Table of Contents:

BOOKS ................................................................................4
The Global Gender Gap Report 2011 .................................................................4
Health at a Glance 2011 ....................................................................................4
Health at a Glance: Europe 2010 .......................................................................4
The State of Men’s Health in Europe - Extended Report .................................4
Governing public hospitals: Reform strategies and the movement towards institutional autonomy.............................................................5
Rethinking Development Strategies in Africa: The Triple Partnership as an Alternative Approach - The Case of Uganda .................................................................5

ONLINE PUBLICATIONS ....................................................5
Global Health................................................................................................................ 5
Global Fund cancels funding......................................................................................5
Should we call it murder? - On the Gutting of the Global Fund .......................6
The U.S. Commitment to Global Health: Recommendations for the Public and Private Sectors ........................................................................................................6
Center for Health Market Innovations - Highlights 2011 .................................7
HIV - AIDS - STI ........................................................................................................ 7
Voluntary Medical Male Circumcision for HIV Prevention: The Cost, Impact, and Challenges of Accelerated Scale-Up in Southern and Eastern Africa ..................................................7
Global AIDS Response Progress Reporting 2012 ..............................................8
A New Investment Framework for the Global HIV Response ..............................8
HIV Prevention in Generalised Epidemics: Optimal Interventions for Global Fund Applications..................................................................................................................9
Testing for Recent Infection to Estimate HIV Incidence from Single Cross-Sectional Surveys ..............................................................................................................9
Interventions to increase antiretroviral adherence in sub-Saharan Africa: a systematic review of evaluation studies .................................................................9
Infant Feeding in the context of HIV in South Africa: Questions & Answers ..........10
Guideline on HIV disclosure counselling for children up to 12 years of age ..10

Sexual & Reproductive Health ............................................................................ 10
World Fertility Report: 2009.................................................................................10
An Exploratory Study of the Social Contexts, Practices and Risks of Men Who Sell Sex in Southern and Eastern Africa ........................................................................10
Maternal & Child Health .....................................................................................11
Delivering Cervical Cancer Prevention in the Developing World.......................11
Challenge and Change: Integrating the Challenge of Gender Norms and Sexuality in a Maternal Health Program.................................................................................11
Effectiveness of strategies incorporating training and support of traditional birth attendants on perinatal and maternal mortality: meta-analysis ................................................................. 11
A review of health system infection control measures in developing countries: what can be learned to reduce maternal mortality, .......................................................... 12
Cost effectiveness of child pneumococcal conjugate vaccination in GAVI-eligible countries .......................................................... 12
Cost effectiveness of child pneumococcal conjugate vaccination in middle-income countries .......................................................... 12
Malaria............................................................................................................................................. 13
A Head-to-Head Comparison of Four Artemisinin-Based Combinations for Treating Uncomplicated Malaria in African Children: A Randomized Trial ........................................ 13
Use of a pLDH-based dipstick in the diagnostic and therapeutic follow-up of malaria patients in Mali ........................................................................................................................................ 13
I can change it! Advocacy Guide for Young Campaigners .......................................................... 13
Tuberculosis ................................................................................................................................... 14
Simple Rapid Near-Patient Diagnostics for Tuberculosis Remain Elusive - Is a “Treat-to-Test” Strategy More Realistic? .......................................................................................... 14
ART and TB prevention .................................................................................................................. 14
Other Infectious Diseases .................................................................................................................. 14
Pneumonia Progress Report 2011 ................................................................................................. 14
A Google Earth-based surveillance system for schistosomiasis japonica implemented in the lower reaches of the Yangtze River, China .......................................................................................... 15
Essential Medicines .......................................................................................................................... 15
List of Essential Medicines for Children of India ........................................................................ 15
DOHA+10 - Trips Flexibilities and Access to Antiretroviral Therapy: Lessons from the Past, Opportunities for the Future .......................................................................................... 15
Social Protection ............................................................................................................................... 16
Conditional Cash Transfer Programmes: The recent experience in Latin America and the Caribbean ........................................................................................................................................ 16
Bolsa Familia and the Citizen’s Basic Income: A Misstep? ................................................................ 16
Social Security Programs throughout the World: Africa, 2011...................................................... 16
Social determinants of health: The role of social protection in addressing social inequalities in health................................................................................................................................. 17
If gender ‘makes development and economic sense’, why is social protection gender-blind? The politics of gender and social protection ........................................................................................................ 17
Third-party payment mechanisms in health microinsurance: Practical tips and solutions .... 18
Rethinking cash transfers to promote maternal health: good practice from developing countries ........................................................................................................................................ 18
Water, Sanitation & Hygiene ........................................................................................................... 18
Off-track, off-target: Why investment in water, sanitation and hygiene is not reaching those who need it most ......................................................................................................................................... 18
Pathways to Progress: Transitioning to Country-Led Service Delivery Pathways to Meet Africa’s Water Supply and Sanitation Targets ............................................................................ 19
Human Resources ............................................................................................................................. 19
Governance and human resources for health ................................................................................... 19
The WHO Global Code of Practice on the International Recruitment of Health Personnel: The Evolution of Global Health Diplomacy .................................................................................. 20
Convincing health workers to work in rural areas ........................................................................... 20
Exploring the Human Resources for Health Landscape for Adult Male Circumcision Rollout in Four Districts in Nyanza Province, Kenya .................................................................................. 20
Health Systems & Research ............................................................................................................ 21
International Profiles of Health Care Systems 2011 .................................................................... 21
Joint Mapping Modelling for Multiple Health Problems in South Africa ........................................ 21
Information & Communication Technology ..................................................................................... 21
A Doctor in Your Pocket: Health Hotlines in Developing Countries ......................................... 21
A web-based appointment system to reduce waiting for outpatients: A retrospective study 22
IT Sector Promotion in Developing and Emerging Countries ...................................................... 22
Education .......................................................................................................................................... 22
UNESCO and Education: Everyone has the right to education ...................................................... 22
Harm Reduction and Drug Use ........................................................................................................... 23
Women & Smoking: Becoming Part of the Solution ..............................................................23
Alcohol: Ongoing Efforts to Reduce Harmful Consumption ..............................................23
Millennium Development Goals .................................................................................. 23
After the MDGs – what then? ....................................................................................... 23
Development Assistance ............................................................................................... 24
Busan has been an expression of shifting geopolitical realities........................................ 24
Brave New World: A Literature Review of Emerging Donors and the Changing Nature of
Foreign Assistance ......................................................................................................... 24
Development cooperation beyond the aid effectiveness paradigm: A women’s rights
perspective ...................................................................................................................... 24
What if development aid were truly ‘catalytic’? ............................................................... 25
Others ......................................................................................................................... 25
Gender, work and health .............................................................................................. 25
Transport (Road Transport): Shared Interests in Sustainable Outcomes ........................ 26
The OECD Environmental Outlook to 2050 (forthcoming, 2012): Key Findings on Climate
Change .......................................................................................................................... 26

ELECTRONIC RESOURCES .................................................................................. 26
New mobile application: Application for Contraceptive Eligibility (ACE) for Android 2011 ... 26
Gateways: International Journal of Community Research and Engagement Vol. 4 (2011) . 27
Bulletin of the World Health Organization Vol. 89, Nr. 12, December 2011 ..................... 27
Eurohealth Volume 17, Number 4, 2011 ........................................................................ 28

INTERESTING WEB SITES .................................................................................. 28
Action: Social Determinants of Health (SDH) ................................................................. 28
Electronic Information for Libraries (EIFL) ............................................................... 28
Sharing in Health - Open Access Training in Health Care ............................................. 28

TRAINING OPPORTUNITIES ............................................................................ 29
Master of Science and Short Courses in International Health at Heidelberg University,
Germany- Schedule 2012 ............................................................................................. 29

CONFERENCES ............................................................................................... 29
Healthcare in Africa ................................................................................................. 29
3rd People’s Health Assembly ..................................................................................... 29
AIDS 2012 - XIX International AIDS Conference ...................................................... 30

CARTOON .......................................................................................................... 30

TIPS & TRICKS ................................................................................................. 30
Virtual Wi-Fi Networks in Windows 7 ........................................................................... 30
Browser Keyboard Shortcuts ....................................................................................... 31

Fair Use:
This Newsletter is produced under the principles of ‘fair use’. We source relevant news articles, resources and research
documents and strive to attribute sources by providing reference and/or direct links to authors and websites.

