

***The Sentinel***  
***Human Rights Action :: Humanitarian Response :: Health ::***  
***Holistic Development :: Sustainable Resilience***

***Week ending 15 November 2014***

*This weekly digest is intended to aggregate and distill key content from a broad spectrum of practice domains and organization types including key agencies/IGOs, NGOs, governments, academic and research institutions, consortiums and collaborations, foundations, and commercial organizations. We also monitor a spectrum of peer-reviewed journals and general media channels. The Sentinel's geographic scope is global/regional but selected country-level content is included. We recognize that this spectrum/scope yields an indicative and not an exhaustive product.*

*The Sentinel is a service of the Center for Governance, Evidence, Ethics, Policy & Practice (GE2P2), which is solely responsible for its content. Comments and suggestions should be directed to:*

*David R. Curry  
Editor &  
Founding Director  
GE2P2 – Center for Governance, Evidence, Ethics, Policy, Practice*

*The Sentinel is also available as a pdf document linked from this page:  
<http://ge2p2-center.net/>*

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***:: Week in Review***

*A highly selective capture of strategic developments, research, commentary, analysis and announcements spanning Human Rights Action, Humanitarian Response, Health, Education, Holistic Development, Sustainable Resilience. Achieving a balance across these broad themes is a challenge and we appreciate your observations and ideas in this regard. This is not intended to be a "news and events" digest.*

**G20 Leaders' Brisbane Statement on Ebola**

15/11/14  
G20 Meeting, Brisbane, Australia <https://www.g20.org/>  
[Full text]

We are deeply concerned about the Ebola outbreak in Guinea, Liberia and Sierra Leone and saddened by the suffering and loss of life it is inflicting. We are mindful of the serious humanitarian, social and economic impacts on those countries, and of the potential for these impacts to spread.

The governments and people of Guinea, Liberia and Sierra Leone are making tremendous efforts to fight the outbreak, with the support of the African Union and other African countries. We commend the brave service of health care and relief workers. We also applaud the contributions of countries worldwide, the United Nations (UN) and its bodies such as the World Health Organization (WHO), international and regional organisations and financial institutions, non-governmental and religious organisations, and the private sector. We fully support the UN Mission for Ebola Emergency Response's ongoing work to harness capacity to stop the outbreak, treat the infected, ensure essential services, preserve stability and prevent further outbreaks and urge that it act swiftly to achieve these objectives.

G20 members are committed to do what is necessary to ensure the international effort can extinguish the outbreak and address its medium-term economic and humanitarian costs. We will work through bilateral, regional and multilateral channels, and in partnership with non-governmental stakeholders. We will share our experiences of successfully fighting Ebola with our partners, including to promote safe conditions and training for health care and relief workers. We will work to expedite the effective and targeted disbursement of funds and other assistance, balancing between emergency and longer-term needs.

We invite those governments that have yet to do so to join in providing financial contributions, appropriately qualified and trained medical teams and personnel, medical and protective equipment, and medicines and treatments. While commending ongoing work, we urge greater efforts by researchers, regulators and pharmaceutical companies to develop safe, effective and affordable diagnostic tools, vaccines and treatments. We call upon international and regional institutions, civil society and the private sector to work with governments to mitigate the impacts of the crisis and ensure the longer-term economic recovery.

In this regard, we urge the World Bank Group (WBG) and International Monetary Fund (IMF) to continue their strong support for the affected countries and welcome the IMF's initiative to make available a further \$300 million to stem the Ebola outbreak and ease pressures on Guinea, Liberia and Sierra Leone, through a combination of concessional loans, debt relief, and grants. We ask the IMF and WBG to explore new, flexible mechanisms to address the economic effects of future comparable crises.

This outbreak illustrates the urgency of addressing longer-term systemic issues and gaps in capability, preparedness and response capacity that expose the global economy to the impacts of infectious disease. G20 members recommit to full implementation of the WHO's International Health Regulations (IHR). To this end, and in the context of our broader efforts to strengthen health systems globally, we commit to support others to implement the IHR and to build capacity to prevent, detect, report early and rapidly respond to infectious diseases like Ebola.

We also commit to fight anti-microbial resistance. Interested G20 members are supporting this goal through initiatives to accelerate action across the Economic Community of West African States and other vulnerable regions and will report progress and announce a time frame by May 2015 at the World Health Assembly.

We invite all countries to join us in mobilising resources to strengthen national, regional and global preparedness against the threat posed by infectious diseases to global health and strong, sustainable and balanced growth for all. We will remain vigilant and responsive.

#### **MSF: Ebola Treatment Trials to Start at MSF Sites in December**

November 13, 2014

GENEVA/NEW YORK—In the absence of specific treatments for [Ebola](#), the international medical humanitarian organization Doctors Without Borders/Médecins Sans Frontières(MSF)

announced today that it will host clinical trials in three Ebola treatment centers in West Africa. The separate trials, which are aimed at quickly finding an effective therapy that can be used against the disease, which has so far taken around 5,000 lives in the current outbreak in the region, will be led by three different research partners.

The French National Institute of Health and Medical Research (INSERM) will lead a trial using antiviral drug favipiravir in Guéckédou, Guinea; the Antwerp Institute of Tropical Medicine (ITM) will lead a trial of convalescent whole blood and plasma therapy at the Donka Ebola center in Conakry, Guinea; and the University of Oxford will lead, on behalf of the International Severe Acute Respiratory and Emerging Infection Consortium (ISARIC), a Wellcome Trust-funded trial of the antiviral drug brincidofovir at a site yet to be determined. The World Health Organization (WHO) and health authorities of the affected countries are also taking part in this collaborative effort.

"This is an unprecedented international partnership that represents hope for patients to finally get a real treatment against a disease that today kills between 50 and 80 percent of those infected," said Dr. Annick Antierens, who coordinates investigational partnerships for MSF. "As one of the principal providers of medical care to Ebola patients in West Africa, MSF is taking part in these accelerated clinical trials to give people affected by the current outbreak a better chance of survival."...

***Please see further Ebola actions and updates across agencies and NGOs below, and in a more extensive summary at the end of this edition.***

#### **ITU: Digital inclusion of persons with disabilities lagging behind**

*Policy and regulatory changes to focus on greater ICT accessibility*

Geneva, 14 November 2014 – The Model ICT Accessibility Policy Report released in São Paulo, Brazil recognizes that despite the unprecedented growth in mobile and Internet use worldwide, very few nations have acted to ensure that persons with disabilities are part of the technology revolution. The Report is jointly published by the International Telecommunication Union (ITU) and the Global Initiative for Inclusive Information and Communication Technologies (G3ict).

The report notes that although many countries have information and communication technology (ICT) laws, policies and regulations that generally support the principles of universal access to ICT, the needs of the disability community are different and require a deliberate additional focus on ICT accessibility by legislators, policy-makers and regulators aimed at removing barriers to ICT use.

The policy framework was launched today at the Accessible Americas meeting organized by ITU, UNESCO, Brazil and the National Secretariat for the Promotion of the Rights of People with Disabilities of the Human Rights Secretariat of the Presidential Cabinet of the Brazilian Republic (SDH) in São Paulo, Brazil.

#### **Digital Inclusion: Model ICT accessibility policy report**

ITU (International Telecommunication Union)

November 2014 :: 134 pages

pdf: <http://www.itu.int/en/ITU-D/Digital-Inclusion/Persons-with-Disabilities/Documents/ICT%20Accessibility%20Policy%20Report.pdf>

*[Excerpt from Foreword]*

ICT accessibility for persons with disabilities is a priority for ITU members. At the last ITU World Telecommunication Development Conference (WTDC) ITU members recognized the need

to ensure that the one billion people living with some form of disability can use information and communication technology (ICT) for their empowerment. How do we make ICT accessibility a reality?

ICT accessibility means removing barriers so that persons with disabilities can use ICTs. The barriers faced depend on a person's disability. Our previous publications, *Making mobile phones and services accessible* and *Making television accessible* have documented the accessibility needs of persons with visual, hearing, mobility, dexterity, and cognitive disabilities.

One of the key steps to make ICT a reality is to establish an enabling environment for ICT accessibility, just as nations have established enabling environments to authorize competition in the provision of ICT services. A little over ten years ago, countries around the world created policy and regulatory frameworks that unleashed unprecedented growth in mobile and Internet use. These frameworks led to universal access and service levels beyond the imagination of policy-makers in earlier years: by the end of 2014, we expect nearly 7 billion mobile phone subscriptions and almost 3 billion Internet users.

Despite these advances, very few nations today have acted to ensure that persons with disabilities are part of this technology revolution. Persons with disabilities continue to face barriers in using ICTs. I believe that creating and implementing national ICT accessibility policy frameworks will lead to unprecedented growth in accessible ICTs and the empowerment of persons with disabilities. The impact of these policies will be enjoyed by many others, including immigrants, aging and illiterate populations, and will open doors to inclusive education, employment and health services.

This Model ICT accessibility policy report is designed as a tool for national policy-makers and regulators to create their own ICT accessibility policy frameworks. It includes six modules focusing on different aspects of ICT accessibility (amendments to the existing ICT legal framework, public ICT access, mobile communications, television/video programming and public procurement of accessible ICTs) so that countries can prioritize implementation. In all modules the approach is to develop national policies in consultation with persons with disabilities...

...I am convinced that we can make ICT accessibility a reality. Let us now move from words to action and begin formulating, implementing, and monitoring ICT accessibility policies in close consultation with persons with disabilities.

*Brahima Sanou, Director, Telecommunication Development Bureau*

## **OPINION: Now Is the Time to Tackle Malnutrition and Its Massive Human Costs**

*In advance of the Second International Conference on Nutrition (ICN2) Rome, Nov. 19 – 21, 2014*

By José Graziano da Silva and Margaret Chan ROME/GENEVA, Nov 13 2014 (IPS)

The scourge of malnutrition affects the most vulnerable in society, and it hurts most in the earliest stages of life. Today, more than 800 million people are chronically hungry, about 11 percent of the global population.

Undernutrition is the underlying cause of almost half of all child deaths, and a quarter of living children are stunted due to inadequate nutrition. Micronutrient deficiencies – due to diets lacking in vitamins and minerals, also known as “hidden hunger” – affects two billion people.

Our food systems are simply not sustainable or healthy today, let alone in 2050, when we will have to feed more than nine billion people. We need to produce more food but also nutritious food and to do so in ways that safeguard the capacity of future generations to feed themselves. Another worrying form of malnutrition – obesity – is on the rise. More than 500 million adults are obese as a result of diets containing excess fat, sugars and salt.

This exposes people to a greater risk of noncommunicable diseases – like heart disease, stroke, diabetes and cancer – now the top causes of death in the world. Poor diet and physical inactivity also account for 10 percent of the global burden of disease.

Many developing countries now face multiple burdens of malnutrition, with people living in the same communities – sometimes even the same households – suffering from undernutrition, hidden hunger and obesity.

These numbers are shocking and must serve as a global call to action.

Besides the terrible human suffering, unhealthy diets also have a detrimental impact on the ability of countries to develop and prosper – the cost of malnutrition, in all its forms, is estimated between four and five percent of global GDP.

Government leaders, scientists, nutritionists, farmers, civil society and private sector representatives from around the world will gather in Rome from Nov. 19 to 21 for the Second International Conference on Nutrition (ICN2). It is an opportunity they cannot afford to miss: making peoples' right to a healthy diet a global reality.

#### *Current food systems are unsustainable and unhealthy*

Creating healthy and sustainable food systems is key to overcoming malnutrition in all its forms – from hunger to obesity.

Food production has tripled since 1945, while average food availability per person has risen by only 40 percent. Our food systems have succeeded in increasing production, however, this has come at a high environmental cost and has not been enough to end hunger.

Meanwhile, food systems have continued to evolve with an even greater proportion of food being processed and traded, leading to greater availability of foods with high energy, fats, sugars and salt.

Our food systems are simply not sustainable or healthy today, let alone in 2050, when we will have to feed more than nine billion people. We need to produce more food but also nutritious food and to do so in ways that safeguard the capacity of future generations to feed themselves. Put simply: we need healthy and sustainable food systems – that produce the right balance of foods, in sufficient quantity and quality, and that is accessible to all – if we want to lead healthy, productive and sustainable lives.

#### *Acting now*

In preparation for ICN2, countries have agreed to a Political Declaration and a Framework for Action on nutrition containing concrete recommendations to develop coherent public policies in agriculture, trade, social protection, education and health that promote healthy diets and better nutrition at all stages of life.

The Framework for Action gives governments a plan for developing and implementing national policies and investments throughout the food chain to ensure healthy, diverse and balanced diets for all.

This can include strengthening local food production and processing, especially by family farmers and small-scale producers, and linking it to school meals; reducing fat, sugars and salt in processed food; having schools and other public institutions offer healthy diets; protecting children from marketing of unhealthy foods and drinks; and allowing people to make informed choices regarding what they eat.

While government health, agriculture, and education ministries should take the lead, this task includes all involved in producing, distributing and selling food.

The ICN2 Framework for Action also suggests greater investments to guarantee universal access to effective nutrition interventions, such as protection, promotion and support of breastfeeding, and increasing nutrients available to mothers.

Countries can start implementing these actions now. The first step is to establish national nutrition targets to implement already agreed-upon global targets, as set out in the Framework for Action. ICN2 is the time and place to make these commitments.

FAO and WHO are ready to assist countries in this effort. By transforming commitment into action and cooperating more effectively with one another and with other stakeholders, the world has a real chance of ending the multiple burdens of malnutrition in all its forms within a generation.

*José Graziano da Silva is FAO Director-General and Margaret Chan is WHO Director-General.  
Edited by Kitty Stapp*

## **Global Nutrition Report 2014: Actions and Accountability to Accelerate the World's Progress on Nutrition**

*Demonstrating successes, identifying shortfalls and increasing commitment and accountability for reducing malnutrition globally*

International Food Policy Research Institute.

November 2014 :: 118 pages

Report pdf: <http://www.ifpri.org/sites/default/files/publications/gnr14.pdf>

Malnutrition affects one in two people on the planet. Of these, 165 million children under the age of five are estimated to be stunted (i.e. low height for age). Two billion people are estimated to be deficient in one or more micronutrients. Nearly 1.5 billion people are estimated to be overweight and over 500 million to be obese. These conditions all have severe consequences for survival, for morbidity, and for the ability of individuals, the economy and society to thrive. In relation to the scale that these problems imply, the allocation of public resources to their prevention and amelioration is minuscule. Resources to specific nutrition programmes amount to a small fraction of one per cent of domestic or aid budgets.

The Global Nutrition Report will convene existing processes, highlight progress in combating malnutrition and identify gaps and propose ways to fill them. Through this, the Report will help to guide action, build accountability and spark increased commitment for further progress towards reducing malnutrition much faster.

At its core, the Report aims to empower nutrition champions at the national level to better inform policy decisions and to strengthen the case for increased resources. A repository of global and country-level nutrition data and analysis, the Report will also provide civil society organisations (CSOs), donors, governments, the business sector, researchers, the media and engaged citizens with evidence of the current scale of malnutrition, the measures being taken to combat it, as well as highlighting what more needs to be done.

### *Executive Summary – Key Points*

GOOD NUTRITION IS THE BEDROCK OF HUMAN WELL-BEING. BEFORE BIRTH AND THROUGHOUT INFANCY, GOOD NUTRITION ALLOWS BRAIN FUNCTIONING TO evolve without impairment and immune systems to develop more robustly. For young children, good nutrition status averts death and equips the body to grow and develop to its full potential. Over the course of the human lifespan, it leads to more effective learning at school, better-nourished mothers who give birth to better-nourished children, and adults who are likelier to be productive and earn higher wages. In middle age, it gives people metabolisms that are better prepared to ward off the diseases associated with changes in diet and physical activity. Without good nutrition, people's lives and livelihoods are built on quicksand.

### *Key Points*

- :: People with good nutrition are key to sustainable development.
- . Malnutrition affects nearly every country in the world.

- . More nutrition indicators need to be embedded within the Sustainable Development Goal accountability framework.
- :: We need to commit to improving nutrition faster and build this goal into the Sustainable Development Goal targets for 2030.
- . The 2030 Sustainable Development Goal targets should be more ambitious than simple extensions of the 2025 World Health Assembly targets. A new consensus about what is possible needs to be established.
- :: The world is currently not on course to meet the global nutrition targets set by the World Health Assembly, but many countries are making good progress in the target indicators.
- . More high-quality case studies are needed to understand why progress has or has not been made.
- :: Dealing with different, overlapping forms of malnutrition is the “new normal.”
- . Nutrition resources and expertise need to be better aligned toward the evolving nature of malnutrition.
- :: We need to extend coverage of nutrition-specific programs to more of the people who need them.
- . More attention needs to be given to coverage data—an important way of assessing presence on the ground where it counts.
- :: A greater share of investments to improve the underlying determinants of nutrition should be designed to have a larger impact on nutritional outcomes.
- . We need to keep tracking the proportion of nutrition resources to these approaches.
- . We must also provide more guidance on how to design and implement these approaches to improve their effectiveness and reach.
- :: More must be done to hold donors, countries, and agencies accountable for meeting their commitments to improve nutrition.
- . Stakeholders should work to develop, pilot, and evaluate new accountability mechanisms. - Civil society efforts to increase accountability need support.
  - . We need to develop targets or norms for spending on nutrition.
- :: Tracking spending on nutrition is currently challenging, making it difficult to hold responsible parties accountable.
- . Efforts to track financial resources need to be intensified—for all nutrition stakeholders.
- :: Nutrition needs a data revolution.
- . Of the many information gaps, the ones that most need to be filled are those that constrain priority action and impede accountability.
- :: National nutrition champions need to be recognized, supported, and expanded in number.
- . We must fill frontline vacancies, support nutrition leadership programs, and design country-led research programs.

### **Protected Planet Report 2014 - Tracking progress towards global targets for protected areas**

United Nations Environment Programme

November 2014 :: 80 pages

Authors: Juffe-Bignoli, D., Burgess, N.D., Bingham, H., Belle, E.M.S., de Lima, M.G., Deguignet, M., Bertzky, B., Milam, A.N., Martinez-Lopez, J., Lewis, E., Eassom, A., Wicander, S., Geldmann, J., van Soesbergen, A., Arnell, A.P., O'Connor, B., Park, S., Shi, Y.N., Danks, F.S., MacSharry, B., Kingston, N. (2014).

*[Excerpt from Executive Summary]*

## A GLOBAL TARGET FOR PROTECTED AREAS

In 2010, the 192 State Parties to the Convention on Biological Diversity (CBD) adopted a Strategic Plan to halt biodiversity loss and ensure the sustainable and equitable use of natural resources. The plan includes the 20 Aichi Biodiversity Targets, most of which are to be achieved by 2020. Aichi Biodiversity Target 11 reads: By 2020, at least 17 per cent of terrestrial and inland water areas and 10 per cent of coastal and marine areas, especially areas of particular importance for biodiversity and ecosystem services, are conserved through effectively and equitably managed, ecologically representative and well-connected systems of protected areas and other effective area-based conservation measures, and integrated into the wider landscape and seascape. This target sets out a series of equally important and necessary elements that a global protected area network should deliver.

## AIM OF PROTECTED PLANET REPORT 2014

The Protected Planet Report 2014 follows the recommendation of the Protected Planet Report 2012 to provide a more complete overview of each of these elements of Aichi Biodiversity Target 11. Chapters summarise current knowledge and progress towards achieving each element of the target, and provide further guidance for implementation, based on data from the World Database on Protected Areas (WDPA), a review of published literature, and expert review.

## [\*\*World Conference on Education for Sustainable Development calls for renewed commitment by all countries\*\*](#)

Aichi-Nagoya, Japan, 12 November: [The World Conference on Education for Sustainable Development \(ESD\)](#) in Aichi-Nagoya, Japan, closed today with a declaration calling for urgent action to mainstream education for sustainable development (ESD) and include ESD in the post-2015 development agenda. The Aichi-Nagoya Declaration calls on all nations to implement the Global Action Programme on ESD (GAP) to move the ESD agenda forward.

"We were able to share successful initiatives from all over the world, to help government representatives and other key stakeholders formulate new goals and objectives. We have shaped these into a Roadmap for ESD that will implement the Global Action Programme," said Mr Qian Tang, Assistant Director-General for Education of UNESCO.

More than 1,000 participants gathered for the three-day conference under the theme "Learning Today for a Sustainable Future." Among them were 76 ministerial-level representatives of UNESCO Member States, NGOs, academia, the private sector and UN agencies, as well as individual experts and youth participants from 150 countries.

