EDITORIAL

Dear colleagues,

when we announced the closure of HESP-News Briefing end of September 2017 we received quite a number of messages from disappointed subscribers. A typical one is the following:

Dear all,

this is the saddest news that has come up for a long time!

We have all appreciated your outstanding work during many years and I can even say, we have been waiting fortnightly to see the HESP notes popping up in our inbox.

Numerous students in various LRS countries have profited from your work and I cannot say how much I feel sorry for this development.

I still think that for our students it is hard to find subscription-free, condensed, digested and undirectional access to international papers.

If this decision is undetournable, may I suggest to help us with some explanations and directions in terms of where to turn to now when bandwith and capacity is limited and Information on latest publications is so much needed.

Thank you for all your much appreciated work and hoping to find directions,
Andreas S. and numerous BSc, Master and doctorate students in Malawi

As we mentioned in the previous issue of HESP-News Briefing we shall try our level best to continue with our News Briefing albeit on a smaller level and perhaps less frequently. You can download the latest issue (20/2017, PDF 27 pp. 900 kB) here.

For comments write to hesp-news-briefing@healthy-developments.de

Enjoy the reading,
Dieter Neuvians MD

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ONLINE RESOURCES

Healthy Developments – Germany’s commitment to health and social protection

KfW hackathon generates innovative urban health solutions

http://health.bmz.de/events/Events_2017/KfW_hackathon_innovative_urban_health_solutions/index.html

At this year’s World Health Summit, KfW Entwicklungsbank organised a two-day hackathon at which teams of young experts from countries around the world searched for innovative solutions to urban health challenges. At the award ceremony KfW General Manager Joachim Nagel praised the three winning teams, saying that ‘the international community needs innovations like these to tackle the enormous challenges it faces’. The term ‘hackathon’ is a combination of the words ‘hack’ and ‘marathon.’ It describes a collaborative event at which multidisciplinary teams come together for several days to develop innovative solutions to help address contemporary problems.

Social protection for people caught up in protracted crises


The number of people forced to leave their homes has reached an all-time high. Fresh and practical solutions to extend social protection to people caught up in the world’s current protracted crises were at the centre of an international conference in Brussels on 28/29 September, organized jointly by UNICEF, German Development Cooperation, EU Commission and other partners.

Reproductive, maternal, neonatal, child and adolescent health & Right to health

Knowledge and quality of adolescents reproductive health communication between parents and their adolescents children in Ibadan, Nigeria

by Musibau A. Titiloye, Ademola J. Ajuwon
Journal of Public Health in Africa 2017; Volume 8:688
8 pp. 681 kB
Parents need to take a more proactive role in encouraging healthy sexual development in adolescents, this new study has found. The authors analyzed communication between adolescents and parents in Ibadan, Nigeria, and determined that despite an ever-growing body of information on adolescent reproductive health, poor communication at home is contributing to a dearth of basic sexual health knowledge that could prevent HIV/AIDS, unwanted pregnancies and abortion. The problem is exacerbated by adolescents’ ever-growing reliance on mass media to learn about sex.

A new use for an old tool: maternity waiting homes to improve equity in rural childbirth care. Results from a cross-sectional hospital and community survey in Tanzania

by Piera Fogliati, Manuela Straneo, Sabina Mangi et al.
Health Policy and Planning, czx100 - Published: 10 October 2017
7 pp. 150 kB

The authors aimed to determine whether Maternity Waiting Homes (MWHs) may be a tool to improve access of lower socio-economic women to facilities providing advanced management of childbirth complications. In multivariable analysis, age, education, marital status and obstetric factors were not significantly associated with MWH stay. Adjusted odds ratios for MWH stay increased progressively with distance from the hospital. Poorer women were more likely to access the MWH before hospital delivery compared with the wealthiest quintile. Policy makers should consider MWH as a tool to mitigate inequity in rural childbirth care.

Levels & Trends in Child Mortality

by Lucia Hug, David Sharrow, Dazhen You et al.
UNICEF, the World Health Organization, the World Bank and the Population Division of UNDESA which make up the Inter-agency Group for Child Mortality Estimation (IGME), 2017
40 pp. 2.1 MB

The publication reveals that although the number of children dying before the age of five is at a new low – 5.6 million in 2016, compared with nearly 9.9 million in 2000 - the proportion of under-five deaths in the newborn period has increased from 41 per cent to 46 per cent during the same period. The report notes that many lives can be saved if global inequities are reduced. If all countries achieved the average mortality of high-income countries, 87 per cent of under-five deaths could have been averted and almost 5 million lives could have been saved in 2016.
State of Inequality: Childhood immunization

The report addresses two overarching questions: What inequalities in childhood immunization coverage exist in low- and middle-income countries? And how have childhood immunization inequalities changed over the last 10 years? In answering these questions, this report draws on data about five childhood immunization indicators, disaggregated by four dimensions of inequality, and covering 69 countries. The findings of this report indicate that there is less inequality now than 10 years ago. Global improvements have been realized with variable patterns of change across countries and by indicator and dimension of inequality. The current situation in many countries shows that further improvement is needed to lessen inequalities.

