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**BOOKS**

*African Sexualities - A Reader*

by Sylvia Tamale  
Pambazuka Press - Publication Date: June 2011  
http://fahamubooks.org/book/?GCOI=90638100320440

‘African Sexualities’ is a groundbreaking new volume, forthcoming from Pambazuka Press. As well as using popular culture to help address the ‘what, why, how, when and where’ questions, the book’s contributors provide a critical mapping of African sexualities that informs readers about the plurality and complexities of sexualities on the continent – desires, practices, fantasies, identities, taboos, abuses, violations, stigmas, transgressions and sanctions.

The following article by ‘African Sexualities’ editor Sylvia Tamale comprises the book’s introduction:  
http://www.pambazuka.org/en/category/features/73150

* * *

*International Travel and Health 2011*

World Health Organization, March 2011  
Download chapter by chapter as Adobe PDF files (total 240 pp.) at:  
http://www.who.int/ith/chapters/en/index.html

This book explains how travellers can stay healthy and provides WHO guidance on vaccinations, malaria chemoprophylaxis and treatment, personal protection against insects and other disease vectors, and safety in different environmental settings. It covers all the principal risks to travellers’ health, both during their journeys and at their destinations. It describes all relevant infectious diseases, including their causative agents, modes of transmission, clinical features and geographical distribution, and provides details of prophylactic and preventive measures.

* * *

*World Health Statistics 2011*

World Health Organization Department of Health Statistics and Informatics of the Innovation, Information, Evidence and Research Cluster in collaboration with WHO technical programmes and regional offices, 2011  
170 pp. 4.1 MB:  
http://www.who.int/entity/whosis/whostat/EN_WHS2011_Full.pdf

The World Health Statistics series is WHO’s annual compilation of health-related data for its 193 Member States, and includes a summary of the progress made towards achieving the health-related Millennium Development Goals (MDGs) and associated targets. Indicators have been included on the basis of their relevance to global public health; the availability and quality of the data; and the reliability and comparability of the resulting estimates. Taken together, these indicators provide a comprehensive summary of the current status of national health and health systems.

Amnesty International, May 2011


The Amnesty International Report 2011 documents the state of human rights in 157 countries and territories in 2010. It reveals a world in which people continue to challenge oppression and to confront human rights abusers, despite the powerful array of repressive measures deployed against them. This report shows that the communities most affected by human rights abuses are the real driving force behind the human rights struggle and it details how the rise of social media is fuelling a new activism that repressive governments are struggling to control.

* * *

Building Community Disaster Resilience through Private-Public Collaboration

Committee on Private-Public Sector Collaboration to Enhance Community Disaster Resilience, Geographical Science Committee, National Research Council, 2011

143 pp. 4.5 MB: http://download.nap.edu/cart/deliver.cgi?&record_id=13028

Increasing evidence indicates that collaboration between the private and public sectors could improve the ability of a community to prepare for, respond to, and recover from disasters. The book assesses the current state of private-public sector collaboration dedicated to strengthening community resilience, identifies gaps in knowledge and practice, and recommends research that could be targeted for investment. Specifically, the book finds that local-level private-public collaboration is essential to the development of community resilience.

ONLINE PUBLICATIONS

Global Health

Leveraging the World Health Organization’s Core Strengths

by Margaret Reeves and Suzanne Brundage
Center for Strategic and International Studies (CSIS), May 2011


In recent years, WHO’s scope has been stretched beyond its core strengths, with the result that its impacts have been diluted and its reputation damaged. Donor interests are to a significant degree responsible, as they have pressured WHO to enlarge its goals to include health system strengthening, human rights monitoring, trade and health issues, and new eradication campaigns. WHO should phase out operations in these areas on appropriate timelines. Director-General Margaret Chan has initiated promising efforts to
streamline WHO's processes and improve its performance.

* * *

**WHO needs change**

by Barry R. Bloom  
Nature 473, 143-145 (12 May 2011)

3 pp. 1.0 MB:  

The WHO must regain the trust of donors and the scientific community by becoming more transparent and transforming itself into the main source of global health knowledge. Despite some great achievements in the 63 years since it was created, the organisation is increasingly “underfunded and marginalized”. And it has failed to lead on science or public health priorities - the organisation’s response to the recent outbreak of cholera in Haiti was slow, and, although chronic diseases are the main contributors to disease burden, its 2008-2009 funding still focuses on infectious diseases.

* * *

**The Health Systems Funding Platform: Is this where we thought we were going?**

by Peter S Hill, Peter Vermeiren, Katabaro Miti et al.  
Globalization and Health 2011, 7:16 (19 May 2011)

22 pp. 204 kB:  
http://www.globalizationandhealth.com/content/pdf/1744-8603-7-16.pdf

In March 2009, the Task Force for Innovative International Financing for Health Systems recommended “a health systems funding platform for the Global Fund, GAVI Alliance, the World Bank and others to coordinate, mobilize, streamline and channel the flow of existing and new international resources to support national health strategies.” This paper is a case study using documentary analysis, participant observation and in-depth interviews to examine the processes of development and key issues raised by the Health Systems Funding Platform.

* * *

**The Joint Action and Learning Initiative: Towards a Global Agreement on National and Global Responsibilities for Health**

by Lawrence O. Gostin, Eric A. Friedman, Gorik Ooms et al.  

5 pp. 183 kB:  
http://www.plosmedicine.org/article/fetchObjectAttachment.action?sessionId=8575E547CE922FA11BF0F6F26003C9F8&uri=info%3Adoi%2F10.1371%2Fjournal.pmed.1001031&representation=PDF

A coalition of civil society organizations and academics are initiating a Joint Action and Learning Initiative on National and Global Responsibilities for Health (JALI) to research key conceptual questions involving health rights and responsibilities, with the goal of securing a global health agreement and supporting civil society mobilization around the human right to health. Using broad partnerships and an inclusive consultation process, JALI seeks to clarify the health services to which everyone is entitled.
Hepatitis C in HIV-infected individuals: cure and control, right now

David L Thomas, Dennis Leoutsakas, Tomas Zabransky et al.

For persons living with HIV, hepatitis C is a major public health problem that must be controlled and could be eliminated. Despite the major benefits of antiretroviral therapy on HIV outcomes, antiretroviral therapy is not sufficient to halt the complications of hepatitis C virus (HCV) infection. Nonetheless, HCV can be controlled at all stages, including prevention of infection and cure. Thus, HCV is an eradicable disease. There are significant inequalities worldwide in HCV control that could markedly constrain the impact of these measures.

