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BOOKS

European Report on Development 2013
Post 2015: Global Action for an Inclusive and Sustainable Future
by Yurendra Basnett, Bruce Byiers, Florence Dafe et al.
Overseas Development Institute (ODI), German Development Institute / Deutsches Institut für Entwicklungspolitik (DIE), European Centre for Development Policy Management (ECDPM), April 2013
315 pp. 17.9 MB(!):

The Report argues that the new framework that will replace the MDGs needs to build on the past achievements, but has to go further by looking beyond MDGs and beyond aid. Effective multilateral action in areas as migration, trade, and finance – not covered by the MDGs – will be key to efforts of developing countries to achieve progress. The Report draws on wide-ranging research and consultations in Nepal, Rwanda, Cote d’Ivoire, and Peru.

***

Strengthening civil registration and vital statistics for births, deaths and causes of death
Resource Kit
by Alan Lopez, Lene Mikkelsen, Rasika Rampatige et al.
World Health Organization, 2013
254 pp. 2.3 MB:
http://apps.who.int/iris/bitstream/10665/78917/1/9789241504591_eng.pdf

Given the huge importance of well-functioning civil registration and vital statistics (CRVS) systems to both the public and policy-makers, it is remarkable that this issue has received so little attention from the global health and development community. With their primary focus on the need for regular and reliable statistics on births and deaths by age, sex and cause of death, the eight modules and associated resources which comprise the kit will enable all users to identify, locate and make use of core standards, tools, materials and country experiences.

***

OECD Guidelines on Measuring Subjective Well-being
by Conal Smith, Carrie Exton, Tracey Chester et al.
Organisation for Economic Co-operation and Development, 2013
270 pp. 2.3 MB:
http://www.oecd-ilibrary.org/oecd-guidelines-on-measuring-subjective-well-being_5k4dmc22dtls.pdf?contentType=/ns/Book&itemId=/content/book/9789264191655-en&containerItemId=/content/book/9789264191655-en&accessItemIds=&mimeType=application/pdf

Being able to measure people’s quality of life is fundamental when assessing the progress of societies. There is now widespread acknowledgement that measuring subjective well-being is an essential part of measuring quality of life alongside other social and economic indicators.
economic dimensions. These Guidelines represent the first attempt to provide international recommendations on collecting, publishing, and analysing subjective well-being data.

* * *

**South African Health Review 2012/13**

Editors: Ashnie Padarath and René English  
Health Systems Trust, March 2013

346 pp. 17.1 MB(!):  

The South African Health Review 2012/13 provides information on selected issues that are relevant to the six building blocks of health systems strengthening, the Negotiated Service Delivery Agreement and primary health care re-engineering. A range of experts provide commentary on topics such as social determinants of health, non-communicable diseases, climate change and occupational health. The Review also contains a section on core health issues where recent developments in health information, medicines selection and pricing and health legislation and policy are discussed.

**ONLINE PUBLICATIONS**

**Global Health**

**The Lancet Global Health Series: Universal Health Coverage**

Published online December, 2012

The Lancet Global Health Series are groups of articles on a topic of global health importance.

Universal Health Coverage eBook (110 pp. 1.4 MB):  
Download for iBooks from iTunes  
Download for Kindle from Amazon  
Download for tablet/smartphone/EPUB

The vision of Universal Health Coverage (UHC) is rapidly becoming a reality, with access to health care no longer the privilege of a few, but the birthright of many. In years to come, those whose actions helped bring about the rise of UHC can rightly be proud of this legacy; while those who persist in their opposition will find themselves increasingly trying to defend an argument that, as today’s issue shows, makes no ethical, political, economic, or health sense.

* * *

**Health in the Post-2015 Agenda**

by Shenaaz El-Halabi, Themba Moeti, Joy Phumaphi et al.  
Task Team for the Global Thematic Consultation on Health in the Post-2015 Development Agenda, April 2013

108 pp. 1.2 MB:  
[http://www.worldwewant2015.org/bitcache/aa5345b4af0fae1615b108c3e392a2ca781ce2ec?vid=366802&disposition=attachment&op=download](http://www.worldwewant2015.org/bitcache/aa5345b4af0fae1615b108c3e392a2ca781ce2ec?vid=366802&disposition=attachment&op=download)
Between September 2012 and March 2013 the Global Thematic Consultation on Health in the Post-2015 Development Agenda received inputs from people and organizations around the world on how best to ensure the health of future generations. Following a three-week public review of the first draft of this report, a high-level meeting was convened in Gaborone, Botswana in early March 2013 to discuss a revised draft. This report is a summary of the findings from the full consultative process.

* * *

**The Global Fund to Fight AIDS, Tuberculosis and Malaria: Update on Results and Impact**

Fourth Replenishment (2014-2016), April 2013

30 pp. 1.4 MB:  

The Global Fund Fourth Replenishment is the name given to the organization’s work to secure financing for 2014-2016. A Preparatory Meeting is being held in Brussels on 9-10 April 2013, which serves as an opportunity for the organization to present to current and potential donors the results of its programs and its financing needs for the next three years. It will close with a pledging meeting to be held in the fourth quarter of 2013. The funding secured through this process will drive the implementation of the Global Fund Strategy 2012-2016

* * *

**Is global health really global?**

by Peter Byass  
Glob Health Action 2013, 6: 20671

3 pp. 217 kB:  
http://www.globalhealthaction.net/index.php/gha/article/download/20671/pdf_1  

It seems that global health as a concept has not yet achieved southern ownership. This may be a transitional stage, but it also means that the future of the concept of global health is at risk: if global health does not achieve more general global ownership in the relatively near future, it may go into terminal decline as a concept. To ensure the future of global health, rapid progress is needed on making everyone count, documenting the dynamics of disease burdens, understanding ‘social determinants of health’ and the effects of climate on health, as well as making health information a universally accessible public good.

* * *

**Decentralisation and WHO reform: a broader perspective**

by Ilona Kickbusch  

14 pp. 620 kB:  
http://graduateinstitute.ch/webdav/site/globalhealth/shared/1894/Publications/working%20papers/Working%20papers_008.pdf
The paper argues that the greatest challenges of the WHO reform are governance challenges. In principle, WHO with its three tiers of governance is actually better placed to act in a multilevel and multi-actor world than many other international organizations. Its challenge is to set itself up to do so much better than at present through adopting principles of network governance. This is a challenge not only to the Secretariat but also to the Member States and how they govern the organization.