Disclaimer:
The views expressed in this newsletter do not necessarily represent those of GIZ or the editor of HESP-News & Notes.
While we make every effort to ensure that all facts and figures quoted by authors are accurate, GIZ and the editor of the
Newsletter cannot be held responsible for any inaccuracies contained in any articles. Please contact dneuvians@gmx.de
if you believe that errors are contained in any article and we will investigate and provide feedback.
BOOKS

The Global Gender Gap Report 2011

by Ricardo Hausmann, Laura D. Tyson, Saadia Zahidi
World Economic Forum, Geneva, Switzerland, 2011

375 pp. 2.3 MB:

According to this new global report many of the world’s women are moving closer to
gender equality, but substantial gaps remain between men and women in health, educa-
tion and, particularly, political and economic participation in a number of countries, in-
cluding some of the most developed ones.

* * *

Health at a Glance 2011

Organisation for Economic Co-Operation and Development (OECD)
November 2011

204 pp. 4.4 MB:

Health at a Glance 2011 presents comparisons of key indicators of
health and health systems across the 34 OECD countries, as well as for some major
non-OECD economies. It provides striking evidence of large variations across countries
in indicators of health status and health risks, as well as in the inputs and outputs of
health systems.

* * *

Health at a Glance: Europe 2010

Organisation for Economic Co-Operation and Development (OECD)
2010

130 pp. 6.9 MB:

This first edition of Health at a Glance: Europe presents a set of key indicators on health
and health systems across 31 countries. In addition, the publication provides detailed in-
formation on health expenditure trends across countries, building on the OECD’s estab-
lished expertise in this area. This publication is a concrete example of the long and fruitful
collaboration between the OECD and the European Commission in the development
and reporting of health statistics.

* * *

The State of Men’s Health in Europe - Extended Report

by Alan White, Bruno de Sousa, Richard de Visser et al.
European Union, 2011

407 pp. 6.6 MB:
http://ec.europa.eu/health/population_groups/docs/men_health_extended_en.pdf
This report highlights the broad range of mortality and morbidity data arising from the many different health conditions which affect men in Europe. The authors rehearse the familiar problems of earlier deaths, unhealthy lifestyles, and low uptake of services. But they show that the health gap between men and women varies widely (being worse in Eastern Europe and among men in poorer social conditions), which suggests that the differences are not immutable. The authors want action in schools to challenge harmful gender stereotypes and describe initiatives in workplaces that help men access health services.

* * *

**Governing public hospitals: Reform strategies and the movement towards institutional autonomy**

Edited by Richard B. Saltman Antonio Durán Hans F.W. Dubois
European Observatory on Health Systems and Policies, 2011

278 pp. 1.1 MB: [http://www.euro.who.int/__data/assets/pdf_file/0017/154160/e95981.pdf](http://www.euro.who.int/__data/assets/pdf_file/0017/154160/e95981.pdf)

This book explores key developments in public hospital governance in Europe. In doing so, it highlights the central role of hospital-level decision-making and how it is shaped by the various participants and stakeholders. In particular, it examines the degree to which granting an individual hospital the ability to make its own strategic, financial and clinical decisions - to become semi-autonomous within the public sector - may improve institutional-level functioning and outcomes.

* * *

**Rethinking Development Strategies in Africa: The Triple Partnership as an Alternative Approach - The Case of Uganda**

by Johnson W. Makoba
Africa in Development, Vol. 5
Oxford, 2011; 269 pp. ISBN 978-3-03911-948-6; € 44.00

The author focuses on how development-oriented non-governmental organizations (NGOs) and microfinance institutions (MFIs) are suited to the dual development process of improving the wellbeing and empowerment of the poor and other marginalized peoples (especially women) in Africa and other developing countries, focusing on Uganda. NGOs and MFIs are seen as a third approach (i.e. an alternative to state or market strategies) to achieving sustainable development and poverty reduction.

**ONLINE PUBLICATIONS**

**Global Health**

**Global Fund cancels funding**

Integrated Regional Information Networks (IRIN) PlusNews - Global HIV/AIDS news and analysis, 24 November 2011

The Global Fund to Fight HIV, Tuberculosis (TB) and Malaria has cancelled its next round of funding and cut off countries like Russia, China and Brazil after donors failed to deliver US$ 2.2 billion in previously committed funding. Emergency funding measures will now be put in place for some countries.

The Global Fund board took the difficult decision of cancelling Round 11 at its latest meeting, which concluded on 22 November in Accra, Ghana. A reduced pool of eligible countries will now be able to apply for new funding only after the Fund’s next disbursement in 2014.

A Transitional Funding Mechanism has been established to provide emergency relief to current recipients who will run out of money before 2014. But this will apply only to essential services such as HIV treatment and care, according to a statement issued by the Fund.

**Should we call it murder? - On the Gutting of the Global Fund**

Remarks by Stephen Lewis, Co-Director of AIDS-Free World, delivered at a colloquium hosted by Yale University’s Global Health Leadership Institute and the Yale School of Public Health in New Haven, CT, on November 28, 2011.


The Global Fund to Fight AIDS, Tuberculosis and Malaria has been the international financial armada in the battle against the three diseases. The collapse of the next round of Global Fund grants, known as Round 11, is the most serious, catastrophic setback in the Fund’s decade of existence. Hiding behind the banner of the financial crisis, the donor countries have clearly decided that if budgetary cuts are to be made, the Global Fund can be among the first to go.

**The U.S. Commitment to Global Health: Recommendations for the Public and Private Sectors**

Committee on the U.S. Commitment to Global Health, Board on Global Health; The National Academies Press, 2009

296 pp. 2.6 MB: http://download.nap.edu/cart/download.cgi?&record_id=12642&free=1

While the United States has made a major commitment to global health, there remains a wide gap between existing knowledge and tools that could improve health if applied universally, and the utilization of these known tools across the globe. The book concludes that the U.S. government and U.S.-based foundations, universities, nongovernmental organizations, and commercial entities have an opportunity to improve global health.
The Center for Health Market Innovations (CHMI) was established in 2010 to accelerate innovative health initiatives around the world by informing and connecting program managers, funders, researchers, and policy makers who strive to create better health markets for the poor. CHMI works through a network of in-country partners to identify, document, and promote the diffusion of Health Market Innovations. These are promising programs and policies - implemented by governments, non-governmental organizations (NGOs), social entrepreneurs, or private companies - that have the potential to improve the way health markets operate for the poor.