* * *

Treating HIV-infected People with Antiretrovirals Protects Partners from Infection

National Institute of Allergy and Infectious Diseases (NIAID), 12 May 2011

Read online at:

and:


HIV treatment as prevention - it works

See comments:
Still No Reason to Stall Male Circumcision, Forget the HIV Vaccine or Throw Away Your Condoms

Men and women infected with HIV reduced the risk of transmitting the virus to their sexual partners by taking oral antiretroviral medicines when their immune systems were relatively healthy. The clinical trial, known as HPTN 052, was slated to end in 2015 but the findings are being released early as the result of a scheduled interim review of the study data by an independent data and safety monitoring board (DSMB). The DSMB concluded that it was clear that use of antiretrovirals by HIV-infected individuals with relatively healthier immune systems substantially reduced transmission to their partners.

* * *
Getting Ahead of the Wave: Lessons for the Next Decade of the AIDS Response

Campaign for Access to Essential Medicines, Médecins Sans Frontières (MSF), May 2011

34 pp. 1.1 MB:  
http://www.msf.org/shadomx/apps/fms/fmsdownload.cfm?file_uuid=0ADAF3D0-F526-45F2-B0D5-64E6F37B4F59&siteName=msf

The report reveals that several countries hardest hit by the AIDS epidemic are improving HIV treatment to reduce deaths and illness – but a lack of support from donors prevents many from making vital changes. This fragile progress needs sustained support, but the two biggest AIDS donors, the US and UK, are opposing a critical HIV treatment target ahead of next month’s AIDS Summit in New York at a time when mounting evidence shows that HIV treatment can also prevent HIV infections.

* * *

Viral load testing in a resource-limited setting: quality control is critical

by Jane Greig, Philipp du Cros, Derryck Klarkowski et al.  

20 pp. 187 kB:  
http://www.jiasociety.org/content/pdf/1758-2652-14-23.pdf

World Health Organization guidelines now recommend routine use of viral load testing, where available, for patients receiving antiretroviral treatment (ART). However, its use has not been routinely implemented in many resource-limited settings due to cost, availability and accessibility. Viral load testing is complex, making its application in resource-limited settings challenging. The paper describes the issues encountered by Médecins Sans Frontières when using routine viral load testing in a large HIV programme in sub-Saharan Africa.

* * *

Community Conversation Toolkit (for HIV Prevention)

Academy for Educational Development (AED), C-Change, December 2010

http://www.c-hubonline.org/7948/

Materials in the Community Conversation Toolkit include a Facilitator’s Guide, Community Mobilizer’s Cards, Roleplay Cards, Storytelling Finger Puppets, Promotional Proverbs and Best Kept Secrets Throw Boxes, Promotional Playing Cards and Dialogue Buttons. These interactive formats are designed to mobilize adults in communities aged 20 and above to take action toward HIV prevention.

* * *

Masculinity as a Barrier to Men’s Use of HIV Services in Zimbabwe

by Morten Skovdal, Catherine Campbell, Claudius Madanhire et al.  
Globalization and Health 2011, 7:13 (15 May 2011)
A growing number of studies highlight men’s disadvantage in making use of HIV services. The authors urge HIV service providers to consider the obstacles that prevent many men from accessing their services and argue for community-based and driven initiatives that facilitate safe and supportive social spaces for men to openly discuss social constructions of masculinity as well as renegotiate more health-enabling masculinities.

**HIV Prevention Gains Momentum: Successes in female condom programming**

by Bidia Deperthes, Steve Kraus, Kristin Helmore et al.
United Nations Population Fund (UNFPA), 2011

This report examines a number of success stories in the fight against HIV. Examples come from countries such as Zimbabwe, Myanmar, Nigeria and the Caribbean region. The report stresses the importance of comprehensive male and female condom programming. This could be achieved through developing strategies and programmes through which every sexually active person at risk of HIV or other sexually transmitted infections has the information, access and motivation to use good quality condoms.

**Good practice HIV programming standards**

International HIV/AIDS Alliance, 2010

These programming standards define the Alliance approach to HIV programming. They set out what their beneficiaries can expect from their HIV programmes and their research. Programme standards define good practice in various technical areas, and are based on evidence, and on experience and values. The standards refer to tools that define good practice for specific intervention types, or that assist in implementing the standard. They do not define reach and scope.

**Population Dynamics in the Least Developed Countries: Challenges and Opportunities for Development and Poverty Reduction**

by Michael Herrmann, JoseMiguel Guzman, Sabrina Juran et al.
United Nations Population Fund (UNFPA), May 2011
This report outlines the population dynamics and their relationship with reproductive health in LDCs and addresses the implications for development and poverty reduction efforts. It also identifies five areas of intervention that can help countries anticipate, shape and plan for demographic change. Most fundamentally, this requires evidence-based policy-making which takes due account of current and future population dynamics, empowers women and further strengthens access to sexual and reproductive health.

* * *

**Contraceptive Technologies: Responding to Women’s Needs**

by Jacqueline E. Darroch, Gilda Sedgh and Haley Ball

Guttmacher Institute, April 2011


Seven out of 10 women in Sub-Saharan Africa, South Central Asia and Southeast Asia who want to avoid pregnancy but are not using modern contraceptives, report reasons for non-use that indicate currently available methods do not satisfy their needs. The findings suggest that substantially bringing down unintended pregnancy rates in these developing regions will require increased investment in the development of new methods that better address women’s concerns and life circumstances.

* * *

**Reproductive Rights Violations as Torture and Cruel, Inhuman, or Degrading Treatment or Punishment: A Critical Human Rights Analysis**

by Ximena Andión Ibañez, Elisa Slattery, Jaime Todd-Gher et al.

Center for Reproductive Rights, 2010

39 pp. 221 kB: http://reproductiverights.org/sites/crr.civicactions.net/files/docume nts/TCiDT.pdf

Women and girls worldwide face a wide range of violations to their sexual and reproductive rights, such as lack of access to contraception and safe abortion, female genital mutilation (FGM), and sexual violence. Moreover, when accessing sexual and reproductive healthcare services women and girls encounter low-quality, often negligent and abusive care and treatment.

* * *

**Healthy Timing and Spacing of Pregnancy (HTSP) Online Toolkit**

http://www.k4health.org/toolkits/htsp/about-htsp-toolkit

It is hoped that you will find this toolkit to be the primary source of evidence-based knowledge on HTSP and resources for integrating HTSP into existing health and community programs and policies. The studies and resources that have been included here have been carefully selected and organized so that you can easily find the material that you need, whether for advocacy, training, or health systems strengthening so that women in your community, region or country can safely delay, space or limit her pregnancies for the healthiest outcomes for women, children, families and communities.
The 2011 Mothers’ Index

Save the Children - State of the World’s Mothers 2011

Save the Children’s twelfth annual Mothers’ Index compares the well-being of mothers and children in 164 countries - more than in any previous year. These statistics go far beyond mere numbers. The human despair and lost opportunities represented in these numbers demand mothers everywhere be given the basic tools they need to break the cycle of poverty and improve the quality of life for themselves, their children, and for generations to come.

