

The Sentinel

Human Rights Action :: Humanitarian Response :: Health :: Holistic Development :: Sustainable Resilience

Week ending 13 December 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:

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The Sentinel is also available as a pdf document linked from this page:

<http://ge2p2-center.net/>

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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.

[UN members agree deal at Lima climate talks](#)

BBC News 14 December 2014 Last updated at 10:02 ET

[Excerpt]

Delegates have approved a framework for setting national pledges to be submitted to a summit next year.

Differences over the draft text caused the talks in Lima, Peru, to overrun by two days. Environmental groups have criticised the deal as a weak and ineffectual compromise, saying it weakens international climate rules.

The talks proved difficult because of divisions between rich and poor countries over how to spread the burden of pledges to cut carbon emissions.

'Not perfect'

Peru's environment minister, Manuel Pulgar-Vidal, who chaired the summit, told reporters: "As a text it's not perfect, but it includes the positions of the parties."

The agreement was adopted hours after a previous draft was rejected by developing countries, who accused rich nations of shirking their responsibilities to fight global warming and pay for its impacts.

The final draft is said to have alleviated those concerns with by saying countries have "common but differentiated responsibilities".

Further advancing the Durban Platform

United Nations

Framework Convention in Climate Change

FCCC/CP/2014/L.14

13 December 2014 :: 5 pages

Conference of the Parties - Twentieth session

Lima, 1–12 December 2014

Agenda item 4 Report of the Ad Hoc Working Group on the Durban Platform for Enhanced Action

Nobel Peace Prize - 2014

:: Malala Yousafzai - Nobel Lecture - English

:: Kailash Satyarthi - Nobel Lecture - English

With 15 million children caught up in major conflicts, UNICEF declares 2014 a devastating year for children

UNICEF Press release

NEW YORK/GENEVA, 8 December 2014 – The year 2014 has been one of horror, fear and despair for millions of children, as worsening conflicts across the world saw them exposed to extreme violence and its consequences, forcibly recruited and deliberately targeted by warring groups, UNICEF said today. Yet many crises no longer capture the world's attention, warned the children's agency.

"This has been a devastating year for millions of children," said Anthony Lake, UNICEF Executive Director. "Children have been killed while studying in the classroom and while sleeping in their beds; they have been orphaned, kidnapped, tortured, recruited, raped and even sold as slaves. Never in recent memory have so many children been subjected to such unspeakable brutality."

As many as 15 million children are caught up in violent conflicts in the Central African Republic, Iraq, South Sudan, the State of Palestine, Syria and Ukraine – including those internally displaced or living as refugees. Globally, an estimated 230 million children currently live in countries and areas affected by armed conflicts.

In 2014, hundreds of children have been kidnapped from their schools or on their way to school. Tens of thousands have been recruited or used by armed forces and groups. Attacks on

education and health facilities and use of schools for military purposes have increased in many places.

:: In the Central African Republic, 2.3 million children are affected by the conflict, up to 10,000 children are believed to have been recruited by armed groups over the last year, and more than 430 children have been killed and maimed – three times as many as in 2013

:: In Gaza, 54,000 children were left homeless as a result of the 50-day conflict during the summer that also saw 538 children killed, and more than 3,370 injured.

:: In Syria, with more than 7.3 million children affected by the conflict including 1.7 million child refugees, the United Nations verified at least 35 attacks on schools in the first nine months of the year, which killed 105 children and injured nearly 300 others. In Iraq, where an estimated 2.7 million children are affected by conflict, at least 700 children are believed to have been maimed, killed or even executed this year. In both countries, children have been victims of, witnesses to and even perpetrators of increasingly brutal and extreme violence.

:: In South Sudan, an estimated 235,000 children under five are suffering from severe acute malnutrition. Almost 750,000 children have been displaced and more than 320,000 are living as refugees. According to UN verified data, more than 600 children have been killed and over 200 maimed this year, and around 12,000 children are now being used by armed forces and groups. The sheer number of crises in 2014 meant that many were quickly forgotten or captured little attention. Protracted crises in countries like Afghanistan, the Democratic Republic of the Congo, Nigeria, Pakistan, Somalia, Sudan and Yemen, continued to claim even more young lives and futures.

This year has also posed significant new threats to children's health and well-being, most notably the Ebola outbreak in Guinea, Liberia, and Sierra Leone, which has left thousands of children orphaned and an estimated 5 million out of school.

Despite the tremendous challenges children have faced in 2014, there has been hope for millions of children affected by conflict and crisis. In the face of access restrictions, insecurity, and funding challenges, humanitarian organizations including UNICEF have worked together to provide life-saving assistance and other critical services like education and emotional support to help children growing up in some of the most dangerous places in the world.

:: In Central African Republic, a campaign is under way to get 662,000 children back to school as the security situation permits. Nearly 68 million doses of the oral polio vaccine were delivered to countries in the Middle East to stem a polio outbreak in Iraq and Syria.

:: In South Sudan, more than 70,000 children were treated for severe malnutrition.

:: In Ebola-hit countries, work continues to combat the virus in local communities through support for community care centres and Ebola treatment Units; through training of health workers and awareness-raising campaigns to reduce the risks of transmission; and through supporting children orphaned by Ebola.

"It is sadly ironic that in this, the 25th anniversary year of the Convention on the Rights of the Child when we have been able to celebrate so much progress for children globally, the rights of so many millions of other children have been so brutally violated," said Lake. "Violence and trauma do more than harm individual children – they undermine the strength of societies. The world can and must do more to make 2015 a much better year for every child. For every child

who grows up strong, safe, healthy and educated is a child who can go on to contribute to her own, her family's, her community's, her nation's and, indeed, to our common future."

UNHCR, IOM, IMO, UNODC and OHCHR Joint Statement on Protection at Sea in the Twenty-First Century

8 December 2014

[Full text]

We are deeply concerned about the loss of life, injury, trauma and serious human rights violations affecting migrants, asylum-seekers and refugees traveling by sea. The situation is stretching rescue and reception infrastructure, as well as coast guard and navy resources, and affecting international shipping.

The high frequency of incidents involving death in the Mediterranean has captured international attention. However, these tragedies are not only occurring in the Mediterranean, but in many locations around the globe. Behind the statistics of those rescued or lost at sea are individual stories of human tragedy and human rights violations throughout the migration process.

The time-honored tradition of rescue at sea enshrined in international law is in jeopardy. Important conventions establish the obligation of a ship's captain to render assistance to people in distress at sea and of States to coordinate and cooperate to deliver those rescued at sea to a place of safety within a reasonable time. These obligations apply regardless of the migration status of the persons in distress at sea.

Much media and public attention has focused on the irregular or criminal nature of this maritime migration. We wish to stress that the people undertaking these journeys are not criminals. Those who exploit their need for protection or hope for a better future, putting lives at risk and violating human rights for profit, are the criminals.

We are convinced that concerted action from the international community is needed to address all aspects of this issue. Closer cooperation between States of origin, transit and destination, and other relevant actors, is critical to reducing loss of life at sea, addressing the drivers of dangerous sea journeys, as well as ensuring that responses by States upon arrival and disembarkation uphold human rights and dignity, and address specific needs for protection of migrants, asylum-seekers and refugees. Such cooperation is also critical to identifying, prosecuting and punishing the criminal gangs who are responsible for human rights abuses and for arranging sea transportation in breach of all safety regulations.

