

*A bi-weekly newsletter supported by GTZ  
(Deutsche Gesellschaft für Technische Zusammenarbeit)*

2 January 2007

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

## BOOKS

### *The HIV/AIDS Epidemic in Sub-Saharan Africa in a Historical Perspective*



Philippe Denis and Charles Becker (eds.)  
Réseau sénégalais 'Droit, éthique, santé'/ Senegalese Network 'Law, Ethics, Health', October 2006

Online edition - Adobe PDF file (270 pp. 3.5 MB!):  
<http://www.refer.sn/rds/IMG/pdf/AIDSHISTORYALL.pdf>

The aim of this book is to initiate a dialogue between historians and experts in other disciplines such as economics, sociology, epidemiology and the science of development on the history of AIDS in sub-Saharan Africa. The articles published here retrace, in overviews of the situation or in case studies, the spacio-temporal origin of the epidemic. The intention is to approach AIDS in sub-Saharan Africa as an historical fact. The epidemic is not a recent as supposed, but, in many aspects, it is an unrecognized event.

The French version has been just published under the title "L'Epidémie du sida en Afrique subsaharienne. Regards historiens" (Louvain-La-Neuve - Bruylant-Academia/Paris, Karthala, 2006, 427 pp. € 29.00 Collection "Espace Afrique"), ISBN 2-84586-783-2. To order online go to: [http://www.karthala.com/rubrique/detail\\_produit.php?id\\_oeuvre=1705](http://www.karthala.com/rubrique/detail_produit.php?id_oeuvre=1705)

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### *Political Economy of the Budget in Mozambique*

by Tony Hodges and Roberto Tibana  
Oxford Policy Management, December 2005



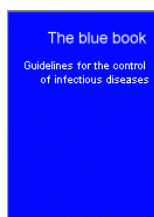
Adobe PDF file (111 pp. 903 kB):  
<http://www.dfid.gov.uk/pubs/files/political-economy-mozambique.pdf>

This book is about the nature of the budget process in a highly aid-dependent developing country with weak institutions. It argues that, while external aid helped to rebuild Mozambique after a long and devastating civil war and has contributed to economic growth, it has also had perverse side-effects, fragmenting government planning, budgeting and management and weakening national ownership of policymaking. Since Mozambique also has a weak civil society and a weak parliament that is not yet able to act as an effective check on the executive, high aid dependence means that the budget process essentially involves only two actors, the executive and foreign donors. Accountability to donors is much stronger than it is to Mozambican society.

\* \* \*

### *The blue book: Guidelines for the control of infectious diseases*

Revised edition May 2005



Published by the Communicable Diseases Section, Public Health Group, Victorian Department of Human Services, Australia

Adobe PDF file (270 pp. 1.0 MB):  
<http://www.health.vic.gov.au/ideas/downloads/bluebook.pdf>

These guidelines have been prepared following consultation with experts in the field of infectious diseases and are based on information available at the time of their preparation. The challenge, together with public health practitioners, is to reduce community risk from communicable disease in Australia through the implementation of patient focused and population focused control strategies based on surveillance and risk assessment.

\* \* \*

### **Soziale Grundsicherung in der Weltgesellschaft - Monetäre Mindestsicherungssysteme in den Ländern des Südens und des Nordens**



von Lutz Leisering, Petra Buhr und Ute Traiser-Diop  
Universität Bielefeld, Okt. 2006, 342 S., € 29,80; ISBN: 3-89942-460-3

Auch Sozialpolitik globalisiert sich. Das Buch zeigt, dass sozialhilfe- und rentenartige Grundsicherungssysteme nicht nur in entwickelten, sondern auch in Entwicklungs- und Übergangsgesellschaften wirksame Instrumente der Armutsbekämpfung sein können. Direkte Geldleistungen etwa an von AIDS betroffene Familien, alleinerziehende Frauen und Alte können auch entwicklungspolitisch produktiv sein. Das Buch gibt erstmals einen weltweiten Überblick über monetäre Grundsicherungssysteme.

Das Buch basiert auf einer Studie durchgeführt im Auftrag der GTZ:



### **Grundsicherung als globale Herausforderung**

von Lutz Leisering, Petra Buhr und Ute Traiser-Diop, Eschborn 2006

Adobe PDF file (153 pp. 2.1 MB):

<http://www.gtz.de/de/dokumente/de-grundsicherung-als-globale-herausforderung.pdf>

## **ONLINE PUBLICATIONS**

HIV - AIDS - STI

### **Guidance on Provider-initiated HIV Testing and Counselling in Health Facilities**

DRAFT FOR PUBLIC COMMENT - WHO/UNAIDS, November 27, 2006

Adobe PDF file (47 pp. kB): <http://www.who.int/hiv/topics/vct/PITCguidancedraft.pdf>

This document responds to growing demand at country level for basic operational guidance on provider-initiated testing and counselling in health facilities. It is based on an assessment of available evidence and is intended for a wide audience including policy-makers, HIV/AIDS programme planners and coordinators, health-care providers, non-governmental organizations providing HIV/AIDS services and civil society groups.

If you would like to send your comments on the text, please log onto the web-based survey, [https://extranet.who.int/datacol/survey.asp?survey\\_id=395](https://extranet.who.int/datacol/survey.asp?survey_id=395) with username - **pitc** and password - **pitc2006** to submit your comments. The deadline to receive comments is 5 January 2007.

\* \* \*

## **"Routinizing" HIV testing in low- and middle-income countries**

by Ralf Jürgens - DRAFT FOR COMMENT

Public Health Program, Open Society Institute, 13 December 2006

Adobe PDF file (110 pp. 621 kB):

[http://www.soros.org/initiatives/health/articles\\_publications/publications/routinizing\\_20061213/routinizing\\_20061213.pdf](http://www.soros.org/initiatives/health/articles_publications/publications/routinizing_20061213/routinizing_20061213.pdf)

This paper is based on a review of the literature and extensive consultations with people providing services to, and/or shaping policy for, populations vulnerable to HIV in Sub-Saharan Africa, Asia, Eastern Europe, Latin America, and North America. It focuses on the issues raised by proposals to routinize HIV testing in low- and middle-income countries. Greater access to HIV testing and counselling is both a public health and a human rights imperative. Efforts to scale up access must be grounded in sound public health practice and in respect, protection, and fulfilment of human rights norms and standards.

