EDITORIAL

Dear colleagues,

‘Leave no one behind’ is a key principle of the SDGs, but how can we put it into practice? The UN looks at the progress: In many areas, it is far slower than needed to meet the targets by 2030.

In this week’s News Briefing we share two reads about the inclusion of People with Disabilities. The first article, “We do not dare to love”, analyses shortcomings in inclusive sexual and reproductive health programming in Cambodia. The second piece, a multi-country case study, assesses the engagement of Organisations of Persons with Disabilities along challenges and first best practices.

Many other interesting reads await you in this latest issue of our News Briefing: Enjoy the reading!

Your editorial team
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ONLINE RESOURCES

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

Sexually transmitted infections: challenges ahead

The Lancet Infectious Diseases Commission
by Magnus Unemo, Catriona S Bradshaw, Jane S Hocking et al.
The Lancet Infectious Diseases, Vol. 17, No. 8, e235–e279, August 2017
45 pp. 3.0 MB

This Commission addresses current challenges for research, practice, and policy that they selected because they are common and important global health priorities, or because new evidence is emerging in the area. A new set of global health sector strategies for HIV infection, viral hepatitis, and STIs focuses on five key strategic directions: knowing the epidemic, service coverage, quality of services, adequate financing, and innovation. These key strategic directions highlight the essential interventions common to the three strategies on HIV infection, viral hepatitis, and STIs: elimination of mother-to-child transmission of HIV infection, syphilis, and hepatitis B virus infection; vaccination against HPV and hepatitis B virus; and antimicrobial resistance surveillance.

Family planning saves lives and promotes resilience in humanitarian contexts

International Rescue Committee, in partnership with Care, Save the Children and the Women’s Refugee Commission, July 2017
15 pp. 1.9 MB

The Family Planning Summit (FP Summit), convened in London on 11 July 2017, presents a critical opportunity to accelerate efforts to deliver family planning to women and girls globally - including those affected by humanitarian crises. Building on this momentum, the International Rescue Committee, in partnership with Care, Save the Children and the Women’s Refugee Commission, organised a donor consultation on 7 June 2017 to seek input from donors and stakeholders to shape messages and recommendations for the London FP summit. This paper is a synthesis of the findings developed through both consultations and identifies collaborative solutions and actions to be taken at the FP Summit and beyond.
Digitizing Family Planning: The Way of the Future

by Stella Paul
Inter Press Service (IPS), 17 July 2017
Read online at:
http://www.ipsnews.net/2017/07/digitizing-family-planning-way-future/

Online shopping may have its pros and cons, but when it comes to buying products that have an invisible morality tag, it’s the safest possible option, believes Franklin Paul. One of India’s most vocal advocates for youth rights to sexual health, education and products, Paul has spent over two years studying and introducing digital technologies to India’s rural youths. “One day soon, nobody will have to walk into a store to buy condoms, face the nosey chemist and feel embarrassed. They will just order it from their mobile phone or tablet or laptop and get it delivered on their doorstep,” he says.

Reasons Women Have Induced Abortions: A Synthesis of Findings from 14 Countries

by Sophia Chae, Sheila Desai, Marjorie Crowell et al.
Guttmacher Institute, Contraception (2017)
25 pp. 545 kB

Many reasons inform women’s reproductive decision-making. This paper aims to present the reasons women give for obtaining induced abortions in 14 countries. The authors conclude that this study shows that women have abortions for a variety of reasons, and provides a broad picture of the circumstances that inform women's decisions to have abortions. Future research should examine in greater depth the personal, social, economic, and health factors that inform a woman's decision to have an abortion as these reasons may shed light on the potential consequences that unintended births can have on women's lives.

Structural adjustment programmes adversely affect vulnerable populations: a systematic-narrative review of their effect on child and maternal health

by Michael Thomson, Alexander Kentikelenis and Thomas Stubbs
Public Health Reviews, 2017 38:13 - Published: 10 July 2017
18 pp. 712 kB

Structural adjustment programmes of international financial institutions have typically set the fiscal parameters within which health policies operate in developing countries. This review finds that structural adjustment programmes have a detrimental impact on child and maternal health. In particular, these programmes undermine access to quality and affordable healthcare and adversely impact upon...
social determinants of health, such as income and food availability. The evidence suggests that a fundamental rethinking is required by international financial institutions if developing countries are to achieve the Sustainable Development Goals on child and maternal health.

Social Experiences of Women with Obstetric Fistula Seeking Treatment at Mulago National Referral Hospital in Kampala, Uganda

by Marielle Meurice, Rene Genadry, Carol Heimer et al.
28 pp. 876 kB
http://www.annalsofglobalhealth.org/article/S2214-9996(17)30637-9/pdf

Obstetric fistula is a preventable and treatable condition predominately affecting women in low-income countries. Understanding the social context of obstetric fistula may lead to improved prevention and treatment. The study subjects experienced substantial changes in their social lives due to obstetric fistula and there were a variety of beliefs regarding the cause. The complex social context is an important component to understanding how to prevent and treat obstetric fistula. Further elucidation of these factors may bolster current efforts in prevention and holistic treatment.

The care of children in data: Evidence, gaps and opportunities for change in the SDGs

by Claudia Arisi, Zach Christensen, Elizabeth Lie et al.
Global Humanitarian Assistance programme (Development Initiatives), SOS Children’s Villages International, 2017
16 pp. 910 kB

Children and young people growing up outside of their family environment remain virtually invisible in official statistics, leaving governments without the necessary information to tackle the challenges these children face and respond to their needs so that they can thrive. The call for timely investment in the statistical capacity of countries to produce and use reliable disaggregated data under Sustainable Development Goal 17 has been echoed by several experts and institutions. This briefing paper explores how such a call can be turned into concrete action to achieve a real data revolution for these children.
Severity of Pneumonia in Under 5-Year-Old Children from Developing Countries: A Multi-center, Prospective, Observational Study

by Thomas Bénet, Valentina Sanchez Picot, Shally Awasthi et al.
The American Journal of Tropical Medicine and Hygiene, Vol. 97, Issue 1, July 2017, pp. 68 - 76
9 pp. 589 kB
http://www.ajtmh.org/deliver/fulltext/14761645/97/1/tpmd160733.pdf?itemId=/content/journals/10.4269/ajtmh.16-0733&mimeType=pdf&containerItemId=content/journals/14761645

Pneumonia is the leading cause of death in children. The objectives were to evaluate the microbiological agents linked with hypoxemia in hospitalized children with pneumonia from developing countries, to identify predictors of hypoxemia, and to characterize factors associated with in-hospital mortality. Detection of human metapneumovirus (hMPV) and respiratory syncytial virus (RSV) in respiratory samples was independently associated with increased risk of hypoxemia. Lower chest indrawing and cyanosis were predictive of hypoxemia. Predictors of death were Streptococcus pneumoniae detection by blood PCR.