Robust action to combat criminal networks is crucial, but tackling migrant smuggling and the associated corruption is only part of the equation. The real root causes of irregular maritime migration, which include lack of access to safe and regular migration channels, must also be rigorously tackled. Without credible alternative options to escape desperation, people will continue to place their lives and those of their families at risk by making unsafe boat journeys. [Focus on saving lives, says UNHCR, as numbers of people taking to the seas in search of asylum or migration passes 348,000 globally](#)

Press Releases, 10 December 2014

UNHCR warned today that the international community was losing its focus on saving lives amid confusion among coastal nations and regional blocs over how to respond to the growing number of people making risky sea journeys in search of asylum or migration.

With preparations under way for the opening later today in Geneva of UNHCR's 2014 High Commissioner's Dialogue – an informal policy discussion forum whose focus this year is Protection at Sea – High Commissioner for Refugees António Guterres said some governments are increasingly seeing keeping foreigners out as being a higher priority than upholding asylum.

"This is a mistake, and precisely the wrong reaction for an era in which record numbers of people are fleeing wars," Guterres said. "Security and immigration management are concerns for any country, but policies must be designed in a way that human lives do not end up becoming collateral damage."...

World: UN and partners launch \$16.4 billion humanitarian appeal to bring aid to 57 million people in 2015 [EN/FR]

Geneva, 8 December 2014

Humanitarian organizations aim to help at least 57.5 million of the most vulnerable people in the world with assistance in 2015 and require US\$16.4 billion to do so. "Over 80 percent of those we intend to help are in countries mired in conflict where brutality and violence have had a devastating impact on their lives," said Valerie Amos, UN Under-Secretary- General for Humanitarian Affairs and Emergency Relief Coordinator, as she launched the [2015 global humanitarian appeal](#). "We will continue to put people at the centre of our relief efforts and do everything we can to respond quickly and effectively," she said, "but the rising scale of need is outpacing our capacity to respond".

In 2014, there was a sharp rise in the number of people affected by conflict and millions were forced to flee and became dependent on humanitarian aid for their survival. The crises in Central African Republic, Iraq, South Sudan and Syria will remain top humanitarian priorities next year. Combined with the impact in their regions, these crises account for over 70 percent of the funding requirements launched today...

The other major crises covered by the appeal are Afghanistan, Democratic Republic of Congo, Myanmar, occupied Palestinian territory, Somalia, Sudan, Ukraine and Yemen. "This is not business as usual in the humanitarian world," said António Guterres, the UN High Commissioner for Refugees. "Today's needs are at unprecedented levels, and without more support there simply is no way to respond to the humanitarian situations we're seeing in region after region and in conflict after conflict."

In February next year the strategic response plans covering requirements in West Africa's Sahel region and Djibouti will be launched. This will increase the number of people to be reached and the financial requirements for 2015.

International donors provided \$9.4 billion in funding in 2014 but that was only half of what the aid community requested and there were large differences in the levels of funding provided for specific countries. "Every year we ask our donors to do more - and they do. But as crises become more complex and go on longer, the gap between needs and resources grows. I hope we can close it in 2015 because if we don't raise the money it means that we are able to help

fewer children, women and men with medicine, food and shelter; the basics they need to survive," said Ms. Amos.

Global Humanitarian Overview 2015 documentation is available on www.unocha.org/2015appeal and www.humanitarianresponse.info/appeals

Trends in income inequality and its impact on economic growth

OECD - New Approaches to Economic Challenges Initiative

Working paper

PDF - A four-page summary is available at www.oecd.org/social/inequality-and-poverty.htm

09 Dec 2014 :: 65 pages

DOI: 10.1787/5jxrjncwxv6j-en

Abstract

In most OECD countries, the gap between rich and poor is at its highest level since 30 years. Today, the richest 10 per cent of the population in the OECD area earn 9.5 times the income of the poorest 10 per cent; in the 1980s this ratio stood at 7:1 and has been rising continuously ever since. However, the rise in overall income inequality is not (only) about surging top income shares: often, incomes at the bottom grew much slower during the prosperous years and fell during downturns, putting relative (and in some countries, absolute) income poverty on the radar of policy concerns. This paper explores whether such developments may have an impact on economic performance.

Drawing on harmonised data covering the OECD countries over the past 30 years, the econometric analysis suggests that income inequality has a negative and statistically significant impact on subsequent growth. In particular, what matters most is the gap between low income households and the rest of the population. In contrast, no evidence is found that those with high incomes pulling away from the rest of the population harms growth. The paper also evaluates the "human capital accumulation theory" finding evidence for human capital as a channel through which inequality may affect growth. Analysis based on micro data from the Adult Skills Survey (PIAAC) shows that increased income disparities depress skills development among individuals with poorer parental education background, both in terms of the quantity of education attained (e.g. years of schooling), and in terms of its quality (i.e. skill proficiency). Educational outcomes of individuals from richer backgrounds, however, are not affected by inequality.

It follows that **policies to reduce income inequalities should not only be pursued to improve social outcomes but also to sustain long-term growth.** Redistribution policies via taxes and transfers are a key tool to ensure the benefits of growth are more broadly distributed and the results suggest they need not be expected to undermine growth. But it is also important to promote equality of opportunity in access to and quality of education. This implies a focus on families with children and youths – as this is when decisions about human capital accumulation are made -- promoting employment for disadvantaged groups through active labour market policies, childcare supports and in-work benefits.

Core Humanitarian Standard on Quality and Accountability

HAP International, People In Aid and the Sphere Project

First edition: 2014 [December] :: 24 pages

ISBN: 978-2-8399-1564-9

Foreword

The Core Humanitarian Standard on Quality and Accountability (CHS) is a direct result of the Joint Standards Initiative (JSI) in which the Humanitarian Accountability Partnership (HAP) International, People In Aid and the Sphere Project joined forces to seek greater coherence for users of humanitarian standards. The JSI consulted more than 2,000 humanitarian workers in head offices, regions and in disaster-prone countries. The feedback highlighted the need for the harmonisation of standards, with communities and people affected by crisis at the centre and humanitarian principles as the foundation.

The CHS is the result of a 12-month, three-stage consultation, during which humanitarian workers, communities and people affected by crisis, several hundred Non-Governmental Organisations (NGOs) and networks, governments, United Nations and donor agencies, and academics rigorously analysed the content of the CHS and tested it at headquarters and field level.

The feedback from each consultation was then considered and the revisions approved by a 65-person Technical Advisory Group representing a broad spread of constituencies and areas of technical expertise in humanitarian action and standards development.

It is the intention of the boards of HAP International, People In Aid and the Sphere Project that the CHS will replace the 2010 HAP Standard in Accountability and Quality Management, the People In Aid Code of Good Practice in the Management and Support of Aid Personnel and the Core Standards section of the Sphere Handbook.

The Nine Commitments and Quality Criteria

vii. Commitments, Actions and Responsibilities

1. Communities and people affected by crisis receive assistance appropriate and relevant to their needs.
2. Communities and people affected by crisis have access to the humanitarian assistance they need at the right time.
3. Communities and people affected by crisis are not negatively affected and are more prepared, resilient and less at-risk as a result of humanitarian action.
4. Communities and people affected by crisis know their rights and entitlements, have access to information and participate in decisions that affect them.
5. Communities and people affected by crisis have access to safe and responsive mechanisms to handle complaints.
6. Communities and people affected by crisis receive coordinated, complementary assistance.
7. Communities and people affected by crisis can expect delivery of improved assistance as organisations learn from experience and reflection.
8. Communities and people affected by crisis receive the assistance they require from competent and well-managed staff and volunteers.
9. Communities and people affected by crisis can expect that the organisations assisting them.