The costs of HIV treatment and care in Ghana

The objective of the study was to determine cost functions that describe the dynamics of costs of HIV treatment and care in Ghana by CD4+ cell count at treatment initiation and over time on antiretroviral therapy (ART). The findings show that an accurate analysis of resource needs of HIV treatment and care should take into account that healthcare costs for HIV-infected people are dynamic rather than constant. The cost functions derived from the study are valuable input for cost-effectiveness analyses and research allocation exercises for HIV treatment in sub-Saharan Africa.

Compendium of WHO guidelines and associated standards: ensuring optimum delivery of the cascade of care for patients with tuberculosis

The objective of the study was to determine cost functions that describe the dynamics of costs of HIV treatment and care in Ghana by CD4+ cell count at treatment initiation and over time on antiretroviral therapy (ART). The findings show that an accurate analysis of resource needs of HIV treatment and care should take into account that healthcare costs for HIV-infected people are dynamic rather than constant. The cost functions derived from the study are valuable input for cost-effectiveness analyses and research allocation exercises for HIV treatment in sub-Saharan Africa.
After decades of stagnation, finally new diagnostics, drugs and regimens have become available through intensified research efforts and increased field experiences. This has engendered a growing need for expert guidance to the point that the production of guidelines and policy recommendations risks resulting in limited understanding if not seen in a comprehensive and coherent fashion. This document, therefore, has been conceived to provide a general overview of all recommendations made by WHO in the past few years. It incorporates all recent policy guidance from WHO’s Global TB Programme; follows the care pathway of persons with signs or symptoms of TB in seeking diagnosis, treatment and care; and it includes those cross-cutting elements that are essential to a patient-centred approach to care delivery.

Effectiveness of Canada's tuberculosis surveillance strategy in identifying immigrants at risk of developing and transmitting tuberculosis: a population-based retrospective cohort study

by Leyla Asadi, Courtney Heffernan, Dick Menzies et al.

In Canada, tuberculosis disproportionately affects the foreign-born population. The national tuberculosis medical surveillance programme aims to prevent these cases. Individuals referred for further in-country surveillance (referrals) have a history of active tuberculosis or have features of old, healed tuberculosis on chest radiograph; those not referred (non-referrals) do not undergo surveillance. The authors aimed to examine the risk of transmission arising from referrals versus non-referrals.

Special issue: Evidence to improve global tuberculosis control strategies: lessons from Southeast Asia

Health, Policy and Planning, Vol 32, Issue suppl_2, October 2017

The series provides some key lessons that have broader relevance in the rely. It shows the importance of linking health systems research to defined problems - in this case the reduction of death and suffering from an ancient disease, TB. As has been shown elsewhere, countries need both effective TB control programs and sufficiently resourced primary health care, with an efficient use of resources to achieve both. Locally defined health systems research can then help define what works in different situations for different communities and high-risk groups. Similarly, there are lessons in other parts of the world that could help inform local TB policy and research priorities in the region.
Tracking development assistance and government health expenditures for 35 malaria-eliminating countries: 1990–2017

by Rima Shretta, Brittany Zelman, Maxwell L. Birger et al.
Malaria Journal, 2017 16:251 - Published: 27 July 2017

https://malariajournal.biomedcentral.com/track/pdf/10.1186/s12936-017-1890-0?site=malariajournal.biomedcentral.com

Since 2010, development assistance for health (DAH) for malaria has been declining for the 35 countries actively pursuing malaria elimination (from US$ 176 million in 2010 to US$ 62 million in 2013). The Global Fund to Fight AIDS, Tuberculosis and Malaria is the largest external financier for malaria providing 96% of the total external funding for malaria in 2013, with vector control interventions being the highest cost driver in all regions. Government expenditure on malaria, while increasing, has not kept pace with diminishing DAH or rising national GDP rates, leading to a potential gap in service delivery needed to attain elimination.

Quantification of the association between malaria in pregnancy and stillbirth: a systematic review and meta-analysis

by Kerryn A Moore, Julie A Simpson, Michelle J L Scoullar et al.
Lancet Glob Health 2017, Published: 26 September 2017


2.6 million stillbirths occur annually worldwide. The association between malaria in pregnancy and stillbirth has yet to be comprehensively quantified. The authors aimed to quantify the association between malaria in pregnancy and stillbirth, and to assess the influence of malaria endemicity on the association. They conclude that P falciparum and P vivax malaria in pregnancy both increase stillbirth risk. The risk of malaria-associated stillbirth is likely to increase as endemicity declines. There is a pressing need for context-appropriate, evidence-based interventions for malaria in pregnancy in low-endemicity settings.

