Table of Contents:

BOOKS ................................................................................................................................. 4
The Tobacco Atlas .................................................................................................................... 4
The Cash Dividend: The Rise of Cash Transfer Programs in Sub-Saharan Africa ............ 4
Hepatology - A Clinical Textbook ......................................................................................... 4
Population Dynamics in Muslim Countries: Assembling the Jigsaw ................................. 5
Public Health in the Arab World .............................................................................................. 5
Migration and health in the European Union .......................................................................... 5
Epilepsy Across the Spectrum: Promoting Health and Understanding .............................. 6

ONLINE PUBLICATIONS .................................................................................................... 6
Global Health ........................................................................................................................... 6
Good health adds life to years: Global brief for World Health Day 2012 ......................... 6
The Global Fund to Fight AIDS, Tuberculosis and Malaria .................................................. 6
Shifting Paradigm: How the BRICS Are Reshaping Global Health and Development ........ 7
The Role of Public Health Institutions in Global Health System Strengthening Efforts: The US CDC’s Perspective .................................................................................................................. 7
Bugs, Drugs & Smoke: Stories from Public Health ................................................................. 7
HIV - AIDS - STI ................................................................................................................... 8
Guidelines for the Use of Antiretroviral Agents in HIV-1-Infected Adults and Adolescents 8
The International AIDS Conference Returns to the United States ........................................ 8
Possible Clues Found to Why HIV Vaccine Showed Modest Protection .............................. 8
Using quality improvement to accelerate highly active antiretroviral treatment coverage in South Africa ............................................................................................................................. 8
Effectiveness of generic and proprietary first-line anti-retroviral regimens in a primary health care setting in Lusaka, Zambia: a cohort study ......................................................... 9
Sexual & Reproductive Health ............................................................................................... 9
Levers of Success: Case studies of national sexuality education programmes .................. 9
Implementation of legal abortion in Nepal: a model for rapid scale-up of high-quality care ... 9
Quality Sexual Education Needed for Adolescents in Egyptian Schools ............................... 10
Maternal & Child Health ...................................................................................................... 10
‘Stepping Stones PLUS’ - supporting women in their quest for safe motherhood .............. 10
Barriers to hospital delivery in a rural setting in Coast Province, Kenya: community attitude and behaviours .......................................................................................................................... 11
Mother to Child: How Discrimination Prevents Women Registering the Birth of their Child 11
Increase in facility-based deliveries associated with a maternal health voucher programme in informal settlements in Nairobi, Kenya .................................................................................... 11
Accountability for Maternal, Newborn & Child Survival: An update on progress in priority countries ................................................................................................................................. 12
Equity in maternal, newborn, and child health interventions in Countdown to 2015: a retrospective review of survey data from 54 countries ........................................................................ 12
Medicines for Maternal Health: Key Data and Findings ....................................................... 12
What We Don’t See - Pediatrics 1812-2012 ......................................................................... 13
Malaria .......................................................................................................................... 13
The implementation of a new Malaria Treatment Protocol in Timor-Leste: challenges and constraints .......................................................................................................................... 13
Cost and cost effectiveness of long-lasting insecticide-treated bed nets - A model-based analysis .............................................................................................................................................. 13
Management of uncomplicated malaria in febrile under five-year-old children by community health workers in Madagascar: reliability of malaria rapid diagnostic tests ............................................................. 14
The Gates Malaria Partnership: a consortium approach to malaria research and capacity development ........................................................................................................................................ 14
Risk factors for mortality from imported falciparum malaria in the United Kingdom over 20 years: an observational study .......................................................................................................................... 14
Estimates of child deaths prevented from malaria prevention scale-up in Africa 2001-2010 ............................................................................................................................................. 15
Do patients adhere to over-the-counter artemisinin combination therapy for malaria? Evidence from an intervention study in Uganda ...................................................................................... 15
Tuberculosis ................................................................................................................... 15
Effectiveness and cost-effectiveness of first BCG vaccination against tuberculosis in school-age children without previous tuberculin test (BCG REVAC trial): a cluster-randomised trial ......................................................................................................................... 15
Diagnosing and preventing TB in children ........................................................................... 16
Electronic recording and reporting for tuberculosis care and control ........................................ 16
2011 Report on Tuberculosis Research Funding Trends, 2005-2010 ........................................................................................................................ 16
Addressing poverty through disease control programmes: examples from Tuberculosis control in India ........................................................................................................................................... 17
Non-communicable Diseases .......................................................................................... 17
An ecological approach to non-communicable disease prevention in the workplace ................. 17
Country-Level Decision Making for Control of Chronic Diseases ............................................ 17
Cancer mortality in India: a nationally representative survey .................................................... 18
Social Protection ............................................................................................................. 18
The Revised Social Protection Index ..................................................................................... 18
Control and Accountability in Conditional Cash Transfer Programs in Latin America and the Caribbean ............................................................................................................................................. 18
Social Cash Transfers and Financial Inclusion: Evidence from Four Countries ......................... 19
The potential for cash transfers in Nigeria .................................................................................. 19
How does access to social protection programmes affect the decision to migrate? ....................... 19
Productive Role of Safety Nets ........................................................................................... 20
Pension Reforms and Gender Equality in Latin America ............................................................ 20
Water, Sanitation & Hygiene ............................................................................................. 20
The Hippo Water Roller: Technology for improved access to water ........................................... 20
Human Resources ........................................................................................................... 21
Human Resources in Health (HRH) Toolkit ............................................................................. 21
Why do health workers in rural Tanzania prefer public sector employment? .......................... 21
Health Systems & Research ............................................................................................... 21
Private versus public strategies for health service provision for improving health outcomes in resource-limited settings .................................................................................................................. 21
Disease control and health systems in low- and middle-income countries: enhancing positive interrelation .......................................................................................................................... 22
Research to support universal coverage reforms in Africa: the SHIELD project ....................... 22
Investing in African research training institutions creates sustainable capacity for Africa: the case of the University of the Witwatersrand School of Public Health Masters programme in epidemiology and biostatistics ................................................................. 22
Private sector involvement in health services in East and Southern Africa: country profiles 23
Innovative Pro-Poor Healthcare Financing and Delivery Models ............................................... 23
Epidemiology in Latin America and the Caribbean: current situation and challenges .............. 23
Information & Communication Technology ......................................................................... 24
The Global Information Technology Report 2012: Living in a Hyperconnected World .............. 24
You Are What You Tweet: Analyzing Twitter for Public Health .............................................. 24
mBCC Field Guide: A Resource for Developing Mobile Behavior Change Communication Programs ................................................................................................................................. 24
Deepening Participation and Improving Aid Effectiveness through Media and ICTs .................. 25
Education ......................................................................................................................... 25
Girls’ Education, Empowerment, and Transitions to Adulthood ................................................. 25
From Evidence to Policy - Do School Feeding Programs Work? .......................................................... 25
Harm Reduction and Drug Use ............................................................................................................. 26
Alcohol in the European Union: Consumption, harm and policy approaches ........................................ 26
Millennium Development Goals .......................................................................................................... 26
Report on Progress in Achieving the Millennium Development Goals in Africa 2012 ..................... 26
Is the Distribution of Foreign Aid MDG-Sensitive? ............................................................................ 26
Strengthening the Global Financing Architecture for Reproductive, Maternal, Newborn and Child Health: Options for Action ......................................................................................... 27
Development Assistance ..................................................................................................................... 27
Evaluation for equitable development results ....................................................................................... 27
The Quality of Official Development Assistance Assessment 2009: Is Aid Quality Improving? ............ 27
Beyond Paris: 11 innovations in aid effectiveness ................................................................................. 28
The Long-Run Impact of Foreign Aid in 36 African Countries ............................................................... 28
Arab Development Challenges Report 2011 ....................................................................................... 28
From high to low aid: a proposal to classify countries by aid receipt .................................................... 29
‘Valuing development’: Could approaches to measuring outcomes in health help make development more accountable? .............................................................................................................. 29
An Assessment of the Busan Partnership for Effective Development Cooperation: From a civil society perspective ....................................................................................................................... 29
Others ................................................................................................................................................... 30
Earth Institute: World Happiness Report ............................................................................................... 30
Population and Economic Development 2012 Data Sheet ................................................................. 30
Breaking stereotypes about going to clinics: Towards a pro-male health system ............................. 30