Global status report on violence prevention 2014

WHO, United Nations Development Programme, United Nations Office on Drugs and Crime
December 2014

English [pdf 9.56 MB]

The Global status report on violence prevention 2014, which reflects data from 133 countries, is the first report of its kind to assess national efforts to address interpersonal violence, namely child maltreatment, youth violence, intimate partner and sexual violence, and elder abuse. The report reviews the current status of violence prevention efforts in countries, and calls for a scaling up of violence prevention programmes; stronger legislation and enforcement of laws relevant for violence prevention; and enhanced services for victims of violence.

[New study highlights need to scale up violence prevention efforts globally](#)

News release excerpt

10 December 2014 | Geneva - The " that 475,000 people were murdered in 2012, and homicide is the third leading cause of death globally for males aged 15–44 years, highlighting the urgent need for more decisive action to prevent violence.

Despite indications that homicide rates decreased by 16% globally between 2000 and 2012, violence remains widespread. Non-fatal acts of violence take a particular toll on women and children. One in four children has been physically abused; one in five girls has been sexually abused; and one in three women has been a victim of physical and/or sexual intimate partner violence at some point in her lifetime.

Key findings

The report indicates that:

:: only one third of the 133 countries surveyed are implementing large-scale initiatives to prevent violence, such as bullying prevention programmes, visits by nurses to families at risk, and support to those who care for older people;

:: just over half the countries are fully enforcing a set of 12 laws generally acknowledged to prevent violence, although 80% of countries have enacted them;

:: only half of all countries have services in place to protect and support victims of violence.

The consequences of violence on physical, mental, sexual and reproductive health often last a lifetime. Violence also contributes to leading causes of death such as cancer, heart disease and HIV/AIDS, because victims are at an increased risk of adopting behaviours such as smoking, alcohol and drug misuse, and unsafe sex...

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EBOLA/EVD [to 13 December 2014]

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

WHO: [Ebola response roadmap - Situation report 10 December 2014](#)

Summary [Excerpt]

A total of 17 942 confirmed, probable, and suspected cases of Ebola virus disease (EVD) have been reported in five affected countries (Guinea, Liberia, Mali, Sierra Leone, and the United States of America) and three previously affected countries (Nigeria, Senegal and Spain) up to the end of 7 December. **There have been 6388 reported deaths.** Reported case incidence is slightly increasing in Guinea (103 confirmed and probable cases reported in the week to 7 December), declining in Liberia (29 new confirmed cases in the 3 days to 3 December), and may still be increasing in Sierra Leone (397 new confirmed cases in the week to 7 December). The case fatality rate across the three most-affected countries in all reported cases with a recorded definitive outcome is 76%; in hospitalized patients the case fatality rate is 61%.

Response activities in the three intense-transmission countries continue to progress in line with the UNMEER aim to isolate and treat 100% of EVD cases and safely bury 100% of EVD-related deaths by 1 January. At a national level, there is now sufficient bed capacity in EVD treatment facilities to treat and isolate all reported EVD cases in each of the three intense-transmission countries, although the uneven distribution of beds and cases means there are serious shortfalls in some areas. Similarly, each country has sufficient and widespread capacity to bury all reported EVD-related deaths; however, because not all EVD-related deaths are reported, and many reported burials are of non-EVD-related deaths, it is possible that some areas still have insufficient burial capacity. Every district that has reported a case of EVD in the three intense-transmission countries has access to a laboratory within 24 hours from sample collection. All three countries report that more than 80% of registered contacts associated with known cases of EVD are being traced, although contact tracing is still a challenge in areas of intense transmission and in areas of community resistance. Rapidly increasing capacity for case finding and contact tracing in areas with low and moderate levels of transmission will be necessary to end local chains of transmission....

Editor's Note:

Our extensive coverage of Ebola/EVD activity continues – including detailed coverage of UNMEER and other INGO/agency activity now available at the end of this digest. Please also note that many of the organizations and journals we cover continue to publish important EVD content which is threaded throughout this edition.

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Emergencies Scorecard

UN OCHA: [L3 Emergencies](#) [at 13 December 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 13 December 2014]

:: [Ebola/EVD](#)

:: [Polio](#)

WHO: [Grade 3 and Grade 2 emergencies](#) [at 13 December 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 Press Releases [to 13 December 2014]

Secretary General, Security Council, General Assembly

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

Secretary General

12 December 2014

SG/SM/16421-HR/5237

[Secretary-General, at Launch of Action Plan, Says Human Rights Education Strengthens Values, Increases Chance for Peace](#)

Following is UN Secretary-General Ban Ki-moon's remarks at the launch of the National Plan of Action for Human Rights Education, in Lima today.

12 December 2014

SG/SM/16422

[Secretary-General Tells Peruvian Congress He Cannot Overstate Importance of Foundation Being Laid at United Nations Climate Conference in Lima](#)

Following is UN Secretary-General Ban Ki-moon's address, as prepared for delivery, to the Congress of Peru, in Lima, today.

10 December 2014

SG/SM/16413-HR/5234-OBV/1418

[Secretary-General Encourages Concerted Action to Uphold Human Rights, Improve Lot of Afrodescendants, in Message for International Observance](#)

Following is UN Secretary-General Ban Ki-moon's message, as delivered by Valerie Amos, Emergency Relief Coordinator and Under-Secretary-General for Humanitarian Affairs, at the launch of the Decade for People of African Descent, in New York today.

10 December 2014

SG/SM/16414-ENV/DEV/1478

[Secretary-General, at Lima Conference, Says All Stakeholders Must Join Forces to Make Climate Change Opportunity for Creating Safer, Healthier Planet](#)

Following are UN Secretary-General Ban Ki-moon's remarks at the Head of State segment of the twentieth session of the Conference of the Parties of the United Nations Framework Convention on Climate Change, in Lima today.

8 December 2014

SG/SM/16404-OBV/1416

[Marking Global Anti-Corruption Day, Secretary General Urges 'Breaking the Chain' as Eliminating the Scourge Remains 'Crucial' to World's Well-Being](#)

Following is UN Secretary-General Ban Ki-moon's message on International Anti-Corruption Day, to be observed 9 December:

UNICEF [to 13 December 2014]

http://www.unicef.org/media/media_71508.html

Media Releases [selected]

[One year after conflict, children still under daily threat in South Sudan](#)

JUBA/GENEVA, 12 December 2014 – The future for a generation of children in South Sudan is being stolen by the year-long conflict in the country, which has driven hundreds of thousands of children from their homes, schools and communities; subjecting them to violence, malnutrition and disease, the UNICEF said today.

[To boost fight against Ebola and strengthen community-based services for the future, UNICEF raises appeal to US\\$500 million](#)

NEW YORK/GENEVA, 12 December 2014 – UNICEF today announced an expanded fight against the Ebola virus in West Africa over the next six months, costing a total of US\$500 million – of which just 24 per cent (\$125.7 million) has been secured.

[UNICEF mobilizes to reach children and families affected by Typhoon Hagupit](#)

MANILA/NEW YORK, 8 December 2014 – As Typhoon Hagupit wreaks havoc through the Philippines, UNICEF is acting quickly to support the Filipino government's response to the emergency, providing lifesaving supplies and services for children and women in the areas hardest hit by cyclone-force winds and heavy rains.