* * *

**Concepts in and Perspectives on Global Health Diplomacy**

by R. Loewenson, M. Modisenyane and M. Pearcey
Regional Network for Equity in Health in East and Southern Africa (EQ-UINET) Discussion Paper 96, January 2013

Health has been brought into foreign policy processes for several centuries, as a goal of foreign policy; a tool of foreign policy, to secure economic or security interests of states and an intended outcome in the collective negotiation of competing interests. Diplomacy primarily emerges from and is framed by security issues. It initially and largely responds to public health as containment of risk. What then are the possibilities of raising health as a goal rather than a tool of foreign policy? What are the risks of raising health goals within foreign policy platforms? Given the de facto rise in health diplomacy, this paper explores questions on Global Health Diplomacy (GHD), to inform debate and dialogue in Africa on raising health within global diplomacy.

* * *

**Globalization, Climate Change, and Human Health**

by Anthony J. McMichael

Rapid globalization has brought new, large-scale influences to bear on patterns of human health. Various global-scale changes - economic, social, demographic, and environmental (particularly climatic) - are linked, for example, to the increased prevalence of obesity, changes in regional food yields, the emergence of infectious diseases, the spread of cigarette smoking, and the persistence of health disparities. Undertaking primary prevention at the source to reduce health risks resulting from these global influences is a formidable challenge.

* * *

**Global health post-2015: the case for universal health equity**

by Lucia D'Ambruoso
Glob Health Action 2013, 6: 19661

This paper is part of the thematic cluster Global Health Beyond 2015. More papers from
The deadline for the MDGs, 2015, is approaching. At that time a new global development infrastructure will become operational. This article examines the topic from an analytical health perspective and identifies universal health equity as an operational and analytical priority to encourage attention to the root causes of unnecessary and unfair illness and disease from the perspectives of those for whom the issues have most direct relevance.

* * *

Untreated Pain, Narcotics Regulation, and Global Health Ideologies

by Nicholas B. King and Veronique Fraser

Access to pain management is a widely recognized human right, enshrined in international law. There should be no serious technical or financial obstacles to global distribution of effective pain treatments. Why then is there so much untreated pain? Calls to action on untreated pain are numerous, but they will continue to fall on deaf ears as long as the existing players in global health accept the marginalization of pain management in their dominant ideologies.

* * *

HIV - AIDS - STI

Nevirapine versus efavirenz for patients co-infected with HIV and tuberculosis: a randomised non-inferiority trial

by Maryline Bonnet, Nilesh Bhatt, Elisabeth Baudin et al.
The Lancet Infectious Diseases, Vol. 13, Issue 4, pp. 303-312, April 2013

Access to pain management is a widely recognized human right, enshrined in international law. There should be no serious technical or financial obstacles to global distribution of effective pain treatments. Why then is there so much untreated pain? Calls to action on untreated pain are numerous, but they will continue to fall on deaf ears as long as the existing players in global health accept the marginalization of pain management in their dominant ideologies.

* * *

The South African Antiretroviral Treatment Guidelines 2013

Department of Health (South Africa), 24 March 2013

The Antiretroviral Treatment (ART) guidelines introduce fixed dose combination (FDC)
ART for patients for the first time; introduce FDC ART for HIV positive pregnant women irrespective of CD4 count during pregnancy and during the breastfeeding period; phased introduction of FDC to patients with other co-morbidities and phased introduction of FDC to patients who require switching due to drugs toxicity or switching from Stavudine (d4T) based regime.

* * *

**Scoping Report on Interventions for Increasing the Demand for Voluntary Medical Male Circumcision**

by Eric Djimeu Wouabe and Annette N. Brown
International Initiative for Impact Evaluation, February 2013

55 pp. 405 kB: [http://www.3ieimpact.org/media/filer/2013/03/22/white_paper_vmmc.pdf](http://www.3ieimpact.org/media/filer/2013/03/22/white_paper_vmmc.pdf)

In order to promote and identify effective interventions for increasing the demand for Male Circumcision (MC), the International Initiative for Impact Evaluation (3ie) is implementing a grants program for piloting and testing demand-side innovations for MC. The aim of this scoping report is to guide implementers of Voluntary Medical Male Circumcision (VMMC) programmes and researchers in the design of innovative interventions to increase the uptake of MC in 14 priority countries.

* * *

**Priority interventions to reduce HIV transmission in sex work settings in sub-Saharan Africa and delivery of these services**

by Matthew F Chersich, Stanley Luchters, Innocent Ntaganira et al.
Journal of the International AIDS Society 2013, 16:17980


Virtually no African country provides HIV prevention services in sex work settings with an adequate scale and intensity. Uncertainty remains about the optimal set of interventions and mode of delivery. The authors conclude that there is sufficient evidence of effectiveness of targeted interventions with female sex workers in Africa to inform delivery of services for this population. With improved planning and political will, services would act at multiple levels to reduce HIV exposure and transmission efficiency among sex workers. Initiatives are required to enhance access to HIV testing and ART for sex workers, using current CD4 thresholds, or possibly earlier for prevention.

* * *

**Evaluation of Public Sector Workplace Programme in Tanzania**

by Gerlinde Reiprich and Jörg Longmuß
Health Focus GmbH, January 2013


In 2007 the Tanzanian Commission for AIDS asked GIZ to support the development and implementation of a comprehensive and sustainable workplace programme for the pub-
lic sector that is mandatory in Tanzania. The programme’s evaluation has just been fi-
finalized and is now available at the above URL.

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**Adolescents and Long-Acting Reversible Contraception: Implants and In-
trauterine Devices**

Committee on Adolescent Health Care, Long-Acting Reversible Con-
traception Working Group
Committee Opinion, Number 539, October 2012

7 pp. 428 kB:  
http://www.acog.org/~/media/Committee%20Opinions/Committee%20on%20Adol-
escent%20Health%20Care/co539.pdf?dmc=1&ts=20130328T1333462609

Long-acting reversible contraception (LARC) - intrauterine devices and the contracep-
tive implant - are safe and appropriate contraceptive methods for most women and ado-
lescents. The LARC methods are top-tier contraceptives based on effectiveness, with 
pregnancy rates of less than 1% per year for perfect use and typical use. These contracep-
tives have the highest rates of satisfaction and continuation of all reversible contracep-
tives. Adolescents are at high risk of unintended pregnancy and may benefit from in-
creased access to LARC methods.

* * *

**Early Marriage, Marital Relations and Intimate Partner Violence in Ethiopia**

by Annabel Erulkar  
International Perspectives on Sexual and Reprodu-
tive Health, Vol. 39, Nr. 1, March 2013

8 pp. 132 kB:  
http://www.guttmacher.org/pubs/journals/3900613.pdf

In Ethiopia, the lack of educational opportunities for girls is fuelling the country’s high 
level of early marriage. Using data on 20-24-year-old women, the author found that most 
of those who had married before age 15 had never been to school (79%) and that only 
3% had attained any secondary schooling. Unschooled women had nine times the risk 
of marrying before age 15 as women who had some degree of formal education and five 
times the risk of marrying at ages 15-17.