* * *

Household survey on maternal and child health practices & care-seeking behavior at community level In East and West Nusa Tenggara - Indonesia

by Gertrud Schmidt-Ehry, Ute Jugert, Ibu Adriane Sopacua et al.
Center for Health Research, University of Indonesia and GTZ, 2009

The aim of this baseline study, which was carried out at the community level, was to obtain a picture of care or treatment seeking behavior, customer satisfaction and perceptions of the quality of reproductive health services, safe pregnancy and contraception measures, and to assess the nutritional status of children under five years of age. Applying standard methods and performed in collaboration with local research institutes, this study is expected to be of use in the future and to supplement available data on health services obtained from other surveys and from routine reports.

* * *

A strategic assessment of unsafe abortion in Malawi

by Emily Jackson, Brooke Ronald Johnson, Hailemichael Gebreselassie et al.
Reproductive Health Matters;19(37):133-143 (May 2011)

As part of efforts to achieve Millennium Development Goal 5 the Malawi Ministry of Health conducted a strategic assessment of unsafe abortion in Malawi. This paper describes the findings of the assessment, including a human rights-based review of Malawi’s laws, policies and international agreements relating to sexual and reproductive health and data from 485 in-depth interviews about sexual and reproductive health, maternal mortality and unsafe abortion, conducted with Malawians from all parts of the country and social strata.

* * *
Advancing Cervical Cancer Prevention Initiatives in Resource-Constrained Settings: Insights from the Cervical Cancer Prevention Program in Zambia

by Mulindi H. Mwanahamuntu, Vikrant V. Sahasrabuddhe, Sharon Kapambwe et al.

5 pp. 417 kB:

The authors describe their Cervical Cancer Prevention Program in Zambia, which has provided services to over 58,000 women over the past five years, and share lessons learned from the program’s implementation and integration with existing HIV/AIDS programs.

* * *

Community Mobilisation through Women’s Groups to improve the Health of Mothers and Babies

Good Practice Guide
BADAS, Ekjut, Women and Children First (UK), UCL, March 2011

106 pp. 1.5 MB:

This ‘good practice’ guide, based on the experience of a project in India and Bangladesh called ‘Saving Mothers and Children’, describes an approach that has the potential to reduce maternal and newborn deaths, and to address other health problems. The project worked through women’s groups, using a participatory learning and action cycle, to mobilise community action to improve the health of mothers and babies.

* * *

Perinatal Mortality in Eastern Uganda: A Community Based Prospective Cohort Study

by Victoria Nankabirwa, James K. Tumwine, Thorkild Tylleskär et al.
PLoS ONE 6(5): e19674 (9 May 2011)

7 pp. 92 kB:

To achieve a child mortality reduction according to millennium development goal, it is necessary to considerably reduce neonatal mortality. The authors report stillbirth and early neonatal mortality risks as well as determinants of perinatal mortality in Eastern Uganda. Their findings strengthen arguments for ensuring that pregnant women have access to and use adequate delivery facilities and bed nets.

* * *

The Long Reach of Early Childhood Poverty

by Greg J. Duncan and Katherine Magnuson
Pathways, Winter 2011
Emerging research in neuroscience and developmental psychology suggests that poverty early in a child’s life may be particularly harmful because the astonishingly rapid development of young children’s brains leaves them sensitive (and vulnerable) to environmental conditions. This paper highlights emerging research linking poverty occurring as early as the prenatal year to adult outcomes as far as the fourth decade of life. Based on this evidence, it discusses how policy might better focus on deep and persistent poverty occurring very early in the childhoods of the poor.

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**Adolescent job aid**

A handy desk reference tool for primary level health workers

by Adepeju Olukoya and Jane Ferguson

Department of Child and Adolescent Health and Development (CAH), World Health Organization, 2010

196 pp. 1.5 MB:

The Adolescent Job Aid is a handy desk reference tool for health workers (trained and registered doctors, nurses and clinical officers) who provide services to children, adolescents and adults. It aims to help these health workers respond to their adolescent patients more effectively and with greater sensitivity. It provides precise, step-by-step guidance on how to deal with adolescents when they present with a problem or a concern about their health or development.

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**Malaria**

*Malaria: From the heart of Europe to the Tropics*

by Christiane Fischer, Claudia Jenkes, Jörg Schaaber

BUKO Pharma-Kampagne/Gesundheit und Dritte Welt e.V., 2010

28 pp. 1.1 MB:

Malaria is considered to be a tropical disease today. In earlier days, however, it also caused much suffering here in Europe. The marshes and moors of Northern Germany had been dreaded malaria infested regions up to the 19th century. Fortunately, this is a thing of the past. On the southern hemisphere though, malaria is still harsh reality even today. Almost one million people die of a fatal mosquito bite each year, every 30 seconds a child dies. That is reason enough to take a look at the disease.

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Travellers’ malaria - 'one shoe does not fit all'

by Patricia Schlagenhauf and Marcel Hommel
Malaria Journal 2011, 10:129 (17 May 2011)

5 pp. 109 kB:
http://www.malariajournal.com/content/pdf/1475-2875-10-129.pdf

Travellers’ malaria is an exciting topic. It is a field in flux with evolving options for chemoprophylaxis, self-diagnosis, self-treatment, risk/strategy analyses and surveillance. Ideologies vary and experts differ but debate is needed and can bring change. The launch of a new thematic series in the Malaria Journal - "Travellers' malaria" - creates an ideal forum to bring together research papers, reviews, opinion papers and commentaries, and will hopefully stimulate debate.

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Cost risk benefit analysis to support chemoprophylaxis policy for travellers to malaria endemic countries

by Eduardo Massad, Ben C Behrens, Francisco AB Coutinho et al.
Malaria Journal 2011, 10:130 (17 May 2011)

31 pp. 2.7 MB:
http://www.malariajournal.com/content/pdf/1475-2875-10-130.pdf

In a number of malaria endemic regions, tourists and travellers face a declining risk of travel associated malaria, in part due to successful malaria control. Many millions of visitors to these regions are recommended, via national and international policy, to use chemoprophylaxis which has a well recognized morbidity profile. To evaluate whether current malaria chemoprophylactic policy for travellers is cost effective when adjusted for endemic transmission risk and duration of exposure. a framework, based on partial cost- benefit analysis was used.

