

giz Health, Education, Social Protection News & Notes 01/2015

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HIGHLIGHTS from *Healthy DEvelopments*

Germany's commitment to health and social protection

[Climate and Health Summit - Lima, Peru, 6 December 2014](#)

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BOOKS

Global Health Watch 4: An Alternative World Health Report



by Global Health Watch, Zed Books, 2014, ISBN: 978-178360253-7, 432 pages, US\$ 40 paperback

To order online go to: <http://store.hesperian.org/HB/prod/B832.html>

Now in its fourth edition, the Global Health Watch is widely perceived as the definitive voice for an alternative discourse on health. It covers a range of issues that currently impact on health, including the present political and economic architecture in a fast-changing and globalized world; a political assessment of the drive towards Universal Health Coverage; broader determinants of health, such as gender-based violence and access to water; stories of struggles, actions and change; and a scrutiny of a range of global institutions and processes.

* * *

Preventing corruption in humanitarian operations

by Roslyn Hees, Marie-Luise Ahlendorf and Stephanie Debere
Transparency International (TI), 2014



196 pp. 7.6 MB:

http://files.transparency.org/content/download/1899/12606/file/2014_Humanitarian_Handbook_EN.pdf



Transparency International has long held that the most directly damaging impact of corruption is the diversion of basic resources from poor people. Corruption in humanitarian aid is most egregious form of this, as it deprives the most vulnerable poor people, the victims of natural disasters and civil conflicts, of essential life-saving resources. This handbook helps diagnose corruption risks specific to humanitarian operations and to develop a set of good practices aimed at mitigating those risks.

* * *

African Development Report 2014: Regional Integration for Inclusive Growth

by Issa Faye, Ralf Krüger, Audrey Verdier-Chouchane et al.
African Development Bank, 2014



138 pp. 4.6 MB:

http://www.afdb.org/fileadmin/uploads/afdb/Documents/Publications/ADR14_ENGLISH_web.pdf



This report puts regional integration under the spotlight as being necessary for Africa's development, recalling that this is an aspiration dating back to the independence period in the 1960s. Critically examining the developments that have marked these last 50 years in terms of economic and political integration, the publication underscores how much it needs to be stepped up. The world may well be radically changing, but African integration remains as topical as ever, concludes the Report, which also highlighted how much integration could stimulate sustained, inclusive growth.

ONLINE PUBLICATIONS

Global Health

Climate Change: Health Impacts and Opportunities

A Summary and Discussion of the IPCC Working Group 2 Report

by David McCoy and Nick Watts
Global Climate and Health Alliance, 2014



 17 pp. 2.1 MB:
[http://www.eldis.org/vfile/upload/1/document/1404/Global%20Climate%20and%20Health%20Alliance%20-%20Health%20Impacts%20and%20Opportunities%20\(1\).pdf](http://www.eldis.org/vfile/upload/1/document/1404/Global%20Climate%20and%20Health%20Alliance%20-%20Health%20Impacts%20and%20Opportunities%20(1).pdf)

In this briefing, health and medical organisations from around the world call on governments to respond to the major health risks described in the Intergovernmental Panel on Climate Change (IPCC)'s March 2015 report: 'Impacts, Vulnerability and Adaptation.' The document summarises the IPCC report's implications for health, now and in the future and argues that there is still time to turn what has been called "the biggest global health threat of the 21st century" into one of our biggest opportunities to improve health. It concludes that human health is profoundly threatened by the failure to tackle climate change.

* * *

Universal Health Coverage for Inclusive and Sustainable Development: Country Summary Report for Brazil

by Magnus Lindelow and Edson C. Araujo
World Bank Group Report, September 2014



 15 pp. 439 kB:
<https://openknowledge.worldbank.org/bitstream/handle/10986/20732/912140WPOUHCOC0Box385329B00PUBLIC0.pdf?sequence=1>

Brazil was one of the first Latin American countries to establish universal health coverage (UHC) as a fundamental right, based on the principles that health care is a duty of the state and should be free at the point of use. The reform in the late 1980s created the Unified Health System (Sistema Único de Saúde, or SUS) and was based on the principle that health care should be free at the point of use to all Brazilian citizens.

* * *

Global mental health from a policy perspective

by Jessica Mackenzie
Overseas Development Institute, November 2014



44 pp. 975 kB:

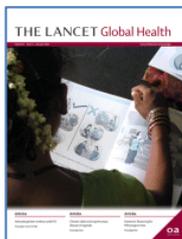
<http://www.odi.org/sites/odi.org.uk/files/odi-assets/publications-opinion-files/9285.pdf>



Mental illness will likely affect one in four people within their lifetime, and yet it does not receive due policy attention or funding in developed and developing countries. The report presents an array of engagement strategies to inform how the Mental Health Innovation Network (MHIN) can best help to improve policy influence across aspects of the global mental health community. If successful, it could attain the levels of policy traction, financing and public support that would correspond more closely to the actual devastating scale of the issue.

* * *

Funding AIDS programmes in the era of shared responsibility: an analysis of domestic spending in 12 low-income and middle-income countries



by Stephen Resch, Theresa Ryckman, Robert Hecht
Lancet Glob Health, Vol. 3, No. 1, e52–e61, January 2015



10 pp. 111 kB:

[http://www.thelancet.com/pdfs/journals/langlo/PIIS2214-109X\(14\)70342-0.pdf](http://www.thelancet.com/pdfs/journals/langlo/PIIS2214-109X(14)70342-0.pdf)

As the incomes of many AIDS-burdened countries grow and donors' budgets for helping to fight the disease tighten, national governments and external funding partners increasingly face the following question: what is the capacity of countries that are highly affected by AIDS to finance their responses from domestic sources, and how might this affect the level of donor support? In this study, the authors attempt to answer this question.

HIV - AIDS - STI

HIV Testing Technologies

by Roger Pebody
Produced by NAM for HIV Prevention England Programme, December 2014



6 pp. 208 kB:

http://www.aidsmap.com/v635544251970000000/file/1187610/HE_briefing_HIV_testing_technologies.pdf



This briefing paper provides an overview of HIV diagnostic tests for people planning, commissioning or providing HIV prevention activities in England. Increasing the uptake of HIV testing in order to reduce rates of undiagnosed infection and late diagnosis is a key goal of the HIV Prevention England programme. Many non-clinical services are now involved in providing or promoting HIV testing services. In order to accurately explain the benefits of HIV testing to clients, workers need to know what kind of test is being offered and how accurate it is, especially in the context of recent infection.