[With 15 million children caught up in major conflicts, UNICEF declares 2014 a devastating year for children](#)

NEW YORK/GENEVA, 8 December 2014 – The year 2014 has been one of horror, fear and despair for millions of children, as worsening conflicts across the world saw them exposed to extreme violence and its consequences, forcibly recruited and deliberately targeted by warring

groups, UNICEF said today. Yet many crises no longer capture the world's attention, warned the children's agency.

UNHCR [to 13 December 2014]

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

[Focus on saving lives, says UNHCR, as numbers of people taking to the seas in search of asylum or migration passes 348,000 globally](#)

8 December 2014

[UNHCR, IOM, IMO, UNODC and OHCHR Joint Statement on Protection at Sea in the Twenty-First Century](#)

8 December 2014

[Donors pledge an initial US\\$ 500.8 million for UNHCR operations in 2015](#)

8 December 2014

[Governments pledge to take in around 100,000 Syrian refugees](#)

8 December 2014

[First Somali refugees in Kenya decide to return home as part of a new pilot project](#)

8 December 2014

UNOCHA [to 13 December 2014]

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

12 Dec 2014

[Mali: Maimouna Traoré, une juriste dévouée à la cause des femmes au Mali](#)

11 Dec 2014

[Colombia: Emergencia por avalancha en Jambaló \(Cauca\)](#)

11 Dec 2014

[Democratic Republic of the Congo: RDC: l'assistance des personnes retournées passe en mode numérique](#)

11 Dec 2014

[Somalia: Statement from the Humanitarian Coordinator for Somalia \[EN/SOM\]](#)

Source: UN Office for the Coordination of Humanitarian Affairs, UN Resident and Humanitarian Coordinator for Somalia Country: Somalia

(Mogadishu, 10 December 2014) Speaking after the launch of the 2015 Global Humanitarian Response plans in Geneva on 8 December 2014, the Humanitarian Coordinator for Somalia, Mr. Philippe Lazzarini, revealed that humanitarian organizations in Somalia require US\$ 863 million to meet the most urgent needs of 2.76 million Somalis in 2015. "The humanitarian...

09 Dec 2014

[Democratic Republic of the Congo: Le Coordonnateur humanitaire Moustapha Soumare condamne la récurrence des tueries des civils et les graves violations de droits humains dans la zone de Beni \[EN/FR\]](#)

08 Dec 2014

[World: Under-Secretary-General Valerie Amos remarks to the press at the launch of the global humanitarian appeal 2015](#)

Source: UN Office for the Coordination of Humanitarian Affairs Country: Afghanistan, Central African Republic, Democratic Republic of the Congo, Iraq, Myanmar, Somalia, South Sudan, Syrian Arab Republic, World, Yemen The number of people affected by conflicts and natural disasters around the world has reached record levels. Just a year ago, UN agencies and partners asked for \$12.9 billion to assist 52 million people who we considered to be the most vulnerable and most in need of protection...

08 Dec 2014

[World: UN and partners launch \\$16.4 billion humanitarian appeal to bring aid to 57 million people in 2015 \[EN/FR\]](#)

Source: UN Office for the Coordination of Humanitarian Affairs Country: Central African Republic, Democratic Republic of the Congo, Djibouti, Iraq, Myanmar, occupied Palestinian territory, Somalia, South Sudan, Sudan, Syrian Arab Republic, Ukraine, World, Yemen (Geneva, 8 December 2014): Humanitarian organizations aim to help at least 57.5 million of the most vulnerable people in the world with assistance in 2015 and require US\$16.4 billion to do so. "Over 80 percent of those we intend to help...

UNISDR UN Office for Disaster Risk Reduction [to 13 December 2014]

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

[UN lauds Philippines handling of Typhoon Hagupit \(Ruby\)](#)

As negotiations resume this week in Geneva on a global agreement on disaster risk management, the UN Office for Disaster Risk Reduction (UNISDR) said the Philippines "zero casualty" approach to managing Typhoon Hagupit was further evidence of Asia's leadership role in reducing mortality and tackling economic losses from disasters.

8 Dec 2014

WHO & Regionals [to 13 December 2014]

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

[World Malaria Report 2014](#)

WHO, 2014 :: 242 pages ISBN: 978 92 4 156483 0

Downloads: [French summary](#) [Spanish summary](#)

Overview

The World Malaria Report 2014 summarizes information received from malaria-endemic countries and other sources, and updates the analyses presented in the 2013 report. The World Malaria Report is WHO's flagship malaria publication, released each year in December. It assesses global and regional malaria trends, highlights progress towards global targets, and describes opportunities and challenges in controlling and eliminating the disease. Most of the data presented in this report is for 2013.

[New study highlights need to scale up violence prevention efforts globally](#)

10 December 2014 -- The "*Global status report on violence prevention 2014*" reveals that 475 000 people were murdered in 2012, and homicide is the third leading cause of death globally for males aged 15–44 years, highlighting the urgent need for more decisive action to prevent violence.

WHO Regional Offices

WHO African Region AFRO

:: [Democratic Republic of the Congo: The country that knows how to beat Ebola](#)

In DRC there was long experience with Ebola – this was the seventh outbreak of the disease here. The country had the knowledge and the people needed to stop an outbreak – plus strong technical assistance and support from WHO.

:: [Liberia: Sharing his experience fighting Ebola - 09 December 2014](#)

WHO Region of the Americas PAHO

:: [First-ever Universal Health Coverage Day urges "Health for all – everywhere"](#) (12/12/2014)

:: [Developing countries in Latin America and the Caribbean have world's highest homicide rates](#) (12/10/2014)

:: [PAHO/WHO provides training in risk communication for possible Ebola introduction](#) (12/09/2014)

WHO South-East Asia Region SEARO

:: [WHO targets implementation of new guidelines for indoor air quality](#) 11 December 2014

:: [Address at the Ebola Preparedness Partners Meeting](#) 5 December 2014, SEARO, New Delhi
Dr Poonam Khetrapal Singh, WHO Regional Director for South-East Asia

WHO European Region EURO

[website unreachable]

WHO Eastern Mediterranean Region EMRO

:: [WHO delivers six tonnes of medicines to west Harasta in Syria](#)

8 December 2014 - As part of an UN inter-agency convoy, WHO, in collaboration with the Syrian Arab Red Crescent (SARC), has delivered 6 tonnes of medicines and other items to west Harasta in Syria for a population of 2200 families. Since the beginning of the crisis, WHO has supported local health authorities, SARC and nongovernmental organization partners with the provision of medicines and medical equipment, including surgical supplies for over 12.5 million people across the country. It was the first time that medical support has reached west Harasta since October 2011.

:: [Government of Saudi Arabia provides support for purpose-built mobile medical clinics in Erbil, Iraq](#) 11 December 2014

:: [Afghanistan's midwifery report highlights need for still greater investment](#) 10 December 2014

:: [Vaccinators, health educators and volunteers in Aden: working enthusiastically with vulnerable groups](#) 8 December 2014

UNAIDS [to 13 December 2014]

<http://www.unaids.org/en/resources/presscentre/>
No new digest content identified.

UNFPA United Nations Population Fund [to 13 December 2014]
<http://www.unfpa.org/public/>
No new digest content identified.

UN Women [to 13 December 2014]
<http://www.unwomen.org/>

[Around the world, women and men of all ages “orange their hoods” to end violence](#)

Date : December 11, 2014

From flash mobs to bicycle races, street marches to art exhibits, and even illuminating landmarks and buildings in orange light, people around the world banded together during the 16 Days of Activism against Gender Violence by “orangeing their neighbourhoods.”