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Anti-malarial drug formulations and novel delivery systems: A review

by P. Murambiwa, B. Masola, T. Govender et al.

9 pp. 288 kB (free registration required):

Malaria cases have increased in sub-Saharan Africa largely due to falciparum resistance to the most frequently used drugs (chloroquine and sulphadoxine/pyrimethamine (SP) combination). Therapeutic failure has also been attributed in part to adverse effects of anti-malarial drugs and patients' non-compliance due to inconvenient dosing schedules. The authors consider that formulation and evaluation of novel drug delivery systems is not only less expensive than developing new drugs, but may also improve delivery of anti-malarials at the desired rates.

* * *
Two-year evaluation of Intermittent Preventive Treatment for Children (IPTc) combined with timely home treatment for malaria control in Ghana

by Collins K Ahorlu, Kwadwo A Koram, Atsu Seake-Kwawu et al.
Malaria Journal 2011, 10:127 (15 May 2011)

Intermittent preventive treatment for children (IPTc) has recently been accepted as an important component of the malaria control strategy. The year-two-evaluation study results indicate that IPTc given three times in a year (every four months) combined with timely treatment of febrile malaria illness, is effective to reduce malaria parasite prevalence in children aged 6 to 60 months in the study community. This must give hope to malaria control programme managers in sub-Saharan Africa where the burden of the disease is most debilitating.

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Status of pesticide management in the practice of vector control: a global survey in countries at risk of malaria or other major vector-borne diseases

by Henk van den Berg, Jeffrey Hii, Agnes Soares et al.
Malaria Journal 2011, 10:125 (14 May 2011)

It is critical that vector control pesticides are used for their acceptable purpose without causing adverse effects on health and the environment. This paper provides a global overview of the current status of pesticides management in the practice of vector control.

Tuberculosis

Ethics and social determinants: key elements of tuberculosis prevention, care and control

The June 2011 issue of the International Journal of Tuberculosis and Lung Disease features a special supplement devoted to examining how social and economic factors impact tuberculosis (TB). The issue, entitled “Ethics and social determinants: key elements of tuberculosis prevention, care and control” contains 12 articles that look at ways of understanding these non-medical determinants and how best to deal with them.

Other Infectious Diseases

The Case of Alor: A Model for Elimination of Lymphatic Filariasis

From 2001 to 2004 GTZ (now GIZ) Health assisted in the elimination of Lymphatic Fi-
Lariasis (LF) on the Eastern Indonesian Island of Alor. This successful campaign has become one of the best-documented success stories on the elimination of LF worldwide. It is one of the rare cases in public health science where the decrease of a biological variable, i.e. microfilariae load, could be linked to a well-implemented social mobilization campaign. Until now, the Alor experience is being used as a model for an effective mass drug administration and social mobilization campaign activities concerning LF in Indonesia.

The toolkit with Modules, Guidebooks, Surveillance forms & IEC materials (packed with pkzip - 5.5 MB) can be found at:
http://ighealth.org/id/library/downloadfile/95/Toolkit-for-the-Elimination-of-Lymphatic-Filariasis

Collection of academic articles (packed with pkzip - 2.7 MB):

Film: http://www.dailymotion.com/kvdo#videoId=xiq3on

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Use of Saliva for Early Dengue Diagnosis

by Grace Yap, Bijon Kumar Sil, Lee-Ching Ng

7 pp. 919 kB:
http://www.plosntds.org/article/fetchObjectAttachment.action;jsessionid=85506130389249086FE07B227D257254.ambr02?uri=info%3Adoi%2F10.1371%2Fjournal.pntd.0001046&representation=PDF

The necessity of a venous blood collection in all dengue diagnostic assays and the high cost of tests that are available for testing during the viraemic period hinder early detection of dengue cases and thus could delay cluster management. This study reports the utility of saliva in an assay that detects dengue virus (DENV)–specific immunoglobulin A (Ig A) early in the phase of a dengue infection. The ACA-ELISA is easy to perform, cost effective, and especially useful in laboratories without sophisticated equipment. The findings established the usefulness and reliability of saliva for early dengue diagnosis.

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Dengue vector control strategies in an urban setting: an economic modelling assessment

by Paula Mendes Luz, Tazio Vanni, Jan Medlock et al.

8 pp. 401 kB:
http://download.thelancet.com/pdfs/journals/lancet/PIIS0140673611602468.pdf?id=5bbe37e152166496.5f1903e8:12fe8c662ff:-5b181305281584615

An estimated 2,5 billion people are at risk of dengue. Incidence of dengue is especially high in resource-constrained countries, where control relies mainly on insecticides targeted at larval or adult mosquitoes. The authors found that six high-efficacy adult vector control applications per year have a cost-effectiveness ratio that will probably meet WHO’s standard for a cost-effective or very cost-effective intervention. Year-round larval control can be counterproductive, exacerbating epidemics in later years because of evo-
olution of insecticide resistance and loss of herd immunity.

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**Guideline for the Prevention and Control of Norovirus Gastroenteritis Outbreaks in Healthcare Settings**

by Taranisia MacCannell, Craig A. Umscheid, Rajender K. Agarwal et al. Centers for Disease Control & Prevention, May 2011


Norovirus gastroenteritis infections and outbreaks have been increasingly described and reported in both non-healthcare and healthcare settings during the past several years. This document is intended for use by infection prevention staff, physicians, healthcare epidemiologists, healthcare administrators, nurses, other healthcare providers, and persons responsible for developing, implementing, and evaluating infection prevention and control programs for healthcare settings across the continuum of care.

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**Essential Medicines**

**Unedited Report of the 18th Expert Committee on the Selection and Use of Essential Medicines**

21 to 25 March 2011, Accra, Ghana

World Health Organization, 5 May 2011

211 pp. 1.3 MB: [http://www.who.int/selection_medicines/Complete_UNEDITED_TRS_18th.pdf](http://www.who.int/selection_medicines/Complete_UNEDITED_TRS_18th.pdf)

The purpose of the meeting of the WHO Expert Committee on the Selection and Use of Essential Medicines was to review and update the WHO Model List of Essential Medicines (EML) as well as the WHO Model List of Essential Medicines for Children (EMLc). The Expert Committee evaluated the scientific evidence on the comparative effectiveness, safety and cost-effectiveness of medicines to update the WHO Model List of Essential Medicines and the Model List of Essential Medicines for Children.