Sexual and reproductive health and rights in changing health systems



by Gita Sen & Veloshnee Govender
Global Public Health - Published online: 24 December 2014



16 pp. 271 kB:

<http://www.tandfonline.com/doi/pdf/10.1080/17441692.2014.986161>

Sexual and reproductive health and rights (SRHR) are centrally important to health. However, there have been significant shortcomings in implementing SRHR to date. In the context of health systems reform and universal health coverage/care (UHC), this paper explores several questions. It argues that achieving equity on the UHC path will require a combination of system improvements and services that benefit all, together with special attention to those whose needs are great and who are likely to fall behind in the politics of choice and voice (i.e., progressive universalism paying particular attention to gender inequalities).

* * *

Sexual and reproductive health and rights of adolescent girls: Evidence from low- and middle-income countries

by K.G. Santhya & Shireen J. Jejeebhoya
Global Public Health - Published online: 02 January 2015



34 pp. 299 kB:

<http://www.tandfonline.com/doi/pdf/10.1080/17441692.2014.986169>

Findings of this paper indicate that many countries have yet to make significant progress in delaying marriage and childbearing, reducing unintended childbearing, narrowing gender disparities that put girls at risk of poor sexual and reproductive health and rights (SRH) outcomes, expanding health awareness or enabling access to SRH services. While governments have reaffirmed many commitments, policy development and programme implementation fall far short of realising these commitments.

* * *

Sexual and reproductive health: Progress and outstanding needs

by Rachel C. Snowa, Laura Laskib & Massy Mutumbac
Global Public Health - Published online: 02 January 2015



26 pp. 404 kB:

<http://www.tandfonline.com/doi/pdf/10.1080/17441692.2014.986178>



The authors examine progress towards the 1994 International Conference on Population and Development (ICPD) commitment to provide universal access to sexual and reproductive health (SRH) services by 2014, with an emphasis on changes for those living in poor and emerging economies. While there have been notable declines in HIV incidence and prevalence, women affected by HIV are too often bereft of other SRH services, including family planning. Achieving universal access to SRH will require substantially greater investment in comprehensive and integrated services that reach the poor.

* * *

Young Women's Access to and Use of Contraceptives: The Role of Providers' Restrictions in Urban Senegal

by Estelle M. Sidze, Solène Lardoux, Ilene S. Speizer et al.
International Perspectives on Sexual and Reproductive Health, 2014, 40(4):176–183

INTERNATIONAL
PERSPECTIVES
on Sexual and Reproductive Health



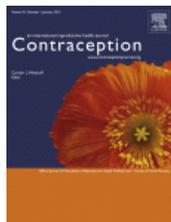
8 pp. 140 kB:

<http://www.guttmacher.org/pubs/journals/4017614.pdf>

While there are no official eligibility requirements for obtaining modern contraceptives in Senegal, health care providers often impose their own age and marital status restrictions on women seeking family planning services. According to this paper more than half (57%) of the public-sector providers surveyed applied age restrictions to provision of the pill and slightly fewer than half (44%) to provision of the injectable - the two methods most often used by young women in urban Senegal.

Maternal & Child Health

Improved maternal health since the ICPD: 20 years of progress



by Timothy N. Thomas, Jewel Gausman, Samantha R. Lattof et al.
Contraception 90 (2014) S32–S38, June 2014



7 pp. 222 kB:

[http://www.contraceptionjournal.org/article/S0010-7824\(14\)00326-6/pdf](http://www.contraceptionjournal.org/article/S0010-7824(14)00326-6/pdf)

The 1994 Conference on Population and Development (ICPD) was a turning point in the field of sexual and reproductive health - repositioning population and development programs globally in the context of reproductive rights, gender equity, and women's empowerment. Some goals envisioned by ICPD have been met. Others still need to be addressed. Renewed political will to address the remaining challenges is necessary for the post-2015 development agenda so that women's health throughout the world continues to be supported with ambitious, yet feasible goals that take into account the world's evolving development priorities.

* * *

A qualitative study of health system barriers to accessibility and utilization of maternal and newborn healthcare services in Ghana after user-fee abolition

by John Kuumuori Ganle, Michael Parker, Raymond Fitzpatrick et al.

BMC Pregnancy and Childbirth 2014, 14:425 (21 December 2014)



Pregnancy & Childbirth



29 pp. 407 kB:

<http://www.biomedcentral.com/content/pdf/s12884-014-0425-8.pdf>

In 2003 the government of Ghana implemented a new maternal healthcare policy that provided free maternity care services in all public and mission healthcare facilities. The findings highlight how a focus on patient-side factors can conceal the fact that many health systems and maternity healthcare facilities in low-income settings such as Ghana are still chronically under-resourced and incapable of effectively providing an acceptable

minimum quality of care in the event of serious obstetric complications. Efforts to encourage continued use of maternity care services, especially skilled assistance at delivery, should focus on addressing those negative attributes of the healthcare system that discourage access and use.

* * *

Revised WHO classification and treatment of childhood pneumonia at health facilities

World Health Organization, 2014



34 pp. 364 kB:

<http://www.ncbi.nlm.nih.gov/books/NBK264162/pdf/TOC.pdf>



The revised guidelines present two major changes to existing guidelines: (A) there are now just 2 categories of pneumonia instead of 3 (“pneumonia” which is treated at home with oral amoxicillin and “severe pneumonia” which requires injectable antibiotics) and (B) oral amoxicillin replaces oral cotrimoxazole as first line treatment, preferably in 250mg dispersible tablet form, twice daily for five days which can be reduced to three days in low HIV settings. This document’s purpose is to assist national child health programmes in revising their guidelines to conform to the new recommendations.

* * *

Investing in Early Childhood Development: Review of the World Bank’s Recent Experience



by Rebecca K. Sayre, Amanda E. Devercelli, Michelle J. Neuman et al.
International Bank for Reconstruction and Development / The World Bank, 2015



159 pp. 4.7 MB:

<https://openknowledge.worldbank.org/bitstream/handle/10986/20715/9781464804038.pdf?sequence=1>

This study provides an overview of Bank investments in Early Childhood Development (ECD) from 2000-2013 within the Education, Health, Nutrition and Population, and Social Protection and Labor practices. A series of case studies are presented to highlight lessons learned to inform future Bank support to ECD and to promote better planning across sectors and regions. Finally, the study discusses recent new approaches to support ECD within the World Bank and in client countries.