\* \* \*

## **An Analysis of the Strengths and Weaknesses of Proposals Submitted to the Global Fund in Rounds 3-6**

Based on Comments by the Technical Review Panel

by David Garmaise

Aidspan, December 2006



Adobe PDF file (47 pp. 187 kB):

<http://www.aidspan.org/documents/guides/aidspan-strengths-and-weaknesses-guide-extract.pdf>

This document contains information on the most common strengths and weaknesses of proposals submitted to the Global Fund for the third, fourth, fifth and sixth rounds of funding. The information is based on comments made by the Technical Review Panel. It is an extract from the forthcoming Aidspan Guide to Round 7 Applications to the Global Fund, which will be available as close as possible to the date when the Global Fund to Fight AIDS, TB and Malaria issues its Call for Proposals for Round 7 (tentatively set at 1 March 2007).

\* \* \*

## **The Demographic Impact of HIV/AIDS in South Africa**

National and Provincial Indicators for 2006



by Rob Dorrington, Leigh Johnson, Debbie Bradshaw and Timothy-John Daniel

Medical Research Council, South Africa, Centre for Actuarial Research and the Actuarial Society of South Africa

Adobe PDF file (116 pp. 541 kB):

<http://www.mrc.ac.za/bod/DemographicImpactHIVIndicators.pdf>

The latest projections about HIV/AIDS indicate that out of the nearly 48 million South Africans, 5.4 million people were HIV-positive towards the middle of 2006, leaving the total population prevalence rate at just over 11%. The report further suggests that antiretroviral treatment could still significantly help reduce the number of AIDS deaths per year. Of those already infected with HIV, about 600 000 people have AIDS, with KwaZulu-Natal topping the prevalence rate at an estimated antenatal plateau of around 40%.

### ***HIV-1 Disease Progression in Breast-Feeding and Formula-Feeding Mothers: A Prospective 2-Year Comparison of T Cell Subsets, HIV-1 RNA Levels, and Mortality***

by Phelgona A. Otieno, Elizabeth R. Brown, Dorothy A. Mbori-Ngacha et al.  
The Journal of Infectious Diseases 2007;195:220-229

Adobe PDF file (10 pp. 1.4 MB):

<http://www.journals.uchicago.edu/cgi-bin/resolve?JID36904PDF>

There is conflicting evidence regarding the effects of breast-feeding on maternal mortality from human immunodeficiency virus type 1 (HIV-1) infection, and little is known about the effects of breast-feeding on markers of HIV-1 disease progression. The authors conclude that breast-feeding was associated with significant decreases in CD4 cell counts and body mass index. HIV-1 RNA levels and mortality were not increased, suggesting a limited adverse impact of breast-feeding in mothers receiving extended care for HIV-1 infection.

\* \* \*

### ***Culture, HIV and AIDS: An Annotated Bibliography***

by Vinh-Kim Nguyen, Jennifer Klot, Alton Phillips and Catherine Pirkle  
UNESCO and the Social Science Research Council, October 2006

Adobe PDF file (100 pp. 1.3 MB):

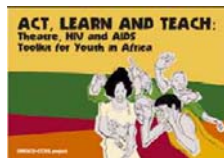
<http://unesdoc.unesco.org/images/0014/001472/147244M.pdf>

Designing culturally appropriate programmes for HIV and AIDS education can be extremely challenging. In an attempt to assist these efforts, UNESCO's 'Culture, HIV and AIDS' project and the Social Sciences Research Council, have compiled this annotated bibliography providing an overview of theoretical perspectives analyzing the complex relations between culture, HIV and AIDS. It also offers practical insights into how responses to HIV and AIDS can be made more accountable to achieving epidemiologically and historically meaningful cultural change.

\* \* \*

### ***Act, Learn and Teach: Theatre, HIV and AIDS - Toolkit for Youth in Africa***

UNESCO and the Coordinating Committee for International Voluntary Service (CCIVS)



Adobe PDF file (71 pp. 5.6 MB!):

[http://www.cantieregiovani.org/ActLearn&Teach\\_web.pdf](http://www.cantieregiovani.org/ActLearn&Teach_web.pdf)

This toolkit was designed for youth groups and is largely based on a workshop held in Uganda and organized by the Eastern African Work Camps Association (EWACA) that brought together youth volunteers from several African countries, Canada and India to learn about the use of interactive theatre in response to HIV and AIDS in English-speaking African countries. The toolkit includes a manual, CD-ROM and posters and is available for download at the above URL.

\* \* \*

### **The INFO Project's Best Practices Signpost**



<http://www.infoforhealth.org/practices/signpost.shtml>

The INFO Project's Best Practices Signpost is a public health resource directing users to the latest information on proven practices in family planning and reproductive health. This site provides annotated links to websites and online publications produced by more than 65 leading international organizations working across the health sector. The information is provided in an easy to use format including best or promising practices, lessons learned, and standards and guidelines on a variety of topics.

\* \* \*

### **Adolescent sexual and reproductive health in Uganda: Results from the 2004 National Survey of Adolescents**

by Stella Neema, Fatima H. Ahmed, Richard Kibombo and Akinrinola Bankole  
Guttmacher Institute Occasional Report No. 25, August 2006

Adobe PDF file (150 pp. 863 kB):

<http://www.guttmacher.org/pubs/2006/08/14/or25.pdf>

This report provides an overview of the sexual and reproductive health of adolescents in Uganda. Specifically, it assesses the current knowledge, attitudes, and behaviours among adolescents and factors that put them at risk for HIV transmission and unwanted pregnancy. It examines why some adolescents are at higher risk of HIV transmission and unwanted pregnancy than others. It documents barriers that prevent adolescents from seeking sexual and reproductive health services, and provides new information about what very young adolescents know and do with respect to sexual and reproductive health.