**HIV - AIDS - STI**

**Voluntary Medical Male Circumcision for HIV Prevention: The Cost, Impact, and Challenges of Accelerated Scale-Up in Southern and Eastern Africa**

A UNAIDS and PEPFAR Collection, November 2011


This collection of nine new articles highlights how scaling up voluntary medical male circumcision (VMMC) for HIV prevention in eastern and southern Africa can help prevent HIV, not only at individual but also at community and population level, as well as leading to substantial cost savings for countries as a result of averted treatment and care costs.

***


Joint United Nations Programme on HIV/AIDS (UNAIDS), November 2011


The report shows that 2011 was a game changing year for the AIDS response with unprecedented progress in science, political leadership and results. It also shows that new HIV infections and AIDS-related deaths have fallen to the lowest levels since the peak of the epidemic. New HIV infections were reduced by 21% since 1997, and deaths from AIDS-related illnesses decreased by 21% since 2005. However, the number of new HIV infections continues to rise in Eastern Europe and Central Asia, Oceania and Middle-East and North Africa, while it has remained stable in other regions of the world.

***
Global AIDS Response Progress Reporting 2012
Construction of Core Indicators for monitoring the 2011 Political Declaration on HIV/AIDS

Joint United Nations Programme on HIV/AIDS (UNAIDS), 2011

164 pp. 842 kB:

The guidelines outline a set of core global indicators designed to help countries assess the current state of their national AIDS response and progress made in achieving their national HIV targets. They will contribute to a better understanding of the global AIDS response, including progress towards meeting the global targets set in the 2011 Political Declaration as well as the Millennium Development Goals.

* * *

Progress report 2011

WHO, UNICEF and UNAIDS, November 2011

229 pp. 3.2 MB:

This publication documents the extraordinary progress achieved over the past decade in the health sector response to HIV. It shows that increased access to HIV services resulted in a 15% reduction of new infections over the past decade and a 22% decline in AIDS-related deaths in the last five years. While there is still much to be done, 2011 was a game changing year, in terms of current progress and innovations creating hope for substantial future advances. This progress demonstrates how countries can surmount seemingly intractable health and development challenges through commitment, investment and collective action.

* * *

A New Investment Framework for the Global HIV Response

Joint United Nations Programme on HIV/AIDS (UNAIDS), October 2011

10 pp. 342 kB:

Over the past 30 years there have been tremendous gains in the global HIV response, but until now there has been only limited systematic effort to match needs with investments. The result is often a mismatch of the two, and valuable resources are stretched inefficiently across many objectives. To achieve an optimal HIV response, countries and their international partners must adopt a more strategic approach to investments.

* * *
**HIV Prevention in Generalised Epidemics: Optimal Interventions for Global Fund Applications**

Recommendations for a Public Health Approach

by Rachel Baggaley, Ying-Ru Lo, Chris Duncombe et al.
World Health Organization, 2011


This document is designed to help countries with generalized epidemics to be more strategic and focused in the development of national HIV prevention plans. It aims to assist with the first step in developing a prevention plan for a country, for example when planning a National Strategy Application (NSA) within the framework of a country’s national HIV/AIDS strategy. The document prioritizes approaches that are evidence-based, inline with the investment framework, appropriate, and meet the needs of the general population as well as being relevant for most-at-risk groups.

* * *

**Testing for Recent Infection to Estimate HIV Incidence from Single Cross-Sectional Surveys**

by Reshma Kassanjee
South African Centre for Epidemiological Modelling and Analysis (SACEMA) Quarterly, November 2011


In recent years, there has been considerable interest in estimating HIV incidence from single cross-sectional surveys testing for ‘recent infection’ through laboratory-measured host or viral biomarkers. In a survey, the sizes of the HIV-negative, ‘recently infected’ and ‘non-recently infected’ populations can be measured, and incidence estimated using knowledge of the dynamics of the ‘recent infection’ biomarker. However, two key obstacles to cross-sectional biomarker-based incidence surveillance remain: the lack of standardisation of terminology and methodology, and poor characteristics, and characterisation, of currently available tests.

* * *

**Interventions to increase antiretroviral adherence in sub-Saharan Africa: a systematic review of evaluation studies**

by Till Bärnighausen, Krisda Chaiyachati, Natsayi Chimbindi et al.
The Lancet Infectious Diseases, Vol. 11, Issue 12, pp. 942-951, December 2011

10 pp. 144 kB: [http://download.thelancet.com/pdfs/journals/laninf/PIIS1473309911701815.pdf](http://download.thelancet.com/pdfs/journals/laninf/PIIS1473309911701815.pdf)

The success of potent antiretroviral treatment for HIV infection is primarily determined by adherence. Evidence suggests that treatment supporters, directly observed therapy, mobile-phone text messages, diary cards, and food rations can effectively increase adherence in sub-Saharan Africa. However, some interventions are unlikely to have large or lasting effects, and others are effective only in specific settings.
Infant Feeding in the context of HIV in South Africa: Questions & Answers

Produced by the Yezingane Network and UNICEF, December 2010, updated July 2011


This handbook is designed to answer frequently asked questions (FAQs) about infant feeding in the context of HIV. Beginning with the World Health Organization (WHO) definition of exclusive breastfeeding (giving the baby no food or drink - not even water - other than breastmilk), the FAQs section provides basic information about breastfeeding and breastfeeding with HIV.

* * *

Guideline on HIV disclosure counselling for children up to 12 years of age

by Beatrice Krauss, Susan Letteney, Anniek De Baets et al.
World Health Organization, November 2011


This guidance is intended as part of a comprehensive approach to ensuring child well-being - that is, the physical, emotional, cognitive and social well-being of the developing child - following the child’s own diagnoses of HIV or that of a parent or close caregiver. Disclosure is crucial to the continuum of HIV care. There is evidence of health benefit (e.g. reduced risk of death) and little evidence of psychological or emotional harm from disclosure of HIV status to HIV-positive children.

* * *

World Fertility Report: 2009

United Nations Department of Economic and Social Affairs (DESA), Population Division, November 2011


This report is the third in the series of World Fertility Reports and it provides the factual basis for the analysis of reproductive behaviour worldwide. It discusses levels and trends of fertility, the timing of childbearing, marriage, contraceptive use and national policies with respect to fertility and childbearing for 196 countries or areas.

* * *

An Exploratory Study of the Social Contexts, Practices and Risks of Men Who Sell Sex in Southern and Eastern Africa

by Paul Boyce and Gordon Isaacs - Oxfam GB, 2011
This research presented explored the social contexts, life experiences, vulnerabilities and sexual risks experienced by men who sell sex in Southern and Eastern Africa, with a focus on five countries; Kenya, Namibia, South Africa, Uganda and Zimbabwe. It sought to better understand differing and similar socio-cultural scenarios and personal life stories of male sex workers in these countries.

Maternal & Child Health

Delivering Cervical Cancer Prevention in the Developing World

by Sarah Goltz, Dr. Aoife Kenny, Kristin Rosella
WOMEN DELIVER, 2011

10 pp. 1.7 MB:

The report highlights exciting new partnerships and innovations in cervical cancer prevention and treatment. It includes profiles of success in increasing access to HPV vaccines and treatment from around the world, with country spotlights on Mexico, Thailand, Bolivia and Rwanda. All of these countries have distinguished themselves as pioneers in ensuring that girls and women have information on and access to the services they need to detect, prevent and treat cervical cancer.

* * *

Challenge and Change: Integrating the Challenge of Gender Norms and Sexuality in a Maternal Health Program

Cooperative for Assistance and Relief Everywhere (CARE) and International Center for Research on Women (ICRW), 2010

28 pp. 1.3 MB:

This is the story of CARE’s and ICRW’s novel effort to improve MNH in the Indian state of Uttar Pradesh by fully integrating existing state-of-the-art health interventions with new activities designed to address some basic underlying causes of poor health – namely, discrimination based on gender and sexuality.