“I Still See the Talibés Begging”: Government Program to Protect Talibé Children in Senegal Falls Short

by Lauren Seibert, Corinne Dufka, Elin Martinez et al.
Human Rights Watch and Plateforme pour la Promotion et la Protection des Droits Humains (PPDH) July 11, 2017
49 pp. 2.9 MB

This report examines the successes and failings of the first year of the new government program to remove children forced to beg from the streets. The report documents the ongoing abuses faced by many talibé children in Dakar and four other regions during – and despite – the program, including pervasive forced begging, violence and physical abuse, chaining and imprisonment, and sexual abuse. Human Rights Watch and the PPDH also assessed the ongoing challenge of ensuring justice for these abuses.
HIV, Tuberculosis & Malaria

The Global Fund Results Fact Sheet

Geneva, Switzerland, July 2017
6 pp. 565 kB

Ahead of next week’s International AIDS Society Conference on HIV Science in Paris, France, the Global Fund to Fight AIDS, Tuberculosis and Malaria has released its year-end 2016 results, showing accelerated progress against HIV, tuberculosis and malaria. The Global Fund Results Factsheet presents the latest programmatic data from recipients of Global Fund grants. It also outlines some of the common questions and answers regarding results reported by Global Fund-supported programs.

Global Fund releases new guidelines on budgeting for grants

by David Garmaise
Global Fund Observer, Issue 316: 19 July 2017
36 pp. 886 kB

The Global Fund has updated its August 2014 guidelines on budgeting for grants. The guidelines aim to ensure implementers understand the Global Fund’s financial policies and procedures, and implement them in a consistent manner; and to “strike a better balance” between flexibility on the one hand, and efficiency, transparency and accountability on the other.

Health Policy and Planning Collection on HIV/AIDS

https://academic.oup.com/heapol/pages/hiv_aids

This collection of papers highlights the strong HIV/AIDS research published in Health Policy and Planning with articles grouped into four key areas: Integrated Care, Cost, investment and resources, Service delivery of HIV prevention, treatment and care, and Policy.
Ending AIDS: Progress towards the 90–90–90 Targets

Joint United Nations Programme on HIV/AIDS (UNAIDS), 2017
198 pp. 7.2 MB

The 90–90–90 targets are galvanizing global action and saving lives. Eastern and southern Africa are leading the way in reducing new HIV infections by nearly 30% since 2010 - Malawi, Mozambique, Uganda and Zimbabwe have reduced new HIV infection by nearly 40% or more since 2010. Concerted efforts are still needed for children, adolescents, men and key populations, and in certain regions.

HIV drug resistance report 2017

by Hiwot Haile-Selassie, Michael R. Jordan, Elliot Raizes et al.
World Health Organization, United States Centers for Disease Control and Prevention, The Global Fund to Fight AIDS, Tuberculosis and Malaria, 2017
82 pp. 5.0 MB
http://apps.who.int/iris/bitstream/10665/255896/1/9789241512831-eng.pdf?ua=1

This second HIV drug resistance (HIVDR) report provides an update on recent population levels of HIVDR covering the period 2014–2016. The report includes data from 16 nationally representative surveys from 14 countries estimating resistance in: adults initiating ART (PDR), children younger than 18 months newly diagnosed with HIV, and adults on ART (acquired HIV drug resistance or ADR). To contextualize results from representative HIVDR surveys, the report is supported by systematic reviews of the published literature on PDR in adults, children and adolescents, and ADR in paediatric and adult populations.

HIV continuum of care in Europe and Central Asia

by RS Drew, B Rice, K Rüütel et al.
HIV Medicine (2017), 18, 490-499
10 pp. 200 kB

The authors present continuum data from multiple countries that provide both a snapshot of care provision and a baseline against which changes over time in care provision across Europe and Central Asia may be measured. To better inform HIV testing and treatment programmes, standard data collection approaches and definitions across the HIV continuum of care are needed. If countries wish to ensure an unbroken HIV continuum of care, people living with HIV need to be diagnosed promptly, and ART needs to be offered to all those diagnosed.
HIV Self-testing Offers New Opportunities for Health Workers and Lay Providers

by Jesse Hastings
Southern Africa HIV and AIDS Regional Exchange portal (SHARE), 10 July 2017

Read online at:
http://www.hivsharespace.net/blog/hiv-self-testing-offers-new-opportunities-health-workers-and-lay-providers

HIV testing is the gateway to prevention and treatment services, which reduce HIV transmission and related morbidity and mortality. Despite the benefits of testing, barriers such as costs, lack of convenience and confidentiality, and fear of stigma, discrimination, and in some settings, possible prosecution, continue to hinder access and uptake. And in 2015 it was estimated that 40 percent of people living with HIV remain unaware of their status. To close these gaps, focused HIV testing approaches designed to reach these missing groups will be essential. HIV self-testing is a process in which a person collects a specimen, performs a test, and interprets the result, often in private or with a person they trust. It is a safe, acceptable, and effective way to reach people with undiagnosed HIV and those at ongoing HIV risk who may be hesitant or unable to access existing services.

HIV misdiagnosis in sub-Saharan Africa: performance of diagnostic algorithms at six testing sites

by Cara S. Kosack, Leslie Shanks, Greet Beelaert et al.
18 pp. 645 kB

In this prospective multisite diagnostic evaluation study (Guinea, Uganda, Kenya, Cameroun and Democratic Republic of Congo), samples from clients testing for HIV were collected and compared to a state-of-the-art algorithm from the AIDS reference laboratory at the Institute of Tropical Medicine, Belgium. The authors conclude that the performance of algorithms at several sites failed to meet expectations and thresholds set by the World Health Organization, with unacceptably high rates of false results. Alongside the careful selection of rapid diagnostic tests and the validation of algorithms, strictly observing correct procedures can reduce the risk of false results. In the meantime, to identify false-positive diagnoses at initial testing, patients should be retested upon initiating antiretroviral therapy.


by Jeffrey W. Eaton, Cheryl C. Johnson, Simon Gregson
4 pp. 105 kB
The authors compared estimated costs of retesting human immunodeficiency virus (HIV)-positive persons before antiretroviral therapy (ART) initiation to the costs of ART provision to misdiagnosed HIV-negative persons. Savings from averted unnecessary ART costs were greater than retesting costs within 1 year using assumptions representative of HIV testing performance in programmatic settings. Countries should implement re-testing before ART initiation.

Best Practices for Adolescent- and Youth-Friendly HIV Services – A Compendium of Selected Projects in PEPFAR-Supported Countries

by Anastasia J. Gage, Mai Do, and Donald Grant (Editors)
MEASURE Evaluation, March 2017
221 pp. 2.8 MB

https://www.measureevaluation.org/resources/publications/tr-16-134/at_download/document

Adolescents (ages 10-19) and youth (ages 15-24) bear a disproportionate share of the HIV burden, especially in sub-Saharan Africa. However, little is known about what projects are doing to make their interventions adolescent- and youth-friendly and which interventions are effective for changing HIV-related outcomes in this age group. Program managers and policymakers have little evidence derived from rigorous studies on how best to invest resources to achieve 90-90-90 targets among adolescents/young people. In recognition of this evidence gap, MEASURE Evaluation reviewed the evidence on adolescent- and youth-friendly HIV services as a contribution toward the U.S. President's Emergency Plan for AIDS Relief (PEPFAR) goal of creating an AIDS-free generation.