Informing new or improved vector control tools for reducing the malaria burden in Tanzania: a qualitative exploration of perceptions of mosquitoes and methods for their control among the residents of Dar es Salaam

by Christina Makungu, Stephania Stephen, Salome Kumburu et al.
Malaria Journal, 2017 16:410 - Published: 11 October 2017

https://malariajournal.biomedcentral.com/track/pdf/10.1186/s12936-017-1890-0?site=malariajournal.biomedcentral.com

hesp-news-briefing Issue 20/2017
The effectiveness of malaria prevention with long-lasting insecticidal nets and indoor residual spraying is limited by emerging insecticide resistance, evasive mosquito behaviours that include outdoor biting, sub-optimal implementation and inappropriate use. New vector control interventions are required and their potential effectiveness will be enhanced if existing household perceptions and practices are integrated into intervention design. Outdoor transmission is widely accepted as an obstacle to malaria elimination. Larval source management, targeting both malaria vectors and nuisance-biting mosquitoes, is the preferred method for mosquito control among the residents of Dar es Salaam and should be prioritized for development alongside new methods for outdoor personal protection. Even if made available, effective and affordable, these additional interventions may require time and user experience to achieve positive reputations and trustworthiness.

Global Vector Control Response 2017–2030

A strategic approach to tackle vector-borne diseases
by Pedro Alonso, Dirk Engels, John Reeder et al.
World Health Organization, 2017
64 pp. 3.5 MB

http://apps.who.int/iris/bitstream/10665/259205/1/9789241512978-eng.pdf?ua=1

Mosquitoes, flies, bugs and other vectors transmit viruses, parasites and bacteria that infect millions of people globally. They cause many diseases, including malaria, dengue, leishmaniases, Chagas disease and Zika virus disease. The World Health Organization (WHO) has developed a new strategy to strengthen vector control worldwide. Member States welcomed this integrated approach at the 2017 World Health Assembly and adopted a resolution to support the strategy.

Neglected Tropical Diseases, Other Infectious diseases & Pandemic Preparedness

Global surgery and the neglected tropical diseases

by Vivek Karun, Peter J. Hotez, Todd K. Rosengart

http://journals.plos.org/plosntds/article/file?id=10.1371/journal.pntd.0005563&type=printable

At the sunset of the Millennium Development Goals there was a global awakening that hundreds of millions of people living in resource-poor countries lacked safe and equitable access to even basic surgeries. In response, a Lancet Commission on Global Surgery was launched in April 2015 under the premise that surgery is an integral component of a properly functioning healthcare system. The commission aims to integrate surgery into the global agenda and identify strategies to provide quality care worldwide in an effort to enhance “universal access to safe, affordable surgical and anesthesia care”. The launch coincided with the publishing of their landmark report, which highlighted that an astonishing 5 billion people lack accessible surgical care and that investing in scaling up surgical services until 2030 is necessary and cost effective.
Local, national, and regional viral haemorrhagic fever pandemic potential in Africa: a multistage analysis

by David M Pigott, Aniruddha Deshpande, Ian Letourneau et al.
The Lancet, Published Online: October 11, 2017
11.0 MB
http://www.thelancet.com/pdfs/journals/lancet/PIIS0140-6736(17)32092-5.pdf

Predicting when and where pathogens will emerge is difficult, yet, as shown by the recent Ebola and Zika epidemics, effective and timely responses are key. It is therefore crucial to transition from reactive to proactive responses for these pathogens. To better identify priorities for outbreak mitigation and prevention, the authors developed a cohesive framework combining disparate methods and data sources, and assessed subnational pandemic potential for four viral haemorrhagic fevers in Africa, Crimean–Congo haemorrhagic fever, Ebola virus disease, Lassa fever, and Marburg virus disease.

Ending Cholera: A Global Roadmap to 2030

by Global Task Force on Cholera Control
32 pp. 5.9 MB
http://www.who.int/entity/cholera/publications/global-roadmap.pdf?ua=1

The publication operationalises the new global strategy for cholera control at the country level and provides a concrete path toward a world in which cholera is no longer a threat to public health. By implementing the strategy between now and 2030, the Global Task Force on Cholera Control (GTFCC) partners will support countries to reduce cholera deaths by 90 percent. With the commitment of cholera-affected countries, technical partners, and donors, as many as 20 countries could eliminate disease transmission by 2030. The strategy focuses on the 47 countries affected by cholera today, and consists of multi-sectoral interventions in two main types of cholera-affected geographies, supported by a nimble and effective coordination mechanism.
Global Hunger Index: The Inequalities of Hunger

by Klaus von Grebmer, Jill Bernstein, Tracy Brown et al.
International Food Policy Research Institute, Concern Worldwide, Welthungerhilfe, October 2017
52 pp. 4.7 MB

The 2017 Global Hunger Index (GHI) shows long-term progress in reducing hunger in the world. The advances have been uneven, however, with millions of people still experiencing chronic hunger and many places suffering acute food crises and even famine. According to 2017 GHI scores, the level of hunger in the world has decreased by 27 percent from the 2000 level. Of the 119 countries assessed in this year’s report, one falls in the extremely alarming range on the GHI Severity Scale; 7 fall in the alarming range; 44 in the serious range; and 24 in the moderate range. Only 43 countries have scores in the low range. In addition, 9 of the 13 countries that lack sufficient data for calculating 2017 GHI scores still raise significant concern, including Somalia, South Sudan, and Syria.