ELECTRONIC RESOURCES ............................................................................................................ 31
‘The new DDT’: Dogs, Drugs, and Traps ............................................................................................... 31
SACEMA Quarterly ............................................................................................................................... 31
Bulletin of the World Health Organization .......................................................................................... 31

INTERESTING WEB SITES ............................................................................................................ 31
Information for Community Oriented Municipal Services (iCOMMS) .............................................. 31
Community Action on Harm Reduction .............................................................................................. 32

TRAINING OPPORTUNITIES ........................................................................................................... 32
Blended e-Learning course: Management of Medicines in International Health ......................... 32
Online course: Health Information Systems to Improve Quality of Care in Resource-Poor Settings .... 32

CONFERENCES ............................................................................................................................... 33
43rd Union World Conference on Lung Health ..................................................................................... 33

CARTOON ........................................................................................................................................... 33

TIPS & TRICKS ................................................................................................................................. 33
Microsoft Outlook Configuration Analyzer Tool ................................................................................. 33
Rearranging the Android Favourites Tray ......................................................................................... 34
Distinguishing a zero from an O .......................................................................................................... 34
BOOKS

* * *

**The Tobacco Atlas**

*4th Edition*

by Michael Eriksen, Judith Mackay, Hana Ross

World Lung Foundation & The American Cancer Society, March 2012

132 pp. 89.7 MB(!) MB:


Tobacco use diminishes health throughout an individual’s lifetime, and these effects accumulate throughout adulthood, resulting in preventable illness and, all too often, premature death. The Atlas graphically details the scale of the tobacco epidemic, progress that has been made in tobacco control, and the latest products and tactics being deployed by the highly profitable tobacco industry – such as the use of new media, trade litigation, and aggressive development of smokeless products.

* * *

**The Cash Dividend: The Rise of Cash Transfer Programs in Sub-Saharan Africa**

by Marito Garcia and Charity M. T. Moore

The World Bank, 2012

440 pp. 5.0 MB:


This book provides the results of a thorough investigation of the recent use of cash transfer programs in Sub-Saharan Africa. The results of the review do not disappoint. The authors identified more than 120 cash transfer programs that were implemented between 2000 and mid-2009 in Sub-Saharan Africa. These programs have varying objectives, targeting, scale, conditions, technologies, and more. A sizable number of these programs conducted robust impact evaluations that provide important information, presented here, on the merits of cash transfer programs and their specific design features in the African context.

* * *

**Hepatology - A Clinical Textbook**

*Third Edition 2012*

By Mauss, Berg, Rockstroh, Sarrazin, Wedemeyer, et al.

Flying Publisher, March 2012

546 pp. 11.6 MB(!):

http://flyingpublisher.com/dl/9002.htm

Hepatology is a rapidly developing area of medicine. The exciting new oral treatments for HCV, breakthroughs in the treatment of chronic hepatitis B, and the identification of genes associated with metabolic liver diseases are just some highlights. The textbook is an up-to-date source of information for physicians, residents and advanced medical students seeking a broader understanding of liver disease.
**Population Dynamics in Muslim Countries: Assembling the Jigsaw**

Editors: Hans Groth and Alfonso Sousa-Poza  
Price: US$ 189.00  

The book discusses the demographic changes in Muslim countries. It thereby focuses on topics such as the demographic dividend and the demographic transition, labour market challenges, health care, universal education and gender issues. These challenges are addressed at a country level and include policy implications for the large majority of the Muslim countries covered in this book. Moreover, political consequences for Europe with respect to the integration of Muslims are presented to the reader.

***

**Public Health in the Arab World**

Editors: Samer Jabbour, Rita Giacaman, Marwan Khawaja et al.  
Faculty of Health Sciences at the American University of Beirut (AUB); published March 2012  
Cambridge University Press, 520 pp. ISBN: 9780521516747, Price £85.00  

The book covers a broad array of contemporary public health issues in the Arab World. In addition to fulfilling a need for informational material on leading public health issues in the region, it offers stimulating material for debate and action. The book sees health in its broadest sense as a right and as a social construct, thus the emphasis on social determinants of health and multi-disciplinarity, associating actions to improve health with broader social actions and, conversely, seeing health actions as having broader social impact.

***

**Migration and health in the European Union**

Edited by Bernd Rechel, Philippa Mladovsky, Walter Devillé et al.  
Open University Press, European Observatory on Health Systems and Policies Series, 2011  

This book explores the overall context of migration and health in the European Union, addresses the rights of migrants to health and looks at problems in their access to health services, explores the challenges and opportunities in monitoring migrant health, reviews the health issues faced by migrants in Europe, discusses the policy response so far and the need for culturally responsive health services, provides examples of best practice, and looks at the policy implications of the findings presented.

***
Millions of lives are affected by epilepsy, yet this fourth most common neurological disorder is not as well understood as less prevalent conditions, such as Parkinson’s disease and multiple sclerosis. Epilepsy is a complex medical disorder - not all seizures are the result of epilepsy, and epilepsy-related seizures can vary widely in severity and in the part of the brain affected. More needs to be known about the extent of epilepsy and its impact, as well opportunities for prevention and early identification, so that programs can be focused most effectively and, in these times of limited resources, be more sustainable. Data from enhanced surveillance and research programs can guide planning and policy efforts to improve the lives of people with epilepsy.

ONLINE PUBLICATIONS

Global Health

**Good health adds life to years: Global brief for World Health Day 2012**

World Health Organization, April 2012

28 pp. 3.7 MB:  
http://whqlibdoc.who.int/hq/2012/WHO_DCO_W HD_2012.2_eng.pdf

The Global brief for World Health Day (7 April) takes a fresh look at health data on ageing to help us better understand the needs of older people. Sections include key points, the demographics of ageing and the epidemiology of population ageing. The document also outlines four key actions that governments and societies can take now for healthier and more active ageing.

***

**The Global Fund to Fight AIDS, Tuberculosis and Malaria**

Presentation by the General Manager, 29 March 2012

30 pp. 478 kB:  

In a progress report to the Board of the Global Fund the General Manager Gabriel Jaramillo says that the Global Fund is moving from a complex organisation with bureaucratic processes that dissatisfy donors and implementers to an organisation that “proactively responds to the needs of both donors and implementers with simple and agile processes.” Grant management processes, in particular, will be streamlined.

***

HESP-News & Notes - 08/2012 - page 6
There is an urgent need for new resources and innovation in global health, and the world is looking to the BRICS (Brazil, Russia, India, China and South Africa) and other emerging economies for greater leadership in these areas. As these countries invest more in global health and Research & Development, it is clear that their approaches differ from those of traditional donors and are shaped by their own experiences, philosophies and interests. It is also clear that the BRICS and other emerging economies will play an increasingly important role in driving access to new health technologies and services.

* * *

The Role of Public Health Institutions in Global Health System Strengthening Efforts: The US CDC’s Perspective

by Peter Bloland, Patricia Simone, Brent Burkholder et al.

To guide its support of public health in low- and middle-income countries around the world, the US Centers for Disease Control and Prevention (CDC) proposes to prioritize its investments on strengthening six key public health functions that would contribute the most towards health systems strengthening efforts as a whole and have the greatest impact on improving the public's health. In this Policy Forum article, the authors set out the US CDC’s perspective on the role of public health institutions in global health system strengthening efforts.