\* \* \*

### **Unintended Pregnancy and Induced Abortion in Uganda: Causes and Consequences**



by Susheela Singh, Ann M. Moore, Akinrinola Bankole, Florence Mirembe, Deirdre Wulf and Elena Prada  
Guttmacher Institute, 2006; ISBN: 0-939253-89-5

Adobe PDF file (38 pp. 957 kB):

<http://www.guttmacher.org/pubs/2006/11/27/UgandaUPIA.pdf>

Because abortion is banned in Uganda (except to save a woman's life) and because strong social stigma surrounds the issue, many women try to conceal their unplanned pregnancies and abortions. The clandestine nature of abortion makes it difficult to measure its incidence in Uganda and allows policymakers to avoid dealing with the problem. Yet the study found that 40% of births in Uganda are unintended and serious health consequences of abortions carried out in unsafe conditions by untrained or poorly trained practitioners impose a heavy burden on women, families and Uganda's already overburdened health care system.

\* \* \*

## ***Sexuality Education in Europe - A Reference Guide to Policies and Practices***

by Kay Wellings and Rachel Parker

International Planned Parenthood Federation, European Network, 2006

Adobe PDF file (98 pp. 1.3 MB):

[http://www.euro.who.int/Document/RHP/SexEd\\_in\\_Europe.pdf](http://www.euro.who.int/Document/RHP/SexEd_in_Europe.pdf)

This guide provides information about sexuality education in 26 European countries, and reflects the reality that policies and practices related to young people's sexual and reproductive health vary from country to country. There are, however, similarities in the way many governments approach sexuality education, and in the challenges they face in implementing policies related to this topic.

### Maternal & Child Health

#### ***Prophylactic antibiotics to prevent pneumonia and other complications after measles: community based randomised double blind placebo controlled trial in Guinea-Bissau***

by May-Lill Garly, Carlitos Balé, Cesário Lourenco Martins, Hilton C Whittle, Jens Nielsen, Ida M Lisse, and Peter Aaby  
BMJ 2006;333:1245 (16 December)

Adobe PDF file (6 pp. kB): <http://www.bmj.com/cgi/reprint/333/7581/1245>

The objective of this study was to investigate whether prophylactic antibiotics can prevent complications of measles. The authors conclude that the group that received prophylactic antibiotics had less pneumonia and conjunctivitis and had significantly higher weight gains in the month after inclusion. The results indicate that prophylactic antibiotics may have an important role in the management of measles infection in low income countries.

### Malaria

#### ***Reducing the burden of childhood malaria in Africa: the role of improved diagnostics***

by Maria E. Rafael, Terrie Taylor, Alan Magill, Yee-Wei Lim et al.  
Nature, S1, 39-48 (23 November 2006)

Adobe PDF file (10 pp. 603 kB):

<http://www.nature.com/nature/journal/v444/n1s/pdf/nature05445.pdf>

Malaria kills more than 1 million children aged below 5 years in sub-Saharan Africa annually. Current control efforts are hampered by increasing drug resistance, unreliable diagnostics, widespread over-treatment and rising drug costs. In this environment, new and widely available malaria diagnostics have the potential to save lives and drastically reduce over-treatment.

\* \* \*

## ***Re-emerging Vivax Malaria: Changing Patterns of Annual Incidence and Control Programs in the Republic of Korea***

Eun Taek Han, Duk Hyoung Lee, Ki Dong Park, Won Seok Seok et al.  
Korean J Parasitol. 2006 Dec;44(4):285-294

Adobe PDF file (10 pp. 253 kB): [http://parasitol.or.kr/kjp/full-text/2006\\_285.pdf](http://parasitol.or.kr/kjp/full-text/2006_285.pdf)

Changing patterns of the re-emerging Plasmodium vivax malaria in the Republic of Korea (South Korea) during the period 1993 to 2005 are briefly analyzed with emphasis on the control measures used and the effects of meteorological and entomological factors. The situation of the re-emerging vivax malaria in the Republic of Korea is remarkably improving during the recent years, at least in part, due to the control activities undertaken in South and North Korea.

\* \* \*

## ***Rifampicin/Cotrimoxazole/Isoniazid Versus Mefloquine or Quinine + Sulfadoxine- Pyrimethamine for Malaria: A Randomized Trial***

Blaise Genton, Ivo Mueller, Inoni Betuela, Gerard Casey et al.  
PLoS Clin Trials 1(8): e38 (December 22, 2006)

Adobe PDF file (11 pp. 163 kB):  
[http://clinicaltrials.plosjournals.org/perlserv/?request=get-pdf&file=10.1371\\_journal.pctr.0010038-S.pdf](http://clinicaltrials.plosjournals.org/perlserv/?request=get-pdf&file=10.1371_journal.pctr.0010038-S.pdf)

The objective of this trial was to compare, in patients with chloroquine- or amodiaquine-resistant malaria, the efficacy and safety of Cotrifazid to that of mefloquine or quinine + SP. The MRAC (Medical Research Advisory Committee) of Papua New Guinea asked that the mefloquine arm be included, to obtain in Papua New Guinean patients reliable safety and efficacy data on alternative drugs that had shown good potential elsewhere.

\* \* \*

## ***Some considerations in the design and interpretation of antimalarial drug trials in uncomplicated falciparum malaria***

by Kasia Stepniewska and Nicholas J White  
Malaria Journal 2006, 5:127 (22 December 2006)

Adobe PDF file (39 pp. 452 kB):  
<http://www.malariajournal.com/content/pdf/1475-2875-5-127.pdf>

Treatments for uncomplicated falciparum malaria should have high cure rates. The World Health Organization has recently set a target cure rate of 95% assessed at 28 days. The use of more effective drugs, with longer periods of patient follow-up, and parasite genotyping to distinguish recrudescence from reinfection raise issues related to the design and interpretation of antimalarial treatment trials in uncomplicated falciparum malaria which are discussed here.

\* \* \*

### ***Tuberculosis Infection Control in the Era of Expanding HIV Care and Treatment***

Centers for Disease Control and Prevention (CDC), World Health Organization (WHO), International Union Against Tuberculosis and Lung Disease (The Union), 2006

Adobe PDF file (43 pp. 368 kB):

[http://www.cdc.gov/nchstp/od/gap/docs/program\\_areas/TB%20Infection%20Control%20Document%20Final%2010%2025%2006.pdf](http://www.cdc.gov/nchstp/od/gap/docs/program_areas/TB%20Infection%20Control%20Document%20Final%2010%2025%2006.pdf)

In this era of increasing access to HIV counselling and testing, care, and treatment for people living with HIV, more people living with HIV-associated immuno-suppression are attending health care and community facilities than ever. This new publication includes recommendations to help minimize the risk of TB trans-mission to staff and patients at facilities in resource-limited settings in which HIV care is provided.