Ivermectin susceptibility and sporontocidal effect in Greater Mekong Subregion Anopheles

by Kevin C. Kobylinski, Ratawan Ubalee, Alongkot Ponlawat et al.
Malaria Journal, 2017 16:280 - Published: 7 July 2017
13 pp. 1.3 MB


Novel vector control methods that can directly target outdoor malaria transmission are urgently needed in the Greater Mekong Subregion (GMS) to accelerate malaria elimination and artemisinin resistance containment efforts. Ivermectin mass drug administration (MDA) to humans has been shown to effectively kill wild Anopheles and suppress malaria transmission in West Africa. The authors conclude that Ivermectin is lethal to dominant GMS Anopheles malaria vectors and inhibits sporogony of P. vivax at safe human relevant concentrations. The data suggest that ivermectin MDA
has potential in the GMS as a vector and transmission blocking control tool to aid malaria elimination efforts.

**Regional Artemisinin-resistance Initiative (RAI)**

The story of malaria in the Greater Mekong today is one of opportunity and urgency. Incidence rates have fallen by more than half since 2012, and death rates have plummeted by 84 percent. But drug resistance now threatens a devastating setback for the region and a major shock to health security if it goes global. Read more about the Global Fund's Regional Artemisinin-resistance Initiative. Projected to total more than US$242 million over three years, it’s the Global Fund’s largest regional grant, and the first with the defined goal of disease elimination from a specific geography.

**Drones Against Malaria - Less Disease, More Food**

To further reduce the impact of malaria we need tools that can be implemented outdoors, at the source of the problem – stagnant, sunlit water. The cradle of mosquitoes. If we stop them there, at the source, we may stop them for good. Using drones, we will tackle the mosquito and malaria problem right at the source, starting with large-scale irrigated rice schemes. And use an environmentally sound biological control agent that can be applied in collaboration with the local (rice farming) community. So that they will suffer less from malaria and have more time to work the fields and thus generate bigger harvests.

**Tracking development assistance and government health expenditures for 35 malaria-eliminating countries: 1990–2017**

by Rima Shretta, Brittany Zelman, Maxwell L. Birger, et al.
Malaria Journal, 2017 16:251 - Published: 14 July 2017
11 pp. 2.1 MB
Donor financing for malaria has declined since 2010 and this trend is projected to continue for the foreseeable future. These reductions have a significant impact on lower burden countries actively pursuing elimination, which are usually a lesser priority for donors. While domestic spending on malaria has been growing, it varies substantially in speed and magnitude across countries. A clear understanding of spending patterns and trends in donor and domestic financing is needed to uncover critical investment gaps and opportunities.

Neglected Tropical Diseases, Other Infectious diseases & Pandemic Preparedness

Assessing process, content, and politics in developing the global health sector strategy on sexually transmitted infections 2016–2021: Implementation opportunities for policymakers

by Andy Seale, Nathalie Broutet, Manjulaa Narasimhan
PLoS Med 14(6): e1002330 - Published: June 27, 2017
9 pp. 554 kB

Sexually transmitted infections (STIs) present significant health and economic challenges in all countries and yet are rarely prioritised for coordinated strategic attention. A number of barriers frustrate efforts to take the response to STIs to scale, including insufficient incidence data and disease surveillance, and political resistance to scientifically-proven and often cost-effective interventions and approaches. This paper applies an analytical approach to the global strategy that includes an investigation of 3 domains: process, programmatic, and political. Key questions are proposed to guide exploration of these domains to help identify and address barriers to, and leverage solutions for, policy success.

Antimicrobial resistance in Neisseria gonorrhoeae: Global surveillance and a call for international collaborative action

by Teodora Wi, Monica M. Lahra, Francis Ndowa et al.
PLoS Med 14(7): e1002344 - Published: July 7, 2017
16 pp. 2.5 MB

Antimicrobial resistance (AMR) in Neisseria gonorrhoeae seriously compromises the management and control of gonorrhoea. Enhanced international collaborative actions are crucial for the control of gonorrhoea, including improved prevention, early diagnosis (development of accurate, rapid, point-of-care tests), partner management, and enhanced surveillance (including population-based surveillance and surveillance of treatment failures and antimicrobial use). Rapid, accurate, point-of-care diagnos-
tic tests (which would ideally predict AMR and/or antimicrobial susceptibility), new therapeutic drugs, and a gonococcal vaccine - which will ultimately be the only sustainable way to achieve gonorrhea control - are needed.

**Multidrug therapy for leprosy: a game changer on the path to elimination**

by Cairns S Smith, Ann Aerts, Paul Saunderson et al.
The Lancet Infect Dis 2017 - Published Online July 7, 2017
5 pp. 141 kB

Leprosy is present in more than 100 countries, where it remains a major cause of peripheral neuropathy and disability. Attempts to eliminate the disease have faced various obstacles, including characteristics of the causative bacillus Mycobacterium leprae: the long incubation period, limited knowledge about its mode of transmission, and its poor growth on culture media. Fortunately, the leprosy bacillus is sensitive to several antibiotics. In 1981, WHO recommended use of three drugs to treat leprosy: rifampicin, clofazimine, and dapsone. Uptake of this multidrug therapy was slow and did not reach 100% coverage until 1997. Global drug donation to provide free multidrug therapy at the point of care was vital to achieving 100% coverage. Use of the shorter multidrug-therapy regimen reduced the prevalence of leprosy by 90% but did not halt transmission. A global leprosy coalition is needed to achieve zero transmission.

**An outbreak of Ebola in the DRC has been contained. What went right this time?**

by Eric Osoro
The Conversation, 12 July 2017
Read online at:

The World Health Organisation recently declared the end of the most recent outbreak of Ebola in the Democratic Republic of Congo (DRC). This outbreak was controlled more efficiently than the 2014 outbreak and sets an example for other countries. A combination of factors meant that it was possible to stop the disease from spreading. These included a prompt response, immediate diagnosis and treatment, a coordinated approach and the involvement of the community in identifying the case and minimising the spread of the outbreak.
Neglected and Unprotected: The Impact of the Zika Outbreak on Women and Girls in Northeastern Brazil

by Margaret Wurth, João Bieber and Amanda Klasing
Human Rights Watch, July 12, 2017
110 pp. 4.2 MB

Brazil has not addressed longstanding human rights problems that allowed the Zika outbreak to escalate, leaving the population vulnerable to future outbreaks and other serious public health risks. The government declared an end to the national public health emergency related to the Zika virus in May 2017, but the Zika threat in Brazil remains. This report documents gaps in the Brazilian authorities’ response that have a harmful impact on women and girls and leave the general population vulnerable to continued outbreaks of serious mosquito-borne illnesses. The outbreak hit as the country faced its worst economic recession in decades, forcing authorities to make difficult decisions about allocating resources.