2016 Global Hunger Index: Africa edition

by Klaus von Grebmer, Jill Bernstein, David Nabarro et al.
20 pp. 2.7 MB

In 30 of 38 sub-Saharan African countries, hunger remains “unacceptably common,” making the region the most undernourished in the developing world. The Global Hunger Index: Africa edition, based on 2016 data, measured rates of undernourishment, children under 5 who are underweight or afflicted by stunting, and child mortality rate. Like all African countries scored, the sub-Saharan region’s undernourishment has improved since 2000. Still, only 3 of 42 countries scored “low” on hunger; 28 had “serious” hunger problems. To curb hunger, the Index suggests nurturing struggling smallholder farms, mobilizing political will and harnessing mobile phones as data hives.

The State of Food and Agriculture 2017 - Leveraging food systems for inclusive rural transformation

by Rob Vos, Andrea Cattaneo, Kostas Stamoulis et al.
Food and Agriculture Organization of the United Nations (FAO), October 2017
Millions of young people in developing countries who are poised to enter the labour force in the coming decades need not flee rural areas to escape poverty, argues this FAO report. Rural areas actually have vast potential for economic growth pegged to food production and related sectors, the report says. And with the majority of the world’s poor and hungry living in these areas, achieving the 2030 development agenda will hinge on unlocking that oft-neglected potential, it adds. Doing so will require overcoming a thorny combination of low productivity in subsistence agriculture, limited scope for industrialization in many places, and rapid population growth and urbanization — all of which pose challenges to developing nations’ capacity to feed and employ their citizens.

Worldwide trends in body-mass index, underweight, overweight, and obesity from 1975 to 2016: a pooled analysis of 2416 population-based measurement studies in 128.9 million children, adolescents, and adults

by NCD Risk Factor Collaboration (NCD-RisC)
The Lancet - Published 10 October 2017
16 pp. 2.9 MB

Underweight, overweight, and obesity in childhood and adolescence are associated with adverse health consequences throughout the life-course. The author’s aim was to estimate worldwide trends in mean body-mass index (BMI) and a comprehensive set of BMI categories that cover underweight to obesity in children and adolescents, and to compare trends with those of adults. They conclude that the rising trends in children’s and adolescents’ BMI have plateaued in many high-income countries, albeit at high levels, but have accelerated in parts of Asia, with trends no longer correlated with those of adults.

Assessing and managing children at primary health-care facilities to prevent overweight and obesity in the context of the double burden of malnutrition

Updates for the integrated management of childhood illness (IMCI) - Guideline by Nigel Rollins, Zita Weise Prinzo, Rajiv Bahl et al.
World Health Organization, 2017
88 pp. 1.0 MB
http://apps.who.int/iris/bitstream/10665/259133/1/9789241550123-eng.pdf?ua=1

As part of its response to the global epidemic of obesity, WHO has issued guidelines to support primary healthcare workers identify and manage children who are overweight or obese. Specifically, all infants and children aged less than 5 years presenting to primary health-care facilities should have both weight and height measured in order to determine their weight-for-height and their nutritional status according to WHO child growth standards. Comparing a child’s weight with norms for its length/height is an effective way to assess for both wasting and overweight.
**Tobacco tax reform at the crossroads of health and development**

Technical report of the World Bank Group global tobacco control program
Executive summary
by Patricio V. Marquez and Blanca Moreno-Dodson
Worldbank Group, 2017
20 pp 420 kB


There is a policy measure that can simultaneously save millions of lives, reduce poverty, and increase countries’ domestic resources for financing development. The policy measure consists of increasing excise tax rates on tobacco in order to reduce its affordability and, as evidence shows, lower its consumption. Today, this powerful human development and poverty reduction measure remains largely underutilized, especially in low- and middle-income countries (LMICs). This report provides decision support for policy makers on tobacco tax reform, as well as analytical and empirical tools for using tobacco excise taxes to save lives and increase government revenues. It shows that, by implementing tobacco tax reforms now, policy makers can choose a fast road to healthier, more prosperous societies.

**Upstream watershed condition predicts rural children's health across 35 developing countries**

by Diego Herrera, Alicia Ellis, Brendan Fisher et al.
Nature Communications 8, Article number: 811 (2017)
8 pp. 742 kB

https://www.nature.com/articles/s41467-017-00775-2.pdf

Diarrheal disease (DD) due to contaminated water is a major cause of child mortality globally. Forests and wetlands can provide ecosystem services that help maintain water quality. To understand the connections between land cover and childhood DD, the authors compiled a database of 293,362 children in 35 countries with information on health, socioeconomic factors, climate, and watershed condition. Using hierarchical models, here they find that higher upstream tree cover is associated with lower probability of DD downstream. This effect is significant for rural households but not for urban households, suggesting differing dependence on watershed conditions. They conclude that maintaining natural capital within watersheds can be an important public health investment, especially for populations with low levels of built capital.