* * *

Effectiveness of strategies incorporating training and support of traditional birth attendants on perinatal and maternal mortality: meta-analysis

by Amie Wilson, Ioannis D Gallos, Nieves Plana et al.
BMJ 2011; 343 (1 December 2011)

10 pp. 835 kB:
http://www.bmj.com/highwire/filestream/547598/field_highwire_article_pdf/0.pdf
The authors selected randomised and non-randomised controlled studies with outcomes of perinatal, neonatal, and maternal mortality. They conclude that perinatal and neonatal deaths are significantly reduced with strategies incorporating training and support of traditional birth attendants.

* * *

**A review of health system infection control measures in developing countries: what can be learned to reduce maternal mortality**

by Julia Hussein, Dileep V Mavalankar, Sheetal Sharma et al.
Globalization and Health 2011, 7:14

9 pp. 243 kB: [http://www.globalizationandhealth.com/content/pdf/1744-8603-7-14.pdf](http://www.globalizationandhealth.com/content/pdf/1744-8603-7-14.pdf)

This article reviews health system infection control measures pertinent to labour and delivery units in developing country health facilities. Organizational improvements, training, surveillance and continuous quality improvement initiatives, used alone or in combination have been shown to decrease infection rates in some clinical settings. A health systems approach is necessary to reduce maternal mortality and the occurrence of infections resulting from childbirth. Organizational and behavioral change underpins the success of infection control interventions.

* * *

**Cost effectiveness of child pneumococcal conjugate vaccination in GAVI-eligible countries**

by Azadeh Tasslimi, Mari M. Nakamura, Orin Levine et al.
International Health 2011 (In press)


Policy-makers increasingly rely on cost-effectiveness analysis, in addition to clinical effectiveness, when considering the introduction of new childhood vaccines. A previous analysis determined vaccination of infants with 7-valent pneumococcal conjugate vaccine (PCV) to be highly cost effective in preventing child mortality in countries eligible for financial support from the Global Alliance for Vaccines and Immunization (GAVI). The authors estimate that two pneumococcal vaccines being introduced in the world’s poorest countries with support from the GAVI Alliance could save the lives of three to four million children over the next 10 years.

* * *

**Cost effectiveness of child pneumococcal conjugate vaccination in middle-income countries**

by Mari M. Nakamura, Azadeh Tasslimi, Tracy A. Lieu et al.
International Health - published online 11 November 2011

12 pp. 426 kB: [http://download.journals.elsevierhealth.com/pdfs/journals/1876-3413/PIIS1876341311000726.pdf](http://download.journals.elsevierhealth.com/pdfs/journals/1876-3413/PIIS1876341311000726.pdf)

Regarding middle-income countries the authors conclude that vaccination would be cost effective for 72 countries with the 7-valent vaccine and for all countries with the 10- or
13-valent vaccines. The economic case for vaccination is compelling for middle-income countries.

### Malaria

**A Head-to-Head Comparison of Four Artemisinin-Based Combinations for Treating Uncomplicated Malaria in African Children: A Randomized Trial**

by The Four Artemisinin-Based Combinations (4ABC) Study Group


16 pp. 826 kB:  

Artemisinin-based combination therapies (ACTs) are the mainstay for the management of uncomplicated malaria cases. This large head-to-head comparison of most currently available ACTs in sub-Saharan Africa showed that artemether-lumefantrine (AL), amodiaquine-artesunate (ASAQ), and dihydroartemisinin-piperaquine (DHAPQ) had excellent efficacy, up to day 63 post-treatment. The risk of recurrent infections was significantly lower for DHAPQ, followed by ASAQ and then AL, supporting the recent recommendation of considering DHAPQ as a valid option for the treatment of uncomplicated *P. falciparum* malaria.

* * *

**Use of a pLDH-based dipstick in the diagnostic and therapeutic follow-up of malaria patients in Mali**

by Amed Ouattara, Safiatou Doumbo, Renion Saye et al.

Malaria Journal 2011, 10:345 (24 November 2011)

31 pp. 210 kB:  
[http://www.malariajournal.com/content/pdf/1475-2875-10-345.pdf](http://www.malariajournal.com/content/pdf/1475-2875-10-345.pdf)

This multicentre study included 725 patients simultaneously screened with the Rapid Diagnostic Test “OptiMal-IT” and thick smears for malaria parasite detection. OptiMal-IT revealed similar results when compared to microscopy which is considered the gold standard for malaria diagnostics. The test was found to have a short processing time and was easier to use. These advantages may improve malaria case management by providing a diagnostic and drug efficacy follow-up tool to peripheral health centres with limited resources.

* * *

**I can change it! Advocacy Guide for Young Campaigners**

by Antje Mangelsdorf, and Tanja Beck

STOP MALARIA NOW! 2011

21 pp. 1.6 MB:  

This guide offers you the possibility to be part of the global fight against malaria. In this guide you can learn more about the tropical disease malaria, its vectors, and the meth-
It offers guidelines that will help you to identify the activity you can do, as well as explanations and practical examples that show you how to do it. The guide directs you through the process of advocacy work and advises you on how to make your engagement a success story.

### Simple Rapid Near-Patient Diagnostics for Tuberculosis Remain Elusive - Is a "Treat-to-Test" Strategy More Realistic?

by Alice L. den Hertog, Oleg A. Mayboroda, Paul R. Klatser et al.
PLoS Pathog 7(11): e1002207 (3 November 2011)


An accurate, simple, and direct test for tuberculosis (TB) has been a priority for many years, but to date no such test has become available. Easily detectable sensitive and specific biomarkers are elusive and may remain so. The authors suggest to evaluate the utility of biomarkers of TB infection in a "treat-to-test" strategy. In this approach, TB suspects would be started on treatment empirically, and after a number of days, a test would be performed to measure mycobacterial or host biomarkers. There is evidence available supporting this proposition. A proportion of patients beginning TB treatment suffer a so-called paradoxical response, which is presumably an immunological reaction to the burst of mycobacterial antigens released when treatment starts.

### ART and TB prevention

by Theo Smart
HIV & AIDS Treatment in Practice (HATiP), Issue 183, 25 November 2011


This HATiP issue explores what is known about the potential benefits - and the limits - of antiretroviral therapy (ART) for TB prevention and control - and the clinical implications if ART isn’t enough to prevent TB.

### Other Infectious Diseases

**Pneumonia Progress Report 2011**

International Vaccine Access Center (IVAC), November 2011


Pneumonia is one of the most solvable problems in global health, yet it remains the world’s leading killer of young children. Great progress is being made to speed vaccines to the developing world, which is projected to have a tremendous health impact – but
there still remains great need to scale up key pneumonia protection and treatment interventions. This report examines steps being taken to prevent this illness in the 15 countries with the highest pneumonia death toll among young children. Together, these countries account for approximately 75 percent of the global toll of child pneumonia.

* * *

**A Google Earth-based surveillance system for schistosomiasis japonica implemented in the lower reaches of the Yangtze River, China**

by Le-Ping Sun, You-Sheng Liang, Hong-Hui Wu et al. Parasites & Vectors 2011, 4:223 (27 November 2011)

Due to the success of the national schistosomiasis control programme in China, transmission has been sufficiently reduced in many areas to severely limit identification of areas at risk by conventional snail surveys only. In this study, the authors imported Google Earth technology and a Global Positioning System (GPS) into the monitoring system for schistosomiasis surveillance of the banks of the Yangtze River in Jiangsu Province, China. The results confirm that the surveillance system can be rapidly updated and easily maintained, which proves the Google Earth approach to be a user-friendly, inexpensive warning system for schistosomiasis risk.