[\*\*Aichi-Nagoya Declaration on Education for Sustainable Development\*\*](#) [ESD]

## **The Economist**

Nov 8th 2014 | [From the print edition](#)

*Performance indices*

## [\*\*Ranking the rankings - International comparisons are popular, influential—and sometimes flawed\*\*](#)

*[Editor's Note: A graphic in the print edition article portrays that based on analysis from Kelley and Simmons, there are over 150 active "global performance indicators" with over 40 others "discontinued" in the last few years]*

EDUCATION ministers across the globe quake in the run-up to the publication, every three years, of the OECD's Programme for International Student Assessment (PISA), which rates 15-year-olds' academic performance in dozens of countries. Those that do well can expect glory;

the first PISA ranking, published in 2001, surprised the world by putting unshowy Finland near the top in every subject and made it a mandatory stop-off for any self-respecting education policymaker. Germany's poor showing, by contrast, led to national hand-wringing, school reforms and the creation of a €4 billion (\$5 billion) federal education support programme. Similarly influential is the yearly Ease of Doing Business Index from the World Bank.

Government presentations to investors will always show the highlights (provided, that is, there are numbers worth boasting about). The Trafficking in Persons (TIP) report compiled by America's State Department each year ranks governments on their perceived willingness to combat trafficking. A bad showing blackens a country's name and can mean losing aid and investment.

Such performance indices, which rank social issues or policy outcomes in different countries by combining related measures into a single score for each, are enjoying a boom. Their number has soared over the past two decades (see chart). For many issues, rival indices must now battle it out. "Numbers, rating and ranking catch people's attention and make information easy to process," says Judith Kelley of Duke University, who studies the impact of global indicators on policy. Rankings spread like wildfire on the web: some have been cited online more than a million times.

The best indices are meticulous (PISA, for instance, combines dozens of carefully standardised sub-measures and raises statistical caveats). But others are based on shaky figures that are calculated differently in different countries. And choosing what to include often means pinning down slippery concepts and making subjective judgments. An index of democracy, freedom or happiness means putting hard numbers to the fairness of elections, weighing civil liberties against economic rights, or deciding how much to rely on surveys.

However an index is calculated, voters tend to conclude that their country's position is at least partly due to government policies—and governments agree, at least when they do well. Increasingly, though, the causality flows the other way. "Ratings and rankings can be powerful tools of both branding and influence," says Ms Kelley. Together with Beth Simmons of Harvard University, she has found that a big reason for the boom in indices is their growing use by governments, NGOs and campaigners to shape new laws and get them passed.

#### Numbers that count

The researchers' main case study is TIP, which was first published in 2001. That year's annual report covered 79 countries; it now ranks almost 190. By placing a heavy weight on whether countries have laws against human trafficking, TIP has spurred a global move towards tackling the problem by introducing criminal penalties. Countries included in the ranking were more likely to go on to pass laws against trafficking than those left out; those placed on its watchlist in one year were more likely to do so than those who were not.

The big reason appears to be that governments felt the heat. Media coverage of trafficking grew dramatically in countries covered by the index, but stayed flat elsewhere. The fear of international opprobrium counted, too. A 2010 press release from Pakistan's Interior Ministry described "significant efforts" to get off the TIP watchlist—efforts it says "improved the stature of Pakistan before the world".

All this makes TIP a fine example of the performance index as a tool of soft power. It also, for some, demonstrates the risk that indices oversimplify and go further than the data warrant. Its raw figures are second-hand, unreliable and not comparable from country to country, says Neil Howard of the European University Institute in Florence; those for prosecutions, for example, refer to quite different laws in different places. TIP's influence, he says, "is out of all proportion to the quality of the data it is based on." Other experts argue that the incentive it

creates for countries to criminalise trafficking will not do much where law enforcement is weak and the economic reasons to migrate for work are strong.

Trafficking is also an example of another trend: the proliferation of indices on similar topics. When Andrew Forrest, one of Australia's richest men, decided to take on modern-day slavery, Bill Gates had some simple advice for him: find a way to quantify it, because "if you can't measure it, it doesn't exist". The result was the Global Slavery Index, a ranking of over 160 countries based on the prevalence of slavery, broadly defined to include victims of trafficking, forced labourers and child brides.

This ranking received widespread attention, and its estimate of nearly 30m for the total number of people enslaved around the world made global headlines. But it has been heavily criticised. Like TIP, it is based on shaky data, making the decision to "name and shame" the ten worst performers particularly unfair, says Mr Howard. Among the ten is Benin, where his own field studies and interviews with presumed victims suggest that slavery is far less common than the index claims.

And for some countries where no one has tried to estimate the incidence of slavery, figures for others were used instead. Prevalence rates for Britain were applied to Ireland and Iceland, for example, and those for America, to several western European nations, including Germany. Ronald Weitzer of George Washington University, who has picked through the methodology, describes these substitutions as "bizarre". Such indices are a "merry-go-round of data that isn't really data," says Mr Howard. "The aims may be well-meaning, but sensationalism doesn't help."

### ***Emergencies Scorecard***

#### **UN OCHA: L3 Emergencies** [at 15 November 2014]

The UN and its humanitarian partners are currently responding to four 'L3' emergencies. This is the UN classification for the most severe, large-scale humanitarian crises.

:: [Iraq](#): - The surge in violence between armed groups and government forces has displaced an estimated 1.8 million people across Iraq and left hundreds of thousands of people in need of assistance.

[OCHA Iraq>>](#)

:: [Syria](#) - 10.8 million people, nearly half the population, are in need of humanitarian assistance. An estimated 6.45 million people have been displaced inside the country.

[OCHA Syria>>](#)

:: [CAR Central African Republic](#) - The violence that erupted in December 2013 has displaced hundreds of thousands of people and left 2.5 million in urgent need of assistance.

[OCHA CAR>>](#)

:: [South Sudan](#) - About 1.4 million people are internally displaced as the result of fighting that began in December 2013. 3.8 million people need humanitarian assistance.

[OCHA South Sudan>>](#)

#### **WHO: Public Health Emergencies of International Concern (PHEIC)** [at 15 November 2014]

:: [Ebola/EVD](#)

:: [Polio](#)

#### **WHO: Grade 3 and Grade 2 emergencies** [at 15 November 2014]

:: *WHO Grade 3 emergencies*

- [Central African Republic](#)
- [Guinea](#)
- [Iraq](#)
- [Liberia](#)
- [Nigeria](#)
- [Sierra Leone](#)
- [South Sudan](#)
- [The Syrian Arab Republic](#)
- :: *WHO Grade 2 emergencies*
- [Democratic Republic of the Congo](#)
- [Guinea](#)
- [Mali](#)
- [occupied Palestinian territories](#)
- [Philippines](#)
- [Ukraine](#)

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### ***:: Agency/Government/IGO Watch***

*We will monitor a growing number of relevant agency, government and IGO organizations for key media releases, announcements, research, and initiatives. Generally, we will focus on regional or global level content recognizing limitation of space, meaning country-specific coverage is limited. Please suggest additional organizations to monitor.*

#### **United Nations – Selected Meetings Coverage and Press Releases [to 15 November 2014]**

<http://www.un.org/en/unpress/>

*Selected Meetings*

13 November 2014

GA/11854

[Worst-Case Scenario Averted, But Fight to Contain Deadly Ebola Outbreak Far from Over, Special Representative Warns General Assembly](#)

The global fight against the Ebola virus so far had aborted a worst-case scenario of runaway increases in infections, but the disease was far from contained, delegates in the General Assembly heard today during an information briefing on the crisis.

*Selected Press Releases*

14 November 2014

SG/SM/16338-DEV/3148-OBV/1400

[Secretary-General, in Message for World Toilet Day, Calls for Stepped-Up Efforts on Equality, Dignity, Safety of Women and Girls](#)

Following is UN Secretary-General Ban Ki-moon's message on World Toilet Day, to be observed on 19 November: [Read more](#)

11 November 2014

SG/SM/16331-OBV/1397

[In Message for World Diabetes Day, Secretary-General Stresses Non-Communicable Diseases Pose Great Health Threat, Calls for Global Efforts to Combat Causes](#)

Following is UN Secretary-General Ban Ki-moon's message for World Diabetes Day, to be observed 14 November: [Read more](#)

10 November 2014

Note No. 6429

**[United Nations Panel Discusses Newly Released War Crimes Commission Records](#)**

On 20 October 1943, 17 member nations established the United Nations War Crimes Commission to investigate and record the evidence of war crimes committed during the Second World War. For more than 70 years, access to those records has been restricted. They are now open to the public, following the release in July 2014 of a full copy of the archive to the United States Holocaust Memorial Museum. [Read more](#)

**UNICEF** [to 15 November 2014]

[http://www.unicef.org/media/media\\_71508.html](http://www.unicef.org/media/media_71508.html)

*Media Releases [selected]*

**[Mali: Emergency Directors emphasize critical contribution of humanitarian assistance and call for urgent funds to maintain the UN humanitarian air service](#)**

NEW YORK, 14 November 2014 - Addressing the media today following a three-day visit to Mali last week, the Emergency Directors of three humanitarian agencies, John Ging of OCHA, Afshan Khan of UNICEF, and Mabingue Ngom of UNFPA, said that Mali is at a crucial crossroads and that failure to act now to meet humanitarian needs may jeopardise the prospects for peace and stability in the country.

**[UNICEF: Ten Ebola Community Care Centers to open in Bombali district, Sierra Leone](#)**

GENEVA/FREETOWN, Sierra Leone, 14 November 2014 – Ten new Ebola Community Care Centers are due to open this week in Sierra Leone's Bombali district as part of a new drive to bring Ebola care closer to communities.

**[Children's winter needs are greater than ever in Middle East but limited access and funds hamper UNICEF response](#)**

AMMAN/GENEVA, 14 November 2014 – As seasonal cold winds, freezing rain, and frigid temperatures close in on conflict-torn parts of the Middle East, UNICEF and partners have begun the distribution of warm clothes and other winter items to ensure that one million of the most vulnerable children are kept warm and healthy.

**[Spike in measles deaths among children troubling, UNICEF says](#)**

NEW YORK/GENEVA, 13 November 2014 – UNICEF today expressed alarm at new data showing that the number of child deaths from measles jumped from an estimated 122,000 in 2012 to 145,700 in 2013.

**[Battle against Ebola being waged at community level: UNICEF](#)**

NEW YORK/DAKAR, 13 November 2014 – UNICEF said today the battle against Ebola must be waged, and will be won, at the heart of the community.

**[Steep drop in pneumonia deaths in last decade, but much further to go – UNICEF](#)**

NEW YORK, 12 November 2014 – Significant declines in child deaths from pneumonia prove that strategies to defeat the disease are working, UNICEF said on the sixth World Pneumonia

Day. But much more is needed to stop hundreds of thousands of children from succumbing to this preventable illness each year.

[Pneumonia prevention and care available for every child is key to defeat world's #1 infectious killer of children](#)

LONDON, UK, 12 November 2014 - Every day, more than 2,500 children under age five die of pneumonia, which is close to one million each year. This is nearly 1 in 6 of the total deaths in that age group. Today, the world commemorates the sixth annual World Pneumonia Day by calling on leaders to increase universal access for pneumonia prevention and care in order to end preventable child deaths by 2030.

[UNICEF Statement on the suicide bombing of a school in northeast Nigeria](#)

DAKAR/NEW YORK, 10 November 2014 – “UNICEF condemns the cruel attack today on the Government Science Technical School Potiskum in Yobe State, Nigeria, which killed dozens of children and injured many more.

**UNHCR** [to 15 November 2014]

<http://www.unhcr.org/cgi-bin/texis/vtx/home>

[Continuing violence by Boko Haram in Nigeria forces 13,000 people to flee into Cameroon](#)

11 November 2014 Press Release

**UNOCHA** [to 15 November 2014]

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

14 Nov 2014

[Mali: Emergency Directors emphasize critical contribution of humanitarian assistance and call for urgent funds to maintain the UN Humanitarian Air Service](#)

Source: UN Office for the Coordination of Humanitarian Affairs Country: Mali (New York, 14 November 2014):

Addressing the media today following a three-day visit to Mali last week, the Emergency Directors of three humanitarian agencies, John Ging of OCHA, Afshan Khan of UNICEF, and Mabingue Ngom of UNFPA, said that Mali is at a crucial crossroads and that failure to act now to meet humanitarian needs may jeopardise the prospects for peace and stability in the country

13 Nov 2014

[Pakistan: CERF funds help thousands of displaced families](#)

Source: UN Office for the Coordination of Humanitarian Affairs Country: Pakistan

In June 2014, the Government of Pakistan commenced a military security operation in North Waziristan Agency targeting non-state armed actors. The operations prompted large scale displacement of more than 1 million people. In July 2014, the Emergency Relief Coordinator allocated US\$5 million from the Central Emergency Response Fund (CERF) to help humanitarian partners provide emergency aid to thousands of people in...

13 Nov 2014

[Sri Lanka: CERF grant provides assistance to communities affected by drought in Sri Lanka](#)

Source: UN Office for the Coordination of Humanitarian Affairs Country: Sri Lanka

In 2014, after the northeast monsoon failed, crops were damaged by the prolonged drought and water supplies dried up in many regions of Sri Lanka. In July 2014, the Emergency Relief Coordinator approved a US\$2 million rapid response CERF grant to support humanitarian partners providing life-saving aid to thousands of people. A World Food Programme (WFP)-led Rapid Drought Assessment estimated that 770,000 people...

10 Nov 2014

[Sudan: The United Kingdom's Department for International Development contributes an additional US \\$11.3 million to the Sudan Common Humanitarian Fund \[EN/AR\]](#)

Source: Department for International Development, UN Office for the Coordination of Humanitarian Affairs Country: Sudan Khartoum,

10 November 2014. The United Kingdom's Department for International Development (DFID) has contributed an additional US \$11.3 million to the Sudan Common Humanitarian Fund (CHF), following DFID's US\$16.4 million contribution earlier this year in light of growing needs in the country. DFID has been a committed and generous donor to the fund since its inception in...

**UNISDR** UN Office for Disaster Risk Reduction [to 15 November 2014]

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

[Disasters and business continuity in the Philippines](#)

11 Nov 2014

The first anniversary of Typhoon Haiyan which took the lives of 6,300 people and resulted in US\$ 10 billion in economic losses, was the impetus for a gathering of 130 chief executives, middle managers and government officials to discuss building resilience to disasters yesterday in Manila

## **WHO & Regionals**

*[Please see more extensive Ebola/EVD coverage at the end of this edition]*

[WHO warns that progress towards eliminating measles has stalled](#)

*2015 targets will not be met*

News release

*[Excerpt]*

13 November 2014 | GENEVA - WHO warned today that progress towards the elimination of measles has stalled. The number of deaths from measles increased from an estimated 122 000 in 2012 to 145 700 in 2013, according to new data published in the WHO Weekly Epidemiological Report and the Centers for Disease Control and Prevention's (CDC) Morbidity and Mortality Weekly Report. The estimated number of measles deaths in 2013 represents a 75% decline in mortality since 2000, significantly below the target of a 95% reduction in deaths between 2000 and 2015.

"Poor progress in increasing measles vaccination coverage has resulted in large outbreaks of this highly contagious disease, throwing the 2015 elimination targets off-track," said Dr Peter Strebel from the WHO Department of Immunization, Vaccines, and Biologicals.

"Countries urgently need to prioritize maintaining and improving immunization coverage. Failure to reverse this alarming trend could jeopardize the momentum generated by a decade of achievements in reducing measles mortality."

Member States of all 6 WHO Regions have set goals for measles elimination. "Countries urgently need to prioritize maintaining and improving immunization coverage. Failure to reverse this alarming trend could jeopardize the momentum generated by a decade of achievements in reducing measles mortality," said Dr Strebel.

Meeting these goals on time is one of the 6 goals of the Global Vaccine Action Plan, endorsed by all Member States at the World Health Assembly in 2012. Despite being vaccine-preventable, measles is still an important cause of death and disability among children worldwide. Strong efforts are needed to maintain the current level of control and to continue reducing the number of cases and deaths. WHO and its partners in the Measles & Rubella Initiative have been warning for a number of years that the disease has the potential to rebound if vaccination and surveillance efforts are not maintained and strengthened.

While the increase in the disease in 2013 was in large part due to outbreaks in China, the Democratic Republic of the Congo, and Nigeria, sizeable outbreaks were also reported in other parts of the world. Progress is stalled in the WHO Eastern Mediterranean region, where weak health systems and conflict and population displacement have hampered vaccination efforts. Meanwhile, the European region has seen measles re-emerge with outbreaks in a number of countries including Georgia, Turkey and Ukraine, and renewed high-level political commitment is needed to reverse this trend...

The [Weekly Epidemiological Record](#) (WER) for 14 November 2014, vol. 89, 46 (pp. 509–516) includes:

:: Global progress towards regional measles elimination, worldwide, 2000–2013  
<http://www.who.int/entity/wer/2014/wer8946.pdf?ua=1>

#### [Poliovirus in South Sudan and Madagascar](#)

*Separate circulating vaccine-derived polioviruses confirmed in South Sudan and Madagascar*

GAR- Disease outbreak news

14 November 2014

In separate and unrelated events, circulating vaccine-derived polioviruses (cVDPVs) have been confirmed in South Sudan and Madagascar.

#### [Global Alert and Response \(GAR\) - Disease Outbreak News \(DONs\)](#)

:: Poliovirus in South Sudan and Madagascar [14 November 2014](#)

:: Marburg virus disease - Uganda [13 November 2014](#)

:: Legionnaires' disease – Portugal [13 November 2014](#)

#### WHO: [Statement on Tetanus Toxoid vaccine](#)

13 November 2014

[Full text]

WHO is concerned that misinformation circulating in the media about the Tetanus Toxoid vaccine could have a seriously negative impact on the health of women and children.

The Organization confirms that the Tetanus Toxoid (TT) vaccine is safe. The vaccine has been used in 52 countries, to immunize 130 million women to protect them and their newborn babies from tetanus. There is no HCG hormone in tetanus toxoid vaccines...

#### **UNAIDS** [to 15 November 2014]

<http://www.unaids.org/en/resources/presscentre/>

*No new digest current identified.*

**UNDP** United Nations Development Programme [to 15 November 2014]

<http://www.undp.org/content/undp/en/home/presscenter.html>

13 Nov 2014

[UNDP, Government of Japan and Government of Ukraine to support restoration of critical social care infrastructure in Eastern Ukraine](#)

The Government of Japan, the Government of Ukraine and the United Nations Development Programme (UNDP) in Ukraine today launched a new project to support restoration of critical social care infrastructure and services for the most vulnerable groups in post-conflict areas in Eastern Ukraine.

13 Nov 2014

[Wildlife crime requires African solutions, governments in the region say](#)

Governments in Africa and a wide spectrum of partners must join forces to combat wildlife crimes, said representatives as they gathered for a regional summit on how to boost conservation efforts.

12 Nov 2014

[UNDP, Government of Haiti provide immediate support to flood-affected victims](#)

Haiti's Department of Civil Protection in partnership with the UN Development Programme (UNDP) has been working non-stop to assist flood-affected families in the northern city of Cap-Haitien and other neighbouring towns following heavy rains, floods and landslides that killed 17 people, five of them children. More than 15,000 houses were flooded, 90 were destroyed and 800 were severely damaged. Over 6,500 people are temporarily housed in emergency shelters.

12 Nov 2014

[UN Pledging Conference sees new funds announced for fight against poverty](#)

26 UN Member States have pledged approximately US\$ 650 million to go towards UN development work, mostly for 2015, with US\$97 million destined for the United Nations Development Programme (UNDP).

10 Nov 2014

[Helen Clark: Keynote address to Preparatory Session for The 3rd International Conference on Financing for Development United Nations, New York](#)

United Nations, New York. 10 November 2014

**UN Division for Sustainable Development** [to 15 November 2014]

<http://sustainabledevelopment.un.org/index.html>

[SD In Action Newsletter](#)

Volume 2, Issue 10 - November 2014

- [Call for inputs to Global Sustainable Development Report](#)
- [How much do you know about sustainable development?](#)
- [Compendium of Issues Briefs now available](#)
- [General Assembly aims to start negotiations on post 2015 development agenda in January](#)
- [Proposed SDG #1: "End poverty in all its forms everywhere"](#)

**UN Women** [to 15 November 2014]

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

[In Liberia, mobile banking to help Ebola-affected women traders](#)

Date : November 14, 2014

Hard-hit by closed markets and travel restrictions, some 2,500 women cross-border traders will receive cash transfers via mobile technology from the Central Bank of Liberia with a grant from UN Women to help them save and expand their businesses.