* * *

**Laws and Policies Affecting Sex Work**

Sexual Health and Rights Project - Open Society Foundations, 2012

12 pp. 747 kB:  
http://www.opensocietyfoundations.org/sites/default/files/sex-
work-laws-policies-20120713.pdf

The purpose of this reference brief is to clarify terms and illustrate examples of alterna-
tives to the use of criminal law as a response to sex work. Laws and policies on sex 
work should be based on the best available evidence about what works to protect health.
and rights. They should optimize sex workers’ ability to realize the right to due process under the law, the right to privacy, the right to form associations, the right to be free of discrimination, abuse, and violence, and the right to work and to just and favourable conditions of work. Sex workers should have a meaningful role in the design, implementation, and monitoring of the laws and policies that affect them.

* * *

**Ten Reasons to Decriminalize Sex Work**

Sexual Health and Rights Project - Open Society Foundations, July 2012


This document provides ten reasons why decriminalizing sex work is the best policy for promoting health and human rights for sex workers, their families, and communities. Removing criminal prosecution of sex work goes hand-in-hand with recognizing sex work as work and protecting the rights of sex workers through workplace health and safety standards. Decriminalizing sex work means sex workers are more likely to live without stigma, social exclusion, and fear of violence.

* * *

**Criminalizing Condoms**

by Acacia Shields
Sexual Health and Rights Project - Open Society Foundations, July 2012


In countries around the world, police are actively engaged in stopping and searching sex workers and confiscating or destroying condoms found in their possession. In many cases, possession of condoms has been used by prosecutors as evidence of prostitution. This treatment of condoms as contraband forces sex workers to make a choice between safeguarding their health and staying safe from police harassment or arrest. “Criminalizing Condom” documents these practices in six countries and identifies their consequences on sex workers’ lives, including their vulnerability to HIV.

* * *

**What has high fertility got to do with the low birth weight problem in Africa?**

by Ivy Kodzi, Øystein Kravdal
Demographic Research, Vol. 28, Article 25, pp. 713-732, 4 April 2013


There has been much concern about adverse individual and societal consequences of
high fertility in sub-Saharan Africa. One concern is that children of high birth orders may have low birth weight. However, the evidence for such an effect is not strong. The authors found that while high fertility may lead to various adverse outcomes for African families, low birth weight appears not to be among these outcomes. Other factors, such as adolescent childbearing, poverty, and inadequate prenatal care may be more important determinants of low birth weight in Africa.

* * *

**Public hospital costs of treatment of abortion complications in Nigeria**

by Janie Benson, Mathew Okoh, Keris KrennHrubec et al.  

7 pp. 233 kB:  
[http://www.ipas.org/~media/Files/IPas%2020Publications/BensonIJG02012.ashx](http://www.ipas.org/~media/Files/IPas%2020Publications/BensonIJG02012.ashx)

Unsafe abortion is a significant contributor to maternal mortality in Nigeria, and treatment of post-abortion complications drains public healthcare resources. This cost could be reduced by shifting service provision to an outpatient basis, allowing service provision by midwives, and abandoning the use of dilation and curettage (D&C). Availability of safe, legal abortion would further decrease cost and reduce preventable deaths from unsafe abortion.

* * *

**Prevalence of placenta praevia by world region: a systematic review and meta-analysis**

by Jenny A. Cresswell, Carine Ronsmans, Clara Calvert et al.  
Tropical Medicine & International Health, Article first published online: 1 April 2013

13 pp. 155 kB:  

This study investigated the prevalence of placenta praevia in diverse geographic locations. The prevalence is low at around 5 per 1000 pregnancies. There is some evidence suggestive of regional variation in its prevalence, but it is not possible to determine from existing data whether this is due to true ethnic differences or other unknown factors.

* * *

**The Lancet Series: Childhood Pneumonia and Diarrhoea**

Published April 12, 2013  

Pneumonia and diarrhoea are the two leading causes of death in children under five and have overlapping risk factors. Several interventions can effectively address these problems, but are not available to those in need. The Lancet Series on Childhood Pneumonia and Diarrhoea, led by Aga Khan University, Pakistan, provides evidence in three comments and five papers for integrated control efforts for childhood pneumonia and diarrhoea.
Travel Medicine and Infectious Disease - Special Issue: Malaria Reviews
Vol. 11, No. 1, January-February 2013
http://www.travelmedicinejournal.com/current

The journal has recently released a special themed issue entitled “Malaria Reviews” that addresses malaria in both travellers and endemic area settings. The topics covered in the Special Issue range from historical aspects of malaria in temperate zones to futuristic themes such as the use of mobile phones to quantify the impact of human mobility on malaria in Africa. Additional topics covered include the epidemiology of the recent malaria outbreak in Greece, the status of the elusive malaria vaccine and the use of Artemisinin Combination Treatments (ACT) in travellers.

* * *

Universal Access to Malaria Diagnostic Testing
An Operational Manual
by Valérie D’Acremont
World Health Organization; First published in November 2011, revised in February 2013
160 pp. 2.1 MB:

In 2010, the WHO Global Malaria Programme issued revised guidelines for the treatment of malaria in which it was recommended that all suspected cases of malaria receive a diagnostic test prior to treatment. In many settings, especially in Africa, this represents a real paradigm change. The availability of inexpensive, quality assured rapid diagnostic tests for malaria means that parasite-based diagnosis is now not only achievable at peripheral health care facilities, but also at the community level. While achieving universal access to malaria diagnostic testing will not be easy, some countries have already shown that this can be done.

* * *

Challenges for malaria elimination in Zanzibar: pyrethroid resistance in malaria vectors and poor performance of long-lasting insecticide nets
by Khamis A Haji, Bakari O Khatib, Stephen Smith
Parasites & Vectors 2013, 6:82 (28 March 2013)
20 pp. 319 kB:
http://www.parasitesandvectors.com/content/pdf/1756-3305-6-82.pdf

Long-lasting insecticide treated nets (LLINs) and indoor residual house spraying (IRS) are the main interventions for the control of malaria vectors in Zanzibar. The sustainability of the gains achieved in malaria control in Zanzibar is seriously threatened by the resistance of malaria vectors to pyrethroids and the short-lived efficacy of LLINs. This study has revealed that even in relatively well-resourced and logistically manageable places like Zanzibar, malaria elimination is going to be difficult to achieve with the current control measures.
Risk Factors Associated with Clinical Malaria Episodes in Bangladesh: A Longitudinal Study

by Ubydul Haque, Gregory E. Glass, Arne Bomblies et al.
Am J Trop Med Hyg 2013 Vol. 88 No. 4 727-732; Published online February 18, 2013

Malaria is endemic to Bangladesh. In this longitudinal study, the authors used hydrologic, topographic, and socioeconomic risk factors to explain single and multiple malaria infections at individual and household levels. The study identifies stable malaria hotspots and risk factors that should be considered for cost-effective targeting of malaria interventions that may contribute to potential elimination of malaria in Bangladesh.