* * *

Reproductive, maternal, newborn and child health today: Overview and implementation analysis

by Arvind Bhardwaj, Aradhna Duggal, Christina Aebischer et al.
The International Federation of Red Cross and Red Crescent Societies (IFRC), 2014



44 pp. 4.7 MB:

<http://reliefweb.int/sites/reliefweb.int/files/resources/RMNCH%20Today-EN-LR.pdf>



The International Federation of Red Cross and Red Crescent Societies (IFRC) has supported and promoted reproductive, maternal, newborn and child health (RMNCH) for

more than twenty years. IFRC's RMNCH programming has evolved in response to the medium- and long-term needs of communities. Most of these programmes are being implemented bilaterally by Supporting National Societies from Europe and North America. Programmes range from comprehensive RMNCH efforts on both the demand and supply sides of primary healthcare including community-based activities that promote appropriate health practices and care-seeking behaviour.

* * *

Increased Access to Care and Appropriateness of Treatment at Private Sector Drug Shops with Integrated Management of Malaria, Pneumonia and Diarrhoea: A Quasi-Experimental Study in Uganda

by Phyllis Awor, Henry Wamani, Thorkild Tylleskar et al.
PLoS ONE 9(12): e115440 (December 26, 2014)



15 pp. 336 kB:

<http://www.plosone.org/article/fetchObject.action?uri=info%3Adoi%2F10.1371%2Fjournal.pone.0115440&representation=PDF>

Drug shops are a major source of care for children in low income countries but they provide sub-standard care. The authors adopted and implemented the integrated community case management (iCCM) intervention within registered drug shops. Attendants were trained to perform malaria rapid diagnostic tests (RDTs) in each fever case and count respiratory rate in each case of cough with fast/difficult breathing, before dispensing recommended treatment. It is concluded that iCCM can be utilized to improve access and appropriateness of care for children at drug shops.

Malaria

Rapid diagnostic tests for diagnosing uncomplicated nonfalciparum or Plasmodium vivax malaria in endemic countries

(Review)

by Katharine Abba, Amanda J Kirkham, Piero L Olliaro et al.
Cochrane Database of Systematic Reviews 2014, Issue 12



198 pp. 1.6 MB:

http://onlinelibrary.wiley.com/store/10.1002/14651858.CD011431/asset/CD011431_1.pdf?v=1&t=i4hh94cs&s=525f17f6ec5d3bde5431c4e53d79d3ae021d305d

Rapid diagnostic tests (RDTs) designed to detect *P. vivax* specifically, whether alone or as part of a mixed infection, appear to be more accurate than older tests designed to distinguish *P. falciparum* malaria from non-falciparum malaria. Compared to microscopy, these tests fail to detect around 5% of *P. vivax* cases. This Cochrane Review, in combination with other published information about in vitro test performance and stability in the field, can assist policy-makers to choose between the available RDTs.

* * *

Strengthening malaria diagnosis and appropriate treatment in Namibia: a test of case management training interventions in Kavango Region

by Christopher Lourenço, Deepika Kandula, Leena Haidula et al.



8 pp. 567 kB:

<http://www.malariajournal.com/content/pdf/1475-2875-13-508.pdf>

Despite its importance in control and elimination settings, malaria diagnosis rates tend to be low in many African countries. An operational research pilot was conducted in Namibia to identify the key barriers to appropriate diagnosis of malaria in public health facilities and to evaluate the effectiveness of various training approaches in improving the uptake and adherence to rapid diagnostic tests (RDTs). The findings demonstrate that implementing simple training interventions can have a significant, sustainable impact on the uptake of and adherence to malaria RDTs.

* * *

How Effective is Integrated Vector Management Against Malaria and Lymphatic Filariasis Where the Diseases Are Transmitted by the Same Vector?

by Christopher M. Stone, Steve W. Lindsay, Nakul Chitnis
PLoS Negl Trop Dis 8(12): e3393 (December 11, 2014)



15 pp. 1.5 MB:

<http://www.plosntds.org/article/fetchObject.action?uri=info%3Adoi%2F10.1371%2Fjournal.pntd.0003393&representation=PDF>

The opportunity to integrate vector management across multiple vector-borne diseases is particularly plausible for malaria and lymphatic filariasis (LF) control where both diseases are transmitted by the same vector. Despite the low level of vector control required to eliminate LF, simulations suggest that prevalence of LF will decrease at a slower rate than malaria, even at high levels of coverage. If representative of field situations, integrated management should take into account not only how malaria control can facilitate filariasis elimination, but strike a balance between the high levels of coverage of (multiple) interventions required for malaria with the long duration predicted to be required for filariasis elimination.

Tuberculosis

Delaying BCG Vaccination Until 8 Weeks of Age Results in Robust BCG-Specific T-Cell Responses in HIV-Exposed Infants

by Christophe Toukam Tchakoute, Anneke C. Hesseling, Elvis B. Kidzeru et al.
J Infect Dis. (2015) 211 (3): 338-346



9 pp. 618 kB:

<http://jid.oxfordjournals.org/content/211/3/338.full.pdf+html>

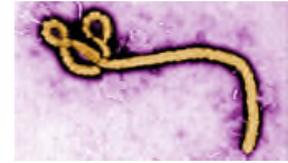
BCG vaccination prevents disseminated tuberculosis in children, but it is contraindicated for persons with human immunodeficiency virus (HIV) infection because it can result in severe disease in this population. In tuberculosis-endemic regions, BCG vaccine is administered soon after birth, before in utero and peripartum HIV infection is excluded. The authors conclude that the immunogenicity of BCG vaccination in HIV-exposed, uninfected infants is not compromised when delayed until 8 weeks of age and results in robust BCG-specific T-cell responses at 14 weeks of age. These findings support further eval-

uation of this modified BCG vaccination strategy for HIV-exposed infants.

Ebola / Other Infectious Diseases

Regional spread of Ebola virus, West Africa, 2014

by Gabriel Rainisch, Manjunath Shankar, Michael Wellman et al.
Emerg Infect Dis. March 2015



Read online at: http://wwwnc.cdc.gov/eid/article/21/3/14-1845_article

To explain the spread of the 2014 Ebola epidemic in West Africa, and thus help with response planning, the authors analyzed publicly available data. They found that the risk for infection in an area can be predicted by case counts, population data, and distances between affected and non-affected areas. If the current pattern of spread in this outbreak continues, or if the outbreak takes hold in new countries, their model can be used to advocate for allocation of surveillance and control resources to non-affected areas.