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**Antiretroviral (ARV) Ceiling Price List**

The Clinton Health Access Initiative (CHAI), May 2011


The Clinton Health Access Initiative (CHAI), UNITAID, and the UK's Department for International Development (DFID) announced further price reductions on key antiretroviral (ARV) drug regimens used to treat HIV/AIDS in the developing world. This announcement represents the latest in a series of price reductions on ‘next-generation’ ARVs that have been accomplished through the collaborative efforts of the three organizations.
At any price? Examination of the business behavior of Boehringer Ingelheim, Bayer and Baxter in India

by Christiane Fischer, Isabelle Schulz, Heiko Zimmermann et al.
BUKO Pharma-Kampagne and Institute of Public Health (IPH), Bangalore, India, 2011

44 pp. 1.5 MB:

Bayer Health Care, Boehringer Ingelheim and Baxter in India sell many irrational preparations and offer only few essential innovations. Bayer and Boehringer Ingelheim conduct numerous clinical trials in India, but they prefer to search for new applications of their blockbusters instead of doing research in the field of neglected diseases. Especially Boehringer Ingelheim has a poor pharmaceutical portfolio with 70% of irrational drugs and no essential preparation.

Social Protection

Concept Note

22 pp. 347 kB:

A decade has passed since the World Bank introduced its Social Risk Management framework and launched its first Social Protection strategy. In order to respond more effectively to the emerging, fast-changing and challenging demands expected in the coming decade, the World Bank Group (WBG) is preparing a new Social Protection Strategy, to be finalized in December 2011. Grounded in lessons learned from the past decade, the new strategy will shape the WBG’s work in social protection for the next 10 years (2012 - 2022).

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Social Security for Social Justice and a Fair Globalization

International Labour Office Geneva, 2011

184 pp. 3.3 MB:

This report seeks to inform the debate during the 100th Session of the International Labour Conference (1-17 June, 2011) by providing: (i) an overview of the present state of social security around the world; (ii) an identification of the main social security challenges; (iii) an overview of national and ILO responses to the challenges; and (iv) suggestions for the direction of future ILO action.

* * *
**Social capital and health - implications for health promotion**

by Malin Eriksson
Global Health Action 2011, 4: 5611 (8 February 2011)


The article presents a theoretical overview of social capital and its relation to health, reviews empirical findings of the links between social capital and (self-rated) health, and discusses the usefulness of social capital in health promotion interventions at individual and community levels. Social capital, conceptualized as an individual characteristic, can contribute to the field of health promotion by adding new knowledge on how social network interventions may best be designed to meet the needs of the target group.

**Water, Sanitation & Hygiene**

**Effects of Water and Sanitation Crisis on Infants and Under-five Children in Africa**

by Onyenekenwa Cyprian Eneh


This review critically examines secondary information and data on sources of water contamination and the effects of water and sanitation crisis on infants and under-five children in Africa. Methaemoglobinemia, dehydration, malnutrition and loss of parents associated with high maternal mortality rates and water and sanitation related low life expectancy afflict children, leading to high mortality rate and morbidity of infants and under-five children. Recommendations include emphasis on preventive health care and pro-poor health policies to ensure the quality and availability of safe water.

**Human Resources**

**Rebuilding human resources for health: a case study from Liberia**

by S Tornorlah Varpilah, Meredith Safer, Erica Frenkel et al.
Human Resources for Health 2011, 9:11 (12 May 2011)


Following twenty years of economic and social growth, Liberia's fourteen-year civil war destroyed its health system, with most of the health workforce leaving the country. This paper illustrates the process, successes, ongoing challenges and current strategies Liberia has used to increase and improve human resources for health since 2006, particularly the nursing workforce. The methods used here and lessons learned might be applied in other similar settings.

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Task-Shifting in HIV Care: A Case Study of Nurse-Centered Community-Based Care in Rural Haiti

by Louise C. Ivers, Jean-Gregory Jerome, Kimberly A. Cullen et al.
PLoS ONE 6(5): e19276 (6 May 2011)

At least 36 countries are suffering from severe shortages of healthcare workers and this crisis of human resources in developing countries is a major obstacle to scale-up of HIV care. Task-shifting using a community-based, nurse-centred model of HIV care in rural Haiti is an effective model for scale-up of HIV services with good clinical and programme outcomes. Community health workers can provide essential health services that are otherwise unavailable particularly in rural, poor areas.

Health Systems & Research

Health in Brazil

The Lancet Series - launched in Brasília May 9, 2011
http://www.lancet.com/series/health-in-brazil

Brazil has made significant improvements in maternal and child health, emergency care, and in reducing the burden of infectious diseases. But the news is not all good. The country continues to have a burden of injury mortality that is different from other countries due to the large number of murders, especially using firearms. The Lancet is publishing a Series of six papers that critically examine what the country’s policies have achieved and where future challenges lie.

The Brazilian health system: history, advances, and challenges
by Jairnilson Paim, Claudia Travassos, Celia Almeida et al.

Influencing policy change: the experience of health think tanks in low- and middle-income countries

by Sara Bennett, Adrijana Corluka, Jane Doherty et al.
Health Policy Plan. (2011) - First published online: May 10, 2011

This study aimed to investigate the contribution made by health policy analysis institutes in low- and middle-income countries to health policy agenda setting, formulation, implementation and monitoring and evaluation; and assess which factors, including organizational form and structure, support the role of health policy analysis institutes in low- and
middle-income countries in terms of positively contributing to health policy.

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**An assessment of routine primary care health information system data quality in Sofala Province, Mozambique**

by Sarah Gimbel, Mark Micek, Barrot Lambdin et al.
Population Health Metrics 2011, 9:12 (13 May 2011)

29 pp. 275 kB:

Primary health care is recognized as a main driver of equitable health service delivery. For it to function optimally, routine health information systems (HIS) are necessary to ensure adequate provision of health care and the development of appropriate health policies. Concerns about the quality of routine administrative data have undermined their use in resource-limited settings. This evaluation was designed to describe the availability, reliability, and validity of a sample of primary health care HIS data from nine health facilities across three districts in Sofala Province, Mozambique.

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**Opportunities, Challenges and Good Practices in International Research Cooperation between Developed and Developing Countries**

OECD Global Science Forum, April 2011

22 pp. 3.5 MB:
http://www.oecd.org/dataoecd/40/16/47737209.pdf

This report describes issues and options that deserve the attention of scientists and administrators in industrialised countries and in developing countries, as they seek to design, initiate and manage collaborative research programmes and projects that include both scientific and development goals. The report identifies good practices and new ideas, and presents options for concrete actions.