[Men can transform gender stereotypes and inequality — Executive Director](#)

Date : November 11, 2014

Speech by UN Women Executive Director Phumzile Mlambo-Ngcuka at the Opening Plenary of the 2nd MenEngage Global Symposium in New Delhi, India on 11 November 2014.

[Female leaders call for end to AIDS epidemic](#)

Date : November 11, 2014

Female leaders from the Middle East and North Africa, meeting in Algiers, Algeria, on 10 and 11 November, called for advancing gender equality, the HIV response and universal access to HIV treatment and prevention in the region.

["Break the social norms and gender stereotypes that constrain the roles of men and boys" — Executive Director](#)

Date : November 11, 2014

In her inaugural speech at the MenEngage Global Symposium, UN Women Executive Director Phumzile Mlambo-Ngcuka says the engagement of men and boys can be a game-changer in shifting power relations to end discrimination against women and achieve gender equality.

**UNFPA** United Nations Population Fund [to 15 November 2014]

<http://www.unfpa.org/public/>

12 November 2014 - Statement

[Joint Statement on the tragic deaths and injuries sustained by women undergoing surgical contraception in the Indian state of Chhattisgarh](#)

UNITED NATIONS, New York, 12 November 2014—Dr. Babatunde Osotimehin, Executive Director of UNFPA, the United Nations Population Fund, and Tewodros Melesse, Director-General of the International Planned Parenthood Federation (IPPF), today issued a joint statement about the tragic deaths and injuries sustained by women undergoing surgical contraception in the Indian state of Chhattisgarh.

11 November 2014 - Dispatch

[In Liberia, contact tracing key to curtailing Ebola's spread](#)

MONROVIA, Liberia — Although there are signs the Ebola outbreak in Liberia is slowing, the fight against the disease remains an uphill battle. Underlying problems with the health system continue to impede public health responses, and rumours are discouraging people from seeking help. To extend the reach of health workers and calm fears about the outbreak, UNFPA is playing a key role in contact tracing and disease surveillance efforts.

10 November 2014 - Dispatch

### [Bringing men into the equation: Men work to end violence against women](#)

HARARE/NEW YORK – This week, UNFPA joins partners and advocates at the second international MenEngage Global Symposium, in New Delhi, India. The event brings together policy experts, researchers and activists to share new findings and best practices on getting men and boys involved in ending gender-based violence and promoting gender equality. A UNFPA-supported programme in Zimbabwe shows how such efforts are already making a difference.

### **DESA** United Nations Department of Economic and Social Affairs [to 15 November 2014]

<http://www.un.org/en/development/desa/news.html>

#### [New instruments of social finance](#)

11 November 2014, New York

The topic of new instruments of social finance took centre stage last week at the special event of the UN General Assembly's Second Committee exploring how impact investing and new instruments of social finance could contribute to achieving sustainable development goals, both in emerging and developed markets.

#### [Examining role of labour migration for sustainable development](#)

11 November 2014, New York

Migration has the potential to lift millions out of poverty, provide access to decent work and foster sustainable development. However, migration is not in-itself a solution. It can also have negative impacts ranging from human trafficking and migrant exploitation, to dependence on remittances and brain drain.

### **ILO International Labour Organization** [to 15 November 2014]

<http://www.ilo.org/global/lang--en/index.htm>

Tanzania

#### [One-stop job centre makes it easier for workers and employers to connect](#)

13 November 2014

Labour rights

#### [Cambodia takes first crucial step towards protecting entertainment workers](#)

10 November 2014

Garment industry in Bangladesh

#### [Workplace injury insurance must be part of the Rana Plaza legacy](#)

14 November 2014

### **FAO** Food & Agriculture Organization [to 15 November 2014]

<http://www.fao.org/news/archive/news-by-date/2014/en/>

#### [Aquaculture can grow faster, raising micronutrient supply from fish](#)

Fish farming will likely grow more than expected in the coming decade, offering a chance for improved nutrition for millions of people, especially in Asia and Africa, according to a new FAO report. Increased investment in the aquaculture sector should boost farmed-fish production by as much as 4.14 percent per year through 2022.

14-11-2014

[Farmers and herders in Iraq in dire need of support](#)

Wheat seeds, fertilizer and animal feed are starting to roll out to nearly 28,000 farming families in Iraq whose livelihoods have been left in tatters as a result of hostilities -- part of an FAO effort aimed at reinforcing food production and helping people recover.

10-11-2014

**UNESCO** [to 15 November 2014]

<http://en.unesco.org/>

[Conclusions and recommendations of the 2001 Underwater Cultural Heritage Convention regional meeting in SEE](#) 14 November 2014

[Protected areas key to safeguarding the global environment Director-General tells Parks Congress](#) 14 November 2014

[Educating Girls, Empowering Women, Transforming Societies](#) 13 November 2014

[18th International Council on Monuments and Sites General Assembly held in Florence \(Italy\)](#)

12 November 2014

...The [18th ICOMOS General Assembly](#) under the High Patronage of the President of the Italian Republic and of the Director General of UNESCO is being held from 10-14 November 2014 in the World Heritage city of Florence. It brings together more than 1000 heritage specialists from more than 90 countries. They will explore the theme "Heritage and Landscape as Human Values" according to five sub-themes:

- Theme 1: Sharing and experiencing the identity of communities through tourism and interpretation
- Theme 2: Landscape as cultural habitat
- Theme 3: Sustainability through traditional knowledge
- Theme 4: Community-driven conservation and local empowerment
- Theme 5: Emerging tools for conservation practice

The General Assembly will conclude with a "Florence Declaration".

[World Conference on Education for Sustainable Development calls for renewed commitment by all countries](#) 12 November 2014

**UNCTAD** [to 15 November 2014]

<http://unctad.org/en/Pages/Home.aspx>

*No new digest content identified.*

**ITU** International Telecommunications Union [to 15 November 2014]

[http://www.itu.int/net/pressoffice/press\\_releases/index.aspx?lang=en#.VF8FYcl4WF8](http://www.itu.int/net/pressoffice/press_releases/index.aspx?lang=en#.VF8FYcl4WF8)

[Digital inclusion of persons with disabilities lagging behind](#)

Policy and regulatory changes to focus on greater ICT accessibility  
Geneva, 14 November 2014

[Renowned global Futurists to convene at ITU Telecom World 2014](#)

Augmented humans, intelligent software, and future of tech to be discussed at Leadership Summit on the Future

12 November 2014 –

**WIPO** World Intellectual Property Organization [to 15 November 2014]

<http://www.wipo.int/portal/en/index.html>

*No new digest content identified.*

**CBD** Convention on Biological Diversity [to 15 November 2014]

<http://www.cbd.int/>

*No new digest content identified.*

**USAID** [to 15 November 2014]

<http://www.usaid.gov/>

[USAID Sustains Commitment to Peacebuilding in the Central African Republic](#)

November 10, 2014

The U.S. Agency for International Development (USAID) today announced \$7 million in funding for the Central African Republic (CAR) Peacebuilding Partnership.

[First U.S.-Constructed Ebola Treatment Unit Set to Open in Liberia](#)

November 10, 2014

The first Ebola treatment unit (ETU) built and staffed with U.S. Government funding is prepared to receive its first patients this week. ETU construction was overseen by the U.S. Department of Defense working with the Armed Forces of Liberia, which was a vital partner in the building process. The U.S. Agency for International Development (USAID) is funding the management and clinical care of the ETU, which will be provided by the International Organization for Migration (IOM) under the leadership of the Liberian Ministry of Health and Social Welfare. Including this ETU, critical funding support from the United States has helped increase the number of Ebola treatment units in Liberia to eight.

**DFID** [to 15 November 2014]

<https://www.gov.uk/government/organisations/department-for-international-development>

*Selected Releases*

[New research funding to strengthen Ebola response](#)

16 November 2014 DFID Press release

[Foreign Secretary visits Sierra Leone to visit next phase of UK Ebola response](#)

12 November 2014 DFID and FCO Press release

[West African farmers given chance to boost incomes through UK investment](#)

12 November 2014 DFID Press release

**ECHO** [to 15 November 2014]

[http://ec.europa.eu/echo/index\\_en.htm](http://ec.europa.eu/echo/index_en.htm)

[Ukraine: EU boosts humanitarian assistance and recovery aid to €32 million](#)

Wed, 12/11/2014 - 12:00

European Commission - Press release Brussels, 12 November 2014 The European Commission is increasing its humanitarian assistance and recovery aid to meet the immediate needs of vulnerable and conflict-affected populations in Ukraine.

**OECD** [to 15 November 2014]

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

[G20: OECD to help monitor growth and gender commitments](#)

Leaders of the G20 countries meeting at their Summit in Brisbane, Australia, have called on the OECD and IMF to monitor their commitment to boost economic growth and create jobs.

16 November 2014

[Better professional training would boost skills and job creation, says OECD](#)

Countries should step up their efforts to improve the quality of post-secondary vocational training in order to meet the changing needs of today's job market, according to a new OECD report.

13 November 2014

[China headed to overtake EU, US in science & technology spending, OECD says](#)

Squeezed R&D budgets in the EU, Japan and US are reducing the weight of advanced economies in science and technology research, patent applications and scientific publications and leaving China on track to be the world's top R&D spender by around 2019, according to a new OECD report.

12 November 2014

**African Union** [to 15 November 2014]

<http://www.au.int/en/>

[Historic Private Sector Meeting Raises \\$31 million to Deal with Ebola Crisis – Including \\$10 million committed from African Development Bank](#) Nov 12 2014

**ASEAN**

<http://www.asean.org/news>

[ASEAN Leaders Gather in Myanmar for a 'Historic' Summit](#)

NAY PYI TAW, 12 November 2014 – The Heads of State/Government of the Association of Southeast Asian Nations (ASEAN) are gathering in Myanmar's capital for the 25th ASEAN Summit which begins today. The Summit takes place at a critical juncture of ASEAN's history with just one year to go before the establishment of the ASEAN Community in 2015. During this Summit, the Leaders of ASEAN will also engage with the Heads of State/Government of China, Japan, the Republic of Korea, India, Australia, New Zealand, Russia and the United States.

**World Trade Organisation** [to 15 November 2014]

[http://www.wto.org/english/news\\_e/news13\\_e/news13\\_e.htm](http://www.wto.org/english/news_e/news13_e/news13_e.htm)

16 November 2014

*DIRECTOR-GENERAL*

[DG Azevedo urges rapid action on Bali Issues](#)

Director-General Roberto Azevêdo today welcomed the strong commitment from G-20 Leaders to implement all elements of the Bali Package including preparing as quickly as possible a WTO work programme on the remaining issues of the Doha Development Agenda.

The Director-General also took advantage of the G-20 Summit to thank Indian Prime Minister Narendra Modi and US President Barack Obama for their leadership in reaching an understanding on two of the Bali Decisions: Trade Facilitation and Public Stockholding for Food Security Purposes. This understanding, which now needs to be discussed with all WTO members, was welcomed by G-20 Leaders as an important step in efforts to resolve the impasse which has paralyzed all multilateral negotiations in the WTO since July...

11 November 2014

*INFORMATION TECHNOLOGY AGREEMENT*

[Azevêdo hails breakthrough on the WTO's Information Technology Agreement](#)

Director-General Roberto Azevêdo today praised Chinese and US negotiators for reaching an understanding that paves the way to an expeditious conclusion of the expanded Information Technology Agreement. He said: "I strongly welcome the announcement of this breakthrough, which represents a significant step forward in the negotiations on an expansion of the ITA." The original Information Technology Agreement (ITA) was struck in 1996 and has contributed to the massive increase in trade in information technology products. The China-US breakthrough reached at the APEC leaders' summit is an important step towards a definitive deal covering a larger range of products. Negotiations must now be finalised by all WTO members participating in the ITA...

**IMF** [to 15 November 2014]

<http://www.imf.org/external/index.htm>

*No new digest content identified.*

**World Bank** [to 15 November 2014]

<http://www.worldbank.org/en/news/all>

[Statement from World Bank Group President on the G20 Leaders' Communique](#)

BRISBANE, November 16, 2014 – World Bank Group President Jim Yong Kim today released the following statement on the G20 Leaders' Communique:

"With the global economy struggling with an uneven recovery, we welcome G20 Leaders' commitment to raising growth and delivering quality jobs. Higher and more inclusive growth is essential if we are to significantly cut poverty and reduce inequality. The G20 commitments promise a much needed boost to G20 countries and beyond. G20 Leaders have rightly identified investment in infrastructure as crucial to lifting growth, creating jobs and tackling poverty. We welcome support by G20 Leaders for the World Bank Group's Global Infrastructure Facility, designed to build a global pipeline of infrastructure investments that can draw in new sources of finance, such as institutional investors.

November 16, 2014

### [World Bank Supports Reforms to Strengthen Guinea's Capacity to Respond to the Ebola Crisis](#)

WASHINGTON, November 13, 2014—The World Bank Group's Board of Executive Directors today approved a total of US\$50 million to strengthen the Government of Guinea's ability to manage public funds in response to the Ebola crisis and related macroeconomic and fiscal shocks. The financing, which will support the Emergency Macroeconomic and Fiscal Support Operation includes a US\$40 million International Development Association (IDA)\* credit and a US\$10 million grant allocated from the World Bank Group's IDA Crisis Response Window, which is designed to help low-income IDA countries respond to exceptionally severe crises in a timely, transparent and predictable way. "Guinea's progress in economic reform is now at risk due to the Ebola crisis and if the epidemic is not contained soon it could lead to an increase in poverty through declines in consumption and investment," said Cheick Kante, the World Bank Country Manager for Guinea.

November 13, 2014

### [India has potential to dramatically reduce stunting in children, says new World Bank report](#)

November 13, 2014

Adequacy in three basic nutritional areas show reduced stunting even in poorest districts  
New Delhi, November 13, 2014 – Stunting (Described as low height for age) in Indian children, 6 to 24 months of age, could be dramatically reduced if children receive three things that are critical for good nutrition – adequate feeding, health care and environmental health, says a new World Bank report which analyzes data from the National Family Health Survey (NFHS) 2005-06 and the HUMGaMA Survey 2011 to indicate a strong co-relation between stunting in children and their adequacy or inadequacy in these three dimensions.

The three key determinants critical for good nutrition:

- Food care: Minimum acceptable diet as defined by WHO (0-6 months: be exclusively breastfed, not fed even water; between 6-8 months along with breastmilk be fed at least twice a day with foods from three or more food groups; between 9-24 months: be fed at least three times a day with foods from four or more food groups)
- Health care: Regular and timely antenatal visits, age appropriate immunizations, birth through skilled attendant, mother's Body Mass Index (BMI) being greater than the threshold
- Environmental health: Good hygiene with proper water and sanitation practices.

The report, *Nutrition in India*, shows that stunting rate in children with adequate feeding, health care and environmental health is half as compared to those with none of these in adequate measure – 23 percent as compared to 52 percent in children who have inadequacies in all dimensions...

### [World Bank Supports Liberia's Efforts to Improve Governance, Business Climate, Education and Strengthen Health Services in Response to the Ebola Crisis](#)

WASHINGTON, DC, November 12, 2014—The World Bank Group's Board of Executive Directors today approved a total of US\$30 million to support Liberia's medium-term strategy to strengthen its transparency and accountability mechanisms, expand the economy, increase access to quality education and improve health services that are critical to fighting the current Ebola epidemic. The financing, which will support the Second Poverty Reduction Support Operation (PRSDPO II), includes a US\$20 million International Development Association (IDA)\* credit and a US\$10 million grant allocated from the World Bank Group's IDA Crisis Response Window, which is designed to help low-income IDA countries respond to exceptionally severe crises in a timely, transparent and predictable way. "Liberia has made significant progress in

reducing poverty after a history of conflict, but the country is now faced with heightened challenges brought on by the Ebola epidemic," said Inguna Dobrja, World Bank Country Manager...

November 12, 2014

\* \* \* \*

### ***:: NGO/Collaborations/Initiatives Watch***

*We will monitor media releases and other announcements around key initiatives, new research and major organizational change from a growing number of global NGOs, collaborations, and initiatives across the human rights, humanitarian response and development spheres of action. This Watch section is intended to be indicative, not exhaustive. We will not include fund raising content.*

#### **Amref Health Africa** [to 15 November 2014]

##### **World Prematurity Day- November 17, 2014**

*Amref Health Africa warns that there will be no improvement in child survival if premature deaths are not addressed*

...World Prematurity Day is observed annually to raise awareness of the concerns surrounding preterm babies and their families worldwide. On this third World Prematurity Day, Amref Health Africa renews its commitment to working hand in hand with governments, development partners and civil society organisations to:

- :: Conduct research and explore innovations to inform and improve the quality and reach of prematurity management programmes
- :: Work hand in hand with the relevant regulatory bodies and training institutions to build skills of frontline health workers using innovative training approaches that do not take them away from their work for too long
- :: Implement and advocate priority, evidence-based interventions including family planning strategies and provision of adolescent-friendly services, and prevention and management of sexually transmitted infections such as HIV and syphilis
- :: Increase health education and health promotion among girls and women
- :: Promote healthy nutrition including micronutrient fortification
- :: Address life-style risks such as smoking, and environmental ones like indoor air pollution

Amref Health Africa realises that governments are solely responsible for ensuring the right to health for their citizenry. Our role is to support the governments to meet this objective. To that extent, Amref Health Africa urges governments as well as their development partners to meet the following obligations for improving prematurity survival:

- :: Allocate adequate resources for family planning and increased empowerment of women and adolescents
- :: Improve quality of care before, between and during pregnancy to reduce preterm birth rates
- :: Ensure frontline workers are skilled in the care of premature babies and improve supplies of life-saving commodities and equipment
- :: Ensure universal access to comprehensive antenatal care, quality childbirth services and emergency obstetric and newborn care

:: Invest in research addressing multiple biological, clinical, and social-behavioral risk factors associated with prematurity...

**Aravind Eye Care System** [to 15 November 2014]

*No new digest content identified.*

**BRAC** [to 15 November 2014]

[BRAC Uganda awarded at the 2014 Financial Reporting \(FiRe\) Awards](#)

16 November 2014, Dhaka.

On 6 November 2014, BRAC Uganda was recognised for its financial reporting system when it became the first runner up in the NGO category at the 2014 Financial Reporting (FiRe) Awards-Uganda, at the Kampala Serena Hotel. BRAC Uganda has participated in the FiRe awards for the past three years, and has been recognised as the best NGO in both 2011 and 2012 and became the first runner-up in the same category in 2013. This year, BRAC Uganda competed against 16 NGOs' and 75 ...

**CARE International** [to 15 November 2014]

<http://www.care-international.org/news/press-releases.aspx>

*No new digest content identified.*

**Danish Refugee Council** [to 15 November 2014]

<http://drc.dk/news/archive/>

[DRC helping more than 10,000 people who've fled conflict in Anbar, Iraq](#) (13.11.14)

DRC-Iraq: November 12, 2014 – Tens of thousands of Iraqis who have fled their homes due to conflict have received vital relief items distributed by the Danish Refugee Council, DRC, and funded by the...

[Danish NGO celebrates 30th anniversary](#) (13.11.14)

The Danish NGO DACAAR (Danish Committee for Aid to Afghans Refugees) celebrates its 30th Anniversary for its work with development and relief in Afghanistan. This will be marked on Friday 14 November...

[Danish Refugee Council exits North Caucasus after 17 years](#) (11.11.14)

17 years of humanitarian efforts in North Caucasus is concluded and the Danish Refugee Council (DRC) can look back on one of the largest operations in the history of the organization. From emergency relief during the wars in Chechnya to reconstruction and durable solutions for the displaced population, the lessons learned in North Caucasus have set the standard for DRC interventions in zones of conflict across the globe.

..."We leave the North Caucasus with a sense of achievement having solved a crucial task and gained important experience as an organization - we have helped many hundreds of thousands of civilians, and efforts are recognized both internationally and locally, in the Assinovska settlement a street was baptised 'Danish Street' in recognition of DRC efforts in Chechnya, "says Ann Mary Olsen.

**Casa Alianza** [to 15 November 2014]

**Covenant House** [to 15 November 2014]

[True Colors Fund and Covenant House Announce Groundbreaking Partnership to Ensure Safe, Welcoming Beds for LGBT Youth](#)

November 10, 2014

The True Colors Fund, which was co-founded by Cyndi Lauper, and is the leading national organization focused on the issue of lesbian, gay, bisexual, and transgender (LGBT) youth homelessness, and Covenant House announced a groundbreaking partnership to ensure safe, inclusive, and affirming beds and services for the disproportionate number of homeless LGBT youth in need of shelter and supportive services across the country.