Tuberculosis

Advances in tuberculosis diagnostics: the Xpert MTB/RIF assay and future prospects for a point-of-care test

by Stephen D Lawn, Peter Mwaba, Matthew Bates et al.
The Lancet Infectious Diseases, Vol. 13, Issue 4, pp. 349-361, April 2013

The authors review the rapidly growing body of scientific literature and discuss the advantages and challenges of using the Xpert MTB/RIF assay in areas where tuberculosis is endemic. They also review other prospects within the developmental pipeline. A rapid, accurate point-of-care diagnostic test that is affordable and can be readily implemented is urgently needed. Investment in the tuberculosis diagnostics pipeline should remain a major priority for funders and researchers.

* * *

Definitions and reporting framework for tuberculosis - 2013 revision

World Health Organization, 2013

Collection of tuberculosis (TB) data forms part of the general health information system. For data to be comparable within and between the national TB programmes (NTPs), standard definitions of key concepts captured by NTP information systems need to be used. This document revises previous WHO standard case definitions for TB and drug-resistant TB, the categories used to assign outcomes, and the standard reporting framework for TB.

* * *
Same-Day Diagnosis of Tuberculosis by Microscopy: WHO Policy Statement

World Health Organization, 2011


In 2009, the strength of the evidence for a ‘same-day diagnosis’ approach (microscopy of two consecutive sputum specimens on the same day) was assessed by the WHO, following standard appropriate for evaluating both the accuracy and the effect of new interventions on patients and public health. It was found that there was sufficient generalizable evidence that a same-day diagnosis approach is equivalent, in terms of diagnostic accuracy, to conventional microscopy case-finding strategies.

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Course on Multidrug-Resistant Tuberculosis (MDR-TB)

The World Medical Association (WMA), 2010


This Course is aimed at medical practitioners involved in the management of Multidrug-Resistant Tuberculosis (MDR-TB) patients, under the guiding principles of the expanded DOTS framework. The Course presupposes essential knowledge of TB transmission, pathogenesis, and the international DOTS strategy for TB control. The Course aims to facilitate self-study by medical practitioners of contemporary, evidence-based standards for diagnosis and clinical management of MDR-TB in a variety of geographical, economic and social settings.

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Predictive Value of the Tuberculin Skin Test among Newly Arriving Immigrants

by Christiaan Mulder, Brigit Mulleners, Martien W. Borgdorff et al.
PLoS ONE 8(3): e60130 (27 March 2013)


In countries with a low-incidence of tuberculosis (TB), TB is primarily prevalent among first generation immigrants. Some data suggest that immigrants acquire TB infection in their country of origin and that incident TB is a consequence of reactivation of latent TB infection (LTBI). Specificity of the tuberculin skin test (TST) is considered limited, due to cross-reactivity with bacille Calmette-Guérin (BCG) vaccination and environmental mycobacteria. The objective of this study was to predict the risk of progression to TB within two years after entry given the TST result at entry. From this study the authors conclude that the TST has the discriminatory ability to differentiate between individuals at low and high risk of disease.
Mobile Phone Microscopy for the Diagnosis of Soil-Transmitted Helminth Infections: A Proof-of-Concept Study

by Isaac I. Bogoch, Jason R. Andrews, Benjamin Speich et al.

A smartphone, a strip of double-sided tape and a simple glass lens could have a significant impact on the diagnosis of helminths, intestinal parasites that affect millions in remote, rural parts of the world. In this proof-of-concept study in rural Tanzania, researchers compared the effectiveness of a lens attached to an iPhone with the effectiveness of a standard light microscope in searching for roundworm and hookworm eggs in 199 children's stool samples. Although not as sensitive as the light microscope, the mobile phone microscope revealed a sensitivity of 69.4% and a specificity of 61.5% for detecting any soil-transmitted helminth infection.

Polio Eradication and Endgame Strategic Plan 2013-2018

Global Polio Eradication Initiative, 29 March 2013

The WHO Global Polio Eradication Initiative (GPEI)'s new Polio Eradication and Endgame Strategic Plan targets the end of all kinds of polioviruses by 2018, including the wild and rare vaccine-related strains which cause paralysis among thousands of children worldwide. The plan is focused on developing and deploying a shot version of the anti-polio vaccine to replace the current oral variant, which is known to occasionally cause the same disease that it is supposed to prevent. This document is intended for the use of individuals and organizations involved in polio eradication efforts.

A Success Story: Togo Is Moving toward Becoming the First Sub-Saharan African Nation to Eliminate Lymphatic Filariasis through Mass Drug Administration and Countrywide Morbidity Alleviation

by Yao K. Sodahlon, Ameyo Monique Dorkenoo, Kodjo Morgah et al.

Togo is one of the 34 African countries endemic for lymphatic filariasis (LF) and is surrounded by the endemic countries of Benin, Ghana, and Burkina Faso. Togo is the first sub-Saharan country to achieve probable interruption of transmission and to move to
the post-Mass Drug Administration surveillance phase as defined by the WHO. Here the authors describe the elements that proved successful in the national strategy to address LF in Togo.

**Non-communicable Diseases**

*Enhancing nursing and midwifery capacity to contribute to the prevention, treatment and management of noncommunicable diseases*


38 pp. 709 kB: [http://www.who.int/entity/hrh/resources/observer12.pdf](http://www.who.int/entity/hrh/resources/observer12.pdf)

In most countries, nurses and midwives account for more than 50% of health-care providers, representing the largest group who can make significant contributions to prevent and treat non-communicable diseases. This document discusses specific interventions in the areas of policy, advocacy, research and education and practice, and the roles that nurses and midwives play. The evidence outlined in this document provides an important reference point for policy-makers, researchers, educationists, nurses and midwives, and other health-care workers.