This document is an addendum to the 1999 WHO Guidelines for the Prevention of Tuberculosis in Health Care Facilities in Resource-limited Settings.

\* \* \*

### ***The Directly Observed Therapy Short-Course (DOTS) strategy in Samara Oblast, Russian Federation***

by Y Balabanova, F Drobniowski, I Fedorin, S Zakharova, V Nikolayevskyy et al.  
Respiratory Research 2006, 7:44 (23 March 2006)

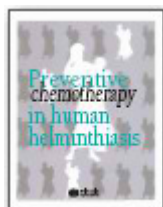
Adobe PDF file (10 pp. 431 kB):

<http://respiratory-research.com/content/pdf/1465-9921-7-44.pdf>

The purpose of this study was to implement a DOTS programme in the civilian and prison sectors of Samara Region of Russia, describe the clinical features and outcomes of recruited patients, determine the proportion of individuals in the cohorts who were infected with drug resistant TB, the degree to which resistance was attributed to the Beijing TB strain family and establish risk factors for drug resistance.

## Other Infectious Diseases

### ***Preventive Chemotherapy in Human Helminthiasis***



Coordinated Use of Anthelmintic Drugs in Control Interventions - A Manual for Health Professionals and Programme Managers

D. W. T. Crompton

World Health Organization, 2006 - Price CHF 20.00 / US\$ 18.00

Developing countries: CHF 14.00, ISBN-10 9241547103

Adobe PDF file (71 pp. 1.6 MB):

[http://whqlibdoc.who.int/publications/2006/9241547103\\_eng.pdf](http://whqlibdoc.who.int/publications/2006/9241547103_eng.pdf)

This manual is intended to guide the coordinated implementation of regular, systematic, large-scale interventions that provide anthelmintic drug treatment as a core component of the joint and synergic control of helminthic diseases such as lymphatic filariasis, on-

chocerciasis, schistosomiasis and soil-transmitted helminthiasis. The manual focuses mainly on antihelminthic treatment, but other drugs used to eliminate other agents can be potentially associated to those mentioned in the manual.

## Essential Medicines

### ***Counterfeit Medicines: an update on estimates***

International Medical Products Anti-Counterfeiting Taskforce (IMPACT), 15 November 2006

Adobe PDF file (3 pp. 73 kB):

<http://www.who.int/medicines/services/counterfeit/impact/TheNewEstimatesCounterfeit.pdf>

For the past few years the public opinion and expert circles have passively accepted the argument that 10% of medicines around the world could be counterfeit. This number however, is not supportable, because this figure fails to reflect the wide range in the proportion of counterfeits across countries and because of the difficulties in measurement that allow only inferences to be made about the potential range of proportion in different regions. The estimated range does not aim at providing an exact figure but rather an indication of the different possible levels of prevalence around the world.

\* \* \*

### ***Measuring Transparency in Medicines Registration, Selection and Procurement***

Four Country Assessment Studies



World Health Organization, 2006

Adobe PDF file (43 pp. 2.3 MB):

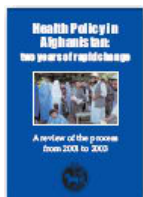
[http://www.who.int/medicines/areas/policy/goodgovernance/WHO\\_PSM\\_PAR\\_2006.7.pdf](http://www.who.int/medicines/areas/policy/goodgovernance/WHO_PSM_PAR_2006.7.pdf)

This report summarizes the findings of the transparency assessments carried out in four countries (Lao People's Democratic Republic, Malaysia, the Philippines and Thailand). It provides a comprehensive picture of the level of transparency and potential vulnerability to corruption in three essential functions of the public pharmaceutical sector - registration, selection and procurement of medicines.

## Health Systems & Research

### ***Health Policy in Afghanistan: two years of rapid change***

A review of the process from 2001 to 2003



by Lesley Strong, Abdul Wali and Egbert Sondorp  
London School of Hygiene and Tropical Medicine (LSHTM), 2005

Adobe PDF file (58 pp. 668 kB):

[http://www.lshtm.ac.uk/hpu/conflict/files/publications/file\\_33.pdf](http://www.lshtm.ac.uk/hpu/conflict/files/publications/file_33.pdf)

The paper describes health policy developments in a fast moving, post-conflict environment, characterised by a large number of international stakeholders, all of which have

different agendas, mandates and ideas of the best way to reconstruct a health system. Despite this multitude of actors and views, the process of developing health policy and implementation strategies has been quick and by mid 2004, only a year and a half after the articulation of the BPHS, the MOH together with its partners have expanded coverage of BPHS proposals to reach approximately 59% of the population.

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### ***Priority setting in developing countries health care institutions: the case of a Ugandan hospital***

by Lydia Kapiriri and Douglas K Martin  
BMC Health Services Research 2006, 6:127 (6 October 2006)

Adobe PDF file (9 pp. 279 kB):  
<http://www.biomedcentral.com/content/pdf/1472-6963-6-127.pdf>

The article describes how priorities are set in a teaching hospital in Uganda and uses an ethical framework to evaluate whether this process is a fair one. In particular, it asks whether the process is accountable and reasonable. It concludes that priority setting decisions at this hospital do not satisfy the conditions of fairness.

## Social Security

### ***Kalomo Social Cash Transfer Scheme***

Evaluation Report



Ministry of Community Development and Social Services (MCDSS), Zambia and German Technical Cooperation (GTZ) - Social Safety Net Project, October 2006

Adobe PDF file (80 pp. 1.3 MB):  
[http://www.socialcashtransfers-zambia.org/mediapool/28/282961/data/SCTS\\_final\\_evaluation\\_report\\_II.pdf](http://www.socialcashtransfers-zambia.org/mediapool/28/282961/data/SCTS_final_evaluation_report_II.pdf)

While conditional and unconditional cash transfer schemes have long been established and tested in middle income settings, they are rather recently implemented and remain contested in low income countries. The Kalomo social cash transfer scheme, which has been set up as a social protection mechanism in reaction to the HIV/AIDS pandemic in Zambia, is the first of its kind to verify whether cash transfer schemes are feasible and can have an impact in a low income country with weak administrative structures and constrained financial resources.