**ECPAT** [to 15 November 2014]

*No new digest content identified.*

**Fountain House** [to 15 November 2014]

<http://www.fountainhouse.org/blog/fountain-house-receive-15-million-hilton-humanitarian-prize>

*No new digest content identified.*

**Handicap International** [to 15 November 2014]

*No new digest content identified.*

**Heifer International** [to 15 November 2014]

*No new digest content identified.*

**HelpAge International** [to 15 November 2014]

*No new digest content identified.*

**International Rescue Committee** [to 15 November 2014]

[Syrian civilians unable to escape](#)

*Syrian civilians trying to escape the brutal war inside Syria risk being turned back at the borders and the number of refugees finding safety abroad has declined dramatically, according to a new report.*

13 Nov 2014 - Faced with limited international support and huge strains on their economies, the countries neighboring [Syria](#) are making it harder for refugees to escape Syria. Many civilian men, women and children cannot flee to safety, according to the report "[No Escape](#)," released by Norwegian Refugee Council and International Rescue Committee Thursday.

"Humanitarian organizations have repeatedly warned that the capacity of the host-communities have been stretched to the limits and argued for better international burden-sharing. What we are witnessing now are the results of our failure to deliver the necessary support to the region. We are witnessing a total collapse of international solidarity with millions of Syrian civilians," says Secretary General of the Norwegian Refugee Council Jan Egeland...

[Empowering refugee girls on the Thailand-Myanmar border](#)

November 13, 2014

In refugee camps on the Thailand-Myanmar border, the IRC is working with adolescent girls to tackle issues such as early marriage and domestic violence, and to help them build a brighter future.

**ICRC - International Committee of the Red Cross** [to 15 November 2014]

<http://www.icrc.org/eng/resources/index.jsp>

[Syria: ICRC president seeks broader humanitarian role for the organization](#)

Geneva/Damascus (ICRC) – The scale of the crisis in Syria, with millions of people affected, is staggering, and parties to the conflict ...

14-11-2014 | News release

[ICRC and UNRWA join forces to help Palestine refugees](#)

Palestinian refugees arriving in Lebanon from Syria are facing harsh winter conditions in the northern Bekaa Valley, where whole families have little or no ...

14-11-2014 | News release

**IRCT** [to 15 November 2014]

In focus

[Hope in sight? Torture rehabilitation centres in Iraq, Jordan, Lebanon and Turkey reflect on the Syrian refugee crisis](#)

12 November 2014

News

[IRCT underlines importance of care for caregivers with new good practices report](#)

12 November 2014

The IRCT is pleased to launch the 'Peer Support Report'. The report draws from the results of the Peer Support Project, which took place between June 2012 and November 2013 and involved six IRCT member centres based in the EU.

As the report points out, when working with survivors of torture there is a need for proper staff support and stress management strategies. Without these, organisations and their staff are susceptible to stress-related issues such as health problems, higher turnover and lower work efficiency.

The aim of the EU-funded project was to help torture rehabilitation centres tackle high levels of stress and burnout among their staff and volunteers by raising awareness of the importance of stress and quality management policies and processes...

...Six European rehabilitation centres, all members of the IRCT network, took part in the project: ACET (Bulgaria), Freedom from Torture (United Kingdom), HEMAYAT (Austria), MRCT Craiova (Romania), Parcours d'Exil (France), and SPIRASI (Ireland). The Peer Support Project was coordinated by the IRCT with support from the bzfo (Berlin Centre for the Treatment of Torture Victims) and the Antares Foundation.

[PEER SUPPORT PROJECT - GOOD PRACTICES REPORT](#)

IRCT

November 2014 :: 32 pages

pdf:

<http://www.irct.org/Admin/Public/DWSDownload.aspx?File=%2fFiles%2fFiler%2fpublications%2fPeer-support-final.pdf>

### *Introduction*

Staff and volunteers of organisations working with survivors of extreme trauma experience high levels of stress. They are repeatedly exposed to the harrowing accounts of torture survivors. They are often required to work with limited resources to provide support to a large population of beneficiaries. Those working in conflict zones or situations of political instability face threats to their own physical security and integrity. In some cases, staff and volunteers are themselves part of the target population, having gone through traumatic experiences themselves. Even staff who do not have direct client contact are exposed to the stresses of working in often under-resourced organisations and are often indirectly exposed to traumatic material.

Long-term stress of this nature can have serious consequences for the mental health, health and general well-being of staff. It also affects the organisation itself. Chronic staff stress leads to higher turnover, higher absenteeism, lower morale and lower work efficiency and effectiveness. It is therefore essential that centres for the rehabilitation of victims of torture create a framework that provides a sustainable system of support to their employees and volunteers.

The goal of the Peer Support Project is to assist in the development of such a framework.

### **MSF/Médecins Sans Frontières** [to 15 November 2014]

Press release

[Ebola Treatment Trials to Start at MSF Sites in December](#)

November 13, 2014

In the absence of specific treatments for Ebola, MSF will host clinical trials in three Ebola treatment centers in West Africa.

Press release

["Vital Pact: Fandom Where It's Needed Most" Rallies Fandom Communities in Support of Doctors Without Borders's Lifesaving Work](#)

November 12, 2014

Press release

[CAR: Attacks Against MSF Threaten Humanitarian Aid](#)

November 11, 2014

Attacks and extortion against providers of humanitarian assistance on the rise.

Press release

[Statement from Dr. Craig Spencer](#)

November 11, 2014

Hello, my name is Craig Spencer. I am a physician and aid worker for Doctors Without Borders, also known as MSF. I'm proud to be among the ranks of more than 3,300 Doctors Without Borders responding to the Ebola outbreak in West Africa.

Press release

[Doctors Without Borders Aid Worker Recovers from Ebola](#)

November 11, 2014

Dr. Craig Spencer discharged from HHC Bellevue Hospital Center.

Press release

[Ebola: Hard-Won Gains in Liberia Must Not Be Undermined](#)

November 10, 2014

International response must adapt to changing epidemic pattern.

**Mercy Corps** [to 15 November 2014]

<http://www.mercycorps.org/press-room/releases>

[Liberia: Mercy Corps: Impact of Ebola epidemic deepens as Liberian households report eating fewer meals](#)

November 11, 2014

*In-depth market assessment of Liberian communities details growing economic crisis*

A new report by the global humanitarian agency Mercy Corps details how some Ebola containment protocols are straining food security, market supply chains and household incomes in Liberia. In a recent assessment, 90 percent of households reported coping with decreased income and rising prices by reducing the amount of food eaten at each meal, and substituting preferred food with lower quality or less expensive food. Eighty-five percent of households also reported eating fewer meals each day.

"Prices are spiking, household purchasing power is dropping and transportation restrictions are limiting the availability of goods in local markets," says Javier Alvarez, Mercy Corps' Liberia country director. "Mercy Corps will help by supporting farmers so they keep working, providing cash transfers and emergency food assistance to vulnerable households, and aiding the movement of goods around the country."

Mercy Corps' report puts forward key recommendations to bolster the Liberian economy, which the agency will begin to implement. These include:

- :: Provide farmers with cash transfers and agricultural tools to mitigate the effects of increased prices and reduced support from existing or paused humanitarian programs.
- :: Work with local government to improve transportation issues that are limiting the availability of food and other products in local markets.
- :: Deliver emergency food assistance through cash transfers or in-kind distributions...

Pdf report:

[http://www.mercycorps.org/sites/default/files/MercyCorps\\_Liberia\\_EconomicImpactEbolaOutbreak\\_November\\_2014.pdf](http://www.mercycorps.org/sites/default/files/MercyCorps_Liberia_EconomicImpactEbolaOutbreak_November_2014.pdf)

**Operation Smile** [to 15 November 2014]

*Upcoming Mission Schedule*

Nov 5 - 15 | Guatemala City, Guatemala

Nov 16 - 29 | Jimma, Ethiopia

**OXFAM** [to 15 November 2014]

<http://www.oxfam.org/en/pressroom/pressreleases>

[G20 must heed call to action on fight against killer Ebola virus](#)

14 November 2014

World leaders taking their seats at the G20 Brisbane Summit today must heed the call to pull together and act now to stop Ebola, before it's too late.

[Almost half the G20 countries have failed to deliver in the global fight against Ebola](#)

12 November 2014

Nine of the G20 countries have failed to deliver adequate support in the fight against Ebola despite calls for more help and the fact they are the largest economies in the world, Oxfam says today.

[G20 must turn the tide on rising inequality and tackle tax dodging](#)

11 November 2014

G20 Leaders meeting in Brisbane, Australia this weekend (15 and 16 November) are being urged to tackle rising inequality head-on or risk leaving millions of people trapped in poverty, as new figures reveal the wealth disparity in a number of G20 countries.

**Partners In Health** [to 15 November 2014]

Nov 14, 2014

[Treating Ebola in Port Loko Town, Sierra Leone](#)

This week Partners In Health nurses began delivering care to Ebola patients at a 106-bed Ebola Treatment Unit (ETU) in Port Loko Town, Sierra Leone. Here, nurse Matthew Rollossen of Tacoma, Wash., has his name written across his chest so clinicians and patients can identify one another while working in the ETU.

Nearly 5,000 Ebola cases have been confirmed by the World Health Organization in Sierra Leone, and Port Loko--located in the country's Northern Province--is one of the hardest-hit areas. To contain the outbreak, PIH is committed to scaling up its efforts and is preparing to deploy rapid response teams, which will travel to the most remote areas of the country when Ebola cases are reported to deliver immediate care.

**PATH** [to 15 November 2014]

Announcement | November 13, 2014

[PATH welcomes news that millions more women can access Sayana® Press](#)

*Pfizer Inc., the Bill & Melinda Gates Foundation, and the Children's Investment Fund Foundation announce a novel price agreement*

Today, PATH celebrates another milestone in the pathway toward providing more women and girls access to voluntary family planning. Pfizer Inc., the Bill & Melinda Gates Foundation, and the Children's Investment Fund Foundation (CIFF) have agreed to [a new public-private collaboration](#) through which Sayana® Press will be sold for US\$1 per dose to qualified purchasers. The agreement will help ensure that women in the world's 69 poorest countries have access to this new contraceptive option at reduced or no cost...

**Plan International** [to 15 November 2014]

<http://plan-international.org/about-plan/resources/media-centre>

**Save The Children** [to 15 November 2014]

<http://www.savethechildren.org/site/c.8rKLIXMGIpI4E/b.6150563/k.D0E9/Newsroom.htm>

Save the Children Receives Largest Private Donation to Date to Fight Ebola

*\$6.6 Million Grant from the Paul G. Allen Family Foundation to Provide Emergency Health Support and Education for Children in Liberia*

FAIRFIELD, Conn. (Nov. 13, 2014) — Save the Children received today its largest private donation to date for its Ebola response. The \$6.6 million grant from the Paul G. Allen Family Foundation will support efforts to provide healthcare, comfort, protection and education to Liberia's children and families, as well as community awareness programs aimed at protecting health and preventing the spread of the virus. The grant is part of Mr. Allen's commitment to funding at least \$100 million in programs to tackle the Ebola crisis...

**SOS-Kinderdorf International** [to 15 November 2014]

*No new digest content identified.*

**Tostan** [to 15 November 2014]

*No new digest content identified.*

**Women for Women International** [to 15 November 2014]

Women for Women International Appoints Jennifer Windsor as Chief Executive Officer

November 10, 2014 (Washington, D.C.) – The Board of Directors of Women for Women International (WfWI) announced today that women's empowerment and human rights advocate Jennifer L. Windsor will serve as its next chief executive officer.

Windsor is the third chief executive to lead the global development organization that has served more than 420,000 women living in conflict-affected countries since its founding in 1993 by visionary leaders Zainab Salbi and Amjad Atallah. The organization's 500 staff are located in 11 country offices. Windsor will be based at the headquarters in Washington, D.C.

"We believe Jennifer is exactly the strong, committed leader that Women for Women International needs to move forward and advance its vision and mission. A passionate advocate for the rights of women around the world, Jennifer will be drawing on the organization's powerful 20 year record to boost the reach and results of our programs," said Danuta Lockett, Chair of the Board of Directors.

Windsor comes to WfWI after four years at Georgetown University where she served as Associate Dean for Programs in the School of Foreign Service. Under her leadership she oversaw the creation of the Georgetown Initiative for Women, Peace and Security and served as its Interim Director.

"I am excited and humbled by the opportunity to lead Women for Women International, the only organization exclusively dedicated to serving the most marginalized women affected by conflict and war and living in the most difficult places," said Windsor. "The women we serve -- their courage, their strength and their resilience -- are an inspiration to me. I look forward to working with the talented staff and dedicated board members to further advance the mission and reach of Women for Women International."...

\*\*\*\*\*

**Disasters Emergency Committee** [to 15 November 2014]

<http://www.dec.org.uk/>

*[Action Aid, Age International, British Red Cross, CAFOD, Care International, Christian Aid, Concern Worldwide, Islamic Relief, Oxfam, Plan UK, Save the Children, Tearfund and World Vision]*

10/11/2014

[DEC Ebola Crisis Appeal raises £20 million](#)

**EHLRA/R2HC** [to 15 November 2014]

<http://www.elrha.org/news/elrha>

*Website offline...*

**END Fund**

<http://www.end.org/news>

*No new digest content identified*

**GAVI** [to 15 November 2014]

<http://www.gavialliance.org/library/news/press-releases/>

[Record numbers of children protected against leading causes of pneumonia with Gavi support](#)

12 November 2014

"la Caixa" Foundation announces further €1m commitment to support pneumococcal vaccine

**Global Fund** [to 15 November 2014]

<http://www.theglobalfund.org/en/mediacenter/announcements/>

[Norway Signs Multi-Year Contribution to Global Fund](#) 12 November 2014

**ODI** [to 15 November 2014]

<http://www.odi.org/media>

[G20 giving \\$88 billion a year to support fossil fuel exploration – despite pledge to eliminate subsidies – new report](#)

News - 10 November 2014

**The Sphere Project** [to 15 November 2014]

<http://www.sphereproject.org/news/>

*No new digest content identified.*

**Start Network** [Consortium of British Humanitarian Agencies] [to 15 November 2014]

[http://www.start-network.org/news-blog/#.U9U\\_O7FR98E](http://www.start-network.org/news-blog/#.U9U_O7FR98E)

[Three more Start Build projects join the DEPP](#)

November 13, 2014

Three more projects from the Start Network were approved for funding on October 9th by the Disasters and Emergencies Preparedness Programme (DEPP) Board.

The DEPP is a ground-breaking three-year collaboration between Start Network, CDAC-Network and DFID that will invest £40m to improve the quality and speed of humanitarian response in countries at risk of natural disaster or conflict related humanitarian emergencies. It will do this by increasing and strengthening the capacity of the humanitarian system, with a focus on local humanitarian workers at the national level. The DEPP has identified networks critical to developing preparedness capacity, pre-selecting the Start Network and CDAC Network to deliver the majority of the DEPP programme...

\* \* \* \*

### ***:: Foundation/Major Donor Watch***

*We will monitor media releases announcing key initiatives and new research from a growing number of global foundations and donors engaged in the human rights, humanitarian response and development spheres of action. This Watch section is not intended to be exhaustive, but indicative.*

#### **BMGF (Gates Foundation)**

<http://www.gatesfoundation.org/Media-Center/Press-Releases>

*No new digest content identified.*

#### **Ford Foundation**

<http://www.fordfoundation.org/newsroom>

*No new digest content identified.*

#### **William and Flora Hewlett Foundation**

<http://www.hewlett.org/newsroom/search>

*No new digest content identified.*

#### **Conrad N. Hilton Foundation**

<http://www.hiltonfoundation.org/news>

*No new digest content identified.*

#### **Kellogg Foundation**

<http://www.wkkf.org/news-and-media#pp=10&p=1&f1=news>

[Poll of Latino families finds optimism despite many obstacles](#)

Nov. 12. 2014 DALLAS – In partnership with Univision and The Denver Post, the W.K. Kellogg Foundation (WKKF) today released a national survey of 1,000 Latino adults that relates the challenges and successes their families experience living in the United States. Latinos, ranging from new immigrants to long-time U.S. citizens, are keenly aware of discrimination and inequities, but remain optimistic about the future, particularly their economic conditions, personal health status, and the quality of public education for their children....

...Key findings in the poll include:

:: While optimism is seen throughout the survey, there are important, often counterintuitive, differences in demographic groups underscoring the complexity of the Latino experience in the U.S. Immigrants are especially hopeful about the opportunities in their new country on virtually

all issues examined, while U.S.-born Latinos, and those with more education and higher incomes, express more skepticism and disappointment with persistent inequality, or view opportunities as diminishing.

:: Latinos cite a number of conditions that pose limits to socioeconomic advancement. Jobs and economic concerns are consistently cited as the issues that concern them most. Immigration and crime were the second and third most pressing issues. Interestingly, the two groups most optimistic about their financial futures are undocumented immigrants (86 percent) and those at the highest income range (81 percent of those earning over \$75,000 annually).

:: There is concern about unequal treatment by local police, border patrol, and other law enforcement. Sixty-eight percent worry authorities will use excessive force against Latinos; only 26 percent believe they treat Latinos fairly most of the time; 18 percent have Latino friends or family who were victims of police brutality; and 59 percent said there are things they would change about their local police.

:: Latino women are particularly vulnerable to economic troubles. If faced with income losses, more than half could not draw from personal savings (54 percent); secure a loan from a bank (53 percent), nor from family or friends (56 percent). Among men, 73 percent could take on another job or more work hours, but significantly fewer Latinas (61 percent) could do the same. Parents with young children are also at higher-than-average risk: Only 43 percent have personal savings, 49 percent indicate childcare makes their work situation difficult, and 58 percent fear losing their jobs in the next year.

### **MacArthur Foundation**

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

*No new digest content identified.*

### **David and Lucile Packard Foundation**

<http://www.packard.org/about-the-foundation/news/press-releases-and-statements/>

*No new digest content identified.*

### **Rockefeller Foundation**

<http://www.rockefellerfoundation.org/newsroom>

*No new digest content identified.*

### **Robert Wood Johnson Foundation**

<http://www.rwjf.org/en/about-rwjf/newsroom/news-releases.html>

[RWJF and Consumer Reports' healthtaxcredittool.org Explains Financial Help Available to Pay for Health Insurance](http://www.rwjf.org/en/about-rwjf/newsroom/news-releases.html)

November 10, 2014 | News Release

RWJF and Consumer Reports have released a free, easy-to-use tool that helps people learn how to lower the cost of health insurance plans offered through the state marketplaces for 2015 with the advance premium tax credit.

### **Wellcome Trust**

<http://www.wellcome.ac.uk/News/2014/index.htm>

[Dame Kay Davies wins WISE Lifetime Achievement Award](http://www.wellcome.ac.uk/News/2014/index.htm)

14 November 2014

The Wellcome Trust is delighted to congratulate Dame Kay Davies, Dr Lee's Professor of Anatomy, University of Oxford and Deputy Chair of the Trust, on being awarded the 2014 WISE Lifetime Achievement Award.

Presented by Her Royal Highness the Princess Royal, patron of WISE, this award celebrates Dame Kay's achievements, her outstanding career researching Duchenne muscular dystrophy (DMD) and championing other women in science.

The WISE Awards are held annually to celebrate female talent in science, technology and engineering – from classroom to boardroom – and recognise the efforts of advisors, employers and other organisations to encourage and support women in STEM careers. 2014 marks the 30th year of the WISE Campaign...