* * *

WHO: Ebola situation report 7 January 2015



15 pp. 1.9 MB:

http://apps.who.int/iris/bitstream/10665/147112/1/roadmapsitre7Jan2015_eng.pdf



Reported case incidence continues to fluctuate in Guinea, with no identifiable downward trend. Ebola virus disease (EVD) continues to spread geographically within the country, with the prefecture of Fria reporting 2 confirmed cases for the first time. Case incidence has declined to low levels in Liberia. There are signs that incidence has levelled off in Sierra Leone, although transmission remains intense in the west of the country.

* * *

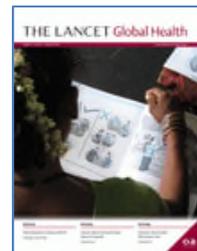
The International Monetary Fund and the Ebola outbreak

by Alexander Kentikelenis, Lawrence King, Martin McKee et al
The Lancet Global Health - Published Online December 22, 2014



2 pp. 42 kB:

[http://www.thelancet.com/pdfs/journals/langlo/PIIS2214-109X\(14\)70377-8.pdf](http://www.thelancet.com/pdfs/journals/langlo/PIIS2214-109X(14)70377-8.pdf)



The authors criticise reforms advocated by IMF for chronically under-funded and insufficiently staffed health systems in Guinea, Liberia and Sierra Leone. They say these policies contributed to “lack of preparedness” of West African health systems to cope with disease and emergencies such as Ebola. The authors of the Lancet article point to that journal’s own Commission on Investing in Health, which calls for increases in public health spending and attention to hiring and training health workers.

* * *

ITU's Ebola-Info-Sharing Mobile App



International Telecommunication Union (ITU), December 2014

<http://www.itu.int/en/ITU-D/Emergency-Telecommunications/Pages/Ebola-Info-Sharing.aspx>

Available for Android devices via the Google Play Store and will soon be available for iOS devices via the Apple App Store.

This mobile App has been developed based on inputs from organizations involved in the Fight against the Ebola Crisis who are working directly on the ground, in the Ebola-affected countries. The App focuses on sharing precise information, locations and focal points related to Ebola with the public and organizations. Official news and key points on the map are available to the public. Organizations have specific features for sharing useful information with staff on the ground and other organizations, including contact and information repositories. These features are dedicated to organizations and protected by login/password combination.

* * *

Management of pregnant women infected with Ebola virus in a treatment centre in Guinea, June 2014

by F M Baggi, A Taybi, A Kurth et al.

Euro Surveill. 2014;19(49):pii=20983 (11 December 2014)



4 pp. 183 kB:

<http://www.eurosurveillance.org/images/dynamic/EE/V19N49/art20983.pdf>

The authors report two cases of confirmed Ebola virus disease in pregnant women, who presented at the Médecins Sans Frontières Ebola treatment centre in Guéckédou. Despite the very high risk of death, both pregnant women survived. In both cases the critical decision was made to induce vaginal delivery. The authors raise a number of considerations regarding the management of Ebola virus-infected pregnant women, including the place of amniocentesis and induced delivery, and whether certain invasive medical acts are justified.

* * *

Global Programme to Eliminate Lymphatic Filariasis: The Processes Underlying Programme Success

Kazuyo Ichimori, Jonathan D. King, Dirk Engels et al.

PLoS Negl Trop Dis 8(12): e3328 - Published: December 11, 2014



9 pp. 1.0 MB:

<http://www.plosntds.org/article/fetchObject.action?uri=info%3Adoi%2F10.1371%2Fjournal.pntd.0003328&representation=PDF>

Lymphatic filariasis (LF) is caused by filarial worms that live in the lymphatic system. Global momentum to eliminate LF has developed over the past 15 years as a result not only of research demonstrating the value of single-dose treatment strategies and point-of-care diagnostic tools, but also of both the generous donations of medicines from committed pharmaceutical companies and the essential financial support for programme implementation from the donor community. This report, rather than highlighting the very considerable contributions of each individual partner or even chronicling most of the

specific achievements of the Global Programme to Eliminate Lymphatic Filariasis (GPELF), instead focuses on the details of the underlying processes themselves and their importance in determining programme success.

* * *

Mapping Global Vulnerability to Dengue using the Water Associated Disease Index

by Laura M. Fullerton, Sarah K. Dickin, Corinne J. Schuster-Wallace
United Nations University, Institute for Water, Environment and Health (UNU-INWEH), 2014



 41 pp. 4.2 MB:
<http://reliefweb.int/sites/reliefweb.int/files/resources/Mapping%20Global%20Vulnerability%20to%20Dengue%20using%20WADI%20-%20full%20paper.pdf>

The maps colourfully illustrate the dynamic expansion and contraction of dengue vulnerability worldwide through the year, revealing hotspots in January, April, July and October. While not all vulnerable regions identified currently experience endemic dengue, these maps demonstrate where the virus could become a danger. The work illustrates the consistent exposure to the virus in equatorial regions with greater seasonal trends in sub-tropical latitudes. As the planet warms, according to the paper, conditions in West and Central Africa are particularly favourable for expansion of dengue illness and both regions are urged to plan for this anticipated health challenge.

* * *

Yemen: Fighting Neglected Tropical Diseases against All Odds

by Elisa Baring and Peter J. Hotez
PLoS Negl Trop Dis 8(12): e3292 - Published: December 18, 2014



 4 pp. 763 kB:
<http://www.plosntds.org/article/fetchObject.action?uri=info%3Adoi%2F10.1371%2Fjournal.pntd.0003292&representation=PDF>

An important reason why we need to care about neglected tropical diseases (NTDs) is that these conditions are often chronic and debilitating and actually cause or reinforce poverty through their long-term effects on children and heads of households. They disproportionately strike girls and women. As a result, NTDs can also destabilize communities and possibly even further help to promote conflict. Thus, NTD control and elimination represent important critical steps to help stabilize the nation of Yemen and to promote its economic development.

Non-communicable Diseases

Non-Communicable Disease and Development: Future Pathways

by Hayley MacGregor, Steven Lally, Gerry Bloom et al.
Institute of Development Studies, December 2014

 82 pp. 2.1 MB:

<http://opendocs.ids.ac.uk/opendocs/bitstream/handle/123456789/5271/ER100Non-CommunicableDiseaseandDevelopmentFuturePathways.pdf;jsessionid=80BA0D0B5F457E1A01472BA4DDB83859?sequence=1>



From a biomedical perspective, non-communicable disease (NCD) is not a new problem, particularly in the global North. However, awareness of the increasing burden from these conditions in low- and middle-income countries (L&MICs) has only recently emerged in the arena of development policy and practice. Yet notwithstanding the UN Secretary-General's call to bring NCD into the broader global health and development agenda, alongside growing concern about the financial and social implications of premature deaths and morbidity from these conditions, the impression persists in some quarters that NCD is not a 'development problem'.