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**Self-Measured Blood Pressure Monitoring: Action Steps for Public Health Practitioners**

A Million Hearts™ Action Guide
Centers for Disease Control and Prevention, US Dept. of Health and Human Services, 2013

40 pp. 1.0 MB: [http://millionhearts.hhs.gov/docs/mh_smbp.pdf](http://millionhearts.hhs.gov/docs/mh_smbp.pdf)

Million Hearts™ is a U.S. Department of Health and Human Services initiative with the goal of preventing one million heart attacks and strokes by 2017. Self-measured blood pressure monitoring (SMBP) plus additional support is one strategy that can be implemented in communities to reduce the risk of disability or death due to high blood pressure. This document provides action steps and resources for public health practitioners on self-measured blood pressure monitoring.

**Food & Nutrition**

*Long-term effects of breastfeeding*

A Systematic Review

by Bernardo L. Horta and Cesar G. Victora
World Health Organization, 2013

74 pp. 1.2 MB: [http://apps.who.int/iris/bitstream/10665/79198/1/9789241505307_eng.pdf](http://apps.who.int/iris/bitstream/10665/79198/1/9789241505307_eng.pdf)
Building upon the strong evidence on the short-term benefits of breastfeeding, the present review addresses its long-term consequences. Current evidence, mostly from high-income countries, suggests that occurrence of non-communicable diseases may be programmed by exposures occurring during gestation or in the first years of life. Early diets, including the type of milk received, is one of the key exposures that may influence the development of adult diseases.

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**Urban poverty, food security and climate change**

by Cecilia Tacoli, Budoor Bukhari, Susannah Fisher  
International Institute for Environment and Development, March 2013

35 pp. 752 kB:  
http://pubs.iied.org/pdfs/10623IIED.pdf

Low and irregular incomes are the root cause of urban food insecurity, but inadequate housing and basic infrastructure and limited access to services contribute to levels of malnutrition and food insecurity that are often as high if not higher than in rural areas. They also increase exposure and sensitivity to the impacts of climate change and affect the ability to build resilience. Effective policies need to address urban food insecurity in both its income and non-income dimensions, and their impact on gendered disadvantage.

* * *

**Measuring the Political Commitment to Reduce Hunger and Undernutrition in Developing Countries**

The Hunger And Nutrition Commitment Index (HANCI 2012)

by Dolf te Lintelo, Lawrence Haddad, Rajith Lakshman et al.  
Institute of Development Studies, April 2013

125 pp. 2.4 MB:  
http://www.hancindex.org/hanci2012/HANCI%202012%20report.pdf

The Hunger And Nutrition Commitment Index (HANCI) is launched to:  
1. Rank governments on their political commitment to tackling hunger and undernutrition;  
2. Measure what governments achieve and where they fail in addressing hunger and undernutrition;  
3. Praise governments where due, and highlight areas for improvement;  
4. Support civil society to reinforce and stimulate additional commitment towards accelerating the reduction of hunger and undernutrition;  
5. Assess whether improving commitment levels lead to a reduction in hunger and undernutrition.

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**Essential Medicines**

**When falsified medicines enter the supply chain: Description of an incident in Kenya and lessons learned for rapid response**

Jennifer Cohn, Tido von Schoen-Angerer, Elodie Jambert et al.  
Falsified and substandard medicines present serious concerns for public health. The authors describe an event that occurred in late 2011 involving falsified antiretroviral medicines found in the supplies of Médecins Sans Frontières (MSF) projects in Kenya. They discuss factors contributing to these falsified medicines entering the supply chain as well as the response by MSF and others. They make recommendations to help defend against future episodes of entry of falsified medicines into the supply chain as well as comments on appropriate responses in cases of falsified medicines.

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Assessing the efficacy of anthelminthic drugs against schistosomiasis and soil-transmitted helminthiases

by Antonio Montresor, Bruno Levecke, Marco Albonico et al.
World Health Organization, 2013

The objective of the document is to provide national control programmes with up-to-date guidelines on monitoring the efficacy of anthelminthic drugs administered in preventive chemotherapy programmes against Schistosomiasis and soil-transmitted helminthiases. Guidance is provided on when and how to assess the efficacy of anthelminthics, including detailed recommendations on indicators of efficacy, sample size, follow-up period, laboratory methods, statistical analysis and final interpretation of data collected, and also on how to respond when drug efficacy is reduced.

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TRIPS-plus and access to medicines in China

by Jing Chen, Xiaoyan Nie, Peng Yao et al.
Journal of Public Health Policy - advance online publication: 4 April 2013

Ample evidence shows that Trade-related aspects of intellectual property rights (TRIPS)-plus provisions have seriously affected access to and availability of drugs in the developing countries. This article focuses on intellectual property (IP) and the health implications of limited access to medicines in China, explores the TRIPS-plus arrangements in Chinese IP laws and regulations, and makes suggestions for China’s negotiation strategy in resisting pressure from developed countries to tighten IP laws and regulations.

Social Protection

Common Ground: UNICEF and World Bank Approaches to Building Social Protection Systems
Developing and strengthening social protection systems is at the core of the World Bank Social Protection and Labour Strategy, and the UNICEF Social Protection Strategic Framework. This note outlines common ground in this commitment and calls on other stakeholders to engage collaboratively in the systems agenda.

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Stop AIDS Alliance brief on Social Protection

International HIV/AIDS Alliance, March 2013

Achieving social protection for people and households affected by HIV is a critical step towards the realisation of universal access to prevention, treatment, care and support. Evidence shows that HIV-sensitive social protection can reduce vulnerability to HIV infection, improve and extend the lives of people with HIV, and support individuals and households. Social protection plays a critical role in helping people overcome the structural inequalities that drive the HIV epidemic and that serve as barriers to treatment, testing, schooling and other essential services.

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Impacts of the Continuous Cash Benefit Programme on Family Welfare

by Pedro Rodrigues de Oliveira and Ana Lucia Kassouf
International Policy Centre for Inclusive Growth, April 2013

Less well known than Bolsa Familia, but with a sizable budget, Benefício de Prestação Continuada (BPC) grants the amount of one minimum wage to any elderly people (65 or older) and to those with disabilities unable to live and work independently. This study aims to assess the BPC programme in terms of the effects it generates within beneficiary households. Specifically, it analyses the labour supply among elderly people and co-residents living in the households under consideration, as well as the labour and schooling levels of children living with grant recipients.

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MILK Brief #19: Microinsurance-only multinational intermediaries: The early years

by Richard Koven and Michael J. McCord
Microinsurance Learning and Knowledge (MILK), January 2013
The MILK Project has been designed to help answer the following two questions: Do low-income families really benefit from microinsurance? Is it true that there is a business case for microinsurance? The MILK project explores this by studying the commercial viability of three microinsurance-only multinational intermediaries: MicroEnsure, Planet-Guarantee, and AKAM. The short answer to the second question, based on the early operations of these three intermediaries, is that there is not a business case for a multinational microinsurance-only intermediary, but that there may be potential for a business case to develop.