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### ***Lessons from a direct welfare transfer intervention: a pilot project by Concern Universal in Malawi***



Concern Universal International, Malawi, 2006

Adobe PDF file (8 pp. 259 kB):  
[http://www.eldis.org/fulltext/Concern%20Universal\\_Direct%20Welfare%20Transfers.pdf](http://www.eldis.org/fulltext/Concern%20Universal_Direct%20Welfare%20Transfers.pdf)

This briefing paper documents the lessons learnt from the Dedza Safety Nets Pilot Pro-

ject (DSNPP) in Malawi. The DSNPP compared the impact of all three Direct Welfare Transfer (DWT) systems, i.e. cash, voucher and in-kind transfers on chronic poverty and vulnerability within a non-emergency context. A major conclusion was that, that in the context of the food security crisis, the DSNPP intervention was not enough to lift the households out of extreme poverty. However, the intervention did succeed in protecting DSNPP beneficiaries from the worst of the food crisis and it reduced the extent to which households were impoverished during this period.

## Human Resources

### ***Human Resources for Health Research: An African Perspective***



Conference Report

African Health Research Forum; Global Forum for Health Research; IDRC; COHRED; EQUINET; AMREF; ACOSHED, July 2006

Adobe PDF file (76 pp. 684 kB):

<http://www.equinet africa.org/bibl/docs/REP062006hres.pdf>

A conference on Human Resources for Health Research (HR-HR) was held on July 2-5, 2006 on the shortfalls specifically in the personnel for health research and the skills and human resources needed by developing countries to improve health research. The conference opened discussion on the health research environment; the role of research networks and of communities in health research and skills to improve health research communication. This is the final report and record of the HR-HR expert meeting in Nairobi.

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### ***An economic perspective on Malawi's medical brain drain***

by Richard Record and Abdu Mohiddin

Globalization and Health 2006, 2:12 (18 December 2006)

Adobe PDF file (24 pp. 215 kB):

<http://www.globalizationandhealth.com/content/pdf/1744-8603-2-12.pdf>

The medical brain drain has been described as rich countries looting doctors and nurses from developing countries undermining their health systems and public health. However this brain-drain might also be seen as a success in the training and export of health professionals and the benefits this provides. This paper illustrates the arguments and possible policy options by focusing on the situation in one of the poorest countries in the world, Malawi.

## Education

### ***Regulating the quality of cross-border education***

UNESCO - Asia-Pacific Quality Network (APQN) Toolkit



by Tony Davies and Wong Wai Sum

UNESCO Bangkok, Asia and Pacific Regional Bureau for Education, 2006

Adobe PDF file (75 pp. 855 kB):

<http://unesdoc.unesco.org/images/0014/001464/146428e.pdf>

This toolkit is intended to act as an aid in regulating quality assurance for countries that are involved in providing and receiving cross-border education. The toolkit examines cross-border education generally, highlights regulatory frameworks for receiver and provider countries and gives examples of various country regulatory frameworks.

\* \* \*

### ***Girls' education: towards a better future for all***

DFID's girls' education strategy - First progress report  
December 2006

Adobe PDF file (42 pp. 255 kB):

<http://www.dfid.gov.uk/pubs/files/education/girls-education-progress-report.pdf>

In 2005, DFID published its strategy for girls' education, "Girls' Education: towards a better future for all". Across the world, it has been estimated that 94 countries have failed to meet the first Millennium Development Target of having equal numbers of girls and boys in primary and secondary education by 2005. DFID's strategy aimed to help do something about this. This first annual report charts the progress DFID has made on their pledges in the first year since publishing them and sets out recommendations for further action.

\* \* \*

### ***Teaching and Learning for a Sustainable Future***

<http://www.unesco.org/education/tlsf/index.htm>

Teaching and Learning for a Sustainable Future is a free multimedia teacher education programme published by UNESCO. It contains 100 hours (divided into 25 modules) of professional development for use in pre-service teacher courses as well as the in-service education of teachers, curriculum developers, education policy makers, and authors of educational materials.

## Others

### ***Annual Review of Development Effectiveness 2006 - Getting Results***



The International Bank for Reconstruction and Development / The World Bank, 2006; ISBN-13: 978-0-8213-6906-7

Adobe PDF file (120 pp. 1.2 MB):

[http://siteresources.worldbank.org/EXT2006ANNREVDEVEFF/Resource/s/arde\\_full.pdf](http://siteresources.worldbank.org/EXT2006ANNREVDEVEFF/Resource/s/arde_full.pdf)

The majority of World Bank supported projects achieve their objectives, but satisfactory project outcomes alone are not enough to deliver high impact development results. The impact of Bank assistance could be further strengthened by putting additional emphasis on the pattern of growth, by ensuring that assistance programs and individual projects set realistic objectives and exploit synergies across sectors, and by building on a pragmatic assessment of the political economy of governance reforms.

## ***Chronic disease: an economic perspective***

by Marc Suhrcke, Rachel A. Nugent, David Stuckler and Lorenzo Rocco  
The Oxford Health Alliance (OxHA), 2006; ISBN 0-9554018-1-X

Adobe PDF file (60 pp. 2.0 MB):

<http://www.oxha.org/initiatives/economics/knowledge/publications/oxha-chronic-disease-an-economic-perspective.pdf>

The publication demonstrates that chronic diseases - heart and lung disease, cancer and diabetes - are having a negative economic impact on both the developed and developing world and should thus be adequately addressed by domestic and international policy makers.

## **ELECTRONIC RESOURCES**

### ***Public Library of Science (PLoS) ONE***

<http://www.plosone.org/home.action>



PLoS ONE is a new way of communicating peer-reviewed science and medicine. Believing that scientific debate is as important as the investigation itself PLoS ONE is a forum where research can be both shared and commented upon. The first beta release of PLoS ONE features tools that allow users to annotate articles and participate in discussion threads. The goal is to spark lively discussion online and you are invited to participate.