[UN Women action to confront the Ebola crisis](#)

Date : December 10, 2014

Since the Ebola outbreak in West Africa was declared an international public health emergency in August, many UN organizations have been working hand-in-hand to help those affected on the ground. UN Women has been facilitating mobilization and information efforts targeting women, who have been disproportionately affected by this disease, coordinating UN efforts to address gender within the response, and supporting the collection of sex-disaggregated data. To help curb the spread of Ebola and mitigate its impacts, UN Women has focused on supporting sensitization and advocacy on Ebola and its gender dimensions primarily in Liberia and Sierra Leone, but with some efforts in Nigeria, where we are making relevant materials available in local languages

UNDP United Nations Development Programme [to 13 December 2014]
<http://www.undp.org/content/undp/en/home/presscenter.html>
12 Dec 2014

[UNDP to support Central African Republic elections in 2015](#)

The United Nations Development Programme (UNDP) will be assisting the Central African Republic in the organization of a constitutional referendum, as well as parliamentary and presidential elections next year.

11 Dec 2014

[Helen Clark, Speech on “Democratic Governance, Human Rights, and Development”. Keynote address at The Norwegian Agency for Development Cooperation \(Norad\) Annual Conference on Development Cooperation: Democracy and Human Rights, Oslo, Norway](#)

11 Dec 2014

[Millions at risk of losing their incomes in Ebola-affected countries, says UNDP](#)

The Ebola outbreak is threatening the livelihoods of millions of women and men, according to a just released United Nations Development Programme (UNDP) study on the socio-economic impact of the disease in West Africa.

09 Dec 2014

[Community volunteers in Liberia are limiting the spread of Ebola](#)

The number of new cases of Ebola in Liberia is decreasing each day and community volunteers' work has contributed substantially to this result. UNDP Liberia has recruited 1,300 volunteers who are being paid \$80 per month to go door to door, every day in their communities, to track down anyone who shows symptoms of the disease and get urgent medical help.

09 Dec 2014

[Helen Clark: Opening Speech at Peruvian Partnerships Dialogues on Public-Private Collaboration for Climate and Development, UNFCCC COP 20, Lima, Peru](#)

09 Dec 2014

[Helen Clark: Speech at High level event on Indigenous Peoples Proposals to Address Climate Change UN Climate Change Conference – COP20, Lima, Peru](#)

09 Dec 2014

[UNDP calls for governments, businesses and communities to boost collaboration for a new climate and development era](#)

Tackling climate change requires serious collaboration between the public and private sectors, engagement with civil society, and having strong and transparent institutions, UN Development Programme (UNDP) Administrator Helen Clark said, wrapping up three-days at the UN Framework Convention on Climate Change (UNFCCC) Conference of the Parties (COP) in Lima today.

07 Dec 2014

[Helen Clark: "What will it take to achieve coherence in the 2015 agreements?" Speech at closing session of the Development & Climate Days event on "Zero Poverty. Zero Emissions. Within a generation?" at the UNFCCC COP, Lima, Peru](#)

UN Division for Sustainable Development [to 13 December 2014]

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

No new digest content identified.

FAO Food & Agriculture Organization [to 13 December 2014]

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

[2014 seen as record year for world cereal production](#)

Latest indications confirm that world cereal production will reach an all-time record of more than 2.5 billion tonnes in 2014, according to FAO's latest Crop Prospects and Food Situation Report. However, the report also warns that food insecurity is worsening in a number of countries due to civil conflicts, adverse weather and the Ebola virus disease (EVD) outbreak.

11-12-2014

[Latin America and the Caribbean need final push to achieve World Food Summit Goal](#)

Latin America and the Caribbean have achieved 92 percent progress toward the World Food Summit goal of halving the total number of people suffering hunger and final push is needed to fully achieve it, according to a new FAO report.

10-12-2014

[Q&A: How FAO and partners are working to help countries explore sustainable bioenergy development](#)

Through the Global Bioenergy Partnership, FAO is helping countries to better assess the possible risks and benefits of bioenergy. In this interview, Michela Morese of FAO's energy team talks about recent FAO work in Colombia and Indonesia to test bioenergy sustainability indicators.

8-12-2014

DESA United Nations Department of Economic and Social Affairs [to 13 December 2014]

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

[New million dollar UN DESA Grant to promote sustainable energy](#)

12 December 2014, New York

"The well-being of our people and economy, and the health of our environment, all depend on safe, clean, secure, sustainable and affordable energy," said Wu Hongbo, Under-Secretary-General for Economic and Social Affairs, at the first meeting of the Advisory Council for a newly created UN DESA Grant to promote sustainable energy.

[Global economy to improve marginally](#)

10 December 2014, New York

Global economic growth is forecast to increase marginally over the next two years, according to the United Nations World Economic Situation and Prospects 2015 (WESP) report, launched today. The global economy is expected to grow 3.1 per cent in 2015 and 3.3 per cent in 2016, compared with an estimated growth of 2.6 per cent for 2014.

ILO International Labour Organization [to 13 December 2014]

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

Universal Health Coverage Day

[Global health protection crisis leaves almost 40% of the world's population without any coverage](#)

12 December 2014

New ILO study reveals large health coverage gaps, including in West African countries, where 80 per cent have no coverage.

Labour Overview for Latin America and the Caribbean 2014

[Unemployment continued to fall in Latin America and the Caribbean but will rise from 2015](#)

11 December 2014

The ILO's Latin American Labour Overview 2014 (Panorama Laboral) shows that the economic downturn has begun to impact the regional labour market.

UNESCO [to 13 December 2014]

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

No new digest content identified.

WIPO World Intellectual Property Organization [to 13 December 2014]

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

No new digest content identified.

CBD Convention on Biological Diversity [to 13 December 2014]

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

11 December 2014

[Press Release: Major sustainable development outcomes of biodiversity meeting to be transmitted to 69th session of UN General Assembly for consideration in post-2015 Development Agenda](#)

Today, the Minister of Environment of the Republic of Korea presented United Nations Secretary-General Ban Ki-moon with three major outcomes of the twelfth meeting of the Conference of the Parties (COP 12) to the Convention on Biological Diversity (CBD) on the role of biodiversity for sustainable development, for transmittal to the 69th session of the United Nations General Assembly.

[This year, declared International Year of Family Farming by the Food and Agriculture](#)

Organization of the United Nations, International Mountain Day is being celebrated under the theme of "Mountain Farming". Mountain agriculture, which is predominantly family farming, has for centuries been a model for sustainable development

2014-12-11

ITU International Telecommunications Union [to 13 December 2014]

http://www.itu.int/net/pressoffice/press_releases/index.aspx?lang=en#.VF8FYcl4WF8

[ITU Telecom World 2014 highlights innovations, technologies, and ideas shaping future of ICTs](#)

Interactive debates and showcases focus on future of technology and its impact on society

Doha, 10 December 2014 – ITU Telecom World 2014 closed its doors today following four busy days of high-level debate, networking, knowledge sharing and showcasing. A dynamic and truly diverse line-up of participants from around the world attended the event, including Cisco, Huawei, Intel, LS telcom, Nokia, Ooredoo, Rohde & Schwarz, Vodafone and ZTE, with pavilions from Argentina, Azerbaijan, Cameroon, Chad, China, Hungary, Nigeria, Malaysia, Qatar, Tanzania, Thailand and Zimbabwe, while Kenya, Uganda, South Sudan and Rwanda came together within the Smart Africa zone on the show floor.