Preliminary findings from a malnutrition mobile app randomised trial in Wajir, Kenya

by Natalie Roschnik, Joanne Chui and Emily Keane
Transform Nutrition Research Brief, June 2017
4 pp. 1.8 MB

A mobile health application developed to help health workers do Integrated Management of Acute Malnutrition (IMAM) was evaluated in 40 health facilities in Wajir Kenya. The study found that the app reduced the number of reporting errors by 25%, provided caseload and treatment data to decision makers within 1.3 days of collection, increased the accuracy and reliability of treatment outcome data and improved health workers’ adherence to the IMAM treatment protocol. The IMAM app has the potential to drastically improve the speed of response to surges in caseloads, identify and resolve operational bottlenecks and improve quality of care and treatment effectiveness. However, its effectiveness is dependent on health workers being well trained and ongoing software support being available to ensure that the app functions properly.

WHO Report on the Global Tobacco Epidemic, 2017

Monitoring Tobacco Use and Prevention Policies
by Virginia Arnold, Lubna Bhatti, Gina Daniel et al.
World Health Organization, 2017
268 pp. 5.1 MB
The report finds that more countries have implemented tobacco control policies, ranging from graphic pack warnings and advertising bans to no smoking areas. About 4.7 billion people – 63% of the world’s population – are covered by at least one comprehensive tobacco control measure, which has quadrupled since 2007 when only 1 billion people and 15% of the world’s population were covered. Strategies to implement such policies have saved millions of people from early death. However, the tobacco industry continues to hamper government efforts to fully implement life- and cost-saving interventions.

**Water and sanitation: how to replicate a successful model**

Swiss Agency for Development and Cooperation (SDC), Global Cooperation Department, 2017
4 pp. 1.0 MB

An SDC project launched some 20 years ago in Peru has become a model for managing water and sanitation in rural areas. It has since been developed for use on a regional scale; influenced national policy on water and sanitation, and aims to become the international blueprint.

**WASH in the 2030 Agenda: New global indicators for drinking water, sanitation and hygiene**

WHO/UNICEF Joint Monitoring Programme for Water Supply and Sanitation (JMP)
8 pp. 443 kB

This briefing note summarises the new global indicators for monitoring the drinking water, sanitation and hygiene (WASH) elements of the SDG targets and reflects extensive technical consultation with over 100 experts from over 60 organisations worldwide. The SDG targets apply to all countries so the JMP proposes to use a ‘service ladder’ approach to benchmark and track progress across countries at different stages of development. Emerging JMP ladders build on existing datasets and introduce new indicators which reflect the ambition of the new SDG targets. Forthcoming thematic reports on safely managed drinking water and safely managed sanitation and hygiene services will describe the indicators, definitions, and proposed methodologies in more detail.
Progress on Drinking Water, Sanitation and Hygiene: Update and SDG Baselines, 2017

Edited by Anna Grojec

World Health Organization (WHO) and the United Nations Children’s Fund (UNICEF), July 2017
66 pp. 4.8 MB


The WHO/UNICEF Joint Monitoring Programme for Water Supply, Sanitation and Hygiene (JMP) has produced regular estimates of national, regional and global progress on drinking water, sanitation and hygiene (WASH) since 1990. The JMP service ‘ladders’ enable benchmarking and comparison of progress across countries at different stages of development. This 2017 report introduces updated water and sanitation ladders which build on established indicators and establish new rungs with additional criteria relating to service levels. A third ladder has also been introduced for hygiene. The JMP will continue to monitor all rungs on each ladder, with a particular focus on those that relate to the Sustainable Development Goal (SDG) global targets and indicators.

Reaching resilience: Handbook resilience 2.0 for aid practitioners and policymakers in Disaster Risk Reduction, Climate Change Adaptation and Poverty Reduction

by Annelies Heijmans
CARE Nederland, Groupe URD and Wageningen University, 2017
127 pp. 3.2 MB

http://reliefweb.int/sites/reliefweb.int/files/resources/resilience-handbook.pdf

This handbook is designed to encourage thinking and provide insights and ideas about how to design well-integrated, step-by-step actions and strategies to foster resilience at the local level. The handbook aims to support students and young professionals in their Disaster Risk Reduction, Climate Change Adaptation and Poverty Reduction related work and secondly to acquaint policymakers involved in these three domains with the integration issue and help them to take a resilience 2.0 approach into their (present or future) daily work.

Environmental Health in Emerging Markets

Summary and Report
by Denise Lievesley, Shaukat Aziz, George Alleyne et al.
The Emerging Markets Symposium, 2017
108 pp. 6.4 MB

https://ems.gtc.ox.ac.uk/sites/ems.gtc.ox.ac.uk/files/Full%20Report%20-%20Environmental%20Health%20in%20Emerging%20Markets%20NE.pdf

This report distils the outcomes of the eighth in a series of symposia on human
welfare in emerging markets at Green Templeton College, Oxford. World’s leading experts warn of irreversible environmental destruction and disastrous economic and health consequences of unregulated economic ambition. As heads of state gathered for the start of the G20 meeting in Hamburg, the expert group called on world leaders to put human wellbeing before unregulated economic ambition, noting that the relentless pursuit of economic growth is undermining not only the environment but also the very prosperity and benefits it aims to achieve in many countries, not least in emerging markets. The group states that while rapid economic growth has generated unprecedented improvements in human welfare in recent decades, many policies that continue to maximise growth without enforcing environmental controls are now reaching a point of diminishing social returns.

The Uninhabitable Earth

Famine, economic collapse, a sun that cooks us: What climate change could wreck - sooner than you think.
by David Wallace-Wells
The New York Magazine, July 9, 2017
Read online at:

It is, I promise, worse than you think. If your anxiety about global warming is dominated by fears of sea-level rise, you are barely scratching the surface of what terrors are possible, even within the lifetime of a teenager today. And yet the swelling seas — and the cities they will drown — have so dominated the picture of global warming, and so overwhelmed our capacity for climate panic, that they have occluded our perception of other threats, many much closer at hand. Rising oceans are bad, in fact very bad; but fleeing the coastline will not be enough.