Human Resources

**Brain Drain: Advocating to Alleviate the Global Health Worker Migration Crisis**

by Jessica Chen, Sarah Hampson and Alessandra Robertson

Student Voices 5; McMaster Health Forum, March 2013

In this paper, the authors evaluate various policy options to address the global health worker migration crisis, which include: financial and technical support from destination countries; bilateral and multilateral agreements between states; creation of self-sufficient healthcare systems; and collection of reliable migration data. Implementation requires the support of key stakeholders such as the World Health Organisation, member states, and other international organisations. However, there are many obstacles to policy change, including the power disparities between source and destination countries, ethical sensitivity of policies, financial incentives, lack of data collection, and limited international cooperation.

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**Addressing staff shortages in public hospitals: a role for clinical associates?**

by Jane Doherty

Public Health Association of South Africa (PHASA), February 2013

Developing mid-level health professionals who can complement existing staff is an additional strategy that has been debated since 1994 and incorporated into the South African government’s recent human resources policy. Concerns remain about whether mid-level workers are the correct choice for South Africa’s health system. The author discusses how the design and early implementation of a new programme to develop South Africa’s first mid-level medical health professionals took account of these concerns and realities. The author concludes that clinical associates have the potential to bring good quality hospital care closer to communities in a way that is affordable for the country.
Health in Europe

The Lancet - March 27, 2013

http://www.thelancet.com/series/health-in-europe

The Lancet Series on Europe provides a comprehensive examination of some of the most important issues affecting the health of people in Europe today. Seven Series papers, led by Prof. Martin McKee of the London School of Hygiene & Tropical Medicine, cover a diverse range of subjects, from how the financial crisis is affecting health in Europe, to whether children’s health services are keeping pace with the changing landscape of child health.

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A Pilot Project Using Evidence-Based Clinical Pathways and Payment Reform in China’s Rural Hospitals Shows Early Success

by Tsung-Mei Cheng

Health Affairs, April 2013

12 pp. 592 kB: http://content.healthaffairs.org/content/early/2013/04/01/hlthaff.2012.0640.full.pdf+html

The study presents early results from a pilot project underway in several of China’s rural provinces that combines new case-based payments for providers and evidence-based clinical pathways for management of patients. Before and after studies and analyses show a reduction in overall length of hospital stays, drug spending and usage, and patients’ out-of-pocket spending. Patient-provider communication and relations reportedly improved, and hospitals did not experience any revenue losses.

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Sharing Clinical Research Data - Workshop Summary

Steve Olson and Autumn S. Downey, Rapporteurs


This workshop focused on strategies to facilitate sharing of clinical research data in order to advance scientific knowledge and public health. While the workshop focused on sharing of data from pre-planned interventional studies of human subjects, models and projects involving sharing of other clinical data types were considered to the extent that they provided lessons learned and best practices.

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A comparative analysis of health policy performance in 43 European countries

by Johan P. Mackenbach and Martin McKee
It is unknown whether European countries differ systematically in their pursuit of health policies, and what the determinants of these differences are. In this article, the authors assess the extent to which European countries vary in the implementation of health policies in 10 different areas, and they exploit these variations to investigate the role of political, economic and social determinants of health policy. They conclude that substantial health gains can be achieved if all countries would follow best practice, but this probably requires the removal of barriers related to both the 'will' and the 'means' to implement health policies.

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International Union Against Tuberculosis and Lung Disease (The Union) and Médecins Sans Frontières (MSF), 2013

Operational research is “learning by doing” and can be broadly described as the “science of doing better”. The Union and MSF will promote and use operational research to improve health outcomes and prevent premature death of people living in low- and middle-income countries. Operational research is thus an important component of health service delivery, linked to the monitoring and health information system of a country.

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The power of the interviewer: A qualitative perspective on African survey data collection

by Sara Randall, Ernestina Coast, Natacha Compaore et al.
Demographic Research, Vol. 28, Article 27, pp. 763-792; 9 April 2013

African censuses and surveys remain dependent on interviewers for data collection. Data quality is assured through training and supervision. Some questions introduce unfamiliar ideas which require considerable negotiation by interviewers to obtain acceptable answers. This submission covers important issues for demographers undertaking secondary analysis of African surveys, especially those without fieldwork experience. The authors conclude that to improve survey data validity more effort should be made to understand the influence of interviewers on data in low-income settings.

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**Doctor Know: a knowledge commons in health**

by John Loder, Laura Bunt and Jeremy C Wyatt  
The Young Foundation, March 2013

43 pp. 1.1 MB:  

This paper argues that society’s growing ability to mobilise knowledge from different fields and sources is beginning to show the potential of a ‘knowledge commons’ in healthcare: an open system of knowledge with researchers, practicing clinicians, patients, their families and communities all involved in capturing, refining and utilising a common body of knowledge in real time. The authors set out what this might mean in practice, and steps we should take to get there.

* * *

**Connected Life: The impact of the Connected Life over the next five years**

PricewaterhouseCoopers (PwC) India, February 2013

24 pp. 3.3 MB:  

Mobile technology is redefining our lives and making it increasingly connected. From health and education to transportation and smarter cities, the proliferation of mobile communication and a connected life is now well established and here to stay. In this report, the authors have attempted to give a snapshot of trends that are redefining our lives through mobile technology. The instances cited here only scratch the surface of the impact that mobile devices will have on society over the next five years. The findings indicate an exciting future for both developed and developing markets.

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**A content analysis of communication between health practitioners in obstetrics and gynecology telemedicine services in Mongolia**

Master’s thesis proposal by Khandregzen Dorjsuren  
Graduate student at Taipei Medical University, June 2011

84 pp. 1.4 MB:  
https://s3-eu-west-1.amazonaws.com/case.io/attachments/b59ba1a84e184752b29a751646b54d84/5161322cd63ac37cd4000126/Master%20Thesis_South%20Korea_CampusMedicus.pdf

Telemedicine service, as a model of providing medical advice at distance, has been proven to be a cost effective, equity and efficient health care. These advantages are attracting policy makers, hospital managers, and health care providers worldwide and particularly, countries like Mongolia, where there are geographical and socio-economical barriers that create disparities for adequate access to health services.
The Dynamics of Opening Government Data

by Natalie Helbig, Anthony M. Cresswell, G. Brian Burke et al.
Center for Technology in Government, University at Albany, Albany, NY, USA

34 pp. 782 kB:

There is growing interest at all levels of government to increase access to and use of government data in support of good governance. A common assumption when opening government data is that simply supplying more data freely and in more formats will lead to more use. But supplying more and more data does not necessarily produce the results we anticipated. This paper presents an approach to analyze and model open data initiatives based on two key ideas: context and dynamics.