\* \* \* \*

### **:: Journal Watch**

*The Sentinel will track key peer-reviewed journals which address a broad range of interests in human rights, humanitarian response, health and development. It is not intended to be exhaustive. We will add to those monitored below as we encounter relevant content and upon recommendation from readers. We selectively provide full text of abstracts and other content but note that successful access to some of the articles and other content may require subscription or other access arrangement unique to the publisher. Please suggest additional journals you feel warrant coverage.*

#### **American Journal of Disaster Medicine**

Winter 2014, Volume 9, Number 1

<http://www.pnpco.com/pn03000.html>

[Reviewed earlier]

#### **American Journal of Preventive Medicine**

Volume 47, Issue 5, p531-6815 November 2014

<http://www.ajpmonline.org/current>

[Reviewed earlier]

#### **American Journal of Public Health**

Volume 104, Issue 11 (November 2014)

<http://ajph.aphapublications.org/toc/ajph/current>

[Reviewed earlier]

#### **American Journal of Tropical Medicine and Hygiene**

November 2014; 91 (5)

<http://www.ajtmh.org/content/current>

[Reviewed earlier]

## BMC Health Services Research

(Accessed 15 November 2014)

<http://www.biomedcentral.com/bmchealthservres/content>

Research article

### **Notifiable disease reporting among public sector physicians in Nigeria: a cross-sectional survey to evaluate possible barriers and identify best sources of information**

Kathryn E Lafond<sup>1</sup>\*, Ibrahim Dalhatu<sup>2</sup>, Vivek Shinde<sup>1</sup>, Ekanem E Ekanem<sup>3</sup>, Saidu Ahmed<sup>3</sup>, Patrick Peebles<sup>1</sup>, Mwenda Kudumu<sup>4</sup>, Milele Bynum<sup>4</sup>, Kabiru Salami<sup>4</sup>, Joseph Okeibunor<sup>4</sup>, Pamela Schwingl<sup>4</sup>, Anthony Mounts<sup>15</sup>, Abdulsalami Nasidi<sup>6</sup> and Diane Gross<sup>1</sup>

#### Author Affiliations

BMC Health Services Research 2014, 14:568 doi:10.1186/s12913-014-0568-3

Published: 13 November 2014

#### *Abstract (provisional)*

#### Background

Since 2001, Nigeria has collected information on epidemic-prone and other diseases of public health importance through the Integrated Disease Surveillance and Response system (IDSR). Currently 23 diseases are designated as ?notifiable? through IDSR, including human infection with avian influenza (AI). Following an outbreak of highly pathogenic avian influenza A(H5N1) in Nigerian poultry populations in 2006 and one laboratory confirmed human infection in 2007, a study was carried out to describe knowledge, perceptions, and practices related to infectious disease reporting through the IDSR system, physicians? preferred sources of health information, and knowledge of AI infection in humans among public sector physicians in Nigeria.

#### Methods

During November to December 2008, 245 physicians in six Nigerian cities were surveyed through in-person interviews. Survey components included reporting practices for avian influenza and other notifiable diseases, perceived obstacles to disease reporting, methods for obtaining health-related information, and knowledge of avian influenza among participating physicians.

#### Results

All 245 respondents reported that they had heard of AI and that humans could become infected with AI. Two-thirds (163/245) had reported a notifiable disease. The most common perceived obstacles to reporting were lack of infrastructure/logistics or reporting system (76/245, 31%), lack of knowledge among doctors about how to report or to whom to report (64/245, 26%), and that doctors should report certain infectious diseases (60/245, 24%). Almost all participating physicians (>99%) reported having a cell phone that they currently use, and 86% reported using the internet at least weekly.

#### Conclusions

Although the majority of physicians surveyed were knowledgeable of and had reported notifiable diseases, they identified many perceived obstacles to reporting. In order to effectively identify human AI cases and other infectious diseases through IDSR, reporting system requirements need to be clearly communicated to participating physicians, and perceived obstacles, such as lack of infrastructure, need to be addressed. Future improvements to the reporting system should account for increased utilization of the internet, as well as cell phone and email-based communication.

**BMC Infectious Diseases**

(Accessed 15 November 2014)

<http://www.biomedcentral.com/bmcinfectdis/content>

[No new relevant content]

**BMC Medical Ethics**

(Accessed 15 November 2014)

<http://www.biomedcentral.com/bmcmedethics/content>

[No new relevant content]

**BMC Public Health**

(Accessed 15 November 2014)

<http://www.biomedcentral.com/bmcpublichealth/content>

**BMC Research Notes**

(Accessed 15 November 2014)

<http://www.biomedcentral.com/bmcresnotes/content>

[No new relevant content]

**British Medical Journal**

015 November 2014(vol 349, issue 7981)

<http://www.bmjjournals.org/content/349/7981>

[New issue; No relevant content]

**Brown Journal of World Affairs**

20.1 Fall–Winter 2013

<http://brown.edu/initiatives/journal-world-affairs/>

[Reviewed earlier]

**Bulletin of the World Health Organization**

Volume 92, Number 11, November 2014, 773-848

<http://www.who.int/bulletin/volumes/92/11/en/>

[Reviewed earlier]

**Complexity**

November/December 2014 Volume 20, Issue 2 Pages fmi–fmi, 1–81

<http://onlinelibrary.wiley.com/doi/10.1002/cplx.v20.2/issuetoc>

[Reviewed earlier]

**Conflict and Health**

[Accessed 15 November 2014]  
<http://www.conflictandhealth.com/>  
[No new relevant content]

### **Cost Effectiveness and Resource Allocation**

(Accessed 15 November 2014)  
<http://www.resource-allocation.com/>  
[No new relevant content]

### **Developing World Bioethics**

December 2014 Volume 14, Issue 3 Pages ii–iii, 111–167  
<http://onlinelibrary.wiley.com/doi/10.1111/dewb.2014.14.issue-3/issuetoc>  
[Reviewed earlier]

### **Development in Practice**

Volume 24, Issue 8, 2014  
<http://www.tandfonline.com/toc/cdip20/current>

#### **Best practice for rural food security projects in Southern Africa?**

Terry Leahy\* & Monika Goforth  
DOI:10.1080/09614524.2014.969196  
pages 933-947

##### *Abstract*

It has been widely believed that commercialisation is the solution to food insecurity in rural Africa. Project designs have attempted to set up agricultural cooperatives and encourage entrepreneurial farmers. Yet the problems revealed in the 1950s are still widespread. In a counter-perspective, some have argued for the relevance of subsistence and low-input agriculture. This article examines three NGO projects in South and South-eastern Africa which prioritise food security through household subsistence, using low-input technologies, along with an encouragement to produce a surplus for cash. We look at what these projects share and why their strategies work.

#### **A training approach for community maternal health volunteers that builds sustainable capacity**

Cathy Green\*, Miniratu Soyoola, Mary Surridge & Dynes Kaluba  
DOI:10.1080/09614524.2014.957165  
pages 948-959

##### *Abstract*

This article examines a training approach for community health volunteers which increased access to maternal health services in rural communities in Zambia. The effectiveness of the training approach was evaluated in an operations research component. Skilled birth attendance rates increased by 63% from baseline over a two-year period in the intervention districts, out-performing increases recorded in control sites at statistically significant levels. As a low-cost, high-impact intervention which shows good sustainability potential, the approach is suitable for national level scale-up and for adaptation for use in other countries in support of maternal and new-born health goals.

## **Coordinating post-disaster humanitarian response: lessons from the 2005 Kashmir earthquake, India**

Peer Ghulam Nabi\*

DOI:10.1080/09614524.2014.964187

pages 975-988

### *Abstract*

This article is based on a field study carried out in Indian-administered Kashmir after the 2005 earthquake. In this analysis of how non-governmental development organisations (NGDOs) engage and coordinate with one another and with other disaster response agencies during post-disaster relief and rehabilitation operations, it can be concluded that NGDO coordination was ineffective. The research points out that, even though there is coordination among the international and national NGDOs, local NGDOs are seldom engaged in the overall coordination processes. The paper advocates developing coordination among the humanitarian agencies as a pre-disaster initiative for a more effective collaborative humanitarian disaster response.

## **Disability and Rehabilitation: Assistive Technology**

Volume 9, Number 6 (November 2014)

<http://informahealthcare.com/toc/idt/current>

[Reviewed earlier]

## **Disaster Medicine and Public Health Preparedness**

Volume 8 - Issue 05 - October 2014

<http://journals.cambridge.org/action/displayIssue?jid=DMP&tab=currentissue>

### *Systematic Review*

## **Resilience—Rhetoric to Reality: A Systematic Review of Intervention Studies After Disasters**

Gisela van Kessela<sup>1</sup> [c1](#), Colin MacDougalla<sup>2</sup> and Lisa Gibbsa<sup>3</sup>

a1 School of Health Sciences, University of South Australia, Adelaide, South Australia

a2 Southgate Institute for Health, Society and Equity, and School of Medicine, Flinders University, Adelaide, South Australia & Jack Brockhoff Child Health & Wellbeing Program, University of Melbourne

a3 Jack Brockhoff Child Health & Wellbeing Program, Centre for Health Equity, University of Melbourne, Melbourne, Victoria

### *Abstract*

Objective This report aimed to examine the literature regarding evidence about community-based interventions that use the concept of resilience to increase positive health outcomes after disaster.

Methods A search was conducted of databases; gray literature, public health journals, and available key journals focused on disaster, emergency, and trauma from inception to December 2013. Excluded were non-English publications, only about children or adolescents, or a commentary or theoretical discussion on resilience.

Results From a total of 1880 records, excluding duplicates, 8 studies were found. Exclusions included participants younger than age 18 years (n=74), non-English (n=40), nonempirical (n=265), not referring to disaster (n=188), not a public health intervention (n=319), and not related to an intervention targeting resilience (n=890).

Conclusions This systematic review highlighted a gap in the evidence relating to interventions targeting the resilience of adults who have experienced a disaster. The results were mixed in relation to information provision but promising for strategies that promote social interactions or develop community competence. Future studies could explore the ability of interventions to build the intrinsic capacity of a system, community, or society at risk of a disaster to adapt and survive. (Disaster Med Public Health Preparedness. 2014;0:1-9)

### **Disaster Prevention and Management**

Volume 23 Issue 5

<http://www.emeraldinsight.com/journals.htm?issn=0965-3562&show=latest>

[Reviewed earlier]

### **Disasters**

October 2014 Volume 38, Issue 4 Pages ii–ii, 673–877

<http://onlinelibrary.wiley.com/doi/10.1111/disa.2014.38.issue-4/issuetoc>

[Reviewed earlier]

### **Emergency Medicine Journal**

November 2014, Volume 31, Issue 11

<http://emj.bmjjournals.org/content/current>

[Reviewed earlier]

### **Epidemics**

Volume 9, In Progress (December 2014)

<http://www.sciencedirect.com/science/journal/17554365>

[Reviewed earlier]

### **End of Life Journal**

Summer 2014 Vol 4 Issue 2

<http://endoflifejournal.stchristophers.org.uk/current-issue>

[Reviewed earlier]

### **The European Journal of Public Health**

Volume 24, Issue suppl 2, 01 October 2014

[http://eurpub.oxfordjournals.org/content/24/suppl\\_2](http://eurpub.oxfordjournals.org/content/24/suppl_2)

Supplement: 7th European Public Health Conference

*Introduction to Glasgow 2014*

We are delighted to introduce this supplement to the European Journal of Public Health which contains the abstracts of papers to be presented at the 7th European Public Health Conference. It includes abstracts for the main part of the conference: plenary sessions; oral sessions (including workshops); pitch sessions; and poster walks.

For Glasgow 2014, we have received a new record in abstracts and workshops: 1025 single abstracts and 75 workshops from 68 countries worldwide. This new record posed an extra challenge to the International Scientific Committee, responsible for the reviewing of the abstracts. The International Scientific Committee of the Glasgow 2014 conference consisted of 59 experts from 20 countries and was chaired by Martin McKee from the UK. We are extremely grateful to them for the hard work this involved. The members of the International Scientific ...

## **Food Policy**

Volume 49, Part 1, In Progress (December 2014)  
<http://www.sciencedirect.com/science/journal/03069192>  
[Reviewed earlier]

## **Food Security**

Volume 6, Issue 5, October 2014  
<http://link.springer.com/journal/12571/6/5/page/1>

### **Resource use and food self-sufficiency at farm scale within two agro-ecological zones of Rwanda**

Charles Bucagu, Bernard Vanlauwe, Mark T. Van Wijk, Ken E. Giller

#### *Abstract*

Resource use and management are major determinants of the food self-sufficiency of smallholder farmers in sub-Saharan Africa. A study was conducted in Rwanda in two contrasting agro-ecological zones (Central plateau and Buberuka) to characterise farms, quantify their resource flows, and evaluate the effect of resource management on food self-sufficiency. The Simbi and Kageyo sectors were selected as the representatives of agro-ecological zones and two villages were selected within each sector. Wealth ranking, focus group discussions and formal survey techniques were used. Farms were classified into resource groups (RGs) that differed with regards to socio-economic and food self-sufficiency status. Soils were more fertile in Kageyo (Buberuka) than in Simbi (Central plateau). In both sites 67 % or more of the households were classified in the poorest category who cultivated less than 0.2 ha and experienced 4–5 months of food deficit each year. The partial N balance was more negative in Kageyo ( $-35.87 \text{ kg N ha}^{-1} \text{ year}^{-1}$ ) while the P balance was negative in close fields and outfields but positive in homefields ( $0.43 \text{ kg P ha}^{-1} \text{ year}^{-1}$ ). Calorie and protein availability were insufficient in RG1 (poor resource group) and RG2 (moderate resource group) farms in Simbi and RG1 (poor resource group) in Kageyo. Boundary line analysis indicated that poor soil C contents led to 0.6–0.8 t ha $^{-1}$  less yield with respect to the attainable yield in better fields in RG 2. Closing the maize yield gap would result in doubling the energy and protein intake in Simbi. In such complex agricultural systems, there is a need to apply an integrated and multi-dimensional approach to understand differences among farms, identify limitations to food production and explore realistic options to ensure sustainable agricultural production and food self-sufficiency.

### **Food (In)security and its drivers: insights from trends and opportunities in rural Mozambique**

Athur Mabiso, Benedito Cunquara, Rui Benfica

#### *Abstract*

We used multiple rounds of nationally representative agricultural survey data to analyze the trends and drivers of food insecurity in rural Mozambique. Reduced-form Probit models were

estimated to explain the observed trends as a function of underlying drivers and factors related to agricultural policy interventions. Despite rapid macroeconomic growth, food insecurity in the rural areas had increased from 42.9 % in 2002 to 47.8 % in 2008. Significant inequalities were also observed in the distribution of food insecurity with a substantial disadvantage to the bottom quintile households and rural households located in the Northern provinces. Limited progress on several drivers of agricultural production and food access as well as geographic disparities appear to explain a significant part of the food insecurity trends and distribution. Whether the indicator was use of improved farm inputs and technology, receipt of agricultural extension services, farm production, or cash income, progress did not occur. This implies that to achieve broad-based food security in rural [Mozambique](#), interventions may need to focus on addressing these drivers to increase agricultural productivity while enhancing resilience to price and weather shocks. Interventions must also be spatially targeted and tailored to each segment of the population.

### **Nutrition-sensitive agriculture in Bangladesh: a review**

K. M. M. Rahman, M. A. Islam

#### *Abstract*

This paper reviews the programs and related research on nutrition sensitive agriculture in Bangladesh using available literature. The government has undertaken several policies, including a National Food and Nutrition Policy, in order to make agriculture into a dynamic food-based activity, leading to nutritional security. Among the under-five children in Bangladesh, 41 % are stunted, 16 % are wasted and 36 % are underweight. Land use patterns by farmers have made the country self-sufficient in rice, potato and vegetable production. Milk producers have been playing an important role in fulfilling the nutritional needs of some regions. Non-government organisation's (NGO's) activities are strongly applauded in terms of rural poverty alleviation, employment generation, empowerment of women and food security. The Adivasi Fisheries Project (AFP) is such a project, aimed at upscaling the nutritional status of the poor and ultra-poor in the north-western and northern regions. Women in rural areas are engaged in a vast array of farm and non-farm activities ranging from livestock rearing to household work. The "One-house-one-farm" project, launched by the government, is a successful programme producing diversified fruits and vegetables at homesteads in order to reduce malnutrition of farm families. Finally, this study makes some policy recommendations which will be helpful in further shaping the ongoing efforts to ensure food security.

### **Forum for Development Studies**

Volume 41, Issue 3, 2014

<http://www.tandfonline.com/toc/sfds20/current>

[Reviewed earlier]

### **Genocide Studies International**

Volume 8, Number 2 /2014

<http://utpjournals.metapress.com/content/w67003787140/?p=8becccd89a51b49fc94adf1a5c976>

8f4f&pi=0

[Reviewed earlier]

### **Global Health: Science and Practice (GHSP)**

August 2014 | Volume 2 | Issue 3  
<http://www.ghspjournal.org/content/current>  
[Reviewed earlier]

### **Global Health Governance**

[Accessed 15 November 2014]  
<http://blogs.shu.edu/ghg/category/complete-issues/summer-2013/>  
[No new relevant content]

### **Global Public Health**

Volume 9, Supplement 1, 2014  
<http://www.tandfonline.com/toc/rgph20/.Uq0DgeKy-F9#.U4onnCjDU1w>  
*This Special Supplement is dedicated to all the Afghan and international health workers who sacrificed their lives during the rebuilding of the Afghan health system.*  
[Reviewed earlier]

### **Globalization and Health**

[Accessed 15 November 2014]  
<http://www.globalizationandhealth.com/>  
[No new relevant content]

### **Health Affairs**

November 2014; Volume 33, Issue 11  
<http://content.healthaffairs.org/content/current>  
*Collaborating For Community Health*  
[Reviewed earlier]

### **Health and Human Rights**

Volume 16, Issue 2 December 2014  
<http://www.hhrjournal.org/volume-16-issue-2/>  
*Papers in Press: Special Issue on Health Rights Litigation*  
[Reviewed earlier]

### **Health Economics, Policy and Law**

Volume 9 - Issue 04 - October 2014  
<http://journals.cambridge.org/action/displayIssue?jid=HEP&tab=currentissue>  
[Reviewed earlier]

### **Health Policy and Planning**

Volume 29 Issue 7 October 2014  
<http://heapol.oxfordjournals.org/content/current>

[Reviewed earlier]

**Health Research Policy and Systems**

<http://www.health-policy-systems.com/content>

[Accessed 15 November 2014]

[No new relevant content]

**Human Rights Quarterly**

Volume 36, Number 4, November 2014

[http://muse.jhu.edu/journals/human\\_rights\\_quarterly/toc/hrq.36.4.html](http://muse.jhu.edu/journals/human_rights_quarterly/toc/hrq.36.4.html)

[Reviewed earlier]

**Human Service Organizations Management, Leadership & Governance**

Volume 38, Issue 4, 2014

<http://www.tandfonline.com/toc/wasw21/current#.U0sFzFcWNdc>

[Reviewed earlier]

**Humanitarian Exchange Magazine**

Issue 61 May 2014

<http://www.odihpn.org/humanitarian-exchange-magazine/issue-61>

[Reviewed earlier]

**IDRiM Journal**

Vol 4, No 1 (2014)

<http://idrimjournal.com/index.php/idrim/issue/view/11>

[Reviewed earlier]

**Infectious Diseases of Poverty**

[Accessed 15 November 2014]

<http://www.idpjurnal.com/content>

**International Health**

Volume 6 Issue 3 September 2014

<http://inthealth.oxfordjournals.org/content/6/3.toc>

[Reviewed earlier]

**International Journal of Epidemiology**

Volume 43 Issue 5 October 2014

<http://ije.oxfordjournals.org/content/current>

[Reviewed earlier]

## **International Journal of Disaster Resilience in the Built Environment**

Volume 5 Issue 4

<http://www.emeraldinsight.com/toc/ijdrbe/5/4>

### **Supply chain resilience: a state-of-the-art review and research directions**

Santanu Mandal (Operations & IT, IBS, Hyderabad, India)

DOI: <http://dx.doi.org/10.1108/IJDRBE-03-2013-0003>

Abstract:

Purpose

- The purpose of this paper is to report a comprehensive review of supply chain resilience and identify several research issues.

Design/methodology/approach

- The articles which have been published in international journals in the period 1980-2012 were collected by using databases like ISI Web of Knowledge, ScienceDirect and EBSCO. The articles were scrutinized based on relevance to context and value addition. The articles contributing significantly in the domain of supply chain resilience were selected for final review and various issues were identified.

Findings

- The paper argues that though several conceptual to few empirical works been done on supply chain resilience in recent years, there is large scope for research to address the issues in risk management, supply chain design, sourcing strategies, green practices, sustainable competitive advantage, supply chain security, supply chain performance and supply chain resilience.

Research limitations/implications

- The insights deduced in the paper are primarily based on 45 articles selected for critical review and analysis in the domain of supply chain resilience and hence should be interpreted only as key concerns in the area.

Originality/value

- The paper reports an evaluation of 45 key articles reported in the domain of supply chain resilience and indicates the research opportunities in the area.