* * *

Bugs, Drugs & Smoke: Stories from Public Health

Editor: Fiona Fleck
World Health Organization (WHO), December 2011

This book is primarily for young people, especially those interested in working in public health. It explains in simple, non-technical language how humankind developed techniques to protect the health of communities, drawing on first-hand interviews with leading public health figures. It covers a wide range of topics, from the control of infectious disease outbreaks to fighting the stigma attached to mental health conditions.

* * *
Guidelines for the Use of Antiretroviral Agents in HIV-1-Infected Adults and Adolescents

Developed by the HHS Panel on Antiretroviral Guidelines for Adults and Adolescents - A Working Group of the Office of AIDS Research Advisory Council (OARAC), 30 March 2012

240 pp. 4.7 MB:

Newly updated US antiretroviral treatment guidelines are recommending antiretroviral treatment for all people with HIV infection, with particular emphasis on treatment for: people with CD4 cell counts below 500; anyone at risk of transmitting HIV to partners; pregnant women; and people with hepatitis B co-infection or HIV-related kidney disease.

* * *

The International AIDS Conference Returns to the United States
Lessons from the Past and Opportunities for July 2012

by Katherine E. Bliss
Center for Strategic and International Studies (CSIS), March 2012

32 pp. 1.3 MB:
http://csis.org/files/publication/120327_Bliss_InterAIDSConference_Web.pdf

This report examines the political history of the international AIDS conferences from 1985 to the present. It is less a survey of major public health achievements in the fight against HIV/AIDS than an examination of the politics of the conferences themselves. It provides insights into the ways the conferences have contributed to the mobilization of funding, research, and advocacy focused on ending the epidemic. At the same time, it aims to offer considerations for future conference planning and decision making.

* * *

Possible Clues Found to Why HIV Vaccine Showed Modest Protection

National Institute of Allergy and Infectious Diseases (NIAID), 4 April 2012
Read online at:

Insights into how the first vaccine ever reported to modestly prevent HIV infection in people might have worked were just published in the New England Journal of Medicine. Scientists have found that among adults who received the experimental HIV vaccine during the landmark RV144 clinical trial, those who produced relatively high levels of a specific antibody after vaccination were less likely to get infected with the virus than those who did not.

* * *

Using quality improvement to accelerate highly active antiretroviral treatment coverage in South Africa

by Patty D Webster, Maria Sibanyoni, Dinah Malekutu et al.
The authors report on a health systems strengthening intervention using quality improvement (QI) methods at the sub-district level to accelerate highly active antiretroviral treatment (HAART) initiation in South Africa. They conclude that a QI approach, using learning networks to teach simple data-driven methods for addressing system failures, with increased training and resource inputs, can assist districts to quickly reach universal coverage targets.

* * *

**Effectiveness of generic and proprietary first-line anti-retroviral regimens in a primary health care setting in Lusaka, Zambia: a cohort study**

by Jeffrey SA Stringer, Albert J Mwango, Mark J Giganti et al.


Although generic anti-retroviral drugs are in common use throughout the developing world, studies comparing their clinical effectiveness with that of proprietary formulations are lacking. In this large programmatic cohort of adults starting zidovudine-based first-line therapy, clinical outcomes appeared similar among patients on generic or proprietary formulations. These findings support continued use of generic anti-retroviral drug formulations in resource-constrained settings.

* * *

**Levers of Success: Case studies of national sexuality education programmes**

by Chris Castle, Ekua Yankah, Dhianaraj Chetty et al.

United Nations Educational, Scientific and Cultural Organization, 2010

This report identifies a range of factors that can contribute to the successful development and implementation of sexuality education in the school setting at regional, country, or local levels. One finding: “Effective sexuality education provides young people with age-appropriate, culturally relevant and scientifically accurate information. It also provides young people with structured opportunities to explore attitudes and values and to practise the skills they will need to be able to make informed decisions about their sexual lives.”

* * *

**Implementation of legal abortion in Nepal: a model for rapid scale-up of high-quality care**

by Ghazaleh Samandari, Merrill Wolf, Indira Basnett et al.
While challenges remain in ensuring that all Nepali women can readily exercise their legal right to early pregnancy termination, the national safe abortion program has already yielded strong positive results. Nepal's experience making high-quality abortion care widely accessible in a short period of time offers important lessons for other countries seeking to reduce maternal mortality and morbidity from unsafe abortion and to achieve Millennium Development Goals.

---

**Quality Sexual Education Needed for Adolescents in Egyptian Schools**

by Fatma El Zahraa Geel

The severe lack of knowledge among adolescents regarding sexual and reproductive health (SRH) is a serious concern in Egypt, where half the population is younger than 25. The majority of youth are enrolled in school, presenting a valuable opportunity for the country’s new government to address these issues directly: by ensuring that school curricula include comprehensive and age-appropriate SRH education that is culturally sensitive and responsive to the needs of young Egyptians.

---

**‘Stepping Stones PLUS’ - supporting women in their quest for safe motherhood**

by Alice Welbourn, Florence Kilonzo, TJ Mboya and Shoba Mohamed Liban


The manual aims to support communities in tackling HIV-related stigma, discrimination and denial and promoting the care, respect and support for people with HIV which is the crucial missing ingredient. ‘Stepping Stones PLUS’ is a supplement to the internationally renowned ‘Stepping Stones’ training manual, published in 1995 by the Strategies for Hope Trust and ActionAid.

To order copies, please contact TALC: info@talcuk.org; http://www.talcuk.org
Tel.: +44-1727-853-869.
Barriers to hospital delivery in a rural setting in Coast Province, Kenya: community attitude and behaviours

by FK Mwangome, PA Holding, KM Songola, GK Bomu
Rural and Remote Health 12: 1852. (Online) 2 April, 2012

8 pp. 223 kB:

A minority of births in sub-Saharan African regions are conducted with the supervision of skilled birth attendants. With among the highest world-wide maternal mortality ratios and the majority of the deaths being associated with a lack of trained supervision at delivery, changing delivery practices is a major priority in this world region. Qualitative analysis identified a number of barriers to seeking skilled attendants at birth. The authors conclude that the communities must be better informed about the costs and benefits of hospital deliveries, while medical services must be more sensitive to community needs and preferences.

* * *

Mother to Child: How Discrimination Prevents Women Registering the Birth of their Child

by Annie Audsley, Nicole McCloy, Rebecca Wallace et al.
Plan International & the UHI Centre for Rural Childhood, 2012

86 pp. 1.3 MB:
http://www.perth.uhi.ac.uk/specialistcentres/ruralchild/Documents/Mother%20to%20Child%20Full%20Report.pdf

Millions of children could be going unregistered as mothers around the world face widespread discrimination when it comes to birth registration. This study commissioned by Plan in 50 developing countries shows that even where legal provisions exist, mothers routinely suffer multiple barriers to birth registration due to local attitudes and discriminatory cultural practices. The study makes several recommendations for the work required to affect change.

* * *

Increase in facility-based deliveries associated with a maternal health voucher programme in informal settlements in Nairobi, Kenya

by Ben Bellows, Catherine Kyobutungi, Martin Kavao Mutua et al.

9 pp. 103 kB:
http://heapol.oxfordjournals.org/content/early/2012/03/20/heapol.cz030.full.pdf+html

The study investigated whether there was an association between the introduction of an output-based voucher programme and the odds of a facility-based delivery in two Nairobi informal settlements. A positive association was observed between vouchers and facility-based deliveries in Nairobi. Although there is a need for higher quality evidence and validation in future studies, this statistically significant and policy relevant finding suggests that increases in facility-based deliveries can be achieved through output-based finance models that target subsidies to underserved populations.