Healthy learning!

by Simon Brooker
Health and Literacy Prevention Project, January 2013

4 pp. 434 kB:
http://www.thiswormyworld.org/sites/www.thiswormyworld.org/files/content/blog/Final%20HALI%20brief%20%202013%20Feb.pdf

This study evaluated the impact of a complex intervention of malaria control and enhanced literacy instruction on the health and education of Kenyan school children. The authors conclude that the malaria intervention, based on intermittent screening and treatment (IST), had no effect on health or education and was found to be complex and costly. In contrast, the teacher training and support improved children’s literacy and reduced dropout. Children’s literacy improved most when teachers focused instruction on letters and sounds and when children were exposed to more text in the classrooms.

International Standards on Drug Use Prevention

by Giovanna Campello, Elisabeth Mattfeld, Wadih Maalouf et al.
United Nations Office on Drugs and Crime (UNODC), 2013

49 pp. 2.2 MB:

The International Standards are intended to guide policymakers worldwide to develop programmes, policies and systems that are a truly effective investment in the future of children, young people, families and communities. The global International Standards summarize the currently available scientific evidence and identify the major components and features of an effective national drug prevention system. The document describes interventions that have been proven to be effective in various countries, broken down by age category. It also outlines some drug prevention issues that require further research.
The challenge of new psychoactive substances

by Beate Hammond, Conor Crean, Sabrina Levissianos et al.
United Nations Office on Drugs and Crime (UNODC), March 2013

122 pp. 9.0 MB:

This report is the first global situation assessment on new psychoactive substances put forward under the Global Synthetics Monitoring: Analyses, Reporting and Trends (SMART) Programme. UNODC launched the SMART Programme in September 2008 that seeks to enhance the capacity of Member States and authorities in priority regions, to generate, manage, analyse and report synthetic drug information, and to apply this scientific evidence-based knowledge to design the policies and programmes.

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Global drug policy is ripe for reform

by Mikael Wigell
The Finnish Institute of International Affairs, March 2013

2 pp. 172 kB:

The global “war on drugs” has reached a turning point. The European Union should seize the opportunity to promote an alternative approach to global drug control. Harm reduction policies need to be extended, while not expecting legalization to solve everything. The emphasis should be on harm reduction instead of law enforcement.

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2012 Global Progress Report on Implementation of the WHO Framework Convention on Tobacco Control

WHO Framework Convention on Tobacco Control, 2012

97 pp. 2.6 MB:
http://apps.who.int/iris/bitstream/10665/79170/1/9789241504652_eng.pdf

The scope of this global progress report is threefold:
- first, it provides a global overview of the status of implementation of the Convention, on the basis of the reports provided by the Parties in the 2012 reporting cycle;
- second, it tracks progress made in implementation of the Convention between different reporting periods;
- third, it draws conclusions on overall progress, opportunities and challenges, and provides key observations by article.

Millennium Development Goals

Post-2015 Development Agenda Bulletin – Vol. 208, Nr. 9, 6 April 2013

Summary of the High-Level Consultation on Hunger, Food Security and Nutrition in the Post-2015 Development Agenda

HESP-News & Notes - 08/2013 - page 26
How Public Libraries Contribute Towards Reaching the Millennium Development Goals

Beyond Access Initiative, 2012

At a time of tight development budgets, libraries can offer a better, smarter way to achieve development goals. Libraries are flexible institutions that can respond quickly to community information needs, whether after a natural disaster or during an ongoing community medical, agricultural, economic or educational challenge. Development practitioners should seek to partner with libraries wherever available as a way to sustainably support initiatives in a variety of fields, including health, agriculture, civic engagement, education and others.

Development Assistance

A renewed global partnership for development

UN System Task Team on the Post-2015 UN Development Agenda, New York, March 2013

The working group on global partnerships was created by the UN Task Team on the Post 2015 Agenda to advance thinking about the characteristics of the global partnerships that would be required to advance a development agenda after 2015. This report captures the main messages contained in the ten individual ‘think pieces’ prepared by members of the working group, which elaborate on the characteristics of global partnerships in relation to specific thematic areas.

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Africa and the Demographic Dividend

Population Reference Bureau, April 2013

Prepared for CoM 2013, “Industrialization for an Emerging Africa”, the five factsheets describe the demographic dividend and the opportunities that this dividend presents for Africa: http://www.prb.org/Reports/2013/africa-demographic-dividend.aspx

The demographic dividend is the accelerated economic growth that may result from a rapid decline in a country’s fertility and the subsequent change in the population age structure. With fewer births each year, a country’s working-age population grows larger in relation to the young dependent population. With more people in the labour force and fewer young people to support, a country can exploit the window of opportunity for rapid economic growth if the right social and economic investments and policies are made in health, education, governance, and the economy. While the benefits of a dividend can be great, the gains are neither automatic nor guaranteed.

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The World’s Youth 2013 Data Sheet

Population Reference Bureau, 2013


The World’s Youth 2013 Data Sheet provides a comprehensive portrait of the well-being of youth ages 10 to 24 across the globe, including such indicators as the current and projected size of youth populations, educational enrolments, labour force participation, marriage and fertility, and health risks and behaviours.

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Death Sentences and Executions 2012

Amnesty International (AI) Publications, April 2013


Despite some negative developments, the use of the death penalty in 2012 overall confirmed the global trend towards abolition. This report analyzes some of the key developments in the application of the death penalty in 2012, presenting figures gathered by Amnesty International (AI) on the number of death sentences handed down and executions carried out during the year. AI opposes the death penalty in all cases without exception, regardless of the nature or circumstances of the crime; guilt, innocence or other characteristics of the individual; or the method used by the state to carry out the execution.
ELECTRONIC RESOURCES

Android Application: Course on MDR-TB

https://play.google.com/store/search?q=mdrtb

The global scale-up to address the challenge of multidrug-resistant tuberculosis (MDR-TB) will require health care workers in low-resource countries to improve their knowledge and skills to detect and care for larger numbers of MDR-TB patients.

This App contains the eight training modules which comprise the World Medical Association’s Course on Multidrug-Resistant Tuberculosis (MDR-TB). The current app is being released for the Android platform; the Apple iPad version will also be available shortly. Once the app is installed much of the course content is then accessible offline. You can find the Android app for free installation by typing the letters mdrtb in Google Play Store or clicking on the above link.