## **International Journal of Disaster Risk Reduction**

Volume 10, Part A, In Progress (December 2014)

<http://www.sciencedirect.com/science/journal/22124209/10/part/PA>

[Reviewed earlier]

## **International Journal of Infectious Diseases**

Volume 29, p1 December 2014

<http://www.ijidonline.com/current>

[New issue; No relevant content]

## **International Journal of Mass Emergencies & Disasters**

August 2014 (VOL. 32, NO. 2)

<http://www.ijmed.org/issues/32/2/>

[Reviewed earlier]

**International Journal of Sustainable Development & World Ecology**

Volume 21, Issue 5, 2014

<http://www.tandfonline.com/toc/tsdw20/current#.VFWaWMI4WF9>

[Reviewed earlier]

**International Migration Review**

Fall 2014 Volume 48, Issue 3 Pages 577–917

<http://onlinelibrary.wiley.com/doi/10.1111/imre.2014.48.issue-3/issuetoc>

[Reviewed earlier]

**Intervention – Journal of Mental Health and Psychological Support in Conflict Affected Areas**

November 2014 - Volume 12 - Issue 3 pp: 320-468

<http://journals.lww.com/interventionjnl/pages/currenttoc.aspx>

*Special Section: Rehabilitation processes of former child soldiers*

[Reviewed earlier]

**JAMA**

November 12, 2014, Vol 312, No. 18

<http://jama.jamanetwork.com/issue.aspx>

Viewpoint | November 12, 2014

**[The Ebola Outbreak, Fragile Health Systems, and Quality as a Cure](#)**

Andrew S. Boozary, MD, MPP1; Paul E. Farmer, MD, PhD2; Ashish K. Jha, MD, MPH1,3,4

Author Affiliations

...CONCLUSIONS

Ebola represents a pressing global health crisis, but more are certain to follow. The outcomes of the next several months will reveal the capacity to forge effective partnerships across borders and disciplines, and the extent of the commitment to value all human lives equally. By responding to the crisis with a surge of stopgap solutions, it is possible (although unlikely) that such an approach could eventually stem the epidemic and end the morbidity and mortality for this current outbreak. Alternatively, responding to Ebola with a broader approach that involves meaningful investments in the provision of health care staff, resources, and systems could succeed now and help create sustainable models for the future. If the approach involves reengineering health systems around the patient, there remains an opportunity to bring lasting progress for those who need it most.

**JAMA Pediatrics**

November 2014, Vol 168, No. 11

<http://archpedi.jamanetwork.com/issue.aspx>

[Reviewed earlier]

**Journal of Community Health**

Volume 39, Issue 6, December 2014  
<http://link.springer.com/journal/10900/39/6/page/1>  
[Reviewed earlier]

**Journal of Development Economics**  
Volume 111, In Progress (November 2014)  
<http://www.sciencedirect.com/science/journal/03043878/110>  
[Reviewed earlier]

**Journal of Epidemiology & Community Health**  
December 2014, Volume 68, Issue 12  
<http://jech.bmjjournals.org/content/current>  
[Reviewed earlier]

**Journal of Global Ethics**  
Volume 10, Issue 1, 2014  
<http://www.tandfonline.com/toc/rjge20/current#.U2V-Elf4L0I>  
**Tenth Anniversary Forum: The Future of Global Ethics**  
[Reviewed earlier]

**Journal of Health Care for the Poor and Underserved (JHCPU)**  
Volume 25, Number 3, August 2014  
[http://muse.jhu.edu/journals/journal\\_of\\_health\\_care\\_for\\_the\\_poor\\_and\\_underserved/toc/hpu.25.3.html](http://muse.jhu.edu/journals/journal_of_health_care_for_the_poor_and_underserved/toc/hpu.25.3.html)  
[Reviewed earlier]

**Journal of Humanitarian Logistics and Supply Chain Management**  
Volume 4 Issue 2  
<http://www.emeraldinsight.com/toc/jhlscm/4/2>  
**Classifying logistics-relevant disasters: conceptual model and empirical illustration**  
Cécile L'Hermitte (Australian Maritime College, National Centre for Ports and Shipping, University of Tasmania, Launceston, Australia)  
Peter Tatham (Department of International Business and Asian Studies, Griffith Business School, Gold Coast, Australia)  
Marcus Bowles (Australian Maritime College, University of Tasmania, Launceston, Australia)  
**Abstract:**  
Purpose  
– The purpose of this paper is to use a theory-based approach to develop a new classification model for disasters that reflects their logistics implications, and to contextualise the findings by applying the model to a particular disaster situation.  
Design/methodology/approach

- A widespread literature review was conducted in order to conceptualise the proposed disaster classification model and a case study (the 2011-2012 Somali food crisis) was used to provide a practical illustration and an initial validation of the conceptual approach.

#### Findings

- The new classification model proposes a set of four categories of disasters based on two generic dimensions, whilst simultaneously integrating five situational factors that reflect the impact of the external environment on the logistics operations. The case study confirms that this systemic approach is necessary since, from a logistics perspective, a disaster should be considered in its entirety and within its contextual environment.

#### Research limitations/implications

- Further research is needed to establish the operational characteristics of each disaster type in order to determine the applicability of business logistics practices to each scenario. In addition, this paper highlights the opportunity to validate or refine the model by using a more varied range of case studies.

#### Originality/value

- This paper proposes a new classification model for disasters based on their logistics implications and, by integrating the key environmental factors, it moves beyond the traditional 2x2 model found in the literature.

### **Performance measurement in humanitarian logistics: a customer-oriented approach**

Sarah Schiffling (Logistics Research Centre, Heriot-Watt University, Edinburgh, UK)

Maja Piecyk (Logistics Research Centre, Heriot-Watt University, Edinburgh, UK)

#### *Abstract:*

#### Purpose

- The purpose of this paper is to develop a performance measurement framework that takes into account the key stakeholders of the logistics departments or personnel in humanitarian organisations. It reflects their views and characteristics by adapting the balanced scorecard (BSC) to this environment. The key stakeholders are identified using the stakeholder salience framework by Mitchell et al. (1997).

#### Design/methodology/approach

- This is a conceptual paper based on a systematic literature review on stakeholders, customers and performance measurement in humanitarian supply chains.

#### Findings

- Beneficiaries are the customers that are the reason for the existence of humanitarian supply chains. Donors are the stakeholder group with the highest salience due to the greatest amount of power. Both groups have their own interests, creating a challenging environment for performance measurement. Standard business tools such as the BSC have to be adapted accordingly to be useful in this environment.

#### Research limitations/implications

- This paper is conceptual and the proposed framework is yet to be tested empirically.

#### Practical implications

- The proposed framework can help humanitarian organisations focus on the aspects of performance that are most relevant to their key customer groups.

#### Originality/value

- The research brings together the complexities of humanitarian supply chains with the increasing customer focus that can be seen in commercial service supply chains. Based on an assessment of stakeholder salience, the difference in key customer groups is analysed. The resulting framework provides indications for balancing their diverging needs

## **Journal of Immigrant and Minority Health**

Volume 16, Issue 6, December 2014

<http://link.springer.com/journal/10903/16/6/page/1>

*Special Issue Focus: Mental Health and Wellness*

### **Specific Trauma Subtypes Improve the Predictive Validity of the Harvard Trauma Questionnaire in Iraqi Refugees**

Bengt B. Arnetz, Carissa L. Broadbridge...

### **The Prevalence of Torture and Associated Symptoms in United States Iraqi Refugees**

Cynthia L. Willard, Mara Rabin, Martha Lawless

#### *Abstract*

Iraqi refugees face difficulties resettling in the US, which may be partially due to high rates of torture. This study determines the rates of torture experience, primary and secondary, among Iraqi refugees in the US; and the association to physical and mental health symptoms on arrival. A retrospective review was conducted in 2011 on the post-arrival health screens of Iraqi refugees resettled in Utah in 2008 and 2009. Measures included reports of torture experience as defined by the United Nations; reports of physical and mental health symptoms at the time of screening; and association of torture to the presence of symptoms on arrival. The study included the health screens of 497 (97 %) of eligible Iraqi refugees. Most experienced torture (56 %) before arrival in the US Logistic regression revealed that torture was the most significant predictor of mental illness symptoms. Iraqi refugees in the US have a high prevalence of torture, and torture is associated with the presence of both mental and physical symptoms on the post-arrival health screen. This information is critical to the development of successful resettlement strategies for Iraqi refugees.

## **Journal of Immigrant & Refugee Studies**

Volume 12, Issue 4, 2014

<http://www.tandfonline.com/toc/wimm20/current#.VFWeF8I4WF9>

*Special Issue: New Forms of Intolerance in European Political Life*

[Reviewed earlier]

## **Journal of Infectious Diseases**

Volume 210 Issue 11 December 1, 2014

<http://jid.oxfordjournals.org/content/current>

[New issue; No relevant content]

## **Journal of International Development**

November 2014 Volume 26, Issue 8 Pages 1097–1196

<http://onlinelibrary.wiley.com/doi/10.1002/jid.v26.8/issuetoc>

*Special Issue: Policy Arena: Papers from DSA Conference, University of Birmingham, November 2013*

*Research Article*

### **HOW IS DISASTER AID ALLOCATED WITHIN POOR COMMUNITIES? RISK SHARING AND SOCIAL HIERARCHY**

Yoshito Takasaki\*

Article first published online: 7 JAN 2014

DOI: 10.1002/jid.2985

*Abstract*

How disaster aid is allocated within poor communities is little understood. Using original post-disaster survey data in rural Fiji that capture household-level traditional kin status, cyclone damage and aid allocations over post-disaster phases, this paper demonstrates that allocations are driven by informal risk-sharing institutions and social hierarchies. On one hand, in response to a disaster with moderate severity, private risk sharing can strongly make up limited aid, making targeting aid on damage appear weak as a result. On the other hand, local elites can dominate not only aid allocation for given damage but also the targeting on damage

*Research Article*

**WOMEN'S EMPOWERMENT AS A DEVELOPMENT GOAL: TAKING A FEMINIST STANDPOINT**

Sarah Mosedale\*

Article first published online: 18 OCT 2014

DOI: 10.1002/jid.3050

*Abstract*

In this paper, through a case study of a large international non-governmental organisation, I identify a number of contradictions and tensions that arise when development agencies attempt to foster 'women's empowerment'. Despite their presentation as apolitical, agencies are inescapably involved in relations of power, and their lack of attention to this is not accidental. In such cases, 'empowerment' risks becoming a signifier of righteousness—part of the process of mystification of dominant group interests. The paper discusses how developing a feminist standpoint could help avoid such mystification. However, such a process is one which cannot be prescribed but must be freely chosen.

*DSA Conference 2013 Special Issue*

**WHO WANTS TO GIVE FOREVER? GIVING MEANING TO SUSTAINABILITY IN DEVELOPMENT**

Ben Taylor\*

Article first published online: 5 NOV 2014

DOI: 10.1002/jid.3033

*Abstract*

This paper argues strongly in favour of a re-examination of the term 'sustainability' in international development research, policy and practice. It demonstrates that the term is understood pluralistically, being both environmental and economic. Within economic interpretations, this paper identifies three clear understandings of 'sustainability', which effect programme design and, ultimately, their impact on poverty significantly. The paper argues that the ramifications of this definition go far beyond semantics and have a significant impact on the development outcomes realised by programmes that incorporate the term. Having evaluated these conceptions, the paper argues for sustainability in development as being interventions that alter the causes of poverty so that the process through which change occurs is improved in an adaptive and permanent way, a permanent increase in adaptability. Evidence is drawn from a review of the literature and policy documentation.

**The Journal of Law, Medicine & Ethics**

Fall 2014 Volume 42, Issue 3 Pages 280–401

<http://onlinelibrary.wiley.com/doi/10.1111/jlme.2014.42.issue-3/issuetoc>

*Special Issue: SYMPOSIUM: Concussions and Sports*  
[Reviewed earlier]

**Journal of Medical Ethics**  
November 2014, Volume 40, Issue 11  
<http://jme.bmjjournals.org/content/current>  
[Reviewed earlier]

**Journal of Policy and Complex Systems**  
Volume 1, Issue 1, pages 4-21 Spring 2014  
<http://www.ipsonet.org/publications/open-access/policy-and-complex-systems/policy-and-complex-systems-volume-1-issue-1-spring-2014>  
[Reviewed earlier]

**Journal of Public Health Policy**  
Volume 35, Issue 4 (November 2014)  
<http://www.palgrave-journals.com/jphp/journal/v35/n4/index.html>  
[Reviewed earlier]

**Journal of the Royal Society – Interface**  
December 6, 2014; 11 (101)  
<http://rsif.royalsocietypublishing.org/content/current>  
[No new relevant content]

**Journal of Sustainable Development**  
Vol 7, No 5 October 2014  
<http://www.ccsenet.org/journal/index.php/jsd/issue/current>  
[Reviewed earlier]

**Knowledge Management for Development Journal**  
Vol 10, No 2 (2014)  
<http://journal.km4dev.org/journal/index.php/km4dj/index>  
[Reviewed earlier]

**The Lancet**  
Nov 15, 2014 Volume 384 Number 9956 p1721 - 1820  
<http://www.thelancet.com/journals/lancet/issue/current>  
*Editorial*  
**[Feeding the world sustainably](#)**  
The Lancet  
*Preview /*

Good nutrition is fundamental to human health and wellbeing, yet according to the latest estimates from the UN Food and Agriculture Organization (FAO), about 805 million people—more than a tenth of the world's population—remain chronically undernourished. In 2013, 161 million children younger than 5 years were affected by stunting, and 51 million by wasting. Undernourishment is the main underlying cause of death in this age group, accounting for 45% of child deaths worldwide. Meanwhile, more than 2 billion people are affected by deficiencies of micronutrients such as iodine, vitamin A, zinc, and iron.

### **The Lancet Global Health**

Nov 2014 Volume 2 Number 11 e616 – 671

<http://www.thelancet.com/journals/langlo/issue/current>

[Reviewed earlier]

### **The Lancet Infectious Diseases**

Nov 2014 Volume 14 Number 11 p1023 - 1162

<http://www.thelancet.com/journals/laninf/issue/current>

[Reviewed earlier]

### **Maternal and Child Health Journal**

Volume 18, Issue 9, November 2014

<http://link.springer.com/journal/10995/18/9/page/1>

[Reviewed earlier]

### **The Milbank Quarterly**

*A Multidisciplinary Journal of Population Health and Health Policy*

September 2014 Volume 92, Issue 3 Pages 407–631

[http://onlinelibrary.wiley.com/journal/10.1111/\(ISSN\)1468-0009/currentissue](http://onlinelibrary.wiley.com/journal/10.1111/(ISSN)1468-0009/currentissue)

[Reviewed earlier]

### **Nature**

Volume 515 Number 7526 pp163-304 13 November 2014

[http://www.nature.com/nature/current\\_issue.html](http://www.nature.com/nature/current_issue.html)

#### **Ethical dilemma for Ebola drug trials**

Public-health officials split on use of control groups in tests of experimental treatments.

Erika Check Hayden

11 November 2014

With clinical trials of experimental Ebola treatments set to begin in December, public-health officials face a major ethical quandary: should some participants be placed in a control group that receives only standard symptomatic treatment, despite a mortality rate of around 70% for Ebola in West Africa?

Two groups planning trials in Guinea and Liberia are diverging on this point, and key decisions for both are likely to come this week. US researchers meet on 11 November at the National Institutes of Health (NIH) in Bethesda, Maryland, to discuss US-government sponsored

trials. A separate group is gathering at the World Health Organization (WHO) in Geneva, Switzerland, on 11 and 12 November to confer on both the US effort and trials organized by the WHO with help from African and European researchers and funded by the Wellcome Trust and the European Union.

Experts convened by the WHO in August gave ethics approval to test experimental treatments amid the Ebola epidemic in West Africa. But the WHO trial organizers are not including control arms because most African patients treated with 'standard of care' — which includes fluid-replacement therapy, pain relief and drugs to ward off secondary infections — die. A trial in Guinea of 'convalescent serum', a blood product thought to include protective antibodies, will only assign a patient to a control group if there is no available serum matched to that person's blood type.

"These trials will be conducted in a context of fear, distrust, a lack of effective care options, the admission of multiple family members to the same centre, and sometimes violence against health-care workers," says Peter Horby, an epidemiologist at the University of Oxford, UK. "Scientific arguments cannot tell us what will work in these conditions."

Organizers of the US-government-led trial disagree that every patient should receive experimental treatment, arguing that it will not necessarily be better than standard care. "The idea that there's no need for randomized, controlled trials presupposes that the drugs have zero side effects, that they are efficacious, and that there's no substantial variability from patient to patient," says Clifford Lane, deputy director for clinical research and special projects at the US National Institute of Allergy and Infectious Diseases in Bethesda, Maryland. "I don't think any of that is true."

Several experimental interventions, including convalescent serum and the antibody cocktail ZMapp, have been given to patients in the United States, but they have been used at different stages of the disease. As a result, it is not clear whether the treatments improved patients' outcomes.

That is one motivation for the upcoming US trial, which will be run among three treatment centres that have cared for people with Ebola: the NIH Clinical Center, Emory University in Atlanta, Georgia, and the University of Nebraska Medical Center in Omaha. "The idea is to talk about whether we might do this in a more systematic way at these three units," Lane says. The NIH is in discussions with Liberian officials that may lead to a similar clinical trial there.

Both the US and WHO trials will use 'adaptive' designs that aim to determine quickly whether an intervention is effective. The US effort will probably employ a 'master protocol' to compare various treatments against a standard-of-care arm, says Edward Cox, director of the antimicrobial products division of the US Food and Drug Administration's Center for Drug Evaluation and Research in Silver Spring, Maryland.

Officials at the two meetings this week will make decisions about which interventions to test on the basis of the limited evidence about potential benefits and side effects, drug availability, and ease of administration in West Africa. Some groups have moved ahead with trials of medications approved for other purposes; the non-profit medical-aid organization EMERGENCY, based in Milan, Italy, is planning to test the cardiac drug amiodarone at an Ebola treatment centre outside Freetown in Sierra Leone.

The choices about which drugs to test have been made more urgent by recent news that the Ebola epidemic may be waning in some regions, especially in Liberia. "There are going to be a limited number of places where you can actually do trials," says Ripley Ballou, the head of Ebola vaccine research at GlaxoSmithKline's vaccine division in Rixensart, Belgium. "It's conceivable that there could be a backlog."

But Piero Olliaro, head of intervention and implementation research on neglected tropical diseases at the WHO, does not think that this will pose a problem. Because Ebola is so deadly, he says, a treatment's efficacy can be determined by testing it on as few as 100–150 people. "Patients are dying every day that we spend debating these issues," he says. "We all share already the responsibility of not having answered these questions before the epidemic, so that we could have started studies right from the beginning."

*Nature / Comment*

### **[Infectious disease: Tough choices to reduce Ebola transmission](#)**

Christopher J. M. Whitty, [Jeremy Farrar](#), [Neil Ferguson](#), [W. John Edmunds](#), [Peter Piot](#), [Melissa Leach](#) & [Sally C. Davies](#)

06 November 2014

Christopher J. M. Whitty and colleagues explain why the United Kingdom is funding many small community centres to isolate suspected cases in Sierra Leone.

## **New England Journal of Medicine**

November 13, 2014 Vol. 371 No. 20

<http://www.nejm.org/toc/nejm/medical-journal>

*Original Article*

### **[Effects of Vaccination on Invasive Pneumococcal Disease in South Africa](#)**

Anne von Gottberg, M.B., B.Ch., Ph.D., Linda de Gouveia, N.D., M.T., Stefano Tempia, D.V.M., Ph.D., Vanessa Quan, M.B., B.Ch., M.P.H., Susan Meiring, M.B., Ch.B., Claire von Mollendorf, M.B., B.Ch., Shabir A. Madhi, M.B., B.Ch., Ph.D., Elizabeth R. Zell, M.Stat., Jennifer R. Verani, M.D., M.P.H., Katherine L. O'Brien, M.D., M.P.H., Cynthia G. Whitney, M.D., M.P.H., Keith P. Klugman, M.B., B.Ch., Ph.D., and Cheryl Cohen, M.B., B.Ch. for the GERMS-SA Investigators  
N Engl J Med 2014; 371:1889-1899 November 13, 2014 DOI: 10.1056/NEJMoa1401914

*Abstract*

#### **Background**

In South Africa, a 7-valent pneumococcal conjugate vaccine (PCV7) was introduced in 2009 with a three-dose schedule for infants at 6, 14, and 36 weeks of age; a 13-valent vaccine (PCV13) replaced PCV7 in 2011. In 2012, it was estimated that 81% of 12-month-old children had received three doses of vaccine. We assessed the effect of vaccination on invasive pneumococcal disease.

#### **Methods**

We conducted national, active, laboratory-based surveillance for invasive pneumococcal disease. We calculated the change in the incidence of the disease from a prevaccine (baseline) period (2005 through 2008) to postvaccine years 2011 and 2012, with a focus on high-risk age groups.