* * *

The global burden of chronic respiratory disease in adults

by P. Burney, D. Jarvis, R. Perez-Padilla
The International Journal of Tuberculosis and Lung Disease, Vol. 19, Nr. 1, 1 January 2015, pp. 10-20(11)



12 pp. 418 kB:

http://docstore.ingenta.com/cgi-bin/ds_deliver/1/u/d/ISIS/80413359.1/uatld/ijtlid/2015/00000019/00000001/art00005/999B8464C6CE4AEE1420879541C1214D1C73F0FB84.pdf

With an aging global population, chronic respiratory diseases are becoming a more prominent cause of death and disability. Age-standardised death rates from chronic obstructive pulmonary disease (COPD) are highest in low-income regions of the world, particularly South Asia and sub-Saharan Africa, although airflow obstruction is relatively uncommon in these areas. Airflow obstruction is, by contrast, more common in regions with a high prevalence of cigarette smoking. COPD mortality is much more closely related to the prevalence of a low forced vital capacity which is, in turn, associated with poverty. Mortality from asthma is less common than mortality from COPD, but it is also relatively more common in poorer areas, particularly Oceania, South and South-East Asia, the Middle East and Africa.

Essential Medicines

Social Pharmacology: A Further Step in Public Health

by José-Luis Alloza
The Open Social Science Journal, 2014, 6, 8-15



8 pp. 1.7 MB:

<http://benthamopen.com/tosscij/articles/V006/8TOSSCIJ.pdf>

Social Pharmacology is a field of health science which generates knowledge about marketed drugs in actual use; it focuses on evaluation of the social consequences of an individual's exposure to any marketed drug and factors related to its utilization. The goal of this discipline is to gain knowledge still needed after a drug is marketed. The dossier of a new medicine following regulatory approval contains only the beginning of information needed to be gathered. The post-marketing period represents the most extensive opportunity to study medications in their "social life cycle".

Social Safety Nets and Gender: Learning From Impact Evaluations and World Bank Projects

by Elena Bardasi, Gisela Garcia, Segen Moges et al.
International Bank for Reconstruction and Development / The World Bank, 2014



98 pp. 2.4 MB:

http://reliefweb.int/sites/reliefweb.int/files/resources/ssn-gender-ie-full-report_0.pdf



Gender equality is widely accepted as an essential component of effective development, and in the past two decades it has progressively taken center stage in the international development community. As the third Millennium Development Goal, several programs were set up to improve education and economic opportunities for women and girls with the aim of achieving gender equality, as well as reducing poverty overall. Social Safety Net (SSN) programs aimed at reducing poverty through cash and in-kind transfers and public works (PW) are not specifically designed to address gender equality, but they may offer great opportunities to respond to women's needs.

* * *

Political and Institutional Drivers of Social Security Universalization in Brazil

by Marcus André Melo
United Nations Research Institute for Social Development (UNRISD),
December 2014



34 pp. 614 kB:

[http://www.unrisd.org/80256B3C005BCCF9/\(httpAuxPages\)/2D57B3E01D13C5F4C1257DA400596D3A/\\$file/Melo.pdf](http://www.unrisd.org/80256B3C005BCCF9/(httpAuxPages)/2D57B3E01D13C5F4C1257DA400596D3A/$file/Melo.pdf)



This paper discusses the political and institutional factors that shaped the emergence and consolidation of a universal health system (SUS) in Brazil after the transition to democracy in the late 1980s. It argues that a combination of political incentives and political, fiscal and institutional capacities have been at the root of the process of creating such a system. First, the political incentives have been associated with a competitive political system leading a race to serve poor constituencies and to the policy communities and activists within and outside the state. SUS benefitted from this political dynamic and thus became politically sustainable. Second, fiscal capacity and sustainability have been secured by a massive increased taxation and earmarked social expenditures. Third, the system's success stems from the institutional capacity to run a complex decentralized system.

* * *

The administrative costs of community-based health insurance: a case study of the community health fund in Tanzania

by Josephine Borghi, Suzan Makawia and August Kuwawenaruwa
Health Policy Plan. (February 2015) 30 (1): 19-27



9 pp. 209 kB:



<http://heapol.oxfordjournals.org/content/30/1/19.full.pdf+html>

Community-based health insurance expansion has been proposed as a financing solution for the sizable informal sector in low-income settings. However, there is limited evidence of the administrative costs of such schemes. The authors assessed annual facility and district-level costs of running the Community Health Fund (CHF), a voluntary health insurance scheme for the informal sector in a rural and an urban district from the same region in Tanzania. They conclude that the cost of administering the CHF was high relative to revenue generated. Similar studies from other settings should be encouraged

Human Resources

Which intervention design factors influence performance of community health workers in low- and middle-income countries? A systematic review

by Maryse C Kok, Marjolein Dieleman, Miriam Taegtmeier et al.
Health Policy Plan. (2014) - First published online: December 11, 2014



21 pp. 837 kB:

<http://heapol.oxfordjournals.org/content/early/2014/12/11/heapol.cz126.full.pdf+html>



Community health workers (CHWs) are increasingly recognized as an integral component of the health workforce needed to achieve public health goals in low- and middle-income countries (LMICs). A mix of financial and non-financial incentives, predictable for the CHWs, was found to be an effective strategy to enhance performance, especially of those CHWs with multiple tasks. Clearly defined CHW roles and introduction of clear processes for communication among different levels of the health system could strengthen CHW performance. Additional intervention research to develop a better evidence base for the most effective training and supervision mechanisms and qualitative research to inform policymakers in development of CHW interventions are needed.

* * *

Coherence between health policy and human resource strategy: lessons from maternal health in Vietnam, India and China

by Tim Martineau, Tolib Mirzoev, Stephen Pearson et al.
Health Policy Plan. (February 2015) 30 (1): 111-120



10 pp. 438 kB:

<http://heapol.oxfordjournals.org/content/30/1/111.full.pdf+html>

The failure to meet health goals such as the Millennium Development Goals (MDG) is partly due to the lack of appropriate resources for the effective implementation of health policies. The lack of coherence between the health policies and human resource (HR) strategy is one of the major causes. This article explores the relationship and the degree of coherence between health policy - in this case maternal health policy-processes and HR strategy in Vietnam, China and India in the period 2005-09.