\* \* \*

### ***New Monitoring & Evaluation tool for HIV/AIDS workplace programmes***

At the occasion of the World AIDS Day, GTZ-ACCA (AIDS Control in Companies in Africa) in cooperation with GBC (Global Business Coalition on HIV/AIDS, TB and Malaria) launched the first interactive Monitoring and Evaluation CD-ROM specifically designed to assess the efficacy of corporate HIV/AIDS programmes.

This interactive course provides companies with a comprehensive set of standards and indicators that have been designed and tested by GTZ in partnership with national business coalitions in Kenya, Mozambique, Namibia, Nigeria, Tanzania and Zambia.

The tool is available both in English and French. For further information please contact Elisabeth Girrback or Gesa Kupfer: Tel: +49-6196-79-1918 or <mailto:acca@gtz.de>

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### ***The Intrauterine Device (IUD) Toolkit***

<http://www.iudtoolkit.org>



The IUD Toolkit is a tailored resource composed of documents, presentations, case studies, and tools compiled and reviewed by reproductive health and family planning experts from 13 leading international reproductive health organizations. It provides comprehensive, standardized, scientifically accurate, and evidence-based information on the IUD, and it provides guidance on best practices as well as tools to help improve access to and quality of services.

## ***Exchange on HIV/AIDS, Sexuality and Gender - Autumn 2006***

Published quarterly by the Royal Tropical Institute (KIT) in collaboration with Oxfam Novib (the Netherlands) and SAfAIDS, Zimbabwe

Adobe PDF file (20 pp. 501 kB):

[http://www.kit.nl/exchange/assets/images/Exchange\\_2006\\_3\\_en.pdf](http://www.kit.nl/exchange/assets/images/Exchange_2006_3_en.pdf)

In this issue particular attention has been paid to women living with HIV. It was compiled together with the International Community of Women living with HIV/AIDS. Other articles are on sexual and reproductive health and rights; lack of access to land and property for women in India; Memory Work done in Uganda and in several other African countries.

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## ***MIMCom Malaria News Update Weekly***

The Multilateral Initiative on Malaria Communications Network (MIMCom) provides a weekly update per e-mail. This update contains announcements, references to the latest journal articles (from more than 100 journals), an overview of free access publications, events, grant & research opportunities, job opportunities and news.

To get a free subscription, just send an e-mail to: [inga@aon.at](mailto:inga@aon.at) with the text in the body: SUBSCRIBE

\* \* \*

## ***Free trial access - Pediatric Dermatology***

Today's dermatologists and pediatricians need new ideas and strategies to care for children and their skin conditions. Each issue will keep readers up-to-date by providing the latest on topics such as, hemangiomas, atopic dermatitis, rare and unusual presentations of childhood diseases, neonatal medicine, and therapeutic advances.

Use this web address to activate your complimentary access before January 15, 2007:

<http://www.blackwell-synergy.com/token/pedtrial07/default>

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## ***Public Finance Reform - Öffentliche Finanzen und Verwaltungsreform***

Deutsche Gesellschaft für Technische Zusammenarbeit (GTZ) - Nr. 6, Dezember 2006

Adobe PDF file (12 pp. 257 kB):

<http://dneuvians.googlepages.com/de-newsletter-public-finance-reform-.pdf>

Dies ist die 6. Ausgabe des Newsletters "Public Finance Reform" Im Mittelpunkt dieser Ausgabe steht das Thema: Good Financial Governance - transparente und nachvollziehbare Staatsfinanzen.

Falls Sie diesen Newsletter regelmäßig beziehen möchten, schicken Sie bitte eine kurze Nachricht an [public-finance@gtz.de](mailto:public-finance@gtz.de)

## **INTERESTING WEB PAGES**

### ***Healthy Tomorrow (Stop Excision.net)***

<http://www.stopexcision.net/>

Healthy Tomorrow is a humanitarian organization dedicated to the eradication of all forms of female genital cutting or FGC (aka excision and female genital mutilation or FGM).

\* \* \*

### ***UNESCO Bangkok: ICT Portal for Teachers***

<http://www.unescobkk.org/index.php?id=787>

This Web section published by UNESCO Bangkok provides a wide and comprehensive range of useful ICT in Education information for teachers and educators, particularly those in the Asia-Pacific region, including: teaching guidelines, lesson plans, and links to online ICT teacher training courses. Some resources are out of date but this directory might still be quite useful.

\* \* \*

### ***UNESCO Bangkok: ICT in Education***

<http://www.unescobkk.org/education/ict>

This website provides helpful material about the use of information and communication technologies (ICT) in Asia-Pacific education. Browse the site by five ICT in Education themes: policy, training of teachers, teaching and learning, non-formal education, and measuring and monitoring change. Find regional and country information, and details about UNESCO ICT in Education projects.

\* \* \*

### ***CrossRef***

<http://www.crossref.org/>



CrossRef is the citation-linking backbone for online publications. Established in 2000 it enables researchers to navigate electronic journals, across publishers, based on open-standards technology (the Digital Object Identifier, or DOI, system - see also below under "[Tips & Tricks](#)").

Citations represent the evolution of ideas, as one author builds on or challenges the research of another. CrossRef allows the user to move from one article to another at the citation level, regardless of journal or publisher. Without full-text citation linking, the user who discovers a desired resource while reading usually has to switch to a different search interface to locate and ultimately access that resource. With CrossRef, it only takes a click or two to get to the full text, either as an authenticated user or through pay-per-view services.

## **TRAINING OPPORTUNITIES**

### ***Rational Medicine Management- A Focus on HIV/AIDS, Tb and Malaria***

5 - 16 November, 2007  
Ifakara, Tanzania

Objectives:

To enable health professionals to understand and apply the concepts and principles of essential medicines and rational medicine management with a focus on the diseases of poverty HIV/Aids, malaria and tuberculosis; to recognise the need for a national and international medicine policy environment; to improve knowledge and skills and to gain practical field experience for rational medicine management within different health system contexts.

Course fee:

The total course fee is CHF 2300.- (Swiss Francs) including tuition, accommodation/full board. Cost for international flights must be added.