A region at risk: The human dimensions of climate change in Asia and the Pacific

by Kira Vinke, Hans Joachim Schellnhuber, Dim Coumou et al.
Asian Development Bank (ADB) and the Potsdam Institute for Climate Impact Research (PIK), 2017
131 pp. 4.4 MB

Under a business-as-usual scenario, a 6 degree Celsius temperature increase is projected over the Asian landmass by the end of the century. Some countries in the region could experience significantly hotter climates, with temperature increases in Tajikistan, Afghanistan, Pakistan, and the northwest part of the People’s Republic of China (PRC) projected to reach 8 degree Celsius. These increases in temperature would lead to drastic changes in the region’s weather system, agriculture and fisheries sectors, land and marine biodiversity, domestic and regional security, trade, urban development, migration, and health. Such a scenario may even pose an existential threat to some countries in the region and crush any hope of achieving sustainable and inclusive development.
Population Dynamics & Social Determinants of Health (including Gender & Education)

The SDC’s Education Strategy: Basic Education and Vocational Skills Development

Federal Department of Foreign Affairs (FDFA), Swiss Agency for Development and Cooperation (SDC), 2017
60 pp. 2.4 MB


Education is a common good underpinned by the international human rights framework and a priority in the Federal Council’s Dispatch on Switzerland’s International Cooperation 2017–2020. The SDC has been instructed by the Swiss Parliament to increase its commitment for education by 50%. The SDC’s education priorities are implemented along the following six strategic axes: (1) global and regional agenda, (2) education system governance, (3) quality and relevance, (4) inclusion and equity, (5) sustainability, cohesion, resilience, (6) transition to work.

Health System Governance, Health Workforce, Health Information Systems and Digital Health

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
The Maternal and Child Health Integrated Program (MCHIP), 2014
468 pp. 10.5 MB

http://chwcentral.org/sites/default/files/MCHIP_CHW%20Ref%20Guide.pdf

The Community Health Worker (CHW) Reference Guide is an in-depth review of issues and questions that should be considered when addressing key issues relevant for large-scale CHW programs. The CHW Reference Guide is designed for new CHW programs that are beginning the planning process as well as for existing programs that are being strengthened or scaled up. The CHW Reference Guide is meant for in-country use by national-level policymakers and planners as well as program implementers. It has many practical examples from CHW programs around the world.
For a 58 pp. updated (May 2017) summary see:
Rapid Methods to Assess the Potential Impact of Digital Health Interventions, and their Application to Low Resource Settings

by G. Royston
8 pp. 2.3 MB

https://www.researchgate.net/publication/318221780_Rapid_Methods_to_Assess_the_Potential_Impact_of_Digital_Health_Interventions_and_their_Application_to_Low_Resource_Settings

Assessing the impact of digital health projects and applications is a key challenge, especially in low resource settings. Full evaluative field studies are resource-intensive and time-consuming. Less demanding approaches that could provide rapid insights would be helpful. This paper presents some "short-cut" approaches for rapid assessments that can provide useful early indications of strengths and weaknesses and can ensure that evaluative efforts are focused on key uncertainties, are not wasted on unpromising interventions, and make the most of what is already known.

Major German Universities Cancel Elsevier Contracts

by Diana Kwon
The Scientist, July 17, 2017
Read online at:
http://www.the-scientist.com/?articles.view/articleNo/49906/title/Major-German-Universities-Cancel-Elsevier-Contracts/

In Germany, the fight for open access and favourable pricing for journals is getting heated. At the end of last month (June 30), four major academic institutions in Berlin announced that they would not renew their subscriptions with the Dutch publishing giant Elsevier once they end this December. Then on July 7, nine universities in Baden-Württemberg, another large German state, also declared their intention to cancel their contracts with the publisher at the end of 2017.

These institutions join around 60 others across the country that allowed their contracts to expire last year. The decision to cancel subscriptions was made in order to put pressure on Elsevier during ongoing negotiations. “Nobody wants Elsevier to starve - they should be paid fairly for their good service,” says Ursula Flitner, the head of the medical library at Charité–Berlin University of Medicine. “The problem is, we no longer see what their good service is.”
Augmenting diagnostic vision with AI

by Giorgio Quer, Evan D Muse, Nima Nikzad et al.
The Lancet - Published: 15 July 2017
1 pp. 353 kB

In the span of their professional lives a radiologist will read over 10 million images, a dermatologist will analyse 200 000 skin lesions, and a pathologist will review nearly 100 000 specimens. Now imagine a computer doing this work over days, rather than decades, and learning from and refining its diagnostic acumen with each new image. This is the capability that artificial intelligence (AI) will bring to medical care: the potential to interpret clinical data more accurately and more rapidly than medical specialists. Computer-aided diagnostics are nothing new in medicine. What is different now is that with deep learning, a class of machine learning algorithms, the system autonomously learns and improves. But AI will not replace physicians any time soon.

‘Predatory’ open access: a longitudinal study of article volumes and market characteristics

by Cenyu Shen and Bo-Christer Björk
BMC Medicine, 2015 13:230 - Published: 1 October 2015
15 pp. 2.1 MB

A negative consequence of the rapid growth of scholarly open access publishing funded by article processing charges is the emergence of publishers and journals with highly questionable marketing and peer review practices. These so-called predatory publishers are causing unfounded negative publicity for open access publishing in general. Reports about this branch of e-business have so far mainly concentrated on exposing lacking peer review and scandals involving publishers and journals. There is a lack of comprehensive studies about several aspects of this phenomenon, including extent and regional distribution.

Access to Medical Products, Vaccines and Technologies


World Health Organization, 2017
34 pp. 3.9 MB
The essential medicines and health products programme is a critical WHO area with a number of flagship and successful initiatives. Its core focus – to increase access to essential, high-quality, safe, effective and affordable medical products – is highlighted in the Sustainable Development Goals and is represented agency-wide through programmes at regional and country levels. The new 2030 development agenda and increasing globalization of health products development and supply have generated a need - and an opportunity - for WHO to adjust and strengthen its work in this area at all three levels (headquarters, regional and country offices) of the Organization.

WHO Drug Information Vol. 31, Nº 2, 2017

WHO Drug Information provides an overview of topics of current relevance relating to drug development and regulation.

The second issue for 2017 includes the following:
- Medicines regulation
- Quality monitoring
- Safety news
- Regulatory news
- Publications and events
- Consultation documents
- ATC/DDD classification
- Proposed International Nonproprietary Names (INN) List 117

Drug shops as primary point of care - the case of Nigeria

by Paul Webster
The Lancet, Vol 390, No. 10089, pp. 15–17 - Published: 01 July 2017
3 pp. 233 kB

Unlicensed medicine vendors, known as drug shops, are common practice in Nigeria, where primary health providers are scarce. By the government’s own admission, the public health system is direly inadequate. In this setting the country's vast network of unofficial drug shops is a dominant source of health care in the country. Nigeria is not the only resource-scarce country exploring the idea of integrating unlicensed drug shops into primary health-care services. Various innovations are being implemented across several countries to promote the roles played by drug shops.
Clinical Trials in Africa: The Cases of Egypt, Kenya, Zimbabwe and South Africa

Wemos Foundation, July 2017
40 pp. 2.8 MB


Clinical trials in Africa are not always conducted according to leading ethical guidelines. This puts clinical trial participants at risk of being physically harmed or having their rights violated. This is the main message of this report from Wemos. Wemos therefore urges the European Medicines Agency (EMA) to be more stringent when evaluating unethical clinical trials and to be more transparent about how it aims to guarantee that trials are ethical.