---

**Essential Medicines**

**List of Essential Medicines for Children of India**

First List - October 2011

The Indian Academy of Pediatrics in collaboration with World Health Organization Regional Office for South-East Asia, New Delhi

Due to the success of the national schistosomiasis control programme in China, transmission has been sufficiently reduced in many areas to severely limit identification of areas at risk by conventional snail surveys only. In this study, the authors imported Google Earth technology and a Global Positioning System (GPS) into the monitoring system for schistosomiasis surveillance of the banks of the Yangtze River in Jiangsu Province, China. The results confirm that the surveillance system can be rapidly updated and easily maintained, which proves the Google Earth approach to be a user-friendly, inexpensive warning system for schistosomiasis risk.

Due to the success of the national schistosomiasis control programme in China, transmission has been sufficiently reduced in many areas to severely limit identification of areas at risk by conventional snail surveys only. In this study, the authors imported Google Earth technology and a Global Positioning System (GPS) into the monitoring system for schistosomiasis surveillance of the banks of the Yangtze River in Jiangsu Province, China. The results confirm that the surveillance system can be rapidly updated and easily maintained, which proves the Google Earth approach to be a user-friendly, inexpensive warning system for schistosomiasis risk.

---

**DOHA+10 - Trips Flexibilities and Access to Antiretroviral Therapy: Lessons from the Past, Opportunities for the Future**

Joint United Nations Programme on HIV/AIDS (UNAIDS) November 2011

The Doha Declaration and the Doha inspired public health decisions of the TRIPS
Council include a number of components that have directly increased access to medicines in low- and middle-income countries. Today, nearly half of people eligible for HIV treatment in low- and middle-income countries are now receiving it - 6.6 million out of the 14.2 million eligible - compared to 300,000 in 2002. The most dramatic increases in antiretroviral therapy coverage have occurred in sub-Saharan Africa, with a 30% increase between 2009 and 2010 alone.

**Social Protection**

### Conditional Cash Transfer Programmes: The recent experience in Latin America and the Caribbean

by Simone Cecchini, Aldo Madariaga, Claudia Robles et al.
Economic Commission for Latin America and the Caribbean (ECLAC) and Swedish International Development Cooperation Agency (Sida), September 2011

This document summarizes experience with conditional cash transfer or “co-responsibility” (CCT) programmes in Latin America and the Caribbean, over a period lasting more than 15 years. During this time, CCTs have consolidated and spread through the region’s various countries as a tool of choice for poverty-reduction policy. CCTs are currently being implemented in 18 of the region’s countries, benefiting over 25 million families (about 113 million people) or 19% of the regional population, at a cost of around 0.4% of regional gross domestic product (GDP).

***

### Bolsa Família and the Citizen’s Basic Income: A Misstep?

by Tatiana Britto and Fábio Veras Soares
International Policy Centre for Inclusive Growth, January 2011

This paper discusses the link between Bolsa Família, Brazil’s largest direct income-transfer programme, and the citizen’s basic income as established in Brazilian legislation. Although these two initiatives were created by law almost simultaneously, the relationship between them does not seem to be unequivocally or even sequentially understood. The paper argues that, despite some commonalities, there are many real and symbolic differences between the formats of conditional cash transfers (CCTs) and basic income.

***

### Social Security Programs throughout the World: Africa, 2011

Social Security Administration, Office of Retirement and Disability Policy, Office of Research, Evaluation, and Statistics, Washington, DC, August 2011
The term social security in this report refers to programs established by statute that insure individuals against interruption or loss of earning power and for certain special expenditures arising from marriage, birth, or death. The data reported are based on laws and regulations in force in January 2011 or on the last date for which information has been received. Information for each country on types of social security programs, types of mandatory systems for retirement income, contribution rates, and demographic and other statistics related to social security are shown in table form.

* * *


United Nations Secretariat, Department of Economic and Social Affairs (DESA), 2011

The Report reveals that many governments are not paying enough attention to the social implications of their economic policies geared towards recovery from the economic crisis. There is a special emphasis on how the disconnection between social and economic policies often have dire consequences for the population in reference to health, nutrition and education, negatively affecting economic growth.

* * *

Social determinants of health: The role of social protection in addressing social inequalities in health

by Barbara Rohregger
Discussion Papers on Social Protection, Issue No. 11, August 2011
Deutsche Gesellschaft für Internationale Zusammenarbeit (GIZ) GmbH

The social, economic and political context in which people grow, live, work and age has enormous impact on their health status. These wider structural determinants of health lie largely outside the health sector. The level and coverage of social protection systems is one key determinant. Social protection measures and mechanisms directly contribute to poverty reduction and human resource development by providing recipients with in-kind or cash transfers. They also allow beneficiaries to gain better access to social services, including health facilities, drugs, etc.

* * *

If gender ‘makes development and economic sense’, why is social protection gender-blind? The politics of gender and social protection

by Nicola Jones and Rebecca Holmes
Institute of Development Studies (IDS), April 2011
Social protection may be high on the policy agenda in international development circles, but the way it plays out in practice at national and local level is deeply political, especially so when viewed through a gender lens. This article explores the political economy of social protection and its effects on gender relations to increase understanding about why social protection debates and approaches have been largely gender-blind.

* * *

**Third-party payment mechanisms in health microinsurance: Practical tips and solutions**

by Pascale Le Roy and Jeanna Holtz

International Labour Office (ILO), Briefing note N°11, October 2011

The third-party payment (TPP) mechanism is a model where insured patients are not required to pay the cost of health services covered by the insurance at the time the services are rendered. While the TTP, or "cashless" mechanism is not new in health insurance, setting up and managing a TPP mechanism for a health microinsurance scheme presents unique challenges. This paper draws on the experience of various health microinsurance schemes and presents the pros and cons of using a TPP mechanism. It also presents key issues to address when establishing and managing a TPP mechanism, as well as tips and solutions collected from cases studies and experts' interviews.

* * *

**Rethinking cash transfers to promote maternal health: good practice from developing countries**

by Nicola Jones, Fiona Samuels, Laura Gisby et al.

Overseas Development Institute (ODI), November 2011

This Background Note reviews the evidence on conditional cash transfers (CCTs) to promote safe motherhood - a concept that spans not only care during pregnancy and childbirth, but access to family planning and equitable health services - comparing them to other approaches to maternal health programming in developing countries.

* * *

**Water, Sanitation & Hygiene**

**Off-track, off-target: Why investment in water, sanitation and hygiene is not reaching those who need it most**

by John Garrett and Tom Slaymaker

WaterAid, November 2011
The report shows that current aid is not reaching the people who need it the most – people living in poor rural communities and urban slums. In Sub-Saharan Africa, the MDG target won't be reached for another 200 years. That's a long wait for a toilet! Donors are reluctant to invest in water, hygiene and improved sanitation in areas most in need due to concerns over the effective use of the money, while a lack of money undermines existing weak performance. Breaking this cycle requires a serious shift in approach. The sector needs stronger leadership to ensure better targeting and sustainability.