**Climate-resilient water safety plans: Managing health risks associated with climate variability and change**
This document is intended to help water suppliers and water safety plan (WSP) teams who have already committed to using the WSP approach and are developing and implementing WSPs to gain greater understanding of climate change and how it can be considered and addressed in the WSP process. This document will also be useful to other stakeholders, particularly health and environment agencies who are supporting WSP implementation. It discusses how to take into consideration the broader issues of climate change, regional climate vulnerability assessments, disaster risk reduction and integrated water resources management within the WSP process. The details of how this is done for any particular WSP depend upon local circumstances.

Population Dynamics & Social Determinants of Health (including Gender & Education)

**The State of World Population 2017**

Arthur Erken, Raquel Fernández, Mercedes Mateo Diaz et al.
United Nations Population Fund, 2017
140 pp. 6.8 MB


Gender amplifies the social, racial and political inequalities that trap people in a cycle of poverty and marginalization, the UNFPA charges in its flagship report. And around the world, gender amplifies these inequalities. Too many women and girls do not have access to sexual and reproductive health care, which means they are unable to receive family planning services or antenatal care, and may be forced to give birth in unsafe conditions. Instead of letting these inequalities hinder goals to end poverty and preventable deaths, the global community could take 10 steps to even out many of the disparities, according to the report.
Unpicking Power and Politics for Transformative Change: Towards Accountability for Health Equity

Workshop Report - Accountability for Health Equity Programme
Institute of Development Studies (IDS), 2017
47 pp. 2.1 MB

https://opendocs.ids.ac.uk/opendocs/bitstream/123456789/13258/1/AHE%20workshop_Full_report.pdf

While 'accountability' has become an increasingly popular buzzword in health systems debates and health service delivery, it has multiple – and contested – meanings. From 19-21 July 2017, IDS brought together 80-plus activists, researchers, public health practitioners and policy makers to examine critically the forces that shape accountability in health systems, from local to global levels. This is the workshop report for the event which is a record of the presentations and discussions that occurred over the course of these three days.

The Value That Infectious Diseases Physicians Bring to the Healthcare System

by Daniel P McQuillen and Ann T MacIntyre
The Journal of Infectious Diseases, Vol. 216, Issue suppl_5, 15 September 2017, pp. S588-S593 - Published: 20 September 2017
6 pp.131 kB


While a career in infectious diseases (ID) has always been challenging and exciting, recognition of the value that ID physicians provide to the healthcare system as a whole, over and above the value they provide to individual patients, has been poor in this system. The authors discuss data showing that ID physicians improve clinical outcomes, positively impact transitions of care, and direct system-level improvements through infection prevention and antimicrobial stewardship. The authors also identify areas where value-based care provides additional future opportunities for ID physicians.

Community Health Worker Programmes in the WHO African Region: Policy Brief

by Nana Twum Danso, Uta Lehmann, Jennifer Nyoni et al.
World Health Organization Regional Office for Africa, 2017
32 pp. 5.4 MB

http://www.afro.who.int/sites/default/files/2017-07/Community%20Health%20Worker%20Policy%20Brief%20-%20English_0.pdf

The purpose of this policy brief is to inform discussions and decisions in the World Health Organization (WHO) African Region on policies, strategies and programmes to increase
access to primary health care (PHC) services and make progress towards universal health coverage (UHC) by expanding the implementation of scaled-up community health worker (CHW) programmes. This brief summarizes the existing evidence on CHW programmes with a focus on sub-Saharan Africa and offers a number of context linked policy options for countries seeking to scale up and improve the effectiveness of their CHW programmes, particularly with regard to needs such as those of Guinea, Liberia and Sierra Leone, the three countries that were the most affected by the 2014–2015 EVD outbreak.

GHJournalSearch: The easy-to-use database that helps you find the right journal to publish your global public health research

https://www.ghjournalsearch.org/

GHJournalSearch is an easy-to-use free resource developed by the USAID-supported Johns Hopkins Knowledge for Health (K4Health) Project in collaboration with The Consortium of Universities for Global Health (CUGH). Our goal for GHJournalSearch is to present the major core peer reviewed global health journals in one place providing authors a simple tool to discover and choose the “best fits” for their intended publication, enhancing publication quality and the probability that important evidence will make its way into the literature. Authors can browse by Journal Title or Topic Category and filter by whether a fee is required and/or by the journal’s open access availability.

