in, make sure the power strip or outlet is turned on. If it is turned on,
Is it turned on? Don't take this as an insult. On/off switches are not always clearly marked or conveniently placed and it can sometimes be difficult to tell if something is powered on or off.

Hopefully, these two simple questions can save you a lot of trouble when dealing with electronic devices.

Microsoft Edge: Ask Cortana

If you have Cortana turned on in Windows 10, there is a neat trick you can try in the Microsoft Edge browser. If you are reading an article online and come across something you need a definition for or would just like to know more about, there is an easy way to get more information. Just click and drag to highlight the word or phrase. Then right click and select Ask Cortana from the drop-down menu.