* * *

Pathways to Progress: Transitioning to Country-Led Service Delivery
Pathways to Meet Africa’s Water Supply and Sanitation Targets

by D. De Waal, M. Hirn and N. Mason
Water and Sanitation Programme, 2011

This report maps progress in water supply and sanitation of 32 countries in Sub-Saharan Africa. According to the report, political stability has heavily influenced progress in improving access to water supply and sanitation services with low-income stable countries outperforming low-income fragile and resource-rich countries, breaking with the common perception that access to sanitation and water increases with gross domestic product (GDP). The authors emphasise that a shift in aid modalities from external funder-driven projects to country-led programmatic approaches can potentially increase access to water and sanitation services for millions of people by 2015.

Human Resources

Governance and human resources for health

by Marjolein Dieleman and Thea Hilhorst
Human Resources for Health 2011, 9:29 (24 November 2011)

The authors believe that the influence of governance is undervalued in addressing the human resources for health (HRH) crisis, both globally and at country level. The six articles comprising this series present a range of experiences. The articles report on governance in relation to developing a joint vision, building adherence and strengthening accountability, and on governance with respect to planning, implementation, and monitoring. To date, few experiences have been shared on improving governance for HRH policy making and implementation, and many questions remain unanswered.

* * *
The WHO Global Code of Practice on the International Recruitment of Health Personnel: The Evolution of Global Health Diplomacy

by Allyn L. Taylor and Ibadat S. Dhillon
Global Health Governance, Vol. V, Issue 1, Fall 2011

The May 2010 adoption of the World Health Organization Global Code of Practice on the International Recruitment of Health Personnel created a global architecture, including ethical norms and institutional and legal arrangements, to guide international cooperation and serve as a platform for continuing dialogue on the critical problem of health worker migration. Highlighting the contribution of non-binding instruments to global health governance, this article describes the Code negotiation process from its early stages to the formal adoption of the final text of the Code. Detailed are the vigorous negotiations amongst key stakeholders, including the active role of non-governmental organizations.

* * *

Convincing health workers to work in rural areas

by Julie Riise Kolstad, Michael Munga and Ottar Maestad
Chr. Michelsen Institute (CMI) Brief, Volume 10, No.12, October 2011

Tanzania has one of the lowest health worker ratios in the world. It is the rural areas that suffer the most. The geographical imbalance represents a serious problem for the delivery of crucial health services to a large share of the population. A new study shows that offering education after a certain period of service may be one of the most powerful instruments the authorities have available in recruiting health workers to the rural areas.

* * *

Exploring the Human Resources for Health Landscape for Adult Male Circumcision Rollout in Four Districts in Nyanza Province, Kenya

by Paul Perchal, George Odingo, and Melinda Pavin
EngenderHealth, 2011

This study found health worker shortages in four districts of Nyanza Province, Kenya, and identified barriers to addressing them, including potential limitations due to sex of the health workers and poor understanding of incentives mechanisms for motivating health workers.

* * *
International Profiles of Health Care Systems 2011
by S. Thomson, R. Osborn, D. Squires, and S. J. Reed
The Commonwealth Fund, November 2011

120 pp. 1.2 MB:
http://www.commonwealthfund.org/~media/Files/Publications/Fun

This publication presents overviews of the health care systems of Australia, Canada, Denmark, England, France, Germany, Japan, Italy, the Netherlands, New Zealand, Norway, Sweden, Switzerland, and the United States. Each overview covers health insurance, public and private financing, health system organization, quality of care, health disparities, efficiency and integration, use of health information technology, use of evidence-based practice, cost containment, and recent reforms and innovations.

* * *

Joint Mapping Modelling for Multiple Health Problems in South Africa
by Samuel Manda
South African Centre for Epidemiological Modelling and Analysis (SACEMA) Quarterly, November 2011

5 pp. 344 kB:

Disease mapping models are used in spatial epidemiologic studies to investigate the causes and distributions of diseases. Most of the studies looking at mapping of health problems in the Sub-Saharan African region have concentrated on using univariate spatial models. However, there is a need to use and apply joint mapping models to measure co-morbidities of common illnesses in the region. This article aims to show the utility of joint mapping models in estimating co-morbidities in two important health problems in South Africa: HIV and Syphilis, and vascular diseases.

* * *

A Doctor in Your Pocket: Health Hotlines in Developing Countries
by Gautam Ivatury, Jesse Moore, Alison Bloch
GSMA Development Fund, 2009

29 pp. 2.0 MB:
http://www.mobileactive.org/files/file_uploa
ds/a_doctor_in_yo
cket.pdf

Health hotlines are medical call centers that provide health-related information, advice, referrals, and sometimes prescriptions to individual callers over a phone line. Callers are connected to health professionals (nurses, paramedics or physicians) who usually follow standard protocols to assess medical situations and provide information and advice.

* * *

HESP-News & Notes - 25/2011 - page 21
A web-based appointment system to reduce waiting for outpatients: A retrospective study

by Wenjun Cao, Yi Wan, Haibo Tu et al.
BMC Health Services Research 2011, 11:318 (22 November 2011)

Long waiting times for registration to see a doctor is problematic in China, especially in tertiary hospitals. To address this issue, a web-based appointment system was developed for the Xijing hospital. The authors conclude that compared to the usual queuing method, the web-based appointment system could significantly increase patient’s satisfaction with registration and reduce total waiting time effectively. However, further improvements are needed for broad use of the system.

IT Sector Promotion in Developing and Emerging Countries

by Lucas von Zallinger
Deutsche Gesellschaft für Internationale Zusammenarbeit (GIZ) GmbH.
November 2011

The Manual and the Toolbox are based on German development cooperation experience in promoting IT sectors in several regions (like the Balkans region, Latin America, Sub-Saharan Africa and Southeast Asia). They introduce a methodology and a set of practical tools to promote the IT industry in developing and emerging countries. They provide a strategic “roadmap” for IT sector promotion which can be flexibly adapted to upcoming changes in resources, global markets and technologies.

UNESCO and Education: Everyone has the right to education

United Nations Educational, Scientific and Cultural Organization (UNESCO), 2011

Since its creation in 1945, UNESCO’s mission has been to contribute to the building of peace, poverty eradication, lasting development and intercultural dialogue, with education as one of its principal activities to achieve this aim. Today, UNESCO is committed to a holistic and humanistic vision of quality education worldwide, the realization of everyone’s right to education, and the belief that education plays a fundamental role in hu-
man, social and economic development.

Harm Reduction and Drug Use

**Women & Smoking: Becoming Part of the Solution**

by Nery Suárez  
MEDICC Review, Vol. 13, No. 4, October 2011

1 pp. 34.9 kB:  
http://www.medicc.org/mediccreview/articles/mr_227.pdf

As male smokers quit or die of smoking-related illnesses, women - young women in particular - are the market the tobacco industry goes after to survive, and gender-specific research on what motivates women to smoke is aimed at the “feminization of tobacco”. Tobacco transnationals minimize the dangers of smoking in powerful advertising that goes round the globe, while health agencies and institutions strive to counter these media messages on shoestring budgets - an astounding asymmetry that endangers the health of millions.

***

**Alcohol: Ongoing Efforts to Reduce Harmful Consumption**

by Bente Molenaar  
Health Diplomacy Monitor 2(5): 6-8, November 2011

22 pp. 599 kB:  

The Global Strategy to Reduce the Harmful Use of Alcohol has much to learn from the Framework Convention on Tobacco Control. Over the years, many have called for the creation of a Framework Convention on Alcohol Control. Despite this push and despite the fact that alcohol and tobacco are relatively equal in terms of global disease burden, the international community has been less willing to be tough on the alcohol industry.