* * *
Accountability for Maternal, Newborn & Child Survival: An update on progress in priority countries

by Jennifer Requejo, Jennifer Bryce, Adam Deixel et al.
World Health Organization, March 2012

94 pp. 9.4 MB:

The profiles in this publication highlight how well each country is doing in increasing coverage of high-impact interventions that can save the lives of millions of women and children. The core indicators included in these updated profiles encompass key elements of the reproductive, maternal, newborn, and child health (RMNCH) continuum of care. The report also includes a brief report providing a snapshot of progress on these core indicators across the priority countries, revealing promising news as well as challenges that still remain to be addressed.

Equity in maternal, newborn, and child health interventions in Countdown to 2015: a retrospective review of survey data from 54 countries

by Aluísio JD Barros, Carine Ronsmans, Henrik Axelson et al.

9 pp. 360 kB:
http://download.thelancet.com/pdfs/journals/lancet/PIIS0140673612601135.pdf

Countdown to 2015 tracks progress towards achievement of Millennium Development Goals (MDGs) 4 and 5, with particular emphasis on within-country inequalities. The authors assessed how inequalities in maternal, newborn, and child health interventions vary by intervention and country. They noted substantial variations in coverage levels between interventions and countries. The most inequitable interventions should receive attention to ensure that all social groups are reached.

Medicines for Maternal Health: Key Data and Findings

by Rachel Wilson, Kristy Kade, Abiah Weaver et al.
Prepared for the United Nations Commission on Commodities for Women and Children’s Health, February 2012

37 pp. 1.6 MB:

Expanding access to quality, affordable maternal health medicines is critical to making progress in reducing maternal mortality. This report provides a review of the current conditions and available evidence on maternal health medicines, specifically Oxytocin and Misoprostol to prevent post-partum haemorrhage and magnesium sulfate, considered the safest, most effective, and lowest-cost medication for treating pre-eclampsia and eclampsia.
What We Don’t See - Pediatrics 1812-2012

by Margaret Kendrick Hostetter
200th Anniversary Article


Malaria

The implementation of a new Malaria Treatment Protocol in Timor-Leste: challenges and constraints

by João Soares Martins, Anthony B Zwi, Karen Hobday et al.

10 pp. 190 kB: http://heapol.oxfordjournals.org/content/early/2012/03/28/heapol.cz019.full.pdf+

Timor-Leste changed its malaria treatment protocol in 2007, replacing the first-line for falciparum malaria from sulphadoxine-pyrimethamine to artemether-lumefantrine. This study explored the factors affecting the implementation of the revised treatment protocol, with an emphasis on identifying key constraints. The authors conclude that to effectively implement a revised malaria treatment protocol, barriers should be identified during the policy formulation process and those emerging during implementation should be recognized promptly and addressed.

* * *

Cost and cost effectiveness of long-lasting insecticide-treated bed nets - A model-based analysis

by Anni-Maria Pulkki-Brannstrom, Claudia Wolff, Niklas Brannstrom et al.
Cost Effectiveness and Resource Allocation 2012, 10:5 (4 April 2012)


The World Health Organization recommends that national malaria programmes universally distribute long-lasting insecticide-treated bed nets (LLINs). The results support the WHO recommendation to distribute only LLINs, while giving guidance on the price thresholds above which this recommendation will no longer hold. Programme planners should be willing to pay a premium for nets which have a longer physical lifespan, and if planners are willing to pay USD 1,600 per under-5 death averted, investing in replenishment is cost effective.

* * *
Management of uncomplicated malaria in febrile under-five-year-old children by community health workers in Madagascar: reliability of malaria rapid diagnostic tests

Arsene Ratsimbasoa, Harintsoa Ravony, Jeanne-Aimee Vonimpaisomihanta et al.

The purpose of this study was to assess the performance of the malaria rapid diagnostic tests (RDTs) used by community health workers (CHWs) by comparing RDT results with two reference methods (microscopy and Polymerase Chain Reaction, PCR). The authors conclude that the introduction of easy-to-use diagnostic tools, such as RDTs, at the community level appears to be an effective strategy for improving febrile patient management and for reducing excessive use of anti-malarial drugs.

* * *

The Gates Malaria Partnership: a consortium approach to malaria research and capacity development

by Brian Greenwood, Amit Bhasin, Geoffrey Targett
Tropical Medicine & International Health; Article first published online: 16 March 2012

The Gates Malaria Partnership (GMP) was an experiment in research capacity development that evolved as the project progressed. A number of important lessons were learnt during the course of the project. A need to strengthen postgraduate training in health sciences in African universities is gaining increasing attention. The authors hope that some of the lessons learnt by GMP will help others entering this crucial but relatively neglected area.

* * *

Risk factors for mortality from imported falciparum malaria in the United Kingdom over 20 years: an observational study

by Anna M Checkley, Adrian Smith, Valerie Smith et al.
BMJ 2012; 344 (Published 27 March 2012)

The study tries to determine which travellers with malaria are at greatest risk of dying, highlighting factors which can be used to target health messages to travellers. Most travellers acquiring malaria are of African heritage visiting friends and relatives. In contrast the risks of dying from malaria once acquired are highest in the elderly, tourists, and those presenting in areas in which malaria is seldom seen. Doctors often do not think of these as high risk groups for malaria; for this reason they are important groups to target in pre-travel advice.

* * *
Estimates of child deaths prevented from malaria prevention scale-up in Africa 2001-2010

by Thomas P Eisele, David A Larsen, Neff Walker et al.
Malaria Journal 2012, 11:93 (Published: 28 March 2012)

This study suggests that funding for malaria prevention in Africa over the past decade has had a substantial impact on decreasing child deaths due to malaria. Rapidly achieving and then maintaining universal coverage of these interventions should be an urgent priority for malaria control programmes in the future. Successful scale-up in many African countries will likely contribute substantially to meeting MDG 4, as well as succeed in meeting MDG 6 (Target 1) to halt and reverse malaria incidence by 2015.

Do patients adhere to over-the-counter artemisinin combination therapy for malaria? Evidence from an intervention study in Uganda

by Jessica L Cohen, Elif Yavuz, Alexandra Morris et al.
Malaria Journal 2012, 11:83 (23 March 2012)

Increasing affordability of artemisinin combination therapy (ACT) in the African retail sector could be critical to expanding access to effective malaria treatment, but must be balanced by efforts to protect the efficacy of these drugs. The authors conclude that overall, adherence to subsidized ACT purchased over-the-counter was found to be moderate. Further, a non-trivial fraction of those who complete treatment are taking the full course too quickly. Strategies to increase adherence in the retail sector are needed in the context of increasing availability and affordability of ACT in this sector.

Effectiveness and cost-effectiveness of first BCG vaccination against tuberculosis in school-age children without previous tuberculin test (BCG-REVAC trial): a cluster-randomised trial

by Susan M Pereira, Mauricio L Barreto, Daniel Pilger et al.
The Lancet Infectious Diseases, Vol. 12, Issue 4, pp. 300-306, April 2012

Catch-up BCG vaccination of school-age children who missed neonatal BCG vaccination could be indicated if it confers protection and is cost-effective. The authors conclude that vaccination of school-age children without previous tuberculin testing can reduce the incidence of tuberculosis and could reduce the costs of tuberculosis control. Restriction of BCG vaccination to the first year of life is not in the best interests of the public nor of programmes for tuberculosis control.

HESP-News & Notes - 08/2012 - page 15
Diagnosing and preventing TB in children

by Theo Smart
HATIP #189, March 30th, 2012

TB is more difficult to diagnose in children. This edition of HATIP includes a scoring tool which may assist in diagnosis, and a compilation of recent expert opinion and research on the best range of symptoms for use in screening children for TB. More research is needed in this area. The most important intervention to protect infants and young children against TB is to diagnose and treat TB in their mothers and other household members, and to ensure that anyone with TB and HIV is receiving antiretroviral therapy.