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**Privatisation in health systems in developing countries: what’s in a name?**

by Marge Bereremail
Reproductive Health Matters; Vol. 19, Issue 37, pp. 4-9 (May 2011)

6 pp. 107 kB:
http://download.journals.elsevierhealth.com/pdfs/journals/0968-8080/PIIS0968808011375659.pdf

Given the rapid move to privatisation in so many countries, and the amount of money that is being channelled by donors into this sector in support of privatisation (non-profit or otherwise), it has been shocking to discover just how little hard evidence there is on the type and quality of health services and standards of care that exist in the private sector in the countries of these two regions. It could almost be said that the private sector is in hiding, as there is so little information about it, at least when it comes to sexual and reproductive health services, or that at best what is published about it has been written by people working in the sector who are blowing their own trumpet, claiming suc-
Using Touchscreen Electronic Medical Record Systems to Support and Monitor National Scale-Up of Antiretroviral Therapy in Malawi

by Gerald P. Douglas, Oliver J. Gadabu, Sabine Joukes et al.  

6 pp. 210 kB:  

This article describes the rationale and experience of using a touchscreen electronic medical record (EMR) system at the point-of-care to monitor and support antiretroviral therapy scale up in Malawi. The EMR eliminates the process of manual updating of paper registers and data aggregation for cohort and survival analysis reports, and produces cohort reports at the touch of a button on the screen. The publication presents a model, developed and refined in Malawi, that has the potential to improve data quality and clinical efficiency in low-resource settings by integrating EMR and monitoring and evaluation systems.

Financing Education in Sub-Saharan Africa: Meeting the Challenges of Expansion, Equity and Quality

by Michael Bruneforth, Shinsaku Nomura, Saïd O. Voffal et al.  
United Nations Educational, Scientific and Cultural Organization (UNESCO), 2011

130 pp. 8.3 MB:  

Sub-Saharan African countries increased their real expenditure on education by more than 6% each year over the past decade, according to this new report published by UNESCO. Yet despite these investments, many countries in the region are still a long way from providing every child with a good quality primary education.

* * *

Reviewing National Experiences from Chile, Indonesia, Kenya, The Netherlands and Oman

by Olivier Laboulle, Ingrid Mulà, Daniella Tilbury et al.  
United Nations Educational, Scientific and Cultural Organization (UNESCO), 2011

132 pp. 1.2 MB:  
http://unesdoc.unesco.org/images/0019/001921/192183e.pdf
Several authoritative documents recognize that sustainable development is a journey and not just a destination. Visions and plans for the future need to be negotiated across sectors, cultures and interest groups. To progress towards a more sustainable world, societies also need to learn their way out of unsustainable practices. This publication captures national journeys that promote dialogue, engagement and change for sustainable development through education and learning.

### Harm Reduction and Drug Use

**Stopping Overdose: Peer-Based Distribution of Naloxone**

Soros Open Society Foundation, Public Health Program, 2011

12 pp. 87 kB: 

Overdose is a major and often overlooked cause of death among people who inject heroin or other opioids. Yet there is a safe and effective treatment: the medication naloxone. This public health fact sheet describes how naloxone is successfully being used to reverse overdose around the world with no side effects beyond opiate withdrawal. And it explains in-depth why naloxone is an invaluable tool for empowering communities to protect their health.

### Millennium Development Goals

**Strengthening accountability to achieve the health MDGs**

by Ronald Labonté; Gill Walt; David McCoy et al.

The International Health Partnership and Related Initiatives (IHP+), 2010

46 pp. 1.9 MB: 

The International Health Partnership and Related Initiatives (IHP+) was launched in 2007 with a commitment by developing country governments and Development Partners to “work effectively together with renewed urgency to build sustainable health systems and improve health outcomes in low and middle-income countries.” This review shows a mixed picture of progress in how health sector resources are being delivered and used. However, at the same time, the report shows that it is possible for development partners and national governments to make a difference when they work together in closer partnership to implement commitments.

### Development Assistance

**Donor aid: New frontiers in transparency and accountability**

by Sarah Mulley

Open Society Foundation, 2010
Aid has enjoyed a period of sustained growth in recent years, and has become increasingly focused on development outcomes. Donors are examining their own policies and practices to ensure that aid delivers results, and are also engaging more systematically with questions of governance in the countries where they work. Transparency and accountability have emerged as key themes in both discussions, but this study focuses on the transparency and accountability of donors themselves.

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**The Money Trail: Ranking Donor Transparency in Foreign Aid**

by Anirban Ghosh and Homi Kharas  

47 pp. 328 kB:  
http://pedl.byu.edu/Documents/The%20Money%20Trail.pdf

Transparency of aid activity is being recognized to be one of the key areas whereby aid effectiveness can be improved. In this paper, the authors propose an index to measure and rank donors on the transparency of their aid activities. The Transparency Index rates 31 bilateral and multilateral donor agencies on six measures of transparency. The authors find no relationship between transparency and donor aid volumes. Overall IDA and Australia are identified as the most transparent donors, while Korea and IDB Special Fund are the least transparent.

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**Rhetoric versus Reality: The Best and Worst of Aid Agency Practices**

by William Easterly & Claudia R. Williamson  
Development Research Institute, New York University, May 2011

78 pp. 972 kB:  

This paper attempts to monitor the best and worst of aid practices among bilateral, multilateral, and UN agencies. Average performance of all agencies on transparency, fragmentation, and selectivity is still very poor. The paper also assesses trends in best practices over time – we find modest improvement in transparency and more in moving away from ineffective channels. However, we find no evidence of improvements (and partial evidence of worsening) in specialization, fragmentation, and selectivity, despite escalating rhetoric to the contrary.

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**Aid Quality and Donor Rankings**

by Stephen Knack, F. Halsey Rogers, Nicholas Eubank  

35 pp. 795 kB:  

This paper offers new measures of aid quality covering 38 bilateral and multilateral do-
The 2005 Paris Declaration on Aid Effectiveness and the follow-up 2008 Accra Agenda for Action have focused attention on common donor practices that reduce the development impact of aid. Using 18 underlying indicators that capture these practices the authors construct an overall aid quality index and four coherently defined sub-indexes on aid selectivity, alignment, harmonization, and specialization.

The Least Developed Countries: Biggest Challenges, Least Assistance?
by Shreya Mitra, Jessica Espey, Matthew Martin et al.
Save the Children UK, May 2011

Inadequate social services, weak governance, limited revenue bases and volatile economic growth - persistent economic and social challenges remain in many of the least developed countries (LDCs). International aid, on which LDCs are highly dependent, has been insufficient to help address these challenges, and all too frequently the quality of the aid received has been poor. This agenda is doubly important at a time when the aid budgets of many bilateral donors are being squeezed, and many LDCs are struggling to cope with the aftershocks of the global economic crisis.