For more information see:

<http://www.sti.ch/en/tut/advanced-studies-in-internathealth/rational-medicine-management.html>

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### ***ARV Drug Supply Management Training***

11 March - 24 March 2007

3 June - 16 June 2007

2 Sept - 15 Sept 2007

18 Nov - 1 Dec 2007

Pretoria, South Africa

Course Objectives: To provide training in the areas of; planning, implementing, monitoring and evaluating the procurement and supply management of ARV delivery projects.

There is a visit to a major Distribution Centre that concentrates on Sub Sahara Africa for Pharmaceutical deliveries as a practical example on procurement, distribution and supply management. The course is aimed at ARV program managers, physicians, pharmacists, health systems managers, procurement and distribution managers.

The course fee will be Euro 3,200 (three thousand two hundred euros).

For additional information, please see:

<http://www.aa4a.co.za>

or contact:

ARV Access for Africa (Pty) Ltd

Tel.: +27-12-460-0914

<mailto:melinda@aa4a.co.za> or <mailto:beckmannm@aa4a.co.za>

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### ***Epidemiology and Field Research Methods***

4-16 June, 2007

Umea, Sweden

The overall aims of this course are to discuss epidemiological design, analysis and interpretation, as well as the roles of quantitative and qualitative approaches in public health research. The course is designed to follow the research process from problem identification, planning and data collection through analysis, interpretation and documentation. A number of places in the course are reserved for participants from developing countries involved in public health research.

Application deadline: February 19, 2007

For more information see:

<http://www.umu.se/phmed/epidemi/utbildning/index.html>

or contact:

Lena Mustonen

Epidemiology and Public Health Sciences

Dept. of Public Health and Clinical Medicine, Umea University

SE-901 85 Umea

Tel: +46-90-785-2933

<mailto:Lena.Mustonen@epiph.umu.se>

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### **IDA Solutions Courses - 2007**



#### **English:**

Monitoring and Evaluation of Antiretroviral Procurement and Supply Management Systems  
18 - 24 March, 2007

[http://www.idasolutions.org/index.php?p=training\\_detail&i=1](http://www.idasolutions.org/index.php?p=training_detail&i=1)

Managing Drug Supply in Developing Countries

1 - 13 October, 2007

[http://www.idasolutions.org/index.php?p=training\\_detail&i=5](http://www.idasolutions.org/index.php?p=training_detail&i=5)

#### **French:**

La gestion optimale des médicaments dans les pays en développement

Juin 25 - Juillet 7, 2007

[http://www.idasolutions.org/index.php?p=training\\_detail&i=2](http://www.idasolutions.org/index.php?p=training_detail&i=2)

La gestion optimale de l'approvisionnement des programmes de VIH/SIDA dans les  
pays en développement

Novembre 19 - Decembre 1, 2007

[http://www.idasolutions.org/index.php?p=training\\_detail&i=3](http://www.idasolutions.org/index.php?p=training_detail&i=3)

For more information on the trainings, please check

<http://www.idasolutions.org/index.php?p=training>

or contact Nicole Visser <[nvisser@idasolutions.org](mailto:nvisser@idasolutions.org)>

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### **Studiengänge Master of Public Health und Master of Science in Epidemiology 2007/2008**

Berlin School of Public Health (BSPH) an der Charité

Universitätsmedizin Berlin, Deutschland



Ab Sommersemester 2007 können die Studiengänge Master of Public Health und Master of Science in Epidemiology in Teilzeit absolviert werden. Ab Wintersemester 2007 erfolgt die Immatrikulation für beide Studiengänge in Voll- und Teilzeit.

Bewerbungsschluss für das Sommersemester 2007 ist der 01.02.2007.

Bewerbungsschluss für das Wintersemester 2007/2008 ist der 15.05.2007.

Für weitere Informationen siehe: <http://bsph.charite.de/>

Kontakt:

Nina Adelberger, MPH

Thielallee 47  
14195 Berlin  
Tel.: +49-30-8445-1385  
Fax: +49-30-8445-1382  
<mailto:bsph@charite.de>

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### ***Postgraduate Studies in Epidemiology (Magister in Public Health)***

April 2007 - April 2009  
Ludwig-Maximilians-Universität München (LMU)  
München, Deutschland

**Kursinhalt:**

Methoden der Biometrie und Epidemiologie mit begleitender Einführung in computergestützte Analysetechnik, Gesundheitssystemforschung und Ökonomie, Sozial- und Verhaltenswissenschaften, präventivmedizinische und epidemiologische Anwendungsfelder.

Sprache Deutsch; Gebühren: Auf Anfrage

**Teilnahmebedingungen:**

Abgeschlossenes Studium der Human-, Zahn- oder Tiermedizin, der Pharmazie, der Naturwissenschaften oder vergleichbarer Fächer, gute Englischkenntnisse.

**Für weitere Informationen:**

Simone Fischer  
Tel.: +49-89-7095-44992  
Fax: +49-89-7095-7491  
<mailto:fischer@ibe.med.uni-muenchen.de>  
<http://www.public-health-muenchen.de>

For further information about training opportunities see:

<http://www.going-international.at/index.php?page=E01>

## **CONFERENCES**

### ***5th European Congress on Tropical Medicine and International Health***

24 - 28 May, 2007  
Amsterdam, Netherlands



The congress theme is "Partnership and Innovation in Global Health", expressing the need for collaboration to develop the quality of global health and achieve some of the Millennium Development Goals. Global collaboration means collaboration between North and South, South and South, North and North, and East and West. Furthermore, innovation is important to be able to attempt to control the major problems of international health.

For more information see: <http://www.trop-amsterdam2007.com/>

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## ***International Conference: Towards Sustainable Global Health***

9 - 11 May 2007  
Bonn, Germany

Sustainable Global Health, as an integral part of the UN Millennium Development Goals (MDGs), plays a key role for global stability as well as for worldwide economics and politics. The conference organized by the partner organizations UNESCO/UNEVOC, UNU, ILO, IHDP and the University of Bonn, Institute for Hygiene and Public Health (WHO CC), addresses key politicians, institutions for development and international corporations for participating in this exchange of knowledge and best practices.