The Journal of Infectious Diseases - Special Supplement: Polio Endgame & Legacy-Implementation, Best Practices, and Lessons Learned

J Infect Dis (2017) 216 (suppl_1) - 1 July 2017
All articles open access at:
https://academic.oup.com/jid/issue/216/suppl_1

The Global Commission for the Certification of the Eradication of Poliomyelitis certified the eradication of type 2 poliovirus in September 2015, making type 2 poliovirus the first human pathogen to be eradicated since smallpox. The eradication of type 2 poliovirus, the absence of detection of type 3 poliovirus worldwide since November 2012, and cornering type 1 poliovirus to only a few geographic areas of 3 countries has enabled implementation of the endgame of polio eradication. This supplement focuses on efforts by global partners to successfully launch polio endgame activities to permanently secure and sustain the enormous gains of polio eradication forever.

Management and Quality of Health Services and Facilities

Measuring Efficiency in Health Care

EuroHealth - Quarterly of the European Observatory on Health Systems and Policies, Vol. 23, Nr. 2, 2017
40 pp. 8.6 MB

http://www.euro.who.int/__data/assets/pdf_file/0004/342463/EH_v23n2 WEB_Final_23 June2017.pdf?ua=1
Being able to measure efficiency is one of the cornerstones of assessing the performance of health systems, and can help to achieve several objectives. This issue’s Eurohealth Observer section features two articles that explore central issues related to measuring the performance of health systems:

- Identify the causes of inefficiencies in health systems and
- The challenges of using cross-national comparisons of efficiency to inform health policy.

**Monitoring & Evaluation: Minimum Standards and Guidelines**

Norwegian Refugee Council (NRC), 2017
76 pp. 1.2 MB


The Norwegian Refugee Council (NRC) is committed to measuring and understanding program performance as an integral part of providing quality humanitarian assistance. Their approach to monitoring and evaluation addresses three central questions:

- Are we on track and progressing towards our goals?
- Are we making a meaningful difference?
- How can we improve, or do better?

The primary purpose of monitoring and evaluation is to improve service provision and program impact for people affected by displacement. Systematic collection of evidence on ‘what works’ (or is not working) is critical to flexible and responsive program management, learning from our success and challenges, and accountability to beneficiaries and other stakeholders. Understanding program performance supports better decision-making, which leads to stronger program design and organizational strategy.

**A Practical Guide to Implementation Research on Health Systems**

by Henry Lucas and Merrick Zwarenstein
Institute of Development Studies, November 2016
Download chapter by chapter at:

http://courses.arcade-project.org/course/view.php?id=9

This is an open access resource targeted primarily at post-graduate students intending to undertake field research on health systems interventions in resource-poor environments. The book consists of twelve chapters addressing theory, methodology, analysis, and influencing policy. Each consists of both original text and links to relevant, open access, web-based journal and multi-media materials, including selected case studies.

Universal Health Coverage, Health Financing and Social Health Protection
Towards UHC: thinking public

Overview of trends in public expenditure on health (2000-2014)
by Helene Barroy, Kelsey Vaughan, Yann Tapsoba et al.
World Health Organization, July 2017
26 pp. 1.1 MB
http://www.who.int/bitstream/10665/255782/1/9789241512428-eng.pdf?ua=1

The publication offers a comprehensive deep-dive analysis of public financing for health in low- and middle-income countries (LMICs) by assessing the changing relationship between domestic public financing for health and the economy, the budget and overall sector financing. The analysis reveals that the period (2000-2014) is characterized by reduced sensitivity of public expenditure on health to macro-fiscal expansion, which in turn has contributed to a reduced role for domestic public funds in financing the sector. With the impact of external sources removed, there is no evidence of an effective “health financing transition” from private to public financing for health in low-income countries (LICs). The relative reduction in out-of-pocket spending reflects a combination of an increase in external health aid with stagnation in domestic public funding.

Revitalizing Health for All: Case Studies of the Struggle for Comprehensive Primary Health Care

Editors: Ronald Labonté, David Saunders, Corinne Packer, and Nikki Schaay
University of Toronto Press, IDRC, May 25, 2017
369 pp. 2.2 MB

The book examines 13 cases of efforts to implement comprehensive primary health care reforms in communities around the globe, including in Australia, Brazil, Democratic Republic of Congo, South Africa, and Iran. The case studies originated from an international research-to-action initiative that brought researchers and research-users from national public health systems together to design, implement, and assess local projects. This volume reveals the similarities among comprehensive primary health care projects in diverse national contexts and offers a rich evidence base from which future reform initiatives can draw.

Financing transformative health systems towards achievement of the health Sustainable Development Goals: a model for projected resource needs in 67 low-income and middle-income countries

by Karin Stenberg, Odd Hanssen, Tessa Tan-Torres Edejer et al.
The Lancet Global Health - Published: 17 July 2017
13 pp. 756 kB

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health and social protection +++ news briefing ++++
The analysis in this article shows that investments to expand services towards universal health coverage and the other SDG health targets could prevent 97 million premature deaths globally between now and 2030, and add as much as 8.4 years of life expectancy in some countries. While most countries can afford the investments needed, the poorest nations will need assistance to reach the targets.

Debating Graduation

Policy in Focus, Vol. 14, Issue No. 2, July 2017
A publication of The International Policy Centre for Inclusive Growth
76 pp. 3.6 MB


This issue of the Policy in Focus (PIF) magazine is dedicated to the ‘Graduation Approach’. It features specialist guest editors Fabio Veras Soares and Ian Orton and presents 15 inspiring articles that capture the diverse and challenging views comprising the debate surrounding the Graduation Approach, ranging from committed proponents and enthusiastic new implementers, to the cautiously optimistic, to outright critics of the intervention. The enthusiasm with and controversy over the Graduation Approach as an effective set of interventions to reduce extreme poverty date back to the beginning of the last decade. Through the programme, households would be able to create a pathway - or ‘graduate’ - out of extreme poverty within a specified time frame. This methodology came to be known as the ‘Graduation Approach’.

Social Transfers

Cash or in-kind? Why not both? Response Analysis Lessons from Multimodal Programming
by Marie Boulinaud, Jenny Coneff, Mulugeta Handino et al.
Catholic Relief Services, Samaritan’s Purse, US Agency for International Development and Cash Learning Partnership, July 2017
32 pp. 3.2 MB


This research reviews lessons learned about response analysis from multimodal responses, that is, responses in which practitioners determined that more than one response modality between cash, vouchers, and in-kind, was a “best fit” or in which the conclusions about “best fit” changed over the course of the project. The research hypothesizes that comparing the reasons for choosing different types of response within the same project and among the same beneficiaries should provide concrete examples of the relative importance of different criteria in response and, by extension, the conditions under which cash or vouchers or in-kind assistance may be most appropriate.
Cash in crisis: The case of Zimbabwe’s ‘Cash First’ humanitarian response

Based on the experience of delivering the first large-scale humanitarian cash programme in Zimbabwe, this briefing paper argues that even during a liquidity crisis, cash transfer programming can still be a feasible option, giving people greater freedom and dignity of choice during times of crisis. The paper concludes that cash transfers are a cost-effective and cost-efficient modality for meeting community needs, and makes policy recommendations for future cash transfer programming.