Health Systems & Research

New TDR Collection Historical Profiles and Perspectives Articles

<http://blogs.plos.org/speakingofmedicine/2015/01/08/tdr-series/>



In this special collection of 7 articles, former and current TDR (the Special Programme for Research and Training in Tropical Diseases) staff provide their views on key challenges and lessons learned during the 40 year history, and explain how and why the approaches and work plans changed through time. This includes the type of research supported, the way it was conducted and even the diseases covered. As the needs in the countries evolved, so too has the Programme.

- [Shaping the Research Agenda](#)
- [From Bright Ideas to Tools: The Case of Malaria](#)
- [Applied Research for Better Disease Prevention and Control](#)
- [What Have We Learned from 40 Years of Supporting Research and Capacity Building?](#)
- [Vector Research Addressing Country Control Needs](#)
- [A Changing Model for Developing Health Products for Poverty-Related Infectious Diseases](#)
- [Strengthening research capacity – TDR's evolving experience in Low- and Middle-Income Countries](#)

* * *

Strengthening Research Capacity - TDR's Evolving Experience in Low- and Middle-Income Countries

by Olumide A. T. Ogundahunsi, Mahnaz Vahedi, Edward M. Kamau et al.
PLoS Negl Trop Dis 9(1): e3380 (8 January 2014)



6 pp. 233 kB:

<http://www.plosntds.org/article/fetchObject.action?uri=info%3Adoi%2F10.1371%2Fjournal.pntd.0003380&representation=PDF>

Soon after inception in 1974, the Special Programme for Research and Training in Tropical Diseases (TDR) established a research capacity strengthening (RCS) programme with a goal to train individuals and strengthen research capacity in disease-endemic countries so that they can find and implement appropriate solutions to their health problems. As the programme goes forward, TDR's research capacity strengthening support will focus on developing the skills and evidence needed to directly address health problems in low- and middle-income countries (LMICs), as well as output-oriented training targeted directly at those working in public health interventions, to increase the generation and uptake of evidence to strengthen implementation.

* * *

Eliminating Health Disparities to Achieve Health Equity

Special Issue of International Journal of Environmental Research and Public Health, January 2015

Guest editors: Stephen B. Thomas, Devon C. Payne-Sturges, Christiane Bunge et al.



International Journal of
*Environmental Research
and Public Health*

Free access to all 12 published papers at:

http://www.mdpi.com/journal/ijerph/special_issues/health-disparities

The purpose of this special issue is to highlight the latest interdisciplinary and innovative

research, tools, methods and approaches to assess, reduce and prevent environmentally driven social, racial and ethnic health disparities. The aim is to advance health disparity research into the arena of environmental health and help accelerate efforts designed to improve access to healthy environments for vulnerable populations.

* * *

The Public-Private Pendulum - Patient Choice and Equity in Sweden

by Anders Anell
N Engl J Med 2015; 372:1-4; January 1, 2015



4 pp. 564 kB:

<http://www.nejm.org/doi/pdf/10.1056/NEJMp1411430>

The current Swedish health care system is largely the product of past national governments led by the Social Democrats, which strongly emphasized equity and reliance on the public sector. Since 1990, however, both center-right and center-left governments have turned to competition and consumer choice as ways to increase efficiency in areas previously dominated by public monopolies. Together with tax-policy reforms and liberal labor-immigration policies, these changes have substantially transformed the Swedish economy over the past 25 years.

* * *

Randomized Controlled Trials in Environmental Health Research: Unethical or Underutilized?



by Ryan W. Allen, Prabjit K. Barn, Bruce P. Lanphear
PLoS Med 12(1): e1001775 - Published: January 6, 2015



5 pp. 191 kB:

<http://www.plosmedicine.org/article/fetchObject.action?uri=info%3A%2F10.1371%2Fjournal.pmed.1001775&representation=PDF>

Randomized controlled trials (RCTs) are standard practice in clinical and pharmaceutical research but have not been embraced by environmental health researchers. Greater use of the RCT design would complement the tremendous contributions made by other methods - including both observational epidemiology and toxicology - to our understanding of environmental risks and the development of environmental health policy. Researchers, academic institutions, and funding agencies have a role to play in expanding the use of RCTs in environmental health research.

* * *

How long does biomedical research take? Studying the time taken between biomedical and health research and its translation into products, policy, and practice

by Stephen R Hanney, Sophie Castle-Clarke, Jonathan Grant e al.
Health Research Policy and Systems 2015, 13:1 (1 January 2015)



32 pp. 1.7 MB:

<http://www.health-policy-systems.com/content/pdf/1478-4505-13-1.pdf>

The time taken, or 'time lags', between biomedical/health research and its translation into health improvements is receiving growing attention. Reducing time lags should in-

crease rates of return to such research. However, ways to measure time lags are underdeveloped, with little attention on where time lags arise within overall timelines. Following reviews of the literature on time lags and of relevant policy documents, the authors developed a new approach to conduct case studies of time lags. They conclude that their advances identify complexities, provide a firm basis for further methodological work along and between tracks, and begin to indicate potential ways of reducing lags.

Information & Communication Technology

EbolaTracks: an automated SMS system for monitoring persons potentially exposed to Ebola virus disease

by L E Tracey, A K Regan, P K Armstrong et al.
Eurosurveillance, Vol. 20, Issue 1, 08 January 2015



Read online at: <http://www.eurosurveillance.org/ViewArticle.aspx?ArticleId=20999>

The authors report development and implementation of a short message service (SMS)-based system to facilitate active monitoring of persons potentially exposed to Ebola virus disease (EVD), whether returning from EVD-affected countries, or contacts of local cases, should they occur. The system solicits information on symptoms and temperature twice daily. They demonstrated proof-of-concept; however this system would likely be even more useful where there are many local contacts to confirmed EVD cases or travellers from EVD-affected countries.

* * *

Wearable Devices as Facilitators, Not Drivers, of Health Behavior Change

by Mitesh S. Patel, David A. Asch, Kevin G. Volpp
JAMA. Published online January 08, 2015



 2 pp. 47 kB:

<http://jama.jamanetwork.com/data/Journals/JAMA/0/jvp140141.pdf?v=635562522184530000>

Several large technology companies including Apple, Google, and Samsung are entering the expanding market of population health with the introduction of wearable devices. This technology, worn in clothing or accessories, is part of a larger movement often referred to as the “quantified self.” The notion is that by recording and reporting information about behaviors such as physical activity or sleep patterns, these devices can educate and motivate individuals toward better habits and better health. The gap between recording information and changing behavior is substantial, however, and while these devices are increasing in popularity, little evidence suggests that they are bridging that gap.