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Glocal Times - No 17/18 (2012)

http://ojs.ub.gu.se/ojs/index.php/gt

Adding to the development of an international community of academics and practitioners, Glocal Times aims at becoming an indispensable digital reference and a vivid forum for the discussion and dissemination of issues concerning communication for development and social change.

The publication’s theme in this issue is “Mobilizing Communication Globally: For What and for Whom?”

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Bulletin of the World Health Organization - Vol. 91, Nr. 4, April 2013


Highlights from the April 2013 issue:

- Community health workers in Africa, what cost?
- HIV programmes should provide filters for Cryptosporidium parasites
- Nigerians wake up to high blood pressure
- Equal chances for maternal care in Viet Nam?
- Reducing alcohol-related harm in China
- To vaccinate or not to vaccinate in emergencies?
- The polio endgame

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http://www.jphres.org/index.php/jphres

The Journal of Public Health Research is an online Open Access, peer-reviewed scholarly journal in the field of public health science. The aim of the journal is to stimulate debate and dissemination of knowledge in the public health field in order to improve efficacy, effectiveness and efficiency of public health interventions to improve health outcomes of populations. This
aim can only be achieved by adopting a global and multidisciplinary approach.

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**Public Health Action**

http://ingentaconnect.com/journals/browse/iuatld/pha

The International Union Against Tuberculosis and Lung Disease (The Union) has launched its open access, on-line journal Public Health Action (PHA) to provide a platform for its mission ‘Health solutions for the poor’. This journal addresses the clear need for show-casing operational research that addresses issues in health systems and services. It publishes high-quality scientific research that provides new knowledge to improve access, equity, quality and efficiency of health systems and services.

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**South African Medical Journal Vol. 103 No. 4**


The April 2013 issue of the South African Medical Journal has been published online (open access).

In this issue:
- Rape in South Africa – a call to action
- Eastern Cape corruption set to continue
- ‘Do not resuscitate’ orders unpacked
- Africa’s lethal motorists
- Thrombosis – the biggest killer

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**Open Data for Africa**


The Open Data Platform programme is part of the AfDB’s recently launched “Africa Information Highway” initiative aimed at significantly improving data management and dissemination in Africa. Work is on course to complete platforms for the rest of African countries by July 2013.

The Open Data Platform is a user-friendly tool for extracting data, creating and sharing own customized reports, and visualizing data across themes, sectors and countries in tables, charts and maps. The platform also facilitates the collection, analysis and sharing of data among countries and with international development partners.

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**OpenEMIS: Education Management Information System**


UNESCO launched a new version of OpenEMIS, a generic and open source Education Management information System (EMIS) software package issued without conditions or
restrictions for use by countries. OpenEMIS is designed to collect and report data on education systems. This sector-wide tool is designed to strengthen statistical information on education with an agile and cost-effective EMIS that can be easily adapted to the needs of information producers and users.

INTERESTING WEB SITES

International Collaboration for Essential Surgery (ICES)

http://essentialsurgery.com/

ICES exists to bridge the gap in global surgical care in developing countries by advocating for the provision of the most essential surgical procedures that should be present in every district hospital worldwide. Their mission is to promote the effective provision of essential low-cost surgical care to save lives & prevent serious disableity in low-resource settings. ICES works with local and international surgical societies to identify ways to bring this vision to reality.

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in2mhconnect Web site launched

http://in2mhconnect.com/

The in2mhconnect website has been launched as a new connect and discussion platform for people involved or interested in global mental health.

You can read more about the whole process behind this site in the in2mentalhealth blog post: ‘How to reach the unconnected? in2mhconnect is on the air’.

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NCD Free: A global social movement against Diabetes, Heart Disease, Cancer, Lung Disease

http://ncdfree.org/

Non-Communicable Diseases (NCDs) such as heart disease, diabetes, cancer, and lung disease kill more people than any other cause worldwide - 35 million every year. More than 80% of disease occurs in the world’s poorest and most marginalised communities. Great things are being done in communities across the planet and we need to bring attention to these inspiring people and their local action.

TRAINING OPPORTUNITIES

Observatory Venice Summer School 2013

Innovative Ways of Improving Population Health
San Servolo, Venice, 21–27 July 2013

European countries increasingly recognize the importance of population health interventions in national health policy. Too often though, public health runs along traditional
lines, drawing on established knowledge and training but overlooking key developments and issues. The Summer School will build on participants’ own knowledge and expertise in public health and marshal the latest evidence on new developments.

Summer School is primarily aimed at senior to mid-level policy-makers, with some junior professionals. All participants should be working in a decision-making or advisory institution that focuses on policy and management at a regional, national or European level.

For more information and the application form please see the Summer School website: http://www.observatorysummerschool.org/index.php

CONFERENCES

*International Conference on AIDS and STI’s in Africa (ICASA) 2013*

7-11 December 2013, Cape Town, South Africa

ICASA aims to provide researchers with the opportunity of an international stage with the light focused on science and public health of Africa. The standards of research presented at this meeting will reflect the dawning of a new era, with proudly African scientists presenting rich and novel data and discoveries.

For more information see: http://www.icasa2013southafrica.org/

CARTOON

“I just sneezed, and by the looks of it, I need to quit smoking.”

TIPS & TRICKS

*Microsoft Office Configuration Analyzer Tool 1.0*

The Microsoft Office Configuration Analyzer Tool (OffCAT) is a programme that provides a detailed report of your installed Office programme. This report includes many parameters about your Office programme configuration and highlights known problems found when OffCAT scans your computer. For any problems that are listed in the report, you are provided with a link to a public-facing article (usually a Microsoft Knowledge Base article) on the issue so you can read about possible fixes for the problem.

* * *

**Move Images in MS WORD to the Exact Position You Want**

When you position an image in a WORD document, it automatically aligns (or snaps) to an invisible grid, which helps keep everything lined up.

If you ever need exact control over the placement of your image, you can temporarily override the grid by pressing and holding the ALT key as you drag the object into place. You will notice that the image moves smoothly and not in increments along the grid.

Note: This tip works as long as the image is not set to be in line with the text. To make sure it works for you:
1. Double-click the image, and select the Layout tab.
2. Under “Wrapping style”, choose any style except “In line with the text”.
3. Then, click OK.

* * *

**Run Mobile Apps on PC or Mac**

Download the programme here (9.1 MB):
http://www.bluestacks.com/

BlueStacks App Player lets you run apps from your phone fast and full-screen on Windows and Mac.

* * *

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Best regards,

Dieter Neuvians MD