Electronic recording and reporting for tuberculosis care and control

by Hazim Timimi, Katherine Floyd, Philippe Glaziou et al.
World Health Organization, Information Resource Centre HTM/STB, March 2012

Adopting electronic recording and reporting is not simply about choosing a piece of software: it is also about changing how people work. This is not a simple undertaking. This document introduces the key questions to be considered and illustrates what the questions, options and recommendations mean in practice by drawing on examples of recent experience from a variety of countries. It is an essential resource for all those planning to introduce electronic recording and reporting systems for TB care and control, or to enhance existing systems.

2011 Report on Tuberculosis Research Funding Trends, 2005-2010
2nd Edition

By Eleonora Jiménez-Levi
Treatment Action Group, March 2012

Close to 4,000 people die every day from tuberculosis, but 2010 investments in researching diagnostics and vaccines for the disease did not even reach half the US$ 2 billion annual target. The report said that in 2010, donors invested only US$ 630.4 million in TB Research & Development, with 81 percent of total funding coming from only 10 sources. The report identifies the major TB donors and where the funds are invested. It also aims to help policymakers and activists determine areas to target their advocacy efforts.
Addressing poverty through disease control programmes: examples from Tuberculosis control in India

by Vishnu Vardhan Kamineni, Nevin Wilson, Anand Das et al.
International Journal for Equity in Health 2012, 11:17 (Published: 26 March 2012)

Tuberculosis remains a major public health problem in India with the country accounting for one-fifth or 21% of all tuberculosis cases reported globally. The purpose of the study was to obtain an understanding on pro-poor initiatives within the framework of tuberculosis control programme in India and to identify mechanisms to improve the uptake and access to TB services among the poor.

Non-communicable Diseases

An ecological approach to non-communicable disease prevention in the workplace

by Anniza de Villiers, Marjanne Senekal, Jean Fourie
Occupational Health Southern Africa, July - August 2011, Vol. 17, No. 4

Non-communicable diseases (NCDs) are the leading cause of death globally, killing more people each year than all other causes combined. Furthermore, behavioural risk factors for NCDs fall increasingly on poorer people within all countries, mirroring the underlying socio-economic determinants. The need for prevention efforts through well-planned, cost-effective and feasible interventions across all levels of society is therefore obvious. The workplace is argued to provide an important setting for ecological models that ensure the both the policies and the environments that enable health.

* * *

Country-Level Decision Making for Control of Chronic Diseases

by Alexandra Beatty
Board on Global Health; Institute of Medicine (IOM), 2012

There is growing recognition that chronic diseases represent a major health threat in low- and middle-income countries, accompanied by significant economic consequences. Yet most governments, global health institutions, and development agencies have largely overlooked chronic diseases when investing in health in developing countries. However, a recent report concluded that not only is it possible to reduce the burden of cardiovascular and related chronic diseases in developing countries but such a reduction will be critical to achieving global health and development goals.

* * *
Cancer mortality in India: a nationally representative survey

by Rajesh Dikshit, Prakash C Gupta, Chinthanie Ramasundarahettige et al.
The Lancet, Early Online Publication, 28 March 2012

10 pp. 696 kB: http://download.thelancet.com/pdfs/journals/lancet/PIIS0140673612603584.pdf

The age-specific mortality rates and total deaths from specific cancers have not been documented for the various regions and subpopulations of India. The authors assessed the cause of death in 2001-03 in homes in small areas that were chosen to be representative of all the parts of India. They conclude that prevention of tobacco-related and cervical cancers and earlier detection of treatable cancers would reduce cancer deaths in India, particularly in the rural areas that are underserved by cancer services. The substantial variation in cancer rates in India suggests other risk factors or causative agents that remain to be discovered.

Social Protection

The Revised Social Protection Index
Methodology and Handbook

by Bob Baulch, Terry McKinley, Sri Wening Handayani et al.
Asian Development Bank (ADB), October 2011


The Asian Development Bank developed the Social Protection Index (SPI) in 2005-2008 to address the growing recognition that economic growth is insufficient in addressing the needs of the poor and vulnerable. In 2010, it revised the SPI to highlight the impact of expenditures on all beneficiaries. This revised SPI handbook contains the rationale for the revision, comparing the total social protection expenditure across all potential beneficiaries with the poverty line expenditures in each country, and offers guidelines for preparing social protection country assessments.

* * *

Control and Accountability in Conditional Cash Transfer Programs in Latin America and the Caribbean
Key Topics and Areas for Further Improvement

by Lucy Bassett, Gaston Blanco, Helena Ribe et al.
World Bank, Latin America and the Caribbean Region, Social Protection Unit, October 2011

12 pp. 2.1 MB: http://siteresources.worldbank.org/EXTSAFETYNETSANDTRANSFERS/Resources/CCTs_Accountability_Note/Web.pdf

Conditional cash transfer (CCT) programs in Latin America and the Caribbean (LAC) have become flagship national social programs with increasingly broad coverage and demonstrated results. By providing cash payments to poor families that meet certain behavioural requirements, generally related to children’s health care and education,
CCTs seek to alleviate poverty in the short-term while fostering human capital development in the long-term. Evidence from a number of countries shows that these programs are well targeted, reduce poverty in the poorest households, and improve the use of education and health services.

***

**Social Cash Transfers and Financial Inclusion: Evidence from Four Countries**

by Chris Bold, David Porteous and Sarah Rotman
Focus Note 77; Washington, D.C.: CGAP, February 2012


In a number of countries, two separate, but potentially complementary policy agendas have emerged in the past five years: governments have sought to increase the use of electronic means for government payments and to promote greater financial inclusion. While the two agendas have by no means converged yet, in practice they have often been translated into a single headline objective: to increase the proportion of recipients of government social cash transfers who receive payment directly into a bank account.

***

**The potential for cash transfers in Nigeria**

by Rebecca Holmes, Michael Samson, Wendy Magoronga et al.
Overseas Development Institute, February 2012


In recent years, the government of Nigeria and its development partners have sought to develop social protection instruments as a mechanism to tackle high rates of poverty and vulnerability in the country and to support development progress in both the economic and the social spheres. As such, social protection is emerging as a policy objective, with cash transfers identified at the federal level and to some extent the state level as a potentially important instrument to achieve these goals. This report examines the role of cash transfers in Nigeria and discusses considerations for the appropriateness and feasibility of different types of cash transfers in the Nigerian context.

***

**How does access to social protection programmes affect the decision to migrate?**

by Jessica Hagen-Zanker and Carmen Leon Himmelstine
Overseas Development Institute (ODI) Background Notes, April 2012


This background note reviews current evidence on how access to social protection programmes influences decisions to migrate internally or internationally. The positive effects of migration on migrant households are obvious and well-documented. These include poverty reduction, wealth creation and investments in businesses. However, mi-
migration may also have a negative impact on a migrating household - such as child abandonment - and on their home areas, including labour shortages. For these reasons, and others, policy makers often aim to reduce migration.

* * *

**Productive Role of Safety Nets**

by Harold Alderman and Ruslan Yemtsov

The paper contains a framework for linking social protection with growth and productivity, an updated review of the literature, new original work filling in gaps in the available evidence, and a discussion of operational implications. The paper demonstrates that there was a shift in the economists’ view on social protection, and now they are seen as a force that can make a positive contribution towards economic growth and reduce poverty.