Millennium Development Goals

**After the MDGs – what then?**

Janice Giffen and Brian Pratt  
International NGO Training and Research Centre (INTRAC), November 2011

12 pp. 116 kB:  

This paper examines some of the debates taking place as we approach 2015, the target date for attainment of the Millennium Development Goals (MDGs). It provides reflections, drawn from discussions with donor agencies and international NGOs, on what the focus will be for international development work after that date. Will it be more of the same - nationally based targets to reduce poverty? Or will it be something radically dif-
Different, involving a revolution in the way we think about how to overcome problems of poverty and marginalisation?

**Development Assistance**

*Busan has been an expression of shifting geopolitical realities*

by Jonathan Glennie
The Guardian online, UK, 2 December 2011


The role of the BRIC (Brazil, Russia, India and China) countries has been critical in forging a ‘new global partnership’ at the aid effectiveness forum in South Korea. If Paris was a triumph of technocratic organisation, Busan has been an expression of shifting geopolitical realities, with the role of the BRICs proving more critical than ever before. But ultimately the same question applies to both talkfests: what difference will all this hullabaloo mean for the world’s poorest and most vulnerable people? That will depend more on the actions of the international community than words on a page.

**Brave New World: A Literature Review of Emerging Donors and the Changing Nature of Foreign Assistance**

by Julie Walz and Vijaya Ramachandran
Center for Global Development, November 2011


This paper investigates the scale and scope of emerging donors, many of which are developing economies themselves. The new donors are not a monolithic group but instead represent three distinct models of aid delivery, described here as the DAC Model, the Arab Model and the Southern Model. In each model, there is room for donors to improve their transparency and accountability. Most are unlikely to join the DAC, but the international donor community can still encourage reporting and disclosure.

**Development cooperation beyond the aid effectiveness paradigm: A women’s rights perspective**

by Anne Schoenstein, Cecilia Alemany, Natalie Raaber et al.
The Association for Women’s Rights in Development (AWID), 2011

29 pp. 425 kB: [http://awid.org/content/download/108558/1245011/file/Dev_Co-op_Beyond_Aid_Effcyns_ENG.pdf](http://awid.org/content/download/108558/1245011/file/Dev_Co-op_Beyond_Aid_Effcyns_ENG.pdf)

When the role of the state is reduced, several social functions that were previously performed by the state, such as healthcare, caretaking, and education, are absorbed by
women. This increases women’s already high work burdens and often takes a toll on women’s health or leads to girls dropping out of school. The Paris Declaration was negotiated through a process that did not engage the full range of stakeholders. Developing countries participated only to a limited extent, and only a small number of civil society groups were part of the debate. Women’s groups were not at the table.

* * *

What if development aid were truly ‘catalytic’?

by Andrew Rogerson
Overseas Development Institute (ODI), November 2011

8 pp. 102 kB:

This Background Note probes some of the limits of the term ‘catalytic aid’ – what precisely do we currently mean by catalytic aid? How might we recognise it and make it operational? And what aid objectives and instruments prevalent today would a resolute shift to catalytic aid allocation principles exclude?

* * *

Gender, work and health

by Stephanie Premji, Evelyn Kortum, Adepeju Olukoya et al.
World Health Organization, November 2011

21 pp. 1.6 MB:

Around the world, women are at a disadvantage compared to men in the various spheres of society. Women’s working conditions are less often researched, and their associated health problems less often diagnosed and compensated for than men’s. This publication provides an overview of the differences and inequalities in work and health between women and men, and highlights issues of particular importance to women. Moreover, it highlights key issues and provides suggestions for action by governments, employers, workers and researchers to improve working conditions and health and well-being with the goal of gender equity.

* * *

Daily Lives and Corruption: Public Opinion in Southern Africa

Transparency International, November 2011

34 pp. 637 kB:
http://transparency.org/content/download/64242/1028614

Between 2010 and 2011, more than 6000 people were interviewed in six Southern African countries – the Democratic Republic of Congo (DRC), Malawi, Mozambique, South Africa, Zambia and Zimbabwe – on their views of corruption levels in their countries and their governments’ efforts to fight corruption. This report also examines the frequency of reports of bribery in different sectors and institutions, and the reasons respondents paid bribes during the last year. It also investigates public willingness
to engage in the fight against corruption.

* * *

**Transport (Road Transport): Shared Interests in Sustainable Outcomes**
Social Determinants of Health - Sectoral Briefing Series 3

by Daniel Albrecht, Gerardo Zamora, David Banister et al.
WHO Headquarters in partnership with the Regional Office for the Western Pacific, November 2011

34 pp. 1.1 MB:

This briefing describes challenges facing transport policy-makers and authorities, how they address them, and areas for potential collaboration between health and transport.

* * *

**The OECD Environmental Outlook to 2050 (forthcoming, 2012): Key Findings on Climate Change**

by Virginie Marchal and Rob Dellink
Organisation for Economic Cooperation and Development (OECD)
November 2011

8 pp. 588 kB:
http://www.oecd.org/dataoecd/21/30/49089652.pdf

The summary report says that climate change mitigation pledges made so far are "not enough", and that time to tackle rising emissions is running out. This rise in emissions will vary around the world. Regarding forestry and land use, net carbon dioxide emissions are projected to be negative by 2045, while emerging economies will also show a decreasing trend in emissions thanks to an expected slowing of deforestation. But in Africa, land use emissions are projected to increase driven by the expansion of agricultural areas on the continent. The report highlights technology support as one of the main policy tools for climate change mitigation.

**ELECTRONIC RESOURCES**

**New mobile application: Application for Contraceptive Eligibility (ACE) for Android 2011**


The ACE mobile app gives family planning providers an easy and effective way to check whether clients are medically eligible to start using certain contraceptive methods. Based on the popular and trusted Family Planning: A Global Handbook for Providers (2011 edition), ACE reflects the latest family planning guidance from the World Health Organization’s Medical Eligibility Criteria for Contraceptive Use.

* * *
**Gateways: International Journal of Community Research and Engagement**

Vol. 4 (2011)

This is a special edition of “Gateways” on the theme of ‘Sustaining community-university partnerships’. Gathered together in this volume are articles from around the world, reflecting on projects and partnerships big and small, young and more established. The articles provide us with a wealth of detailed material and identify some important characteristics of sustainable community-university partnership working, often in the context of socioeconomic disadvantage.

***


In the November issue:
- Impact of non-health policies on infant mortality through the social determinants pathway;
- Maternal death surveillance and response;
- Twenty-year trends in the prevalence of disability in China;
- Syphilis test availability and uptake at medical facilities in southern China;
- Under-registration of deaths in Thailand in 2005-2006;
- Iodine status in late pregnancy and psychosocial determinants of iodized salt use in rural northern Viet Nam;
- Human papillomavirus vaccine delivery strategies that achieved high coverage in low- and middle-income countries;
- Evaluating large-scale health programmes at a district level in resource-limited countries;
- Can pharmacogenomics improve malaria drug policy?
- Redesigning the AIDS response for long-term impact.

***

**Bulletin of the World Health Organization** Vol. 89, Nr. 12, December 2011

http://www.who.int/bulletin/volumes/89/12/en/index.html

Highlights from the December 2011 issue:
- Fungal infection kills tuberculosis survivors;
- American aid policies affect abortion rates in developing countries;
- Health-care fraud costs billions;
- International teamwork averts disease outbreaks;
- Former Norwegian prime minister, Kjell Magne Bondevik speaks openly about his personal experience of mental illness;
- South African children lack variety in their diet;
- Challenges funding vaccine markets;
- Statistics on wartime sexual violence flawed.