Open Access Overview: Focusing on open access to peer-reviewed research articles and their preprints

by Peter Suber
Director, Harvard Office for Scholarly Communication, December 2015
Read online at:
http://legacy.earlham.edu/~peters/fos/overview.htm

This is an introduction to open access (OA) for those who are new to the concept. It is hoped it’s short enough to read, long enough to be useful, and organized to let you skip around and dive into detail only where you want detail. It doesn’t cover every nuance or answer every objection. But for those who read it, it should cover enough territory to prevent the misunderstandings that delayed progress in our early days.


by Nicole Ippoliti, Trinity Zan, Margaret D’Adamo et al.
High-Impact Practices in Family Planning (HIPs), 2017
8 pp. 782 kB
This new HIP brief summarizes the experience and evidence for the most commonly used digital health technologies aimed at supporting health systems and providers. Key messages from the brief include:

- Family planning indicators should be incorporated into new and existing digital health and logistics management information systems.
- More research is needed about when and how digital applications for provider support are most effective, efficient, and scalable.
- Mobile money and electronic financial transactions have the potential to provide efficiency and transparency of health care financing and transactions.

Access to Medical Products, Vaccines and Technologies

Access to Medicine Index 2018: Methodology Report

by Hans Hogerzeil, Sanne Frost-Helt, Fumie Griego et al.
The Access to Medicine Foundation, 2017

The report presents the latest good practice framework for pharmaceutical companies working to improve access to medicine. Developed over the last year through internal analysis, stakeholder engagement and consultations through our committees, the methodology will track where and how pharmaceutical companies are taking action, including in strategy, compliance, R&D, pricing, patenting, donations and capacity building. The 2018 Access to Medicine Index will rank the same 20 pharmaceutical companies as in the 2016 Access to Medicine Index. Considering their size, resources, pipelines, portfolios and global reach, these companies have a critical role to play in improving access to medicine.

As Cancer Tears Through Africa, Drug Makers Draw Up a Battle Plan

by Donald G. McNeill Jr.
The New York Times, 7 October 2017
Read online at:

In Africa, even the most treatable cancers can be a death sentence. The disease takes 450,000 lives annually. Working with the American Cancer Society, pharma giants Pfizer and Cipla agreed to slash the cost of cancer medications in Africa, where the WHO says the death toll could reach 1 million a year by 2030. To start, 6 countries will receive certain pills at 50 cents a pop, and infusions as low as
Africa to get state-of-art HIV drugs for US$ 75 a year

In what has been hailed as a “breakthrough” and a “game changer,” a pricing agreement between the Bill and Melinda Gates Foundation and two generic drug companies (Mylan Laboratories and Aurobindo Pharma, both based in India), will result in significant savings in the cost of antiretrovirals (ARVs). As a result of the agreement, starting in 2018 a state-of-the-art fixed dose combination ARV regimen will be available in 92 developing nations at a maximum cost of US$ 75 per patient per year.

WHO Drug Information Vol. 31, No. 3, 2017

The third issue for 2017 includes featured articles on the following topics:
MEDICINES REGULATION: Regulatory systems in India

The SAFETY NEWS section highlights information on adverse drug reactions and recommendations including labelling changes, as well as findings of non-compliance with good practices.

The REGULATORY NEWS section gives an overview of developments at regulatory authorities, topics under discussion through public consultations, and approvals of products.

PUBLICATIONS AND EVENTS related to access, quality and use of medical products in WHO Member States.

Management and Quality of Health Services and Facilities

What does quality maternity care mean in a context of medical pluralism? Perspectives of women in Nigeria

by Chimaraoke O Izugbara and Frederick Wekesah
Health Policy and Planning, czx131 - Published: 05 October 2017
8 pp. 183 kB
User priorities regarding quality care in contexts of medical pluralism are poorly documented. Drawing on group and individual interviews with women, the authors interrogate ideas of quality maternity care in the context of Nigeria’s medical pluralism. They found complex utilization patterns for conventional, complementary and alternative maternity care services. Convenience, availability and affordability of maternal health services, as well as sociocultural factors were major influences on women’s use of services. Results demonstrate the embeddedness of women’s quality of care notions in the vast socioeconomic inequities that typify Nigeria’s particular form of poorly regulated medical pluralism, raising need for strategies to strengthen the delivery, coordination and supervision of maternal health services in the country.

**Improving inpatient medication adherence using attendant education in a tertiary care hospital in Uganda**

by Patricia Alupo, Richard Ssekitoleko, Tracy Rabin et al.
6 pp. 500 kB

Poor adherence to prescribed inpatient medications was identified as a key shortcoming of clinical care on the internal medicine wards of Mulago National Referral Hospital, Kampala, Uganda. Deficiencies were also identified in attendant (lay caretaker) education, and prescriber and pharmacy metrics. A QI team led by a resident doctor and consisting of a QI nurse, a pharmacist and a ward nurse supervisor used standard QI techniques to address this issue. The authors conclude that QI methods may be the way forward for optimizing health care delivery in resource-limited settings like Uganda. Institutionalization of these methods remains a challenge due to shortage of staff and other resource limitations.
Social Innovation in Health: Case Studies and Lessons Learned from Low- and Middle-Income Countries

by van Niekerk L, Chater R, Naydenova E et al.
World Health Organization on behalf of the Special Programme for Research and Training in Tropical Diseases, 2017
77 pp. 3.7 MB
http://apps.who.int/iris/bitstream/10665/259187/5/9789241513098-LR-eng.pdf?ua=1