For more information see: <http://www.gemini.de/global-health/>

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## ***8th International AIDS Impact Conference***

1 - 4 July, 2007  
Marseille, France



The AIDS Impact conference is specifically devoted to Human and Social Sciences in the field of the HIV/AIDS epidemic. The goal of the conference is to give more space to social sciences research in the field of HIV in developing countries.

Abstract Deadline: 22 January 2007 (abstracts should be submitted in English only and must not have been previously published or presented. They should be no longer than 300 words.)

For more information, go to: <http://www.aidsimpact.com/2007/>

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## ***Global Forum for Health Research - Forum 11***

"Equitable access: research challenges for health in developing countries"

29 October - 2 November, 2007  
Beijing, China

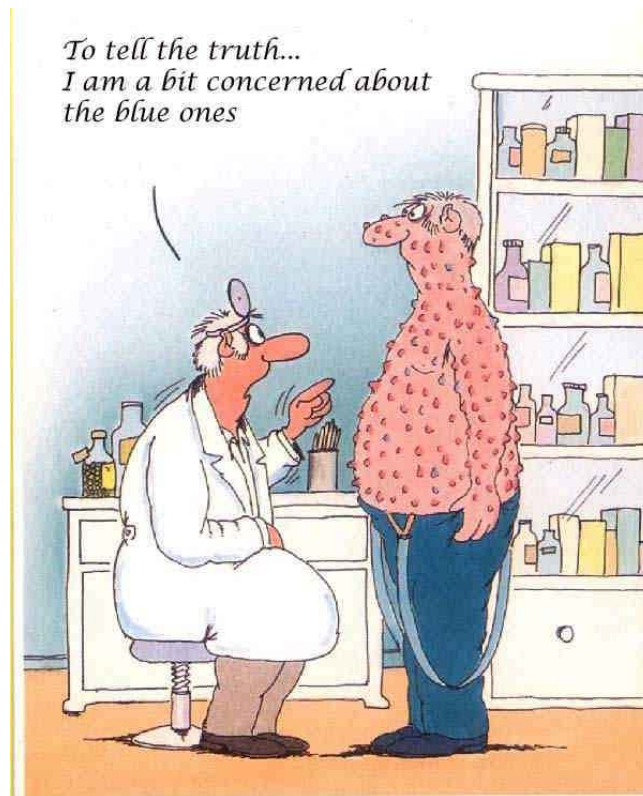


The annual Forum brings together decision-makers, funders and leaders in research and development to focus on reducing the massive underinvestment in health research for the needs of developing countries. Equitable access, the overarching theme of Forum 11, will examine several questions in health research. How can research improve understanding of and equitable access to basic preconditions for health? What innovations in products, policies and processes can improve equity of access? What are the needs for research resources (human, institutional, financial, informational)? How can research facilitate good governance? What role does communications play?

Abstracts are now being accepted until 31 January. For more information and online submission, see the website: <http://www.globalforumhealth.org/>

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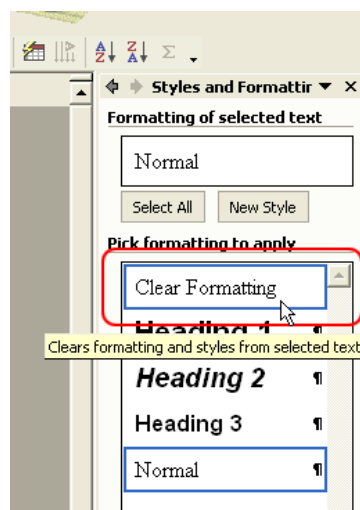
## CARTOON



## TIPS & TRICKS

### *Clean text formatting up at once*

Did you ever feel overwhelmed by all the formatting you have applied to your MS WORD document? So much that you want to strip the text of all the special formatting and start completely over? If you are using a newer version of MS WORD (one with a Task Pane), give this a try:



First, open the Task Pane to Styles and Formatting if it is not already displayed. (Format menu, Styles and Formatting choice).

Now, select the entire document (Ctrl + A).

With the text selected, choose 'Clear Formatting' from the Task Pane.

Voila! The text is cleaned of all formatting with one quick move!

\* \* \*

## SearchMash

<http://www.searchmash.com/>



Google search is passé. Yes, you heard right. The day of the Google search engine is nearly over. Says who, you may ask? Well, it was actually Google themselves. Unknown to most of us, Google for some time now has been trying out a new format for their next generation search engine. For whatever reasons, they have named it SearchMash. The basic idea is the same. There is a text box in which you type in your query and press Enter. Once the results come up, to start with, you won't see all those advertisements that cram up toward the right when you search for something on Google. This page is totally ad free. Secondly, this is quite an improvement over the Google search engine. A search in SearchMash won't bring up tons of irrelevant results like it happens in Google, especially for searches with longer queries. The good thing for tenured Google users is that the syntax and the way of Googling works the same on SearchMash. You can use wildcards, quotes plus signs and the other operators that you presently use to customize your Google searches.

As you can see, along with the regular search results that were pulled up, there is also a small panel where you can see other related material. For instance, if you click on the plus sign next to the images, another small panel will drop down with pictures related to your search query. Similarly, if you click on the plus sign next to the blogs, you will be presented with links to some blogs whose primary content is about the searched item. To see video results about the search query you put in, you can click on the "See Video Results" link. Another good thing about this panel is the Wikipedia link. It shows you all of the Wikipedia pages related to your search query. You don't need to click on another tab or wait for a new page to load. Simply click on the plus sign and you will see instant results.

\* \* \*

## *The Digital Object Identifier (DOI) System*

The DOI System is for identifying content objects in the digital environment. DOI names are assigned to any entity for use on digital networks. They are used to provide current information, including where they (or information about them) can be found on the Internet. Information about a digital object may change over time, including where to find it, but its DOI name will not change.

You might have seen a citation link like the following:

BMC International Health and Human Rights 2006, 6:11 [doi:10.1186/1472-698X-6-11](https://doi.org/10.1186/1472-698X-6-11)

To retrieve the document from the internet you can turn the DOI string into a URL by appending the DOI string to <http://dx.doi.org/> - in this case:

<http://dx.doi.org/10.1186/1472-698X-6-11>

Best regards,

Dieter Neuvians  
[dneuvians@gmx.de](mailto:dneuvians@gmx.de)