Managing cash-based programmes in a volatile markets context: The case of delivering cash using mobile money during the Zimbabwe cash liquidity crisis

This case study of the first large-scale humanitarian cash programme in Zimbabwe presents learning and recommendations on how to design and adapt cash transfer programmes to mitigate the risk of a cash liquidity crisis. The study explores how the programme, which delivered cash through mobile money, coped with a national cash liquidity crisis. Mobile money proved to be a highly flexible way to deliver cash during a liquidity crisis, given its option for e-purchasing, which enabled continued access to food. The case study concludes with a set of more widely applicable recommendations that could apply beyond Zimbabwe in contexts with similar features.

Inclusion of People with Disabilities

Reproductive Health Matters Special Issue: Disability and sexuality: claiming sexual and reproductive rights

Published online: 05 July 2017
Free access to all articles at:
While it goes without saying that people with disability have equal rights to sexual and reproductive desires and hopes as non-disabled people, society has disregarded their sexuality and reproductive concerns, aspirations and human rights. This collection of articles chronicles the experiences of disabled women - globally, these women have significant unmet needs in relation to sexual and reproductive health (SRH) and also face discrimination.

“We do not dare to love”: women with disabilities’ sexual and reproductive health and rights in rural Cambodia

by Alexandra Gartrell, Klaus Baesel & Cornelia Becker
Reproductive Health Matters, Vol. 25, 2017 - Issue 50
13 pp. 565 kB

There is an urgent need for an evidence base to inform the implementation of disability inclusive sexual and reproductive health (SRH) policy and programming to address women with disabilities’ largely unattained SRH rights. This paper presents findings from a qualitative study on the sexual and reproductive health and rights (SRHR) of women with disabilities in rural Cambodia. The findings highlight three critical steps to enhance the physical, communicative and financial accessibility of SRHR information and services. Together these steps will support women with disabilities to claim their sexual and reproductive rights and transform the social attitudes of persons in the lives of women with disabilities, including health care staff.

Call for submission: strong and practical examples of disability-inclusive Sexual and Reproductive Health Rights (SRHR)-activities

How can we include men, women, youngsters and children with disabilities in SRHR programmes? And how can we include SRHR in disability-specific programmes? ‘Leave no one behind’ is a central principle of the SDG’s, but challenges at implementation level are still paramount. Therefore, the Dutch Coalition of Disability and Development (DCDD) – a coalition of twelve organisations – is preparing a publication on SRHR and disability, in cooperation with Sharenet (a Dutch network on SRHR and HIV). This publication will be filled with practical information, interviews, recommendations, and most importantly: with practical examples. It will be spread among SRHR-, disability-, and mainstream organisations and policy makers.
For more information see:

Case Study on the Engagement of Organisations of Persons with Disabilities (Dpo) in Voluntary National Reviews

Stakeholder Group of Persons with Disabilities, 2017
Within the Stakeholder Group of Persons with Disabilities, a working group was created on the Voluntary National Reviews (VNRs) aimed at raising awareness among Organisations of Persons with Disabilities (DPOs) to engage with their governments in the national consultation processes on SDG implementation. The report will showcase the national level DPO work carried out in different regions as well as best practices and challenges, and will serve as a case study for Member States.

Assessment of progress towards universal health coverage for people with disabilities in Afghanistan: a multilevel analysis of repeated cross-sectional surveys

by Jean-Francois Trani, Praveen Kumar, Ellis Ballard et al.
The Lancet Global Health, Vol.5, Nr. 8, August 2017
10 pp. 2.7 MB

Since 2002, Afghanistan has made much effort to achieve universal health coverage. According to the UN Sustainable Development Goal 3, target eight, the provision of quality care to all must include usually underserved groups, including people with disabilities. The authors investigated whether a decade of international investment in the Afghan health system has brought quality health care to this group. They conclude that perceived availability of health care and experience with health-care coverage have not greatly improved for people with disabilities in Afghanistan, particularly in remote areas. Health policy in Afghanistan will need to address attitudinal, social, and accessibility barriers to health care.
Global Health Governance, Sustainable Development Goals & Development Cooperation

G20 Leaders’ Declaration: Shaping an interconnected world

Hamburg, 7/8 July 2017
15 pp. 340 kB
https://www.g20.org/gipfeldokumente/G20-leaders-declaration.pdf

The section on global health is found under the heading ‘Building resilience’ (page 7). Subheadings are ‘Safeguarding against Health Crises and Strengthening Health Systems’ & ‘AMR’.

Read comment by Richard Horton:
Offline: The G20 and health - platitudes and broken promises
1 pp. 261 kB

Spotlight on Sustainable Development 2017: Reclaiming policies for the public

Privatization, partnerships, corporate capture, and their impact on sustainability and inequality – assessments and alternatives
by Barbara Adams, Jens Martens, Chee Yoke Ling et al.
Report by the Civil Society Reflection Group on the 2030 Agenda for Sustainable Development, 2017
160 pp. 3.3 MB

Independent monitoring and review of the implementation of the 2030 Agenda and its structural obstacles and challenges are key factors for the success of the Sustainable Development Goals (SDGs). It is for this reason, the Reflection Group on the 2030 Agenda for Sustainable Development together with other civil society organizations and networks has produced the first annual Spotlight Report assessing the implementation of the 2030 Agenda and the structural obstacles in its realization. The report puts a spotlight on the fulfilment of the 17 goals, with a particular focus on inequalities, responsibility of the rich and powerful, means of implementation and systemic issues.
The Sustainable Development Goals Report 2017

Editor: Lois Jensen
UN Department of Economic and Social Affairs, 2017
64 pp. 12.1 MB

In adopting the 2030 Agenda for Sustainable Development, world leaders resolved to free humanity from poverty, secure a healthy planet for future generations, and build peaceful, inclusive societies as a foundation for ensuring lives of dignity for all. Implementation has begun, but the clock is ticking. This report shows that the rate of progress in many areas is far slower than needed to meet the targets by 2030.

Development and Access to Information 2017

by Fackson Banda, Dave Banisar, Fiona Bradley et al.
International Federation of Library Associations and Institutions (IFLA) and the Technology and Social Change Group (TASCHA), University of Washington, July 2017
110 pp. 1.8 MB

Development and Access to Information (DA2I) is the first of a series of annual reports that will monitor the progress countries are making towards fulfilling their commitment to promote meaningful access to information as part of the United Nations Sustainable Development Goals. Its thematic chapters focus on the following goals: Zero Hunger (SDG2), Good Health and Well-being (SDG3), Gender Equality (SDG5), and Industry, Innovation and Infrastructure (SDG9). As well as updating on progress on a range of indicators of access to information, each DA2I report will have a focus on the SDGs selected for review at the High Level Political Forum (HLPF) in the year of publication.