Social innovation in health: case studies and lessons learned from low- and middle-income countries, is a publication of collaborative case study research conducted by Social Innovation in Health Initiative (SIHI) partners. The summaries of the 23 case studies display the diversity of approaches social innovations have taken to address grassroots health challenges. The insights and lessons learned cast light on the valuable role social innovation can play in strengthening health systems in low- and middle-income countries. It analyses the factors involved and highlights areas that require further study to advance social innovation in health, strengthen health systems and contribute to universal health coverage.

Alleviating the access abyss in palliative care and pain relief - an imperative of universal health coverage: the Lancet Commission report

by Felicia Marie Knaul, Paul E Farmer, Eric L Krakauer et al. on behalf of the Lancet Commission on Palliative Care and Pain Relief Study Group
The Lancet - Published: October 13, 2017
64 pp. 6.1 MB

This Lancet Commission aims to (1) quantify the heavy burden of serious health-related suffering associated with a need for palliative care and pain relief; (2) identify and cost an essential package of palliative care and pain relief health services that would alleviate this burden; (3) measure the unmet need of an indispensable component of the package - off patent, oral, and injectable morphine; and (4) outline national and global health-systems strategies to expand access to palliative care and pain relief as an integral component of UHC while minimising the risk of diversion and non-medical use.
The provision of integrated care is key for older people. The WHO Guidelines on Integrated Care for Older People (ICOPE) propose evidence-based recommendations for health care professionals to prevent, slow or reverse declines in the physical and mental capacities of older people. These recommendations require countries to place the needs and preferences of older adults at the centre and to coordinate care. The ICOPE Guidelines will allow countries to improve the health and well-being of their older populations, and to move closer to the achievement of universal health coverage for all at all ages.

**Global Database of Age-friendly Practices**

https://extranet.who.int/datacol/custom_view_report.asp?survey_id=3536&view_id=6301&display_filter=1

Cities and communities world-wide strive to become more age-friendly. They seek to better adapt to the needs of their ageing populations. But what are they actually doing? Browse the database to find out. Small measures can make a big difference. They are shared here by communities, for communities.

**Inclusion of People with Disabilities**

**Barefoot Guide 5: Mission Inclusion**

Stories and Practices of building a world where all belong

by The Fifth Barefoot Guide Writer’s Collective

154 pp. 22.5 MB


Everyone agrees that inclusion is hard, that reaching the poorest and most marginalised is difficult. Many organisations, large and small, are tackling the deep challenges of exclusion and coming up with creative, innovative and workable solutions that are putting into practice the policies and strategies that everyone is talking about. This Barefoot Guide, written by 34 practitioners from 16 different countries on all continents makes many of these successful approaches and solutions more visible.

**Interventions to improve the labour market for adults living with physical and/or sensory disabilities in low- and middle-income countries: a systematic review**
The authors find that research in this area has received very little attention. They identify only a limited number of relevant impact evaluations to include in the review, all of which had significant methodological limitations. The available evidence does not allow for definite conclusions on the effects of interventions to support the employment of adults living with physical and/or sensory disabilities. The review highlights the identified gaps and lays out key areas for future research, including high-quality evaluations of relevant legislation and policies, educational and skills development programmes, employer sensitisation and awareness-raising campaigns, and programmes targeting adults with hearing impairments.

Global Health Governance, Sustainable Development Goals & Development Cooperation

**Global development trends and challenges**

Horizon 2025 revisited
by Homi Kharas and Andrew Rogerson
Overseas Development Institute, October 2017
52 pp. 4.5 MB


The socio-political phenomena that have materialised since 2012, when we first looked at the future of the development industry, have changed the aid landscape in ways that were not then imagined. There are now more people living in poverty in fragile states than in other developing countries, and their numbers are growing due to stagnant economies coupled with fast-growing populations. There is an optimistic message about the relatively small investment need to close the poverty gap in developing countries. We should channel aid through middle-income countries, whenever it is appropriate to cover effective management of major regional and global spillover effects. Chinese development efforts are setting new benchmarks against which Western aid agencies will be increasingly judged in terms of motivation (mutual benefit), efficiency, and perhaps effectiveness.

**A 10-point roadmap for Europe on the role of the private sector in development**

by CONCORD Europe, October 2017
32 pp. 870 kB
European governments and the European Commission have been increasingly supporting a greater role for the private sector in their development cooperation. With new EU policies and instruments such as the European External Investment Plan, it was deemed important for CONCORD members to agree on a common position, common messages and priorities regarding the role of the private sector in contributing to sustainable development. To write this paper, CONCORD Europe’s specific work stream on the private sector collaborated with all of CONCORD’s membership, but also with other civil society organisations and CSO confederations.