The Future of Development Finance
by Nemat Shafik

Development finance is at a turning point. There is talk about a “triple revolution of goals, actors and tools”. As much of Asia grows its way out of poverty, aid will increasingly be focused on Africa and on countries plagued by instability, or with governments unable to meet the basic needs of their populations. The rules of the game and the tools of development assistance need to evolve to focus on transparency, results, accountability, a market-driven division of labor and flexible partnerships for the future development finance system to become an effective tool of global problem solving.

The Tunis Consensus: Targeting Effective Development
From Aid Effectiveness to Development Effectiveness
African Development Bank Group, NEPAD et al., 2011

On 4 and 5 November 2010, representatives from across Africa met in Tunis to discuss an African agenda on development effectiveness to take to the Fourth High-Level Forum in Busan (Republic of Korea) in 2011. The meeting affirmed the need
to reconfigure development partnerships to make aid less addictive. For all the importance of aid to Africa’s development, we must be able to one day leave aid behind us. Aid should be front-loaded to support Africa’s productive sector by building up infrastructure and the financial sector. The changes that result will free private enterprise to grow and generate surpluses and will enable Africa to finance its own development.

**Others**

**Chronic diseases: A clinical and managerial challenge**

HOPE - European Hospital and Healthcare Federation, October 2010


According to WHO data, on average a quarter of Europeans is affected by at least one chronic condition and care for chronic patients absorbs more than half of hospital expenditure in Europe, the improvements in eHealth and professional qualification produce positive outcomes on this increasingly heavy burden. The recent evaluation studies have proved that good responses can be found in strong prevention activities, early detection, integrated treatments, coordination between different professionals, strong commitment of providers and policy-makers and improvement in the use of health technologies and ICTs.

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**Special Report Renewable Energy Sources (SRREN)**

by Ottmar Edenhofer, Ramon Pichs-Madruga, Youba Sokona et al.

This Summary for Policymakers was formally approved at the 11th Session of Working Group III of the IPCC, Abu Dhabi, United Arab Emirates. 5-8 May 2011.


The Working Group III Special Report on Renewable Energy Sources and Climate Change Mitigation (SRREN) presents an assessment of the literature on the scientific, technological, environmental, economic and social aspects of the contribution of six renewable energy (RE) sources to the mitigation of climate change. It is intended to provide policy relevant information to governments, intergovernmental processes and other interested parties. This Summary for Policymakers provides an overview of the SRREN, summarizing the essential findings.


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**How to promote healthy behaviours in patients? An overview of evidence for behaviour change techniques**

by Theo van Achterberg, Getty G. J. Huisman-de Waal, Nicole A. B. M. Ketelaar et al.

Health Promotion International, Vol. 26 No. 2 (June 2011)

Healthy behaviours may reduce or prevent morbidity and mortality. Yet unhealthy habits are highly prevalent. Health professionals should avoid thinking that providing knowledge, materials and professional support will be sufficient for patients to accomplish change and consider alternative strategies which may be more effective. The objective of this study was to identify the evidence for the effectiveness of behaviour change techniques, when used by healthcare professionals, in accomplishing health-promoting behaviours in patients as described in systematic reviews.

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**Global Plan for the Decade of Action for Road Safety 2011-2020**

Laura Sminkey
Liaison Officer, Secretariat, Decade of Action, World Health Organization, 2011

The UN Road Safety Collaboration has developed a Global Plan for the Decade of Action for Road Safety 2011-2020. The Plan provides an overall framework for activities which may take place in the context of the Decade. The categories or “pillars” of activities are: building road safety management capacity; improving the safety of road infrastructure and broader transport networks; further developing the safety of vehicles; enhancing the behaviour of road users; and improving post-crash care.

**ELECTRONIC RESOURCES**

**Follow and participate in the 64th World Health Assembly on the WHO Watchportal**

http://www.ghwatch.org/who-watch/WHA64

The WHA Watch Portal is now open for business. The Agenda of the World Health Assembly is demystified with links to official papers and to more critical commentary. Over the next weeks additional commentary will appear, reports of discussion at the WHA and a lively open comment space will operate.

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**Global Health Observatory**

http://www.who.int/research/en/

Global Health Observatory is a major milestone based on WHO's collective work over the last years, with now over 50 databases and analyses and more than 800 indicators easily accessible through a single entry point from the above URL.

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Medicines Patent Pool Newsletter

The Medicines Patent Pool is working to make affordable, appropriate HIV medicines available to those that need them in developing countries by negotiating licences from medicines patent holders such as drug companies and research institutes. This exciting new project, founded with the support of financing mechanism UNITAID, aims to bring down the prices of HIV drugs and encourage the development of desperately needed new treatments - like formulations for children.

To get all the latest news from the Pool, subscribe to the newsletter by clicking here: http://www.medicinespatentpool.org/newsletter/register_subscription/1

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EpiNorth Journal No. 4, Vol. 11, 2010


It is published in English and Russian four times a year and contains:

- Editorial: Trends in HIV-infection and AIDS in Europe and EpiNorth Network Countries, 2009
- Spread of HIV Infection in Leningrad Oblast During 1999-2009
- Knowledge and Attitudes Towards HIV/AIDS and Risk Behaviour of Lithuanian Secondary School and College Students
- Prolonged Viral Excretion in Faeces Among Patients With Hepatitis A

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International Human Development Indicators


In a move to provide greater global access to key human development indicators for all countries, Google’s innovative Public Data Explorer will now feature the latest Human Development Index (HDI) figures and direct links to the extensive Human Development Report database of international development statistics.

INTERESTING WEB SITES

EQUATOR Network

http://www.equator-network.org/

The EQUATOR Network (Enhancing the QUAlity and Transparency Of health Research) is an international initiative that seeks to improve the reliability and value of medical research literature by promoting accurate and transparent reporting of health research studies. The network is aimed at scientists, medical and student researchers, editors and peer reviewers.

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Admitting Failure
by Engineers Without Borders, Canada

http://www.admittingfailure.com/

This site is an open space for development professionals who recognize that the only “bad” failure is one that’s repeated. Those who are willing to share their missteps to ensure they don’t happen again. It is a community and a resource, all designed to establish new levels of transparency, collaboration, and innovation within the development sector.

Get involved – share failures, build knowledge and encourage others to do the same – so we all benefit, today.