***
Eurohealth Volume 17, Number 4, 2011
Quarterly of the European Observatory on Health Systems and Policies - incorporating Euro Observer
44 pp. 2.3 MB:

Eurohealth is a quarterly publication that provides a forum for researchers, policy-makers and experts to contribute to a constructive debate on health policy in Europe. The aim of Eurohealth is to bridge the gap between the scientific community and the policy-making community by providing an opportunity for the publication of evidence-based articles, debates, and discussions on contemporary health system and health policy issues.

INTERESTING WEB SITES

Action: Social Determinants of Health (SDH)
http://www.actionsdh.org/

Action: SDH is an electronic Discussion Platform, which aims to foster discussion and debate and to provide a clearing house to share experiences of actions aimed at improving health equity through addressing the social determinants of health. In so doing, WHO joins forces with a range of other organizations and networks around the world that are also committed to this agenda.

***

Electronic Information for Libraries (EIFL)
http://www.eifl.net/

Electronic Information for Libraries (EIFL) is an international not-for-profit organisation based in Europe with a global network of partners. They run a wide range of programmes and events designed to increase access to knowledge. Working in collaboration with libraries in more than 45 developing and transition countries in Africa, Asia and Europe, EIFL enables access to knowledge for education, learning, research and sustainable community development.

***

Sharing in Health - Open Access Training in Health Care
http://www.sharinginhealth.ca/

SharingInHealth is an emerging organization designed to address the shortage of primary health care providers in low-resource settings by increasing training capacity. The foundation of it is currently SharingInHealth.ca, an open-access, computer-based learning resource for small-group learning by health care students. Built by students, for students, it depends on a global community to grow.

***
TRAINING OPPORTUNITIES

Master of Science and Short Courses in International Health at Heidelberg University, Germany - Schedule 2012

The MSc in International Health is intended for health and health-related professionals working in International Health. Its focus is to provide students with a solid foundation in international public health principles and competency with the tools and methods necessary to initiate programmes that would improve the delivery of health services in an efficient, sustainable and equitable way.

Short Courses in International Health
The Institute of Public Health offers a wide range of courses in the field of International Health. All short courses are at postgraduate, advanced level, expecting from participants basic knowledge in the respective fields. The courses are open to participants worldwide and are taken either as part of a postgraduate Masters Programme (tropEd, Heidelberg) or as individual further education.

For detailed information about all courses download the course brochure (Adobe PDF file 39 pp. 802 kB) or check http://www.klinikum.uni-heidelberg.de/Teaching.7082.0.html

CONFERENCES

Healthcare in Africa
“Transforming Africa’s healthcare systems - where should change happen?”

6-7 March 2012, Cape Town, South Africa

Healthcare demands in Africa are changing. With chronic diseases rising, an emerging middle-class demanding better quality, affordable healthcare and private healthcare on the rise, what is the future for healthcare systems across the continent?

Healthcare in Africa will bring together influential healthcare stakeholders from government, providers, suppliers and patient groups to confront and explore key issues around healthcare systems in Africa. You’ll be able to participate in interactive brainstorming sessions, hear cutting-edge case studies, and hear from a range of inspiring speakers.

For more information see: http://cemea.economistconferences.com/event/healthcare-africa

3rd People’s Health Assembly

6 - 11 July 2012
University of the Western Cape, Cape Town, South Africa

In 2012, the People’s Health Movement is organising the Third People’s Health Assembly, a global event bringing together health activists from across the world to share experiences, analyse the global health situation, and develop civil society positions which promote health for all.
We look forward welcoming you all to celebrate our years of activism, to re-asses and re-inspire our movement and to set an agenda for the future. For more information on the programme structure, please visit our website. Details on the registration process and logistics in terms of accommodation and transport, will be uploaded soon.
Website: http://www.phmovement.org

***

**AIDS 2012 - XIX International AIDS Conference**

22 - 27 July 2012, Washington DC, USA
“Turning the tide Together”

AIDS 2012 will bring together leading scientists, public health experts, policy-makers and the HIV-affected community to translate recent momentous scientific advances into action that will address means to end the epidemic, within the current context of significant global economic challenges. The Conference will have a positive impact on the HIV and AIDS response globally, and in the United States.

For more information about the conference see: http://www.aids2012.org/

**CARTOON**

**TIPS & TRICKS**

**Virtual Wi-Fi Networks in Windows 7**

In a digital world – which is also increasingly wireless – seamless integration and syncing of devices has become the norm. Consequently, wired internet connections are slowly becoming a thing of the past. The focus is on ease of use and flexibility, and being tied to a LAN port for internet does not fare well. Most homes and office workspaces these days use Wi-Fi networks and hotspots to connect to the internet. This helps bestow a feeling of mobility on computer users.
However, there are times when you don’t have access to a Wi-Fi hotspot, or rather, have internet on only your laptop, and wish you could share it with other devices such as another laptop / iPad / smart phone. Windows 7 has a nifty little hidden feature which will allow you to do just that.

Virtual Wi-Fi is a relatively unknown feature in Windows 7 which can be put to very good use in such a scenario. Virtual Wi-Fi refers to virtualization of the wireless network adapter or WLAN card, and helps create a virtual network adapter or VWi-Fi. A software access point known as a Soft AP gets created for the virtual Wi-Fi network. Enabling or disabling either one of the network adapters in Control Panel -> Network and Sharing will result in both of these getting enabled / disabled.

To setup virtual Wi-Fi, execute the following steps:
Open a command prompt (as Administrator) and type the below commands:
- `netsh wlan set hostednetwork mode=allow ssid=SSID key=PWD`
- `netsh wlan start hostednetwork`

**Note:** This functionality exists only with certain WLAN cards and you need to ensure that your network adapter drivers are up to date with the latest drivers from the manufacturer’s site and support this feature. However, once it is enabled the hardware functions as two distinct wireless networks with independent access points. This feature can be very useful when you need to share internet with all the features of an access point and do not want to just make use of an ad-hoc network with ICS (Internet Connection Sharing).

VirtualWi-Fi Router, Virtual Router and Connectify are three software programmes which can also be used to help setup Virtual Wi-Fi.

***

**Browser Keyboard Shortcuts**

Here some shortcuts for the keyboard buffs (most of them working with Internet Explorer, Firefox and Chrome browsers):

F1 – Help
F3 – Toggle on/off search panel
F4 – Pull down address bar
F5 – Refresh current page
F6 -Move focus to address bar
F11 – Toggle on/off full-screen mode
Alt + (Left Arrow) – Go back on history (same as Backspace)
Alt + (Right Arrow) – Go forward on history
Ctrl + A – Select All
Ctrl + C – Copy Selected
Ctrl + E – Search panel
Ctrl + F – Find (on page)
Ctrl + H – Toggle History panel
Ctrl + I – Toggle Favourites panel
Ctrl + L – Open a File
Ctrl + N – Open New browser window
Ctrl + P – Print current page
Ctrl + R – Refresh. Same as F5
Esc – Stop (while page is loading)
Ctrl + D – Add the current page to Favourites
Double-click (on a word) – Select the word
Best regards,
Dieter Neuvians MD

-----------------------------
To subscribe for free to the newsletter send an e-mail to:
Majordomo@mailserv.gtz.de
leave the 'Subject' line empty with the following commands in the body of the message:
subscribe hpn-news-notes
end

(If you have problems subscribing, send me a note (dneuvians@gmx.de) that you would like to receive the newsletter).

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