Who pays for cooperation in global health? A comparative analysis of WHO, the World Bank, the Global Fund to Fight HIV/AIDS, Tuberculosis and Malaria, and Gavi, the Vaccine Alliance

by Chelsea Clinton and Devi Sridhar
9 pp. 1.0 MB

The authors highlight three major trends in global health governance more broadly that relate to this development: towards more discretionary funding and away from core or longer-term funding; towards defined multi-stakeholder governance and
away from traditional government-centred representation and decision-making; and towards narrower mandates or problem-focused vertical initiatives and away from broader systemic goals.

**Aid allocation within countries: Does it go to areas left behind?**

by Harsh Desai and Romilly Greenhill
Overseas Development Institute Briefing Note, July 2017
12 pp. 2.4 MB


Much attention has been paid to aid allocation across countries, including whether aid should target poor people or poor countries. There has been less focus on where aid is spent when it reaches recipient countries, at sub-national levels. This is becoming an increasingly important issue in the context of the ‘leave no-one behind’ agenda. This short note presents new analysis on the relationship between aid allocation and sub-national estimates of poverty in four countries: Afghanistan, Bangladesh, Honduras and Nigeria.

**Miscellaneous**

**Taylor & Francis Developing Country Waiver Policy**

Researchers based in less-economically developed countries are able to apply for waivers and discounts to support publishing in fully open access journals which have Article Publishing Charges (APCs):

- Corresponding authors based in low-income countries, as categorized by the World Bank, are eligible to apply for a full waiver of the APC.
- Corresponding authors based in lower-middle-income countries, as categorized by the World Bank, are eligible to apply for a 50% discount of the APC which applies to their article.

Eligibility is determined by the country of the corresponding author’s primary affiliation. For more information see: https://afrocp.files.wordpress.com/2017/07/ejgp-waivers.pdf
The Impact of Systems Medicine on Human Health and Disease

Systems medicine provides an integrative platform for studying the interactions between the biological components of the cell using a holistic approach and generating mechanistic explanations for the emergent systems properties. This interdisciplinary field of study allows for understanding biological processes of cells in health and disease states, gaining new insights into what drives the appearance of the disease and finally identifying proteins and metabolites implicated in human disease. Systems medicine utilizes mathematical approaches to generate models which can be employed for designing new sets of experiments and for mapping the response of the system to perturbations quantitatively. These models as well as the developed tools can accelerate the emergence of personalized medicine which can transform the practice of medicine and offer better targets for drug development with minimum side effects.

CONFERENCES & TRAINING

Hacking Global Health: Improving Urban Health in Africa, Asia and Latin America

Deadline for applications is 31.07.2017

- The hack is organized by KfW (German development bank) as part of the World Health Summit in October in Berlin.
- For this Hackathon KfW is looking for participants from different fields (public health, social science, computer science, software engineers, etc.). The teams will be asked to work on new and innovative digital solution to address current health challenges.
- More information, some additional details are available here: https://www.kfw-entwicklungsbank.de/International-financing/KfW-Development-Bank/Topics/Health/Hacking-Global-Health/

London Family Planning Summit: Summary of Commitments

11 July 2017
29 pp. 731 kB
The Family Planning Summit was co-hosted by the UK Government, UNFPA, the United Nations Population Fund and the Bill & Melinda Gates Foundation, in close partnership with the Family Planning 2020 Secretariat (FP2020). In parallel with the Summit in London, more than 2500 people gathered at 21 satellite events across Cameroon, Côte d'Ivoire, Ethiopia, Ghana, Kenya, Indonesia, Malawi, Nepal, Nigeria, Pakistan, Sierra Leone, Thailand and Uganda, demonstrating growing country leadership and support for family planning. This document includes summaries of the formal commitments made on 11 July 2017 at the Family Planning Summit by at least 37 country governments, 16 private companies and 11 partner organizations, including civil society and private foundations, to accelerate progress on rights-based family planning programmes.

**eLearning Africa, the pan-African conference on ICT for development, education and training**

27 - 29 September 2017
Republic of Mauritius

This year’s conference will offer three exciting days packed with more than 65 innovative sessions, including hands-on workshops, inspiring Plenary Sessions, interactive Breakout Sessions, Poster Presentations, and more! eLearning Africa is the must-attend event, meeting the needs of the pan-African education and training sectors and it is the key networking venue for the continent’s leading educational and technology professionals. Attendees range from policy makers, higher education leaders, academics (deans, vice-chancellors, heads of department, professors, lecturers, researchers), curriculum developers, tech experts and ICT administrators, innovators and founders in the edtech scene, and many more.


**Fifth Global Symposium on Health Systems Research**

“Advancing Health Systems for All in the SDG Era”
8 – 12 October, Liverpool UK

Health systems research is a field that takes on some of the defining concerns of our age – from breaking the barriers to access created by social inequalities, to reaching out across borders to those most in need of care, to harnessing the brilliance of technology so that more people can benefit. Every two years, communities of health professionals, planners, advocates and scientists engaged in strengthening health systems the world over come together for the Global Symposia on Health Systems Research, and share their experiences and expertise on these topics and more.

For more information see: [http://healthsystemsresearch.org/hsr2018/](http://healthsystemsresearch.org/hsr2018/)
7th Multilateral Initiative on Malaria Panafrican Conference

April 15-20, 2018
International Conference Center Abdou Diouf, Dakar, Senegal

The 7th edition of the MIM conference will provide spaces dedicated to groundbreaking scientific research. There will be a wide range of topics, skills and knowledge shared with you by our esteemed Keynote presenters over the course of the conference.

For more information see: http://www.mim2018.com/en/

MalariaX: Defeating Malaria from the Genes to the Globe

https://www.edx.org/course/malariax-defeating-malaria-genes-globe-harvardx-ph425x#

How can we eradicate malaria? Explore the scientific and technological underpinnings of malaria, as well as the historical, political, social, and economic contexts in which control, elimination, and eradication efforts unfold.

Through foundational lectures and supplemental interviews, this course provides participants with a toolbox of knowledge and skills. Learners will be guided through the analysis of real-world data and its effective use in problem-solving. Analytical approaches focus on how to develop and implement evidence-based intervention strategies to contribute to national and local malaria eradication efforts. The self-paced nature of the course will allow learners to access it at their convenience.

CARTOON

Source: Mario Lars
TIPS & TRICKS

New WhatsApp features

WhatsApp has improved its file-sharing capabilities, and now allows users to send any type of file up to 100 MB. This is an improvement over its initial attachment feature, which only allowed people to send PDF documents to contacts. The 100 MB file size also applies to images. Other enhancements include design improvements for voice and video calls, and the ability to tap and hold when typing text in chat to bold, strikethrough, or italicize it.

Open Properties Menu in an Instant

Here is a WINDOWS tip for quickly getting a look at the properties for a file in File Explorer. Hold down the Alt key and then double-click on any file or folder to see its properties. This even works for programme shortcuts.
Archive of past issues:
You can find and search past issues of the news briefing (2010-2017) at http://health.bmz.de/services/HESP_News_Briefing/index.php

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