* * *

**Pension Reforms and Gender Equality in Latin America**

by Camila Arza
United Nations Research Institute for Social Development (UNRISD), March 2012

As most other components of social protection systems, pension schemes can have a substantial impact on gender equality. The way in which pension systems distribute rights, resources and risks can affect men and women differently and serve to mitigate, reproduce or amplify the gender inequalities emerging from the labour market, the distribution of work in the household, and so on. This paper shows that recent pension reforms in Chile, Bolivia and Argentina have embraced some of these problems, and the gender equality issue is slowly being introduced in Latin American pension reform agendas.

* * *

**The Hippo Water Roller: Technology for improved access to water**

by Daniela Kirkby
Consultancy Africa Intelligence, April 2012

This paper discusses the Hippo Water Roller project and its benefits for African people. The project has sought to tackle the water crisis Africa is currently facing. It does this
through a bespoke design that is aimed at alleviating the daily challenges African people face when transporting water. The device allows water to be transported faster, in greater volumes and more efficiently than before.

**Human Resources**

**Human Resources in Health (HRH) Toolkit**

Resources in this eToolkit include WHO guidelines and protocols, documents from Southern African countries on strategic planning, health worker production retention, as well as pre-service and in-service training, country experiences with performance-based financing, and various HRH data sources. Intended audiences for this eToolkit include people and organizations who wish to familiarize themselves with various components of the HRH crisis, focusing primarily on Southern Africa.

* * *

**Why do health workers in rural Tanzania prefer public sector employment?**

by Nils Gunnar Songstad, Karen Marie Moland, Deodatus Amadeus Massay et al.

BMC Health Services Research 2012, 12:92 (5 April 2012)

Severe shortages of qualified health workers and geographical imbalances in the workforce in many low-income countries require the national health sector management to closely monitor and address issues related to the distribution of health workers across various types of health facilities. This article discusses health workers’ preferences for workplace and their perceptions and experiences of the differences in working conditions in the public health sector versus the church-run health facilities in Tanzania. The broader aim is to generate knowledge that can add to debates on health sector management in low-income contexts.

**Health Systems & Research**

**Private versus public strategies for health service provision for improving health outcomes in resource-limited settings**

by Dominic Montagu, Andrew Anglemyer, Mudita Tiwari et al.

Global Health Sciences, University of California, San Francisco, July 2011

Private healthcare providers deliver a significant proportion of healthcare services in low- and middle-income countries (LMIC). Poorer patients get sick and go without care more frequently, and spend more of their incomes on private healthcare than the wealthy. This review is focused on comparing health outcomes in private versus public care settings. It seeks to summarize what is known regarding the relative morbidity or
mortality outcomes that result from treatment by public or private providers in LMIC.

* * *

**Disease control and health systems in low- and middle-income countries: enhancing positive interrelation**

by Charles Collins, Miguel Angel Gonzalez Block, Shenglan Tang  
Tropical Medicine & International Health; Article first published online: 16 March 2012

There is a growing interest in improving the relationship between disease control programmes and the rest of the health system in low- and middle-income countries. This short study seeks to contribute to this movement by providing a multi-dimensional approach for policy-makers and researchers. It recognizes the different and often conflicting perspectives in health systems held by stakeholders. Two such perspectives are those of disease control programmes and health systems.

* * *

**Research to support universal coverage reforms in Africa: the SHIELD project**

Guest Editors: Di McIntyre and Anne Mills  
Health Policy and Planning, Volume 27, suppl. 1, March 2012

Free access to all 11 articles at:  
http://heapol.oxfordjournals.org/content/27/suppl_1.toc

The Social Health Insurance for Equity in Less Developed countries (SHIELD) project sought to respond to a call on universal health coverage adopted at the 2005 World Health Assembly, by critically evaluating the health systems of three African countries (Ghana, South Africa and Tanzania) through an equity lens, and the extent to which expanded or new financing mechanisms could address the equity challenges faced by these countries. It adopted a system-wide perspective, considering both the public and the private health sectors, and evaluating financing as well as service use elements of these health systems. This supplement presents the key findings of the research.

* * *

**Investing in African research training institutions creates sustainable capacity for Africa: the case of the University of the Witwatersrand School of Public Health Masters programme in epidemiology and biostatistics**

by Ronel Kellerman, Kerstin Klipstein-Grobusch, Renay Weiner et al.  
Health Research Policy and Systems 2012, 10:11 (4 April 2012)

16 pp. 227 kB:  

Investing in African institutions to improve research training capacity resulted in the retention of graduates in Africa in research positions and produced research output. Training programmes can be sustained when national governments invest in higher educa-
tion and where that funding is judiciously applied. Challenges remain if funding for students bursaries is not available.

***

**Private sector involvement in health services in East and Southern Africa: country profiles**

by Nicola Foster
Regional Network for Equity in Health in Southern Africa (EQUINET) Discussion Paper 89, March 2012

41 pp. 265 kB: [http://www.equinetafrica.org/bibl/docs/Diss89%20PrivsecESA.pdf](http://www.equinetafrica.org/bibl/docs/Diss89%20PrivsecESA.pdf)

This report looks at the characteristics and extent of private sector involvement in health financing and provision in East and Southern African countries. It synthesises available information on the private health sector in the following ESA countries: Angola, Botswana, the Democratic Republic of the Congo (DRC), Kenya, Lesotho, Madagascar, Malawi, Mauritius, Mozambique, Namibia, South Africa, Swaziland, the United Republic of Tanzania, Uganda, Zambia and Zimbabwe. For each country the core health financing issues, including available National Health Accounts data, are briefly discussed. An overview is provided of the presence (or not) of private health insurance, and different types of private providers.

***

**Innovative Pro-Poor Healthcare Financing and Delivery Models**

by Donika Dimovska, Stephanie Sealy, Sofi Bergkvist, Hanna Pernefeldt
Results for Development Institute, 2009


The report describes 33 innovative financing and delivery programs selected based on their relevance to broader health systems and potential to achieve positive impact for poor people. While these programs range from donor-driven initiatives to large-scale government-subsidized efforts to for-profit businesses, they all involve active participation by the private health sector. The report identifies five financing and delivery mechanisms as key instruments of mixed health systems that can improve access to, availability of, and quality of health services.

***

**Epidemiology in Latin America and the Caribbean: current situation and challenges**

by Sandhi M Barreto, Jaime J Miranda, J Peter Figueroa et al.

15 pp. 620 kB: [http://ije.oxfordjournals.org/content/41/2/557.full.pdf+html](http://ije.oxfordjournals.org/content/41/2/557.full.pdf+html)

This article analyses the epidemiological research developments in Latin America and the Caribbean. It integrates the series commissioned by the International Epidemiological Association to all WHO Regions to identify global opportunities to promote the development of epidemiology. The authors conclude that the health research panorama of
the region shows enormous regional discrepancies, but great prospects. Improving research and human resources capacity in the region will require establishing research partnerships within and outside the region.

Information & Communication Technology

*The Global Information Technology Report 2012: Living in a Hyperconnected World*

Editors: Soumitra Dutta and Beñat Bilbao-Osorio
World Economic Forum, April 2012


Over the past decade, The Global Information Technology Report series, has become the most comprehensive and respected international assessment of the preparedness of economies to leverage the networked economy. This research provides a unique platform for public-private dialogue on best policies and for determining what actions will further national ICT readiness and innovation potential.

* You Are What You Tweet: Analyzing Twitter for Public Health

by Michael J. Paul and Mark Dredze
Association for the Advancement of Artificial Intelligence, 2011


Analyzing user messages in social media can measure different population characteristics, including public health measures. For example, recent work has correlated Twitter messages with influenza rates in the United States; but this has largely been the extent of mining Twitter for public health. In this work, the authors consider a broader range of public health applications for Twitter.