#### **Results**

Surveillance identified 35,192 cases of invasive pneumococcal disease. The rates among children younger than 2 years of age declined from 54.8 to 17.0 cases per 100,000 person-years from the baseline period to 2012, including a decline from 32.1 to 3.4 cases per 100,000 person-years in disease caused by PCV7 serotypes (–89%; 95% confidence interval [CI], –92 to –86). Among children not infected with the human immunodeficiency virus (HIV), the estimated incidence of invasive pneumococcal disease caused by PCV7 serotypes decreased by 85% (95% CI, –89 to –79), whereas disease caused by nonvaccine serotypes increased by 33% (95% CI, 15 to 48). Among adults 25 to 44 years of age, the rate of PCV7-serotype

disease declined by 57% (95% CI, -63 to -50), from 3.7 to 1.6 cases per 100,000 person-years.

#### Conclusions

Rates of invasive pneumococcal disease among children in South Africa fell substantially by 2012. Reductions in the rates of disease caused by PCV7 serotypes among both children and adults most likely reflect the direct and indirect effects of vaccination. (Funded by the National Institute for Communicable Diseases of the National Health Laboratory Service and others.)

### **Nonprofit and Voluntary Sector Quarterly**

December 2014; 43 (6)

<http://nvs.sagepub.com/content/current>

#### **Beyond Grantmaking - Philanthropic Foundations as Agents of Change and Institutional Entrepreneurs**

Rand Quinn<sup>1</sup>, Megan Tompkins-Stange<sup>2</sup>, Debra Meyerson<sup>3</sup>

<sup>1</sup>University of Pennsylvania, Philadelphia, PA, USA

<sup>2</sup>University of Michigan, Ann Arbor, MI, USA

<sup>3</sup>Stanford University, Stanford, CA, USA

#### *Abstract*

Studies examining the role of philanthropic foundations in advancing social change have primarily focused on the impact of foundations' financial resources. Few scholars have analyzed how foundations also leverage social mechanisms to advance and legitimate desired change. We conceptualize philanthropic foundations as agents of change known as institutional entrepreneurs to illuminate the social mechanisms they employ in pursuit of institutional change. We study the case of charter schools within the field of U.S. public education, where foundations elevated a new organizational form—the charter management organization—by engaging in three social mechanisms: recombining cultural elements to establish the form, enforcing evaluative frameworks to assess the form, and sponsoring new professionals to populate the form with preferred expertise. We argue that foundations are distinctive due to their ability to simultaneously pursue social mechanisms that are often considered to be the realms of different types of institutional entrepreneurs

#### **Performance Measurement Challenges in Nonprofit Human Service Organizations**

Sarah Carnochan<sup>1</sup>, Mark Samples<sup>1</sup>, Michael Myers<sup>2</sup>, Michael J. Austin<sup>1</sup>

<sup>1</sup>University of California, Berkeley, USA

<sup>2</sup>Techsperience, Oakland, CA, USA

#### *Abstract*

This qualitative study examines the experiences of four nonprofit human service organizations engaging in performance measurement processes to satisfy accountability requirements and increase organizational and program effectiveness. Nonprofits are increasingly required to respond to performance measurement mandates issuing from multiple sources. However, many of the recommended strategies have been developed in the for-profit and public sectors, and are less appropriate or feasible for nonprofit organizations. Three central findings emerged from interviews, focus groups, and review of archival data. First, the complexity of human change processes and the variation among individual clients complicate efforts to define client outcomes. Second, staff skills play a critical role in effective utilization of data systems. Third, organizational strategies to support performance measurement include incorporating user perspectives into system design and providing adequate staff access to data.

## **The Flow of Management Practices - An Analysis of NGO Monitoring and Evaluation Dynamics**

Jeffery H. Marshall<sup>1</sup>, David Suárez<sup>2</sup>

<sup>1</sup>EdCaminos, San Miguel de Allende, Guanajuato, México

<sup>2</sup>University of Washington, Seattle, WA, USA

### *Abstract*

Which characteristics of NGOs are associated with the adoption of modern management practices and to what extent have those practices become standardized? Based on a national sample of 135 international and local NGOs operating in Cambodia, we address these questions by analyzing the dynamics of “monitoring and evaluation” (M&E), a term used to describe a broad range of activities that NGOs undertake to track, understand, and assess their work. We provide an overview of monitoring and evaluation in a developing country setting, investigate the factors associated with more extensive (or sophisticated) M&E using multivariate analysis, and look at how M&E practices vary between local and international NGOs. Findings demonstrate that professionalization, resource dependence, and social embeddedness all play important roles in explaining the activities of NGOs operating in Cambodia. The analysis also suggests that the flow of management practices in the NGO sector differs for local and international actors.

## **Oxford Monitor of Forced Migration**

OxMo Volume 4, No. 1 May 2014

<http://oxmofm.com/current-issue/>

[Reviewed earlier]

## **The Pediatric Infectious Disease Journal**

November 2014 - Volume 33 - Issue 11 pp: 1103-1209,e273-e315

<http://journals.lww.com/pidj/pages/currenttoc.aspx>

[Reviewed earlier]

## **PLoS One**

[Accessed 15 November 2014]

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

### **Perception of Human Papillomavirus Infection, Cervical Cancer and HPV Vaccination in North Indian Population**

Showket Hussain, Vilas Nasare, Malasha Kumari, Shashi Sharma, Mohammad Ajaz Khan mail, Bhudev C. Das, Mausumi Bharadwaj mail

Published: November 11, 2014

DOI: 10.1371/journal.pone.0112861

### *Abstract*

### *Background*

Human Papillomavirus (HPV) -associated cervical cancer is the second-most common cancer in women worldwide but it is the most frequent gynaecological cancer and cancer associated death in India women. The objective of this study was to assess knowledge about cervical cancer, HPV, HPV vaccine, HPV vaccine acceptance among school and undergraduates students

and their parent's perception about acceptance of HPV vaccine in Northern part of India (Delhi and NCR regions).

#### Materials and Methods

A qualitative questionnaire based survey among 2500 urban/rural students aged 12–22 years was conducted.

#### Results

Overall, a low frequency (15%) of HPV and cervical cancer awareness was observed in students and their parents. However, the awareness was much higher in females belonging to urban setup compared to boys with a perception that HPV causes cervical cancer in women only.

Additionally, only (13%) participants who were aware of cervical cancer and HPV were willing to accept HPV vaccination. Apparently, parents of female students were two times more willing to accept HPV vaccination for their ward than male students ( $p<0.001$ ; OR 95%CI = 2.09 (1.58–2.76).

#### Conclusion

Cervical cancer and HPV awareness among school, undergraduate students and also to their parents was found to be very low in this part of India. The level of awareness and education appears to be insignificant determinants in rural compared to urban setup. Better health education will be needed to maximize public awareness for cervical cancer prevention.

### **PLOS Currents: Disasters**

[Accessed 15 November 2014]

<http://currents.plos.org/disasters/>

[No new relevant content]

### **PLoS Medicine**

(Accessed 15 November 2014)

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

[No new relevant content]

### **PLoS Neglected Tropical Diseases**

(Accessed 15 November 2014)

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

*Review*

#### [\*\*The Global One Health Paradigm: Challenges and Opportunities for Tackling Infectious Diseases at the Human, Animal, and Environment Interface in Low-Resource Settings\*\*](#)

Wondwossen A. Gebreyes mail, Jean Dupouy-Camet, Melanie J. Newport, Celso J. B. Oliveira, Larry S. Schlesinger, Yehia M. Saif, Samuel Kariuki, Linda J. Saif, William Saville, Thomas

Wittum, Armando Hoet, Sylvain Quessy, Rudovick Kazwala, [ ... ], Lonnie J. King , [ view all ]

Published: November 13, 2014

DOI: 10.1371/journal.pntd.0003257

*Abstract*

Zoonotic infectious diseases have been an important concern to humankind for more than 10,000 years. Today, approximately 75% of newly emerging infectious diseases (EIDs) are zoonoses that result from various anthropogenic, genetic, ecologic, socioeconomic, and climatic

factors. These interrelated driving forces make it difficult to predict and to prevent zoonotic EIDs. Although significant improvements in environmental and medical surveillance, clinical diagnostic methods, and medical practices have been achieved in the recent years, zoonotic EIDs remain a major global concern, and such threats are expanding, especially in less developed regions. The current Ebola epidemic in West Africa is an extreme stark reminder of the role animal reservoirs play in public health and reinforces the urgent need for globally operationalizing a One Health approach. The complex nature of zoonotic diseases and the limited resources in developing countries are a reminder that the need for implementation of Global One Health in low-resource settings is crucial. The Veterinary Public Health and Biotechnology (VPH-Biotec) Global Consortium launched the International Congress on Pathogens at the Human-Animal Interface (ICOPHAI) in order to address important challenges and needs for capacity building. The inaugural ICOPHAI (Addis Ababa, Ethiopia, 2011) and the second congress (Porto de Galinhas, Brazil, 2013) were unique opportunities to share and discuss issues related to zoonotic infectious diseases worldwide. In addition to strong scientific reports in eight thematic areas that necessitate One Health implementation, the congress identified four key capacity-building needs: (1) development of adequate science-based risk management policies, (2) skilled-personnel capacity building, (3) accredited veterinary and public health diagnostic laboratories with a shared database, and (4) improved use of existing natural resources and implementation. The aim of this review is to highlight advances in key zoonotic disease areas and the One Health capacity needs.

### **Achieving Population-Level Immunity to Rabies in Free-Roaming Dogs in Africa and Asia**

Michelle K. Morters mail, Trevelyan J. McKinley, Daniel L. Horton, Sarah Cleaveland, Johan P. Schoeman, Olivier Restif, Helen R. Whay, Amelia Goddard, Anthony R. Fooks, I. Made amriyasa, James L. N. Wood

Published: November 13, 2014

DOI: 10.1371/journal.pntd.0003160

#### *Abstract*

Canine rabies can be effectively controlled by vaccination with readily available, high-quality vaccines. These vaccines should provide protection from challenge in healthy dogs, for the claimed period, for duration of immunity, which is often two or three years. It has been suggested that, in free-roaming dog populations where rabies is endemic, vaccine-induced protection may be compromised by immuno-suppression through malnutrition, infection and other stressors. This may reduce the proportion of dogs that seroconvert to the vaccine during vaccination campaigns and the duration of immunity of those dogs that seroconvert.

Vaccination coverage may also be limited through insufficient vaccine delivery during vaccination campaigns and the loss of vaccinated individuals from populations through demographic processes. This is the first longitudinal study to evaluate temporal variations in rabies vaccine-induced serological responses, and factors associated with these variations, at the individual level in previously unvaccinated free-roaming dog populations. Individual-level serological and health-based data were collected from three cohorts of dogs in regions where rabies is endemic, one in South Africa and two in Indonesia. We found that the vast majority of dogs seroconverted to the vaccine; however, there was considerable variation in titres, partly attributable to illness and lactation at the time of vaccination. Furthermore, >70% of the dogs were vaccinated through community engagement and door-to-door vaccine delivery, even in Indonesia where the majority of the dogs needed to be caught by net on successive occasions for repeat blood sampling and vaccination. This demonstrates the feasibility of achieving population-level immunity in free-roaming dog populations in rabies-endemic regions. However,

attrition of immune individuals through demographic processes and waning immunity necessitates repeat vaccination of populations within at least two years to ensure communities are protected from rabies. These findings support annual mass vaccination campaigns as the most effective means to control canine rabies.

#### *Author Summary*

Canine-mediated rabies is a horrific disease that claims tens of thousands of human lives every year, particularly in Asia and Africa. The disease can be effectively controlled through mass vaccination of dogs with high-quality vaccines; however, questions remain over the effectiveness of vaccination where the health status of free-roaming dogs may be compromised and the life expectancy and access to these dogs may be limited. This study evaluated rabies-vaccine induced immune responses and vaccine delivery in previously unvaccinated, free-roaming dog populations in two rabies endemic regions in Asia and Africa, to better understand the effectiveness of vaccination campaigns. We found that the majority of dogs seroconverted to the vaccine regardless of health status. Excellent vaccination coverage was achieved through community engagement and door-to-door vaccine delivery, even where the majority of the dogs needed to be caught by net for vaccination. However, attrition of immune individuals through demographic processes and waning immunity reinforces the importance of frequent and regular vaccination campaigns to ensure effective vaccination coverage is maintained.

## **PNAS - Proceedings of the National Academy of Sciences of the United States of America**

(Accessed 15 November 2014)

<http://www.pnas.org/content/early/>

### **Effects of temperature and precipitation variability on the risk of violence in sub-Saharan Africa, 1980–2012**

John O'Loughlin<sup>1</sup>, Andrew M. Linke<sup>a</sup>, and Frank D. W. Witmer<sup>b</sup>

#### Author Affiliations

Edited by B. L. Turner, Arizona State University, Tempe, AZ, and approved October 9, 2014

#### *Significance*

A robust debate about the effects of climate change on conflict occurrences has attained wide public and policy attention, with sub-Saharan Africa generally viewed as most susceptible to increased conflict risk. Using a new disaggregated dataset of violence and climate anomaly measures (temperature and precipitation variations from normal) for sub-Saharan Africa 1980–2012, we consider political, economic, and geographic factors, not only climate metrics, in assessing the chances of increased violence. The location and timing of violence are influenced less by climate anomalies than by key political, economic, and geographic factors. Overall, the temperature effect is statistically significant, but important inconsistencies in the relationship between temperature extremes and conflict are evident in more nuanced relationships than have been previously identified.

#### *Abstract*

Ongoing debates in the academic community and in the public policy arena continue without clear resolution about the significance of global climate change for the risk of increased conflict. Sub-Saharan Africa is generally agreed to be the region most vulnerable to such climate impacts. Using a large database of conflict events and detailed climatological data covering the period 1980–2012, we apply a multilevel modeling technique that allows for a more nuanced understanding of a climate–conflict link than has been seen heretofore. In the aggregate, high temperature extremes are associated with more conflict; however, different types of conflict

and different subregions do not show consistent relationship with temperature deviations. Precipitation deviations, both high and low, are generally not significant. The location and timing of violence are influenced less by climate anomalies (temperature or precipitation variations from normal) than by key political, economic, and geographic factors. We find important distinctions in the relationship between temperature extremes and conflict by using multiple methods of analysis and by exploiting our time-series cross-sectional dataset for disaggregated analyses.

### **[The ecology of religious beliefs](#)**

Carlos A. Botero<sup>a,b,1</sup>, Beth Gardner<sup>c</sup>, Kathryn R. Kirbyd, Joseph Bulbuliae, Michael C. Gavinf, and Russell D. Grayg,<sup>h,i</sup>Author Affiliations

Edited by Ara Norenzayan, University of British Columbia, Vancouver, Canada, and accepted by the Editorial Board October 10, 2014 (received for review May 11, 2014)

#### *Significance*

Here we show that the spatial prevalence of human societies that believe in moralizing high gods can be predicted with a high level of accuracy (91%) from historical, social, and ecological data. Using high-resolution datasets, we systematically estimate the relative effects of resource abundance, ecological risk, cultural diffusion, shared ancestry, and political complexity on the global distribution of beliefs in moralizing high gods. The methods presented in this paper provide a blueprint for how to leverage the increasing wealth of ecological, linguistic, and historical data to understand the forces that have shaped the behavior of our own species.

#### *Abstract*

Although ecological forces are known to shape the expression of sociality across a broad range of biological taxa, their role in shaping human behavior is currently disputed. Both comparative and experimental evidence indicate that beliefs in moralizing high gods promote cooperation among humans, a behavioral attribute known to correlate with environmental harshness in nonhuman animals. Here we combine fine-grained bioclimatic data with the latest statistical tools from ecology and the social sciences to evaluate the potential effects of environmental forces, language history, and culture on the global distribution of belief in moralizing high gods ( $n = 583$  societies). After simultaneously accounting for potential nonindependence among societies because of shared ancestry and cultural diffusion, we find that these beliefs are more prevalent among societies that inhabit poorer environments and are more prone to ecological duress. In addition, we find that these beliefs are more likely in politically complex societies that recognize rights to movable property. Overall, our multimodel inference approach predicts the global distribution of beliefs in moralizing high gods with an accuracy of 91%, and estimates the relative importance of different potential mechanisms by which this spatial pattern may have arisen. The emerging picture is neither one of pure cultural transmission nor of simple ecological determinism, but rather a complex mixture of social, cultural, and environmental influences. Our methods and findings provide a blueprint for how the increasing wealth of ecological, linguistic, and historical data can be leveraged to understand the forces that have shaped the behavior of our own species.

### **[Brothers in arms: Libyan revolutionaries bond like family](#)**

Harvey Whitehouse<sup>a,1</sup>, Brian McQuinna, Michael Buhrmester<sup>a</sup>, and William B. Swann, Jr.<sup>b</sup>  
Author Affiliations

Edited by Susan T. Fiske, Princeton University, Princeton, NJ, and approved October 9, 2014

#### *Significance*

The human propensity to sacrifice one's life for genetic strangers has puzzled scientists since Darwin. Here, we sought answers to this puzzle by embedding ourselves within groups of individuals prepared to die for one another—Libyan revolutionary battalion members who

fought against Gaddafi's regime in 2011. We found striking evidence of extraordinarily tight, familial-like bonds among those who put themselves directly in harm's way (i.e., frontline combatants). In fact, for nearly half of combatants, their bonds to each other were stronger than bonds to their own families. Moreover, these kin-like bonds to one another predispose them to extreme self-sacrifice.

*Abstract*

What motivates ordinary civilians to sacrifice their lives for revolutionary causes? We surveyed 179 Libyan revolutionaries during the 2011 conflict in Libya. These civilians-turned-fighters rejected Gaddafi's *jamahiriyya* (state of the masses) and formed highly cohesive fighting units typical of intense conflicts. Fighters reported high levels of "identity fusion"—visceral, family-like bonds between fighters and their battalions. Fusion of revolutionaries with their local battalions and their own families were extremely high, especially relative to Libyans who favored the revolution but did not join battalions. Additionally, frontline combatants were as strongly bonded to their battalion as they were to their own families, but battalion members who provided logistical support were more fused with their families than battalions. Together, these findings help illuminate the social bonds that seem to motivate combatants to risk their lives for the group during wartime.

**Prehospital & Disaster Medicine**

Volume 29 - Issue 05 - October 2014

<https://journals.cambridge.org/action/displayIssue?jid=PDM&tab=currentissue>

[Reviewed earlier]

**Public Health Ethics**

Volume 7 Issue 2 July 2014

<http://phe.oxfordjournals.org/content/current>

[Reviewed earlier]

**Qualitative Health Research**

December 2014; 24 (12)

<http://qhr.sagepub.com/content/current>

*Special Issue: Concepts in Promoting Health*

[Reviewed earlier]

**Refugee Survey Quarterly**

Volume 33 Issue 3 September 2014

<http://rsq.oxfordjournals.org/content/current>

[Reviewed earlier]

**Resilience: International Policies, Practices and Discourses**

Volume 2, Issue 3, 2014

<http://www.tandfonline.com/toc/resi20/current#.VF7VUsI4WF9>

[Reviewed earlier]

**Revista Panamericana de Salud Pública/Pan American Journal of Public Health (RPSP/PAJPH)**

September 2014 Vol. 36, No. 3

[http://www.paho.org/journal/index.php?option=com\\_content&view=article&id=151&Itemid=266&lang=en](http://www.paho.org/journal/index.php?option=com_content&view=article&id=151&Itemid=266&lang=en)

[Reviewed earlier]

**Risk Analysis**

September 2014 Volume 34, Issue 9 Pages 1581–1774

<http://onlinelibrary.wiley.com/doi/10.1111/risa.2014.34.issue-9/issuetoc>

[Reviewed earlier]

**Science**

14 November 2014 vol 346, issue 6211, pages 785-884

<http://www.sciencemag.org/current.dtl>

[New issue; No relevant content]

**Social Science & Medicine**

Volume 120, In Progress (November 2014)

<http://www.sciencedirect.com/science/journal/02779536/118>

[Reviewed earlier]

**Stability: International Journal of Security & Development**

[accessed 15 November 2014]

<http://www.stabilityjournal.org/articles>

**An Uncertain Future for Afghanistan's Security Sector**

Mark Sedra

*Abstract*

Western powers may have espoused accountability, civil society, and good governance, but their Afghan operations have largely emphasized training and equipping for security. Military capacities are higher now but those forces are not necessarily balanced, well-managed, or sustainable. A paramilitarized police has alienated communities. Ministries of Defense and Interior are imperiled by lacks in planning, civilian oversight, and budget sufficiency. To stabilize gains of the last decade, donors need to renew their commitments to major (but more discerning) assistance.