Development of a Global Mechanism in Support of Advancing the Scale and Impact of Communication and Media for Development, Social and Behaviour Change

25 pp. 1.0 MB

https://www.comminit.com/files/globalmechanismmeetingreport_0.pdf

This report covers the key considerations and results from the all interested parties (stakeholders) meeting hosted by UNICEF in collaboration with The Communication Initiative (CI). This meeting was part of a process aimed at discussing, exploring and making recommendations towards the establishment of a global mechanism to advance the scale and impact of communication and media for development and social and behaviour change. This report should be read in conjunction with the Options paper and the comments from the overnight survey between days 1 and 2 of the meeting.

The Options paper can be found here: http://www.comminit.com/global/content/draft-paper-global-mechanism-comments-and-critique-please

Miscellaneous

Bulletin of the WHO, Volume 95, Number 10, October 2017

Complete list of contents

Highlights from the October 2017 issue:
- Call for papers: health in the sustainable development goals
- Call for papers: programmes to detect, prevent and treat visual impairments
- Interview with Tabaré Vázquez, president of Uruguay
- Responding to false information about vaccines
- Fewer heart attacks after smoke-free law in Chile
- Improving data for maternal and child health in Kenya
- Sharp decline in malaria in Papua New Guinea
A global knowledge platform for preventing violence

http://apps.who.int/violence-info/

The Violence Prevention Information System (Violence Info) collates published scientific information on the main types of interpersonal violence. This includes information on prevalence, consequences, risk factors, and prevention and response strategies. It also describes what countries report about their actions to address violence. This version contains most of the major features, but remains a work in progress with more studies to be added. User feedback is welcome, including suggestions for features and additional studies, provided they meet the inclusion criteria (see methodology on the About page).

September Issue of GHSP Journal Published

Access at: http://www.ghspjournal.org/
Or download the full open-access issue (PDF 206 pp 11.8 MB) at: http://www.ghspjournal.org/content/ghsp/5/3/local/complete-issue.pdf

The latest instalment of Global Health: Science and Practice (GHSP) puts a spotlight on routine health information systems (RHISs) with three original articles on performance improvement of RHISs in Malawi and Zambia, along with an editorial by guest editor and health systems expert Theo Lippeveld. Other articles cover nutrition, Ebola, noncommunicable diseases among Syrian refugees, family planning, universal health care, tobacco control, and maternal health.

The Plunder Route to Panama: How African oligarchs steal from their countries

by Maxime Domegni, Estacio Valoi, Evelyn Groenink et al.
37 pp. 4.8 MB


The Panama Papers project last year revealed that there are quite a few African politicians, their relatives and friends among those who have stored hidden wealth in off-shore bank accounts. But how did the money get there? An investigation by the African Investigative Publishing Collective in partnership with Africa Uncensored and ZAM.
CONFERENCES & TRAINING

Online course: Eliminating Trachoma

This course aims to inform and support the personnel implementing and managing trachoma programmes at a district and community level. Additionally, the course will provide insights from stakeholders, experts and professionals as they share successes and resolve challenges to achieve elimination of trachoma. This course will teach you to evaluate the natural history, clinical signs, and grading of trachoma in individuals, and map the burden of disease at a community level. Throughout the course we will use a variety of learning tools and provide opportunities to interact and learn through online conversations with peers and educators from across the world.
For more information see: https://www.futurelearn.com/courses/eliminating-trachoma

CARTOON

“Our Heart-Smart Pizza is tomato sauce, pepperoni, sausage, meatballs, and mozzarella cheese served on two defibrillator paddles.”

Source: Glasbergen
Way Too Small in MS Office

Did it happen to you that you had quite a surprise when a Window opened like this one:

The titles are legible, but for the rest, it is quite a struggle. The window is normal size, it is only the informational text that is way too small. But the fix is easy:

First, click into the text area of the window.

Now, while holding down the Ctrl key, spin the scroll wheel on your mouse. If nothing in the other direction.

You should find that the text size increases to normal and you can get the information you need without a magnifying glass.

This one also works for text viewing size in MS Word, Excel (it actually increases or decreases the number of cells on the screen), PowerPoint and message content in Outlook.

Is public wireless Internet access safe?

If you use wireless Internet access in public places like hotels, Starbucks or the airport, you should take some simple precautions to make sure you are not broadcasting your passwords and other personal info to others in the vicinity... Somebody might be running a "sniffer" programme that anyone can download to spy on the internet traffic floating around in the air.

First, be aware that (almost) ANYTHING that you type or any info that appears on your screen while you are using a wireless connection can be seen by others nearby.

If you are accessing a page that requires a login and password, or if you are entering ANY personal data (credit card, PIN etc.) make sure that you are on a secure site. That is easy enough - just check that the web address begins with https instead of the usual http - and your information will be safely encrypted before transmission. As long as you are on a page with an address that begins with https, the data you send and receive is protected from sniffers and snoopers.