* mBCC Field Guide: A Resource for Developing Mobile Behavior Change Communication Programs

S. Umapathy, G.A. O’Sullivan, and S. Rahaim
Abt Associates Inc., February 2012


Mobile behavior change communication (mBCC) is defined here as the use of mobile phones to promote behavior change. The “mBCC Field Guide” is a new tool that helps users guide the design of mobile applications for health and provides insights about what works in mobile behavior change communication is now available. This paper examines what is known about the power of mobile communication tools to influence health behaviours for consumers and health care providers.
**Deepening Participation and Improving Aid Effectiveness through Media and ICTs**

A Practical Manual Translating Lessons Learned into Daily Practice

by Patrick Kalas and Christoph Spurk
Swiss Agency for Development and Cooperation (SDC), 2012

25 pp. 642 kB:
[http://www.e-agriculture.org/sites/default/files/uploads/media/Deepening_Participation_and_Improving_Aid_Effectiveness_through_Media_and_ICTs_Paper_final_WEB%5B1%5D.pdf](http://www.e-agriculture.org/sites/default/files/uploads/media/Deepening_Participation_and_Improving_Aid_Effectiveness_through_Media_and_ICTs_Paper_final_WEB%5B1%5D.pdf)

After more than ten years of support in the realm of Information and Communication Technologies (ICTs) for Development, the Swiss Agency for Development and Cooperation (SDC) has looked back: What do we really know about ICTs, and how can those insights be made useful for the daily practice of development cooperation and particularly in governance programs to enhance voice and accountability? A critical review of project reports, studies, and evaluations was conducted to distil lessons learned and find out what really works and why.

---

**Education**

**Girls’ Education, Empowerment, and Transitions to Adulthood**

by Ann Warner, Anju Malhotra, Allison Mcgonagle
International Center for Research on Women (ICRW), 2012

28 pp. 898 kB:

This paper makes a case for why leveraging education to facilitate girls’ transitions to healthy, safe and productive adulthood is the single most important development investment that can be made. This document provide guidance on how we can build on past progress, forge more productive alliances and redouble our efforts to ensure that all girls in the developing world have the opportunity to obtain a quality, relevant education.

* * *

**From Evidence to Policy - Do School Feeding Programs Work?**

The World Bank, Human Development Network, January 2012

4 pp. 706 kB:

In Burkina Faso, Lao People’s Democratic Republic and Uganda, World Bank researchers teamed up with the World Food Programme (WFP) to evaluate the impact of school feeding and take-home rations programs. The resulting policy note evidences that, when properly implemented, school feeding programs can raise enrolment and lead to better learning.

* * *
Alcohol in the European Union: Consumption, harm and policy approaches

Edited by: Peter Anderson, Lars Møller and Gauden Galea
WHO Regional Office for Europe, Copenhagen, Denmark, 2012

161 pp. 6.7 MB:

Alcohol is one of the world's top three priority areas in public health. Even though only half the global population drinks alcohol, it is the world's third leading cause of ill health and premature death, after low birth weight and unsafe sex, and greater than tobacco. In Europe, alcohol is also the third leading risk factor for disease and mortality after tobacco and high blood pressure. This report presents the latest literature overview of effective alcohol policies, and includes data from the European Union, Norway and Switzerland in the areas of alcohol consumption, harm and policy approaches.

Millennium Development Goals


United Nations Economic and Social Council, Economic Commission for Africa, Published: 10 February 2012

18 pp. 464 kB:

This report, released at a conference in Addis Ababa, Ethiopia, showed that while North African nations are making good progress on maternal, infant, and child mortality indicators, countries in sub-Saharan Africa still lag behind U.N. goals for reducing mortality.

* * *

Is the Distribution of Foreign Aid MDG-Sensitive?

by Degol Hailu and Raquel Tsukada
United Nations Department of Economic and Social Affairs, February 2012

25 pp. 2.2 MB:

This paper examines whether Official Development Assistance (ODA) is disproportionately allocated to countries that need to make the most progress on the Millennium Development Goals (MDGs). It is expected that MDG-sensitive distribution of foreign aid - or a good donor-recipient match - to be guided by the principles of the Global Partnership for Development. When the MDG-sensitivity criteria for aid allocation is applied, the results indicate that ODA allocation since the Millennium Declaration has become more MDG-sensitive – ODA is given to countries that need it most.

* * *
Although significant progress has been made in the last decade towards the health MDGs, MDGs 4 and 5 (and indeed elements of MDG 6) will not be reached according to the latest projections. One reason is that the current global financing architecture for reproductive, maternal, newborn, and child health (RMNCH) may not be structured in a way that optimally facilitates the mobilization and channeling of financing and the rapid scale-up of RMNCH interventions. This report examines options for improving this aid architecture in order to accelerate progress towards MDGs 4 and 5.
have occurred in donor performance since the first edition.

Beyond Paris: 11 innovations in aid effectiveness

by Matthew Morris and Jonathan Pryke
Development Policy Centre, The Australian National University, Canberra, November 2011


This paper provides some examples of new innovations in the management and delivery of development aid. The aim is to promote discussion, encourage feedback on lessons of recent innovations and help identify future reforms. Aid will continue to represent a large, and probably growing, commitment of rich governments. The paper briefly explores the traditional so-called ‘Paris’ reform agenda based around harmonization and alignment, and the limits of this agenda. This leads into the next three sections of the paper: a discussion of 11 recent innovations in development aid.

The Long-Run Impact of Foreign Aid in 36 African Countries

by Katarina Juselius, Niels Framroze Møller and Finn Tarp
UNU-WIDER, September 2011


Studies of aid effectiveness abound in the literature, often with opposing conclusions. To investigate this the authors perform a comprehensive study of the long-run effect of foreign aid (ODA) on a set of key macroeconomic variables in 36 sub-Saharan African countries from mid-1960s to 2007. It was found a positive effect of ODA on investment in 33 of the 36 included countries, but hardly any evidence supporting the view that aid has been harmful.

Arab Development Challenges Report 2011

Editors: Emilia Garofalo and Mona Naguib
United Nations Development Programme, 2011


This report analyses key interlocking development challenges in the Arab region that are the underpinnings of the growing impetus for positive transformative change. It also seeks to provide a menu of options to address the challenges in a manner that paves the way for smooth transitions and transformations that are in direct response to the aspirations of the People of the Arab region toward human dignity.
From high to low aid: a proposal to classify countries by aid receipt

by Jonathan Glennie and Annalisa Prizzon
Overseas Development Institute (ODI), March 2012


While there has always been a view that aid should eventually work itself out of a job, more countries are now voicing their desire to reduce the amount of aid they receive in the medium rather than just the long term. This paper argues that a classification of countries according to their aid receipts could contribute to reducing dependence on official development assistance as well as help donors and recipients monitor changes.

* * *

‘Valuing development’: Could approaches to measuring outcomes in health help make development more accountable?

by Claire Melamed, Nancy Devlin and John Appleby
Overseas Development Institute (ODI), March 2012


The development business is being asked to get more serious about results and evaluation. This is an opportune time to think about the outcomes that ‘development’ is trying to achieve and who gets to decide what they are. This report proposes one approach to answering the question: “Can we devise a way of measuring outcomes, based on poor people’s own values, which strikes the right balance between a reasonable representation of reality and usability by policy makers?”

* * *

An Assessment of the Busan Partnership for Effective Development Co-operation: From a civil society perspective

Open Forum for CSO Development Effectiveness, March 2012


The civil society sector has released its assessment of the Busan aid effectiveness forum’s outcome document. The review notes some high points, especially in moving the agenda beyond aid effectiveness to address development effectiveness. Civil society organizations also praised the document’s focus on transparency and acknowledged the “greatly enhanced” space they were given during the Busan forum itself. But the Busan Partnership for Effective Development Cooperation failed to adequately address the key points that civil society organizations pushed for at the December 2011 forum, the assessment notes.