"Over the last few days I've seen the evolution of a roadmap that provides an immersive, interactive and deeply informative view of the future of ICTs," said ITU Secretary-General Hamadoun I. Touré. "This has been evident in the Leadership Summit and Forum, bringing insights into industry shifts and macro trends from top names on the show floor and looking at new technologies developing in The Lab. I was also deeply impressed by the bright sparks who are building the future of technology and business, in the Young Innovators Programme."

Organized by ITU, the United Nations Specialized Agency for ICTs, the event was hosted by the Government of Qatar, with the support of leading international communications company, Ooredoo...

USAID [to 13 December 2014]

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

[United States Announces Results of Grand Challenge to Fight Ebola](#)

December 12, 2014

Innovative personal protective equipment solutions selected for funding, testing and deployment

The U.S. Agency for International Development (USAID) announced today the first nominees for awards in the Fighting Ebola: a Grand Challenge for Development. Following a rigorous selection process, these innovators have been identified for the solutions they presented to increase the protection and comfort of healthcare workers battling Ebola.

[USAID and Johnson & Johnson to Tackle Antibiotic-Resistant Tuberculosis](#)

December 11, 2014

Today, the United States Agency for International Development (USAID) signed a memorandum of understanding (MoU) with Janssen Therapeutics, Division of Janssen Products, LP (Janssen), one of the Janssen Pharmaceutical Companies of Johnson & Johnson that will accelerate progress in the fight against antibiotic-resistant bacteria, specifically multi drug-resistant tuberculosis (MDR-TB).

[Standing with Civil Society: USAID Co-Hosts Event on Global Civil Society Trends](#)

December 11, 2014

Yesterday the United States Agency for International Development (USAID) and the Aga Khan Foundation hosted an event on Global Trends in Civil Society Resilience. For nearly 30 years, USAID's work in the area of human rights and democratic governance has aimed to support peaceful, prosperous and inclusive societies that benefit from an informed and engaged citizenry. In newer and established democracies, as well as in repressive societies, USAID's work helps to strengthen civil society. The event highlighted the publication of the Civil Society Organization Sustainability Index (CSOSI). First developed by USAID in 1997, the CSOSI enables users to track developments and identify trends in the civil society sector over time while allowing for cross-country and cross-region comparison.

[USAID and Orange Join Forces to Boost mHealth Innovations Across Africa](#)

December 10, 2014

The U.S. Agency for International Development (USAID) and global telecommunications operator Orange announced a new alliance to develop innovations in mobile health (mHealth) at the Global mHealth Forum in Washington, D.C. These mHealth innovations will help treat and care for individuals in developing countries across Africa.

[Statement from USAID Administrator Shah on International Anti-Corruption Day](#)

December 9, 2014

Today, the United States Agency for International Development joins the international community in supporting citizens, governments and organizations from across the globe in their struggle to root out corruption. We know that corruption destroys the lives of millions of people

around the world and can be a cause of great national strife and tragedy. We have seen corruption undermine democracy and the rule of law, lead to human rights violations, distort markets, erode quality of life, and allow organized crime, terrorism and other threats to flourish.

DFID [to 13 December 2014]

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

[UK welcomes international contributions to support efforts to end Ebola in Sierra Leone](#)

12 December 2014 DFID and FCO Press release

[PM announces new global action to deal with online child abuse](#)

11 December 2014 DFID, FCO, Home Office and Number 10 Press release

[Global Summit to End Sexual Violence in Conflict Report published](#)

10 December 2014 DFID, FCO and OLHC Press release

ECHO [to 13 December 2014]

<http://ec.europa.eu/echo/en/news>

[EU facilitates second rotation of Dutch vessel to Ebola affected region](#)

12/12/2014

A new batch of urgently needed medical and relief supplies is leaving to the Ebola-affected region in West Africa today on board of the Dutch ship "Karel Doorman". For the second time, as part of the coordinated European response to the Ebola...

[EU provides food, water, shelter and basic health care to Ukrainian refugees in Belarus](#)

11/12/2014

The European Commission is allocating over €63 000 through the Disaster Relief Emergency Fund (DREF) to support Belarus Red Cross Society in meeting immediate needs of vulnerable refugee populations who fled the conflict in eastern Ukraine into...

[EU steps up assistance for Syrian refugees in Turkey](#)

09/12/2014

With growing numbers of refugees from Syria seeking safety in Turkey, the European Commission is increasing its aid to Syrian refugees in Turkey and across the border by €10 million. The new humanitarian funding will help refugees living outside...

[EU Member States send additional personnel, mobile lab to fight Ebola](#)

08/12/2014

The European Union and its Member States continue to mobilise all available resources to help contain the largest Ebola epidemic on record. In response to the EU's call for the mobilisation of qualified, trained and experienced health workers,...

OECD [to 13 December 2014]

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

[Inequality hurts economic growth, finds OECD research](#)

9 December 2014

Reducing income inequality would boost economic growth, according to new OECD analysis. This work finds that countries where income inequality is decreasing grow faster than those with rising inequality.

African Union [to 13 December 2014]

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

Dec.10.2014

[The Republic of Niger Launches AU Campaign to End Child Marriage in Africa](#)

ASEAN

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

[ASEAN holds Advanced Training on Madrid Protocol](#)

Thursday, 11 December 2014.

SINGAPORE, 11 December 2014 – The ASEAN Member States continue to move forward with their initiative to accede to the Madrid Protocol by the end of 2015 as part of the ASEAN Economic Community-building. To continue to prepare and assist ASEAN Member States to accede to and implement the Protocol, an advanced training on Madrid Protocol operations was organised on 9-11 December in Singapore.

Simple, cost-effective mechanisms for protecting intellectual property (IP) in the region enhance ASEAN competitiveness by giving businesses confidence that their valuable intellectual assets will be protected if they invest and trade across borders.

With the Madrid Protocol, the ASEAN region will make it easier for trademark owners to do business by allowing them to file a single application in one of the accepted languages directly with his or her own national trademark office and use the application to seek protection in ASEAN and other important markets.

UNCTAD [to 13 December 2014]

<http://unctad.org/en/pages/All-News.aspx>

[Partnership between UNCTAD and ILO enters new era with signing of Memorandum of Understanding](#)

11 Dec -

UNCTAD and the International Labour Organization have signed a Memorandum of Understanding to support the development of joint research and policy advice and increased inter-agency operations for more coherence and impact at the national and regional levels.

[Trade balance of developing and developed countries continues to converge, UNCTAD statistics show](#)

10 Dec -

UNCTAD Handbook of Statistics 2014 shows that developing and transition economies run large trade surpluses for merchandise and services trade.

World Trade Organisation [to 13 December 2014]

http://www.wto.org/english/news_e/news13_e/news13_e.htm

[Japan donates USD 76,742 to support food safety, and animal and plant health standards](#)
10.12.2014

The government of Japan has contributed USD 76,742 (CHF 74,034) to the Standards and Trade Development Facility (STDF) for 2014. The objective is to help developing countries and least-developed countries establish and implement sanitary and phytosanitary standards (SPS) for health protection and expand their ability to gain or maintain access to global markets.

IMF [to 13 December 2014]

<http://www.imf.org/external/news/default.aspx>

[IMF Executive Board Discusses 2014 Report on Diversity and Inclusion](#)

Press Release No. 14/556

December 8, 2014

On November 19, 2014, the Executive Board of the International Monetary Fund (IMF) discussed the [2014 Diversity and Inclusion Annual Report](#).