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Open Knowledge Foundation - Germany

http://okfn.de/about/

Open Knowledge Foundation - Germany (OKF DE) promotes the release, use and re-use of open knowledge from various domains, in particular that of government data. They work on technologies that enable greater transparency in public life and new spaces for citizen participation. OKF DE combines expertise from various disciplines and institutions such as academia, civil society, private business, and public sector among others. This interdisciplinary approach enables OKF to work on complex topics and find easy solutions for citizens to achieve an open government in Germany.

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Open for Change

http://openforchange.info/

Open for Change is the Dutch Network for transparency, collaboration, and impact in development. It is a joint effort of numerous Dutch organizations, and hosted by Partos, the Dutch association of private international aid organizations. Open for Change is both the playground for innovation as well as a source of knowledge and experiences. The aim is to increase access to data, knowledge and software applications within the global development sector.

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The Public Health Association of South Africa (PHASA)

http://www.phasa.org.za/

The Public Health Association of South Africa (PHASA) represents the interests of the public health community in South Africa. It promotes greater equity in health for all South Africans by advocating equitable access to effective health care and the basic conditions necessary to achieve health.

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The Transparency and Accountability Initiative (T/A Initiative)

http://www.transparency-initiative.org/
The Transparency and Accountability field is one of the fastest growing public movements of recent years. It brings together a wide range of organisations and projects aimed at promoting greater openness on the part of governments, companies and other institutions so that the public can hold them to account. T/A Initiative aims to seize on this momentum by supporting policy change and encouraging all those working in this field to learn from their successes and failures so that they can have greater impact in the future.

TRAINING OPPORTUNITIES

**Quality Management in International Health**
4 - 15 July, 2011
Universitätsklinikum Heidelberg, Heidelberg, Germany

Course Content: General principles and frameworks for defining and promoting the quality of health systems and services including processes, models and tools for assuring and evaluating quality.

Target Audience: Public health professionals, project planners and managers, paramedical staff, social scientists.
Language: English
Fees: EUR 1,500

Entry Requirements: Minimum of 2 years experience in public health.
For more information contact:
Natascha Petersen
Tel.: +49-6221-56-5048
Fax: +49-6221-56-4918
mailto:petersen@uni-hd.de
or see: [http://www.klinikum.uni-heidelberg.de/QualManagement.8021.0.html](http://www.klinikum.uni-heidelberg.de/QualManagement.8021.0.html)

For more courses and conferences see also: [http://www.going-international.at/index.php?lang=EN](http://www.going-international.at/index.php?lang=EN)

**Procurement and Quantification Management of Medicines and Medical Supplies**
3 - 8 July 2011, The Netherlands

Today, there are many challenges presented by the increasing number of stakeholders in the health sector especially in developing countries. These challenges range from different funding mechanism to reporting requirements, and influence the quantification and subsequent procurement of medicines and medical supplies. This course addresses the major challenges faced during quantification and procurement and aims at building participants’ capacity to manage the quantification and procurement processes in a multi-stakeholder environment.

For more information see: [http://www.iplussolutions.org/index.php?id=46&language=EN](http://www.iplussolutions.org/index.php?id=46&language=EN)
**Advanced Short Course on Monitoring and Evaluation for Health**

22 August - 2 September 2011, Amsterdam, Netherlands

Learn more about the latest developments in monitoring and evaluation and explore its essential role in health systems strengthening in developing countries in this new 2-week course held at the Royal Tropical Institute in Amsterdam (KIT).

For more information see:

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**CONFERENCES**

**1st Africa Regional Conference on TB Pharmaceutical Management**

Fighting Drug-Resistant TB in the 21st Century: Novel Approaches to Pharmaceutical Management

July 19-21, 2011, Johannesburg, South Africa

The conference’s objective is the identification of specific actions the region can take to ensure universal access to quality TB medicines and commodities and contain drug resistance through their appropriate use. In addition, participants will learn how to use modern technologies, frameworks, best practices, and new TB tools to strengthen TB pharmaceutical management systems.

For more information visit the conference site: [http://africatb2011.wordpress.com](http://africatb2011.wordpress.com)

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**The Science behind Malaria Control and Eradication**

July 31 - August 5, 2011
Il Ciocco Hotel and Resort, Lucca (Barga), Italy

Speakers at the conference will highlight the latest advances in malaria epidemiology, mathematical modelling, immunology, parasitology, vector biology, genomics and systems biology, and the ensuing discussions will consider the relevance of these advances to malaria control. New scientific developments will also be shared through the use of featured poster sessions, and talks selected from submitted abstracts.

For more information see:

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**7th European Congress on Tropical Medicine and International Health**

3 - 6 October 2011, Barcelona, Spain

Federation of European Societies for Tropical Medicine and International Health (FESTMIH) - Thirteen European countries are currently represented on the Federation Council by their respective Societies.
The congress will include traditional aspects of Tropical Medicine seen through health research and patient care developed by European institutions and their partners. But this time the congress will place more emphasis on new concepts and practices on Global Health under the motto “Global Change, Migration and Health”.


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*Reforming Social Protection Systems in Developing Countries - Determinants and Strategies of Institutional Change*

20 - 21 October 2011, Bochum, Germany

Convened by the Institute of Development Research and Development Policy (IEE) at the Ruhr-University of Bochum together with the Sector Initiative on Social Protection Systems at GIZ

The conference aims at analyzing ongoing reforms of social protection systems in developing countries from both a political economy and legal point of view.

Please find the call for papers (3 pp. 111 kB) at: [http://www.social-protection-conference.com/dokumente/call_for_papers.pdf](http://www.social-protection-conference.com/dokumente/call_for_papers.pdf)

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*Leveraging Agriculture for Improving Nutrition and Health*

Highlights from an International Conference, 10-12 February 2011
New Delhi, India, International Food Policy Research Institute (IFPRI)


In February 2011, about 1,000 people came together at a conference in New Delhi to think through the interactions among agriculture, nutrition, and health and consider ways to exploit them to improve human nutrition and health. Participants helped clarify what is known about the links among the three sectors, what is not known, and where opportunities for leveraging agriculture for nutrition and health may lie.

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TIPS & TRICKS

Quick Access to Network Connections

Despite making networking generally easier in Windows Vista, Microsoft has made it (for reasons known only to them) very difficult to get to your network connections. In the Start Menu Search box (or Run dialog - Win Key + R), type ncpa.cpl and press ‘Enter’ and there you are!

* * *

“No To All” when Overwriting Files

Have you ever been doing something in Windows that involved multiple files? When overwriting files in the Windows Explorer, there is an option for “Yes To All”. This would overwrite any files you would normally be prompted for.

While there is the option for “Yes to All”, there is no button for “No to All”. To have “No To All”, simply hold down the Shift key while you click on the “No” option.

Best regards,

Dieter Neuviens MD

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