Education

Educating the Next Generation: Improving Teacher Quality in Cambodia

by Prateek Tandon and Tsuyoshi Fukao
International Bank for Reconstruction and Development / The World Bank, 2015



173 pp. 4.1 MB:

<https://openknowledge.worldbank.org/bitstream/handle/10986/21002/934390PUB0978100Box385406B00PUBLIC0.pdf?sequence=1>



This publication diagnoses Cambodian teaching quality and presents policy options for reform. Through classroom observation, assessments of mathematics and pedagogical content knowledge, and surveys of teachers and school directors, it sheds light on content and instruction, interactions with school directors, instructional support systems, and the implementation of teacher standards. Out of the diagnosis follow three policy pillars to reform how teachers are trained, maintained, and motivated.

Harm Reduction & Drug Use

Methadone maintenance treatment programme reduces criminal activity and improves social well-being of drug users in China: a systematic review and meta-analysis

by Hua-Min Sun, Xiao-Yan Li, Eric P F Chow et al.
BMJ Open 2015;5:e005997 doi:10.1136/bmjopen-2014-005997



12 pp. 6.8 MB:

<http://bmjopen.bmj.com/content/5/1/e005997.full.pdf#page=1&view=FitH>

Methadone maintenance treatment (MMT) has been implemented in China since 2004 and has expanded into a nationwide programme. This study aims to evaluate changes in social functioning, family relations and drug-related criminal behaviour among MMT clients in China. The authors conclude that MMT has significantly reduced criminal activity, and improved employment rate and social well-being, of clients of the MMT programme. MMT is an effective measure to help drug users to resume societal and familial functions in China.

Millennium Development Goals

Indicators for Universal Health Coverage: can Kenya comply with the proposed post-2015 monitoring recommendations?

by Valerie Obare, Claire E Brolan and Peter S Hill
International Journal for Equity in Health 2014,
13:123 (20 December 2014)



INTERNATIONAL JOURNAL FOR
EQUITY IN HEALTH

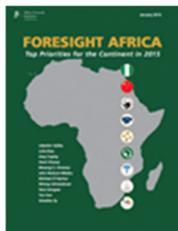


27 pp. 734 kB:

<http://www.equityhealthj.com/content/pdf/s12939-014-0123-1.pdf>

Universal Health Coverage (UHC), referring to access to healthcare without financial burden, has received renewed attention in global health spheres. UHC is a potential goal in the post-2015 development agenda. The proposed global framework for monitoring UHC will only be feasible in Kenya if systemic challenges are addressed. While the infrastructure for reporting the MDG related indicators is in place, Kenya will require continued international investment to extend its capacity to meet the data requirements of the proposed UHC monitoring framework, particularly for the chronic condition and injuries related indicators.

Africa Looks Forward to the Post-2015 Development Agenda



by Homi Kharas and Julie Biau
Foresight Africa 2015 - Brookings Global Staff, January 5, 2015



4 pp. 148 kB:

<http://www.brookings.edu/~media/Research/Files/Reports/2015/01/foresight%20africa/africa%20post%202015%20development%20agenda%20kharas.pdf>

As the Millennium Development Goal process moves toward completion in 2015, many countries in Africa must face the harsh reality that they did not achieve much of what they set out to do. In fact, African countries underperformed in striving towards many of the MDGs and particularly lagged behind the rest of the world in the key areas of poverty, job creation and food security. Despite this lackluster performance, there is much to be optimistic about as African countries prepare for the post-2015 development agenda.

Development Assistance

Science and technology for development in Sub-Saharan Africa: Key topics, challenges and opportunities

by Yulye Jessica Romo Ramos
SciDev.Net Learning Series, 2014



44 pp. 860 kB:

http://www.scidev.net/filemanager/root/site_assets/docs/SubSaharan-Africa-Electronic.pdf



SciDev.Net's focus groups in Sub-Saharan Africa (SSA) are part of a global programme that aims to understand regional needs and contexts for science and technology in development. The programme started in 2012 in South East Asia and the Pacific, and reports are available online at www.scidev.net/global/content/learning-series.html. This report highlights the key areas of interest in for development, and barriers and gaps in the use of science and technology evidence. It also provides suggestions for how communications about science and technology can be improved.

* * *

A World That Counts: Mobilising a Data Revolution for Sustainable Development



by Luis Gonzalez Morales, Yu-Chieh Hsu, Jennifer Poole et al.
The Secretary-General's Independent Expert Advisory Group on a Data Revolution for Sustainable Development (IEAG), 2014



32 pp. 2.5 MB:

<http://www.undatarevolution.org/wp-content/uploads/2014/12/A-World-That-Counts2.pdf>

The report highlights two big global challenges for the current state of data: invisibility and inequality. The report makes specific recommendations on how to address these challenges, calling for a UN-led effort to mobilise the data revolution for sustainable development. As outlined in the group's original Terms of Reference, the recommenda-

tions of the IEAG will inform the Synthesis Report of the Secretary-General and the subsequent intergovernmental process.

Others

Escape from hell - Torture, sexual slavery in Islamic State captivity in Iraq



Amnesty International, December 2014



19 pp. 1.1 MB:

<http://reliefweb.int/sites/reliefweb.int/files/resources/mde140212014en.pdf>

Torture, including rape and other forms of sexual violence, suffered by women and girls from Iraq's Yazidi minority who were abducted by the armed group calling itself the Islamic State (IS), highlights the savagery of IS rule. The report provides an insight into the horrifying abuse suffered by hundreds and possibly thousands of Yazidi women and girls who have been forcibly married, "sold" or given as "gifts" to IS fighters or their supporters. Often, captives were forced to convert to Islam. Support services to survivors of sexual violence must step up their efforts. They must ensure they are swiftly and proactively reaching out to all those who may need them, and that women and girls are made aware of the support available to them.