The annual report is prepared by the IMF's Diversity Office in consultation with the Diversity Council. The Diversity Council is a Fund-wide representative body that provides guidance to management, department heads, and departmental Diversity Reference Groups on diversity-related matters. The report is published annually on the Fund's external website, and provides an accounting of the institution's efforts to promote a more diverse and inclusive working environment for all employees.

World Bank [to 13 December 2014]

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

[500+ Organizations Launch Global Coalition to Accelerate Access to Universal Health Coverage](#)

On first-ever Universal Health Coverage Day, all countries urged to make quality health coverage accessible to everyone, everywhere. NEW YORK, 12 December 2014 – A new global coalition of more than 500 leading health and development organizations worldwide is urging governments to accelerate reforms that ensure everyone, everywhere, can access quality health services without being forced into poverty. The coalition was launched today, on the first-ever Universal Health Coverage Day, to stress the importance of universal access to health services for saving lives, ending extreme poverty, building resilience against the health effects of climate change and ending deadly epidemics such as Ebola. Universal Health Coverage Day marks the two-year anniversary of a United Nations resolution, unanimously passed on 12 December 2012, which endorsed universal health coverage as a pillar of sustainable development and global security. Despite progress in combatting global killers such as HIV/AIDS...

Date: December 12, 2014

[Statement from World Bank Group President Jim Yong Kim on 2014 Nobel Peace Prize Winners Malala Yousafzai and Kailash Satyarthi](#)

WASHINGTON, December 10, 2014—World Bank Group President Jim Yong Kim welcomed the awarding of the 2014 Nobel Prize for Peace to Malala Yousafzai and Kailash Satyarthi today in Stockholm: "Malala Yousafzai and Kailash Satyarthi have inspired the world with their their courageous efforts on behalf of children everywhere—for their fundamental right to be educated, to live free of fear and exploitation, to fulfill their unique potential. Malala's bravery in raising her young voice and standing up to brutal extremism has given new hope to girls everywhere. Kailash Satyarthi's Bachpan Bachao Andolan—the Save Childhood Movement—has

peacefully shone a spotlight on the unconscionable exploitation of countless children, rescuing them from slavery and restoring them to childhood. "Both follow in the tradition of Nobel Peace laureates before them, championing the most fundamental rights of all human beings, including and especially the youngest and most vulnerable among us.

Date: December 10, 2014

[World Bank Hosts 2nd Urbanization and Poverty Reduction Research Conference](#)

In his keynote address on Cities in the Developing World, Edward Glaeser (Harvard University) told a packed audience that the rise of poor country urbanization is the defining development statistic today. He highlighted the need for strong institutions to manage the pressures of urbanization in the future. "There are demons of urbanization, and they need to be tamed. But the future is not rural poverty," Glaeser said. In the second keynote address on The Power of the Grid, Paul Romer (New York University) emphasized the need for countries to plan in advance for urban expansion. In his presentation on "The Power of the Grid" he used New York City as an example of how urban planning decisions made two centuries ago still affect the development of the city's infrastructure and commercial activities to this day. Romer urged policy practitioners to "focus on dimensions that can have enormous impact, and that explain why some countries are rich and some are poor...

Date: December 8, 2014

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:: *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 and only limited blog content.

Amref Health Africa [to 13 December 2014]

[Amref Health Africa Celebrates 28th Graduation of Health Workers](#)

Published: 08 December 2014 Marie Kinyanjui

A total of 5,000 health workers have been trained this year to help ease Africa's high disease burden Nairobi, December 8, 2014...Amref Health Africa today held its 28th graduation for health workers at...

Aravind Eye Care System [to 13 December 2014]

No new digest content identified.

BRAC [to 13 December 2014]

No new digest content identified.

CARE International [to 13 December 2014]

[Remembering the tsunami: a decade of strengthening humanitarian response](#)

INDONESIA

12 DECEMBER 2014

A decade later, lessons learned from the tsunami humanitarian response continue to influence and improve how the world responds to disasters today.

[One year on: CARE calls for health system to be at heart of humanitarian response in South Sudan](#)

SOUTH SUDAN

12 DECEMBER 2014

A year ago, South Sudan's frail healthcare system was struggling. One year on from the conflict that began on December 15 last year, the diagnosis has become critical.

[Effective, global response to climate change still a long way off](#)

LIMA

09 DECEMBER 2014

In the second week of the COP20 UN climate change conference in Lima, Peru, CARE says there are still serious holes in the current draft of a new global climate change agreement.

Danish Refugee Council [to 13 December 2014]

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

[DRC calls for responsibility sharing on mixed migration](#) (09.12.14)

With increasing mixed migration flows and more than 4000 lives lost at sea in the first nine month of 2014 in the Mediterranean and across the globe the need for responsibility sharing is more urgent...

[Danish Demining Group's work results in peace agreements in Somalia](#) (08.12.14)

DDG's conflict resolution and mediation activities have resulted in several peace agreements and a ceasefire among rival sub-clans in the Belet Xawa district in Somalia.

Casa Alianza [to 13 December 2014]

Covenant House [to 13 December 2014]

No new digest content identified.

ECPAT [to 13 December 2014]

[ECPAT Releases New CMRs for Latin America](#)

12/11/2014

On December 11th during the XXI Pan-American Congress of the Organisation of American States (OAS) in Brasilia, ECPAT International and the Inter-American Children's Institute (IIN), a specialised body of the OAS, will call public attention to the gravity of the situation of CSEC in the region and to the fact that it has not been adequately addressed by the majority of OAS Member States.

To support its call for action, ECPAT International is releasing ten Country Monitoring Reports (CMRs) on December 11th focused on various Latin American countries as well as a Regional

Overview on the situation of CSEC throughout Latin America. The Country Monitoring Reports have been produced for [Argentina](#), [Brazil](#), [Chile](#), [Costa Rica](#), [Colombia](#), [Guatemala](#), [Mexico](#), [Paraguay](#), [Peru](#) and [Uruguay](#) (with the Dominican Republic and Nicaragua to be released in the near future). These publications provide a comprehensive baseline of information, as well as an assessment of achievements, challenges and priority actions necessary to assist in the formulation of a successful strategic framework...

Fountain House [to 13 December 2014]

<http://www.fountainhouse.org/about/news-press>

No new digest content identified.

Handicap International [to 13 December 2014]

No new digest content identified.

Heifer International [to 13 December 2014]

December 9, 2014

[Heifer Philippines Families Safe Following Typhoon Hagupit](#)

LITTLE ROCK, Ark.

Initial reports from Heifer International's Philippines office state that all Heifer project families are safe after Typhoon Hagupit, but many have reported damage to homes, crops and animal sheds.

HelpAge International [to 13 December 2014]

[Age discrimination must stop, says HelpAge International](#)

On 10 December 2014, Human Rights Day, HelpAge International is marking the occasion with a renewed call for governments to challenge the wide range of human rights violations experienced every day by many older women and men.

Posted: 10 December 2014

International Rescue Committee [to 13 December 2014]

[RECAP: The IRC and 16 Days](#)

December 11, 2014 by The IRC

For 16 Days of Activism against Gender Violence, women and girls around the world joined the International Rescue Committee to voice their right to safety, equality and education. Here's the IRC's Storify recap.

ICRC - International Committee of the Red Cross [to 13 December 2014]

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

[ICRC scales up operations in eastern Ukraine](#)

News release

12 December 2014

As winter deepens, the ICRC is stepping up its activities in Donetsk and Lugansk regions of Ukraine to help people affected by the conflict. The organization had previously had to scale back its work there after the tragic death of one of its staff members in early October.