* * *

HESP-News & Notes - 08/2012 - page 29
Earth Institute: World Happiness Report
Edited by John Helliwell, Richard Layard and Jeffrey Sachs
The Earth Institute, Columbia University - 2012


It is not just wealth that makes people happy: Political freedom, strong social networks and an absence of corruption are together more important than income in explaining well-being differences between the top and bottom countries. At the individual level, good mental and physical health, someone to count on, job security and stable families are crucial. These are among the findings of the first World Happiness Report that reflects a new worldwide demand for more attention to happiness and absence of misery as criteria for government policy.

Population and Economic Development 2012 Data Sheet
by Donna Clifton, Toshiko Kaneda, and Mahesh Karra
Population Reference Bureau, March 2012

The data sheet with 21 indicators from 140 low- and middle-income countries, presents a complex picture of countries still struggling with economic challenges and inequalities, while others are making significant headway. Though there are fewer low-income countries in 2012 than there were in 2000, those that have graduated into middle-income status continue to battle persistent poverty and sharp variations in inequalities. A number of countries, regardless of income level, are making strides to meet these challenges.

Breaking stereotypes about going to clinics: Towards a pro-male health system
by Malefetsane Soai
Consultancy Africa Intelligence, April 2012


This paper seeks to unearth the factors that inhibit men from developing health-seeking behaviours. Men shun going to medical check-ups for a variety of reasons. The greatest challenge for health policymakers is to encourage more men to go to medical check-ups in order to stem some of the diseases that are claiming the lives of men. Thus the paper explores the best ways in which a men-specific healthcare system and services can be developed to cater for men.

HESP-News & Notes - 08/2012 - page 30
'The new DDT': Dogs, Drugs, and Traps

They are now using Limburger cheese volatiles to trap malaria mosquitoes, but how do you see the role of dogs in the fight against malaria? And what to think of the pill that can kill mosquitoes?

Watch the video (10 Min.) at: http://www.youtube.com/watch?v=gah5TyZOSq4

*SACEMA Quarterly*

The SACEMA Quarterly is an online magazine produced every three months by SACEMA – the Centre of Excellence in Epidemiological Modelling and Analysis. The aim is to provide regular updates, articles and reviews of developments in the world of quantitative epidemiology – with particular reference to the human health in the South African scene and to advances in the fight against the twin scourges of HIV and TB: http://sacemaquarterly.com/

This issue includes the following main articles:

- BED Incidence Testing for Evaluating HIV Intervention Programs by Guy Mahiane, Bertran Auvert
- Imagine a world without AIDS by Brian Williams, Alex Welte

*Bulletin of the World Health Organization*

Volume 90, Number 4, April 2012, 245-320


In this special theme issue, Michael L Perdue & Tim Nguyen (246) look at the WHO public health research agenda for influenza two years from its initial publication. Nahoko Shindo & Sylvie Briand (247) discuss influenza at the beginning of the 21st century, while, in an interview, William Ampofo (254-255) tells Ben Jones why it is essential to track the burden of influenza in Africa.

**INTERESTING WEB SITES**

*Information for Community Oriented Municipal Services (iCOMMS)*

http://www.icomms.org/

The aim of iCOMMS is to develop mobile infrastructure to monitor the delivery of basic services, such as safe drinking water, to rural communities. The University of Cape Town’s iCOMMS team is dedicated to developing
context-relevant tools that will help governments and decision-makers to collect the information they require to deliver better services and to monitor policy implementations.

* * *

**Community Action on Harm Reduction**

http://www.cahrproject.org/

Community Action on Harm Reduction (CAHR) is an ambitious project that aims to expand harm reduction services to more than 180,000 injecting drug users, their partners and children in China, India, Indonesia, Kenya, and Malaysia.

**TRAINING OPPORTUNITIES**

**Blended e-Learning course: Management of Medicines in International Health**

Deutsche Gesellschaft für Internationale Zusammenarbeit (GIZ) GmbH, Competence Center Human Capacity Development, Africa Department

Duration: 07.05.2012 - 30.11.2012
Face-to-face workshop: 26 – 30 November 2012, Kenya

The aim of this course is to introduce the participants to the subject of rational management of medicines in public health services. The course is sponsored by the Federal Ministry for Economic Cooperation and Development on behalf of the Government of the Federal Republic of Germany. The course is accredited by TropEd (5.5 ECTS). The course is for health professionals from developing countries and in the handling of medicines such as prescribing doctors, pharmacists, health service managers, administrators and nurses from Cameroon, Kenya, Malawi, Ruanda and Tanzania.

Application Deadline: 09 April 2012 !!

For more information download the course brochure:

Send the application form together with your CV, by e-mail to the following address: mmih2012@giz.de

* * *

**Online course: Health Information Systems to Improve Quality of Care in Resource-Poor Settings**


The goal of this course is the development of innovations in information systems for developing countries that will (1) translate into improvement in health outcomes, (2) strengthen the existing organizational infrastructure, and (3) create a collaborative ecosystem to maximize the value of these innovations. The course will be taught by guest speakers who are internationally recognized experts in the field and who, with their operational experiences, will outline
the challenges they faced and detail how these were addressed.

CONFERENCES

43rd Union World Conference on Lung Health

13-17 November 2012
Kuala Lumpur, Malaysia

The theme of the conference is “Driving sustainability through mutual responsibility”. The organizers are particularly interested in attracting abstracts on the following broad topics: tuberculosis, asthma, pneumonia, HIV/AIDS, tobacco-related and all other lung diseases, as well as the health consequences of air pollution.

For more information see the conference website: http://www.worldlunghealth.org or write to: scientific2012@theunion.org

CARTOON

TIPS & TRICKS

Microsoft Outlook Configuration Analyzer Tool


Many problems experienced by Outlook users are due to a corrupted MS Office Outlook Profile. The Outlook Configuration Analyzer Tool (OCAT) provides a quick and easy method to analyze your MS Office Outlook Profile for common configurations that may cause problems in Outlook. You can also download a complete OCAT user guide from the above download page. It is highly recommended that you read this document before installing and using OCAT.
Rearranging the Android Favourites Tray

To move an icon on an Android phone, touch and hold the icon, and drag it to a new location. On Android 4.0, this procedure can also make often used icons more accessible by dragging them to the Favourites Tray (located above the Navigation buttons). To reset the Favourites tray, icons can either be moved to make room, or new ones can be stacked with existing icons in the tray (creating a folder).

To move an app from the Favourites Tray, touch and hold the icon and drag it to the home screen (the “All Apps” icon in the centre is permanent, and can’t be moved). Then, drag the preferred icon to the Favourites Tray.

* * *

Distinguishing a zero from an O

Most (but not all) fonts try to portray a zero as an oval with a sharp top and bottom and flat sides. If you turn a printed zero sideways, you will clearly see it resting on a flat belly. An O on the other hand, can be perceived as something that is easy to roll.

Here is a list of fonts and how they show a zero an O. As we can see, distinguishing a zero from an O within the same font is easy, but for some fonts, like Georgia, it gets a bit harder. Always remember, a zero will have nearly flat sides and an O will have a broadly rounded top and bottom in most cases.

<table>
<thead>
<tr>
<th>Zero/o in caps</th>
<th>Font Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>0/O</td>
<td>Arial</td>
</tr>
<tr>
<td>0/O</td>
<td>Antique Olive</td>
</tr>
<tr>
<td>o/O</td>
<td>Georgia</td>
</tr>
<tr>
<td>0/O</td>
<td>Book Antiqua</td>
</tr>
<tr>
<td>0/O</td>
<td>Times New Roman</td>
</tr>
<tr>
<td>0/O</td>
<td>Verdana</td>
</tr>
</tbody>
</table>

Best regards,

Dieter Neuvians MD