* * *

UNHCR Mid-Year Trends 2014

United Nations High Commissioner for Refugees (UNHCR), 2015



24 pp. 2.8 MB:

<http://unhcr.org/54aa91d89.pdf>



War across large swathes of the Middle East and Africa in the first six months of 2014 forcibly displaced some 5.5 million people, signalling yet another record. The report showcases that of the 5.5 million who were newly displaced, 1.4 million fled across international borders becoming refugees, while the rest were displaced within their own countries also known as IDPs or internally displaced persons. As long as the international community continues to fail to find political solutions to existing conflicts and to prevent new ones from starting, we will continue to have to deal with the dramatic humanitarian consequences.

ELECTRONIC RESOURCES

The Ebola Pocket Library v.1.1

<http://www.widernet.org/portals/index.php?PortalID=103>

Ebola

Providing accurate and timely Ebola information to health care and public health workers as well as community leaders and individuals.

The WiderNet Project and WiderNet@UNC have developed the Ebola Pocket Library as a free-to-copy digital off-line library for people responding to the Ebola crisis in Africa - especially local health care workers in Liberia, Guinea, and Sierra Leone. This collection includes high-quality digital resources for everyone from physicians and researchers to

families, teachers, social workers, media outlets, and school children.

* * *

Maternal Health Task Force

<http://www.mhtf.org/resources/global-maternal-health-news/>



The Maternal Health Task Force (MHTF) believes that a strong, well-informed and integrated community with equitable access to high-quality technical evidence is critical to our goal of eliminating preventable maternal mortality and morbidity worldwide. MHTF has compiled a database of resources covering all aspects of maternal health, including recent publications, videos, online classes, training materials, advocacy materials, program planning tools, key papers, public health graduate programs and organizations working in maternal health. Search the data base using keywords. You will be able to filter your results by resource type.

* * *

The Journal of Infection in Developing Countries

Vol. 8, No. 12: December 2014



<http://www.jidc.org/index.php/journal>

The Journal of Infection in Developing Countries has just published its latest issue at the above URL. You are invited to review the Table of Contents and then review/download articles and items of interest.

* * *

Bulletin of the World Health Organization – Vol. 93, Nr. 1, January 2015

<http://www.who.int/bulletin/volumes/93/1/en/>

Highlights from the [January 2015 issue](#):

- The Ebola epidemic:
 - [a turning point for global health](#)
 - [reflects the global health workforce crisis](#)
 - [vaccine trials get underway](#)
- Reviewing the [evidence for new drugs](#) – and their prices?
- [Russian collaboration on noncommunicable diseases](#)
- How Ghana has adapted to [donor proliferation](#)
- [Neonatal causes of death estimates](#) for 194 countries



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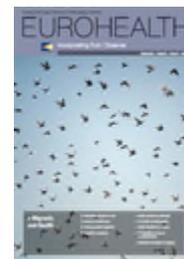
Migrants and Health

EUROHEALTH - Quarterly of the European Observatory on Health Systems and Policies, Volume 20, Number 4, 2014



48 pp. 3.2 MB:

http://www.euro.who.int/_data/assets/pdf_file/0011/266186/EuroHealth_v20n4.pdf



In this issue:

- Migrants and Health
- Infectious disease burden
- Access to health care
- Undocumented migrants
- Hepatitis screening
- Health workforce planning
- EU Health security policy
- Public hospitals in Poland
- Affordability of care in the Netherlands
- Avoidable mortality in England

INTERESTING WEB SITES

Fight the Fakes

<http://fightthefakes.org/>



Fake medicines put patients and the general public at risk. Patients believe they are receiving genuine treatment, but instead they are getting potentially dangerous products that could increase resistance to real treatments, and cause further illness, disability or even death.

Fight the Fakes is a campaign that aims to raise awareness about the dangers of fake medicines. The campaign gives a voice to those who have been personally impacted and shares the stories of those working to put a stop to this threat to public health. It seeks to build a global movement of organizations and individuals who will shine light on the negative impact that fake medicines have on people around the globe and to reduce the negative consequences on individuals worldwide.

* * *

Centre for Evaluation - London School of Hygiene & Tropical Medicine

<http://evaluation.lshtm.ac.uk>



8 pp. 1.3 MB:

<http://evaluation.lshtm.ac.uk/files/2013/01/LSHTM-CFE-booklet-interactive.pdf>



The mission of the Centre is to improve the design and conduct of public health evaluations through the development, application and dissemination of rigorous methods, and to facilitate the use of robust evidence to inform policy and practice decisions. The Centre for Evaluation will support, co-ordinate and promote internationally-renowned evaluation studies with the ultimate goal of improving evidence for action on public health at national and global level.

CONFERENCES

17th Annual International Conference on Women and Education



22 – 26 March, 2015 at Harris Manchester College in the University of Oxford, Oxford, England

<http://www.oxfordroundtable.com/index.php/view/Sessions-Item/id/180>

This is a reminder that registration will close on January 30th for the 17th

Annual International Conference on Women and Education.

Seventeen years ago, a highly successful Round Table was specifically designed to explore women and education. You are invited and encouraged to make a presentation and to provide a paper on a relevant aspect of the topic, however your participation as a member of the Round Table is not contingent upon presenting and you can serve on a panel or as a discussion leader. Papers presented at the Round Table may be subsequently submitted for publication in the Forum, a journal of the Oxford Round Table. Papers considered for publication in the Forum are evaluated by peer reviewers as to technical and substantive quality and for potential to make a significant contribution to new knowledge in the field.

CARTOON



TIPS & TRICKS

Switch quickly between small and CAPITAL letters in MS WORD

A typical situation: by accident you pressed the CapsLock key and EVERYTHING IS SHOWN IN CAPITAL LETTERS. To correct this you need not re-enter the text but select it (by highlighting) and press SHIFT+F3.

This will switch the selected text between:

- ALL LETTER CAPITALIZED
- all letters small
- First Letter Of Each Word Capitalized

You can do this as often as you like until the requested format has been achieved.

* * *

Stop Spam Mail with MailNull

MailNull provides a free anti-spam-mail service to help you take control over your email. With your MailNull account, you can give out a separate



temporary email address to every company which asks you for one. For example, if your MailNull account name is 'dave' and you buy a book from amazon.com, you could give the following email address to Amazon:

dave.amazon@mailnull.com

Mail sent to this address will forward to your current email account with no configuration changes to your system. You can also associate notes to each address to help you remember where you used it. Giving a separate email address for each purchase will help you track which companies are selling their email addresses to marketers. If you start receiving spam on a particular address, you can disable it with a click of the mouse and you know who to blame.

To create a free account go to: <http://mailnull.com/>

Best regards,

[Dieter Neuvians MD](#)