**Sustainability**

Volume 6, Issue 11 (November 2014), Pages 7482-

<http://www.mdpi.com/2071-1050/6/11>

[Reviewed earlier]

**TORTURE Journal**

Volume 24, Nr. 1, 2014

<http://www.irct.org/torture-journal>

[Reviewed earlier]

**Tropical Medicine and Health**

Vol. 42(2014) No. 4

[https://www.jstage.jst.go.jp/browse/tmh/42/4/\\_contents](https://www.jstage.jst.go.jp/browse/tmh/42/4/_contents)

[No relevant content]

**Tropical Medicine & International Health**

November 2014 Volume 19, Issue 11 Pages 1293–1390

<http://onlinelibrary.wiley.com/doi/10.1111/tmi.2014.19.issue-11/issuetoc>

[Reviewed earlier]

**UN Chronicle**

Vol.LI No. 2 2014 September 2014

<http://unchronicle.un.org/>

**Illegal Wildlife Trade**

This issue takes a closer look at poaching and illegal wildlife trade, with a focus on causes and possible solutions.

**Vulnerable Children and Youth Studies**

An International Interdisciplinary Journal for Research, Policy and Care

Volume 9, Issue 4, 2014

<http://www.tandfonline.com/toc/rvch20/current#.Uzg2bFcWNdc>

[Reviewed earlier]

**World Heritage Review**

n°73 - November 2014

<http://whc.unesco.org/en/review/73/>

***World Heritage and our protected planet***

The IUCN World Parks Congress meets every ten years, and its November 2014 meeting may prove to be a turning point for protected areas in offering and implementing solutions for the challenges faced by the planet.

Taken together, the national parks, reserves and designated protected areas of every kind (including the World Heritage natural and mixed natural/cultural sites) now cover 14 per cent of the land surface, and nearly 3 per cent of the seas and oceans. The principles of conservation they apply serve to perpetuate a precious biodiversity. The World Heritage List includes the world's most outstanding protected areas in terms of biodiversity, ecosystems and natural features, warranting the inclusion of World Heritage as a cross-cutting theme at the World Parks Congress. World Heritage sites are the litmus test for measuring success of the global

protected area movement. At the same time, these sites have the potential to be a learning laboratory and a source of inspiration for protected areas.

This issue takes a look at the role of World Heritage in the conservation of protected areas worldwide, its contribution to the protection of wilderness areas globally, while examining how World Heritage can and does support species conservation. We look at how Indigenous peoples play an integral role in protected areas in Australia, and discuss the global conservation agenda and how World Heritage can be part of finding solutions to global challenges in an interview with Zhang Xinsheng, President of IUCN, and Ernesto Enkerlin Hoeflich, Chair of the IUCN World Commission on Protected Areas.

The exceptional relevance of the 2014 World Parks Congress, in which World Heritage is an active participant, is primarily its global impact in helping to address the gap in the conservation and sustainable development agenda which should, in turn, prove beneficial to individual protected areas. For there is reason to hope that concerted action in this domain may give a much-needed impetus to issues of conservation and biodiversity worldwide, even beyond the range of the protected areas.

### **Yale Human Rights & Development Law Journal**

Volume XIV, Issue 2

<http://www.law.yale.edu/academics/YHRDLJcurrentissue.htm>

[Reviewed earlier]

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### **EBOLA/EVD** [to 15 November 2014]

*Public Health Emergency of International Concern (PHEIC); "Threat to international peace and security" (UN Security Council)*

### **WHO: Ebola Virus Disease (EVD)**

[Situation report - 14 November 2014](#) - 'WHO Roadmap'

#### **HIGHLIGHTS**

- :: There have been 14,413 reported Ebola cases in eight countries since the outbreak began, with 5177 reported deaths.
- :: Case incidence continues to increase in Sierra Leone, and transmission also remains intense in Guinea and Liberia.
- :: A total of 4 cases, including 3 deaths, have been reported in Mali.

#### **WHO: Ebola situation assessments**

[:: Mali confirms its second fatal case of Ebola virus disease](#)

12 November 2014

#### **WHO Meeting of the Scientific and Technical Advisory Committee on Ebola Experimental Interventions – Briefing note**

13 November 2014, Geneva, Switzerland

Following the emergence of Ebola virus disease (EVD) as a severe public health emergency for which no effective therapeutic or prophylactic interventions are available, the scientific community has proposed numerous experimental interventions, including: vaccines; convalescent blood and plasma; and medicines. None of these interventions have been evaluated for efficacy against EVD and therefore clinical studies to assess their safety and efficacy are required.

To facilitate and accelerate the appropriate clinical testing and generation of quality data of potential therapeutic interventions for EVD, WHO convened a meeting of the Scientific and Technical Advisory Committee for Ebola Experimental Interventions (STAC-EE) in Geneva, on 11-12 November 2014. The meeting was attended by experts in Ebola virus, preclinical and clinical testing, pharmacologists, sociologists, public health experts and regulators, as well as representatives from countries in West Africa...

### **UNMEER [UN Mission for Ebola Emergency Response] [@UNMEER](#) #EbolaResponse**

UNMEER's [website](#) is aggregating and presenting content from various sources including its own External Situation Reports, press releases, statements and what it titles "developments." We present a composite below from the week ending 15 November 2014.

#### *UNMEER External Situation Reports*

UNMEER External Situation Reports are issued daily (excepting Saturday) with content organized under these headings:

- *Highlights*
- *Key Political and Economic Developments*
- *Human Rights*
- *Response Efforts and Health*
- *Logistics*
- *Outreach and Education*
- *Resource Mobilisation*
- *Essential Services*
- *Upcoming Events*

The "Week in Review" will present highly-selected elements of interest from these reports. The full daily report is available as a pdf using the link provided by the report date.

#### 14 November 2014 |

##### *Key Political and Economic Developments*

1. UNMEER SRSG Anthony Banbury warned the UN General Assembly that EVD is an elusive disease that has just reappeared in Mali where it was thought to be under control, demonstrating the threat that the virus still poses to the region. He said the international community is having enough challenges trying to mobilize resources to respond to the crisis in hardest-hit Liberia, Sierra Leone and Guinea and any outbreaks in other countries would be "truly devastating." He added that "Ebola is a fearsome enemy and we will not win by chasing it. We must get ahead of it."

2. In a broadcast to the nation, the president of Liberia has announced that she will not renew the state of emergency. Nonetheless, many current measures will remain in place for now. The curfew will be reduced. The areas affected by EVD will continue to have tighter restrictions.

##### *Human Rights*

4. The Guinean government announced on 12 November the withdrawal of the troops that had been deployed in Womey (Nzérékoré prefecture) following the murders in September of an eight-member EVD education team by angry locals. In response, a group of human rights defenders, lawmakers and civil society activists confirmed the end of the hunger strike they had initiated to request the demilitarization of Womey and to demand the safe return of thousands of villagers they say have fled their homes because of it. The opposition may stage a new round of demonstrations in case its remaining grievances are not addressed by the government. Foremost among the opposition's demands is the signing of the conclusion of the political dialogue process launched four months ago.

*Response Efforts and Health*

5. MSF says its treatment centres in Guinea will host three separate clinical trials. One involves using the blood of recovered EVD patients to treat sick people, and another will test two antiviral drugs. These are all experimental drugs that have not been through the usual lengthy process of testing on animals and healthy people. Trials will start next month, with initial results expected in February.

7. A representative of striking healthcare workers in Sierra Leone said about a quarter of them returned to work in an EVD clinic after health officials pledged to pay their allowances later this week. A full-scale strike would resume if the payments were not made by Friday, he said.

*Essential Services*

18. According to a UNDP study on the socio-economic impact of EVD, households' purchasing power has decreased 20 per cent in Sierra Leone and 25 per cent in Liberia. This is caused by food price increases resulting from a slowdown in agricultural activities and reduced trade because of closed borders. Many farmers have deserted their fields because of movement restrictions and are unable to sell their produce, which is directly affecting their livelihoods. In Guinea, the government has been importing food, stemming potential price fluctuations and protecting people's purchasing power.

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*Key Political and Economic Developments*

1. UNMEER SRSG Anthony Banbury has told the New York Times that, considering the changing situation on the ground, "we need to be more nimble and flexible. Instead of trying to build 100-bed facilities, I believe we need smaller facilities, more geographically dispersed, and to rely more on trained national medical professionals to provide the clinical care", he said in the interview.

2. Some 600 EVD workers surrounded Liberia's Ministry of Health Monday demanding back payment of salaries and entitlements dating from early September. The enraged workers, whose labors are essential to stemming the epidemic, shouted angrily for hours. In Sierra Leone, more than 400 health workers at the only Ebola treatment unit in the south of the country went on strike on Wednesday over unpaid risk allowances the government is meant to fund.

3. Liberia urged the United Nations on Wednesday not to reduce its peacekeeping force in the country, warning that the EVD epidemic is threatening peace and social cohesion. Liberia's UN Ambassador Marjon Kamara appealed to the Security Council to extend the mission's mandate for a year and put off consideration of a reduction in the force, which had just over 4,500 military personnel at the end of September. UN peacekeeping chief Hervé Ladsous said the United Nations supports extending the mission's mandate until September 2015 and deferring a reduction of troops until health authorities report that the Ebola crisis is over.

4. In Mali, a doctor has tested positive for EVD. He works in the same private clinic in Bamako as the nurse that died of EVD on Tuesday. 186 contacts have been identified so far and are being monitored. Contact identification will continue. Around 20 MINUSMA troops that are being treated in the clinic for injuries sustained during their mission in the north of Mali are also being monitored for the virus. The likely source of the Bamako outbreak, a man from the town of Kouremale on the border with Guinea, was never tested for EVD. In a series of ceremonies that may have exposed many mourners to the virus, his highly contagious body was washed in a Bamako mosque and returned to Guinea for burial without precautions against EVD.

5. UN Secretary-General Ban Ki-Moon called on Asian countries to step up efforts in the global fight against EVD. He noted that Asia has more than half the world's population. While the continent has not publicly recorded any cases, experts worry that border control measures and other preparations are insufficient and that Asian countries should be doing more to fight the outbreak in West Africa. He urged governments to help fill huge gaps in funding, equipment and medical personnel.

6. UN Special Envoy David Nabarro on Wednesday encouraged people to maintain travel and tourism to the EVD affected countries in West Africa. "It is not appropriate to say 'Do not travel there because there is Ebola'", he said. The United Nations have repeatedly urged airlines to maintain flights to the three countries to allow desperately-needed teams of doctors, nurses and health workers to travel there. Nabarro also made an appeal to combat stigmatization surrounding EVD by calling for a global social media campaign to express solidarity and prevent discrimination.

#### *Response Efforts and Health*

9. The Pentagon no longer plans to deploy the full 4,000 US troops to Liberia. The current 2,200 troops will grow to nearly 3,000 by mid-December. But the military does not expect more soldiers on the ground will be necessary.

10. In Liberia, UNMEER staff reported concern over an emerging repetitive pattern of violent EVD-outbreaks in remote communities – three locations in the bordering area between the Bong and Gbarpolu counties over a period of two weeks. Reaching these locations requires 3-4 hours trekking through the deep forest area and canoeing a river. It is expected that residents of the affected communities might become

#### 12 November 2014 |

#### *Key Political and Economic Developments*

2. The United States on Tuesday proposed that the International Monetary Fund write off some \$100 million in debt it is owed by Guinea, Liberia and Sierra Leone to free up more resources for those countries, the hardest hit by the EVD outbreak. The debt relief should enable the three impoverished West African countries to spend more on government services and to support their economies as they cope with the epidemic, officials said on condition of anonymity. The countries now owe the IMF a combined \$372 million, of which \$55 million comes due over the next two years.

4. The Canadian government is tightening restrictions on travellers from the affected countries in West Africa by imposing self-monitoring and quarantine measures. The policy announced Monday applies to all travellers from the affected countries. But because Canada had already stopped issuing visas to residents and nationals of Guinea, Sierra Leone and Liberia, the policy will mostly apply to returning healthcare workers and international staff who work for humanitarian aid groups.

#### *Human Rights*

6. Sierra Leone's attorney general has defended as lawful and justified last week's arrest of a prominent radio journalist who criticized the government's handling of the EVD crisis. He accused the radio host David Tam-Baryoh of undermining the effort to stop the disease's spread by making "disparaging and inflammatory statements" about the government's work, that were likely "to incite public hatred, disaffection and instability."

7. A group of Guinean politicians, civil society activists and private citizens went on hunger strike Tuesday to demand the safe return of thousands of villagers they say have fled their homes amid EVD-related unrest in the south. The action follows the murders in September of an eight-member EVD education team attacked by angry locals in Womey, a town at the epicentre of the deadly outbreak. The army has been deployed in the town since the killings and has been accused of human rights violations there. Many inhabitants are said to have fled to the surrounding forests in fear.

#### *Response Efforts and Health*

9. Sierra Leone will make a one-off payment of US\$ 5,000 to the family of any health worker who dies as a result of treating an EVD patient, authorities said on Tuesday, as a sixth doctor in the country tested positive for the virus. The National Ebola Response Centre said the benefit would be paid retroactively to relatives of the more than 100 health workers who have died from the disease in Sierra Leone. That figure includes all five doctors who had previously tested positive.

#### *Outreach and Education*

20. MSF has launched an online training programme aimed at helping aid workers involved in fighting the EVD outbreak. The organization said its training platform was available to anyone wishing to gain a basic understanding of the virus and how it can be contained.

#### *Essential Services*

21. The rate of women dying in childbirth in West African countries hit by EVD is soaring, with as many as one in seven at risk of death as fear of contact with bodily fluids prevents people from helping them. The United Nations Population Fund estimates that 800,000 women in Sierra Leone, Guinea and Liberia are due to give birth in the next 12 months. Of these, some 120,000 could face life-threatening complications if they do not get the emergency care they need.

22. Security forces in Liberia have been weakened by the EVD epidemic. Several police stations in the poorest parts of Monrovia have closed after officers became ill and/or died of EVD, while armed attacks and opportunistic crime have increased in the cities. In Nimba county, the crime rate has increased significantly.

23. The EVD outbreak erupted at a crucial period in the agricultural season for rice and other important food crops in Sierra Leone. Up to 40% of farms have been abandoned in the most affected areas, according to the International Fund for Agricultural Development. About 47% of surveyed farmers in Sierra Leone claimed that EVD is having considerable adverse effects on farming activities. Experts expect serious food shortages to hit the country in early 2015.

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#### *Key Political and Economic Developments*

1. Senegal has decided to reopen its border with Guinea and resume flights to Liberia and Sierra Leone. President Macky Sall said his country's decision had come in line with the recommendations of the Economic Community of West African States (ECOWAS) to reopen borders with states affected by EVD. However, he did not give a date for reopening the border with neighboring Guinea or resuming flights with Liberia or Sierra Leone.

2. The United Nations and leading international transport, trade and tourism organizations today expressed concern about the reported denial of medical care for ill seafarers on board ships that had previously called at ports in EVD-affected countries. The Travel and Transport Task Force called for international cooperation of governments and the transport sector in following the recommendations of the International Health Regulations Emergency Committee on Ebola, convened by WHO.

#### *Human Rights*

3. Liberian president Ellen Johnson Sirleaf has ordered four soldiers and their commanding officer to be punished for their actions during a protest over an Ebola quarantine in August, in which one boy was shot dead and others were injured. The government also agreed to pay the boy's family compensation.

4. On Saturday citizens in Coyah, Guinea, began protesting against contact tracers. Several incidents of vandalism were reported, and sensitization activities in this area were suspended. Protests also took place in Kaloum (Conakry) after the death of a woman thought to have EVD; youths started vandalizing the vehicle of Red Cross workers that had come to remove the body of the woman. The gendarmerie intervened to restore order and protect the officials of the Red Cross.

5. In Guinea, several deputies and human rights activists have begun a hunger strike at the Palais du Peuple. They are demanding the demilitarization of the town of Womey, where a group of EVD sensitizers were killed last September by angry residents.

#### *Response Efforts and Health*

6. MSF is calling for a change of strategy in the fight against EVD in Liberia, focusing on funding rapid response teams rather than large isolation units. It said that priority should be given to a more flexible approach that allows for rapid isolation and contact tracing in the case of new outbreaks, and that gets the regular healthcare system safely up and running again.

#### *Essential Services*

26. According to WFP, all areas of Liberia are affected by food insecurity. Households in the central zone that includes the counties of Nimba, Bong and Margibi are most frequently affected. This zone accounts for the bulk of EVD cases outside the capital, Monrovia. According to recent inter-agency assessments, food demand and supply has diminished due to quarantine measures. The price of imported rice in Liberia has increased since April, influenced by exchange rate depreciation. Cassava prices have remained stable.

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#### *Key Political and Economic Developments*

1. In an op-ed published by the Washington Post, UN Secretary-General Ban Ki-moon cautions that even with reports of the rate of new cases beginning to slow down, we are still a long way off from ending this crisis. He stressed that the outbreak remains active, and that outbreak patterns often fluctuate. People are dying every day, and new infections continue. And no one can say with certainty what the coming weeks might bring. The Secretary-General went on to state that each day's delay in intensifying the response adds greatly to the toll in lives, the cost of ending the outbreak, the social and economic impact, and the risk of the disease spreading to other countries. EVD, he said, will be beaten through a resolute and coordinated effort. We have initial evidence to prove that this can happen. But we must speed up efforts to first get the crisis under control and then bring it to an end.

#### *Logistics*

9. In Liberia, the humanitarian response is still being hampered by a shortage of funds for fuel, as well as by poor roads that have worsened due to the current heavy rains. Lack of sufficient

vehicles is also complicating the distribution of relief supplies and transportation of EVD patients. Travel restrictions due to the EVD crisis have significantly increased food prices and prices of drugs in private drugstores, thus limiting access to food, health care and essential drugs.

#### *Essential Services*

18. In the three affected countries, many children are left with no supervision after their parents have succumbed to EVD. Orphaned children in Sierra Leone face harsher conditions than during the civil war, the Guardian reports. The minister of social welfare, gender and children's affairs estimates the number of orphans at 2,600. UNICEF, however, puts the figures at 7,000 orphans.

19. There is a continuing need for food and livelihood assistance for people affected by EVD, as well as for the distribution of animal feeds. Food distribution to EVD affected communities under the health emergency response in Liberia is continuing to scale up. In addition to food distribution, partners are providing agricultural inputs and tools (such as rice, cassava sticks, pepper seeds and pesticides) and conducting trainings to increase awareness and improve hygiene and sanitation practices.

#### *UNMEER site: Press Releases*

[:: Amid signs of new Ebola cases, UN health official tells Liberians 'you must hunt the virus'](#)

14 November 2014

A senior United Nations World Health Organization official warned reported that the number of Ebola cases in Liberia, which had recently shown some signs of decline, is starting to pick up again, most likely because "people are relaxing their guard."

[Defeating Ebola, 'a fearsome,' elusive enemy, requires scaling up response on the ground – UN](#)

13 November 2014

There has been important progress made in the global fight against Ebola but a scaling-up in the overall response remains necessary if the deadly outbreak is to be fully stopped, top United Nations officials told the UN General Assembly today as they cautioned against complacency in tackling the disease.

[Ebola: UN special envoy says combating stigma integral to overall crisis response](#)

12 November 2014

The Secretary-General's Special Envoy on Ebola, Dr. David Nabarro, today made a passionate appeal to combat stigmatization surrounding the disease by calling for a global social media campaign to "express solidarity and to show we are anti-discrimination."

[Stopping Ebola as fast as possible is 'number one priority' – UN envoy](#)

11 November 2014

The number one priority is to stop Ebola as fast as possible and "get ahead of the virus," the chief of the United Nations emergency response mission said as the UN health agency today reported that efforts to contain the outbreak in West Africa are being hampered by cumbersome diagnostic tests.

[West Africa 'on brink' of major food crisis in wake of Ebola outbreak – UN expert](#)

11 November 2014

As Ebola continues to ravage West Africa, leaving more than 4,000 people dead, the region is now on the brink of a major food crisis, the United Nations Special Rapporteur on the right to food has warned today.

[Ebola: reported denial of medical care on ships from West Africa draws UN concern](#)

10 November 2014

United Nations and other leading international transport, trade and tourism organizations today expressed concern about the report denial of medical care for ill seafarers on board ships that had previously called at ports in Ebola-affected countries.

[Ebola: UN chief hails progress in fight against virus, urges intensified response](#)

9 November 2014

The world is on the “right track” to defeating Ebola as the infection rate of the deadly virus shows some signs of slowing in West Africa’s most affected areas, United Nations Secretary-General Ban Ki-moon declared today as he urged the international community to remain constant in fighting the disease until it is completely extinguished.

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