[Tunisia: Libyan surgeons improve skills in war surgery](#)

News release

12 December 2014

Thirty-three surgeons from different parts of Libya have just concluded a two-day training course supported by the ICRC in surgery on weapon-wounded patients. A further 15 surgeons have completed three days of training in the management of trauma cases in emergency rooms.

IRCT [to 13 December 2014]

[IRCT calls on the US to ensure access to rehabilitation to the victims of the CIA torture program](#)
10-12-2014

The IRCT calls for a firm commitment by the United States on granting reparations to the victims of the CIA torture including granting access to rehabilitation services.

The upcoming executive summary of the CIA torture report from the US Senate Intelligence Committee confirms many of the earlier claims made about CIA's torture program post 9/11. The report reveals the repeated use of torture by the agency including threats, beatings, waterboarding, cloaking and sleep deprivation, and, most importantly, that the use of torture was unnecessary and yielded no critical intelligence on terror plots.

However, one question remains unanswered: will the victims be granted access to rehabilitation?

"The torture used by the CIA throughout the years has had a traumatic and life-changing impact on the victims, which will require multiple interventions in order to restore their dignity and enable them to be as fully functional as possible," said Miriam Reventlow, IRCT Director of Advocacy.

Throughout the timeline of this report, and in the production of the report itself, the victims have had no say, and the reparations to the victims, including access to health-based rehabilitation and redress have not been a priority for the US government.

The victims of the CIA torture program have suffered a serious violation of their rights and have an explicit right to rehabilitation under international human rights and international humanitarian law, as referred to in Article 14 of the UN Convention against Torture.

Furthermore, the lengthy political process to release this report has created an unacceptable delay in truth and justice.

The IRCT calls on the government of the United States to fulfil its obligation under international human rights and international humanitarian law to ensure that the victims have free and prompt access to rehabilitation services.

In focus

[Human rights day: Psychosocial support in legal proceedings](#)

10 December 2014

MSF/Médecins Sans Frontières [to 13 December 2014]

Press release

[Doctors Without Borders Distributes Antimalarial Drugs in Sierra Leone](#)

December 10, 2014

FREETOWN, SIERRA LEONE—As part of its ongoing emergency response to Ebola in West Africa, Doctors Without Borders/Médecins Sans Frontières (MSF) has begun its largest-ever distribution of antimalarials in Sierra Leone, alongside the Ministry of Health, the medical humanitarian organization announced Wednesday. Teams distributed 1.5 million antimalarial treatments to residents of Freetown and five districts in the surrounding Western area over four days, with the aim of protecting people from malaria during the disease's peak season.

"In the context of Ebola, malaria is a major concern, because people who are sick with malaria have the same symptoms as people sick with Ebola," said Patrick Robataille, MSF field coordinator in Freetown. "As a result, most people turn up at Ebola treatment centers thinking that they have Ebola, when actually they have malaria. It's a huge load on the system, as well as being a huge stress on patients and their families."

Sierra Leone has the fifth highest prevalence of malaria globally, and the disease is the biggest killer of children under five in the country. Malaria symptoms include high fever, dizziness, headaches, muscle aches and fatigue, many of which are similar to the symptoms of early-stage Ebola.

The antimalarial drug artesunate amodiaquine can be used both to prevent and to treat malaria. Its widescale use is recommended in the context of an Ebola outbreak by the World Health Organization (WHO).

At 1.5 million treatments, this is the largest-ever distribution of antimalarials in an Ebola outbreak, as well as the largest ever conducted in Sierra Leone.

"The size of this campaign is in proportion to the scale of the Ebola epidemic –it's massive," said Robataille....

Mercy Corps [to 13 December 2014]

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

[Testimony on Ebola response by Javier Alvarez to the U.S. Senate Foreign Relations Subcommittee on African Affairs](#)

Liberia, December 12, 2014

On Wednesday, December 10, 2014, Mercy Corps was invited to testify before the U.S. Senate Foreign Relations Subcommittee on African Affairs for the hearing: "The Ebola Epidemic: The Keys to Success for the International Response." Javier Alvarez, Senior Team Lead of our Strategic Response and Global Emergencies Unit and Acting Country Director for Liberia spoke on behalf of the agency.

[Download and read the Mercy Corps testimony ►](#)

[Testimony of Andrea Koppel to the U.S. House of Representatives Tom Lantos Human Rights Commission](#)

Iraq, United States, December 12, 2014

Andrea Koppel, Mercy Corps' Vice President of Global Engagement and Policy, testifies at the U.S. House of Representatives Tom Lantos Human Rights Commission hearing on Humanitarian and Human Rights Concerns of the Current Iraq Crisis.

[Mercy Corps TLHRC testimony.pdf](#)

Operation Smile [to 13 December 2014]

Upcoming Mission Schedule

Dec 8 - 13 | Porto Velho, Brazil
Dec 12 - 14 | Cebu, Philippines
Jan 5 - 9 | Ho Chi Minh City, Vietnam
Jan 1 - 18 | Nagercoil, India

OXFAM [to 13 December 2014]

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

[Rough seas ahead for climate talks, Paris deal still on the horizon](#)

14 December 2014

Another year of increasingly extreme and destructive weather and new political momentum were not yet enough to boost the ambition of UN climate talks in Peru. The decisions made in Lima do not foreclose the possibility an agreement in Paris, but do little to improve the odds of success.

[Potential escalation of conflict in South Sudan threatens to push a million more into food crisis](#)

12 December 2014

A year after the fighting started in South Sudan the country remains in a severe food crisis with up to 2.5m people estimated to be at risk of hunger if the conflict continues, Oxfam warned today.

Partners In Health [to 13 December 2014]

[‘PIH Healed My Disease—and My Hunger’](#)

December 12, 2014

Daphroza Nyiranzoga, 59, is a single mother of five who lives in Rwanda’s Butaro District. Below is an edited transcript of an interview in which she reflects on her experience with Partners In Health and discusses the importance of community health workers.

PATH [to 13 December 2014]

No new digest content identified.

Plan International [to 13 December 2014]

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

No new digest content identified.

Save The Children [to 13 December 2014]

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

[Mark Shriver Statement on Early Childhood Education And Today's White House Summit](#)

December 12, 2014

[Malala and Thousands of Children Take a Stand Against Attacks on Education at Save the Children Peace Party](#)

Dec. 10, 2014

[Save the Children Praises Passage of Bipartisan "Feed the Future" Bill to Fight Child Hunger and Malnutrition](#)

December 10, 2014

SOS-Kinderdorf International [to 13 December 2014]

<http://www.sos-childrensvillages.org/about-sos/press/press-releases>

No new digest content identified.

Tostan [to 13 December 2014]

No new digest content identified.

Women for Women International [to 13 December 2014]

No new digest content identified.

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Disasters Emergency Committee [to 13 December 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]

No new digest content identified.

EHLRA/R2HC [to 13 December 2014]

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

No new digest content identified.

END Fund

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

No new digest content identified.

GAVI [to 13 December 2014]

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

[Gavi commits to purchasing Ebola vaccine for affected countries](#)

Vaccine Alliance ready to begin procurement as soon as WHO recommends a vaccine for use

Geneva, 11 December 2014 - Plans to purchase millions of doses of an Ebola vaccine to support large-scale vaccination efforts were today agreed by the board of Gavi, the Vaccine Alliance. Today's decision means that Gavi will be ready to act as soon as a safe, effective vaccine is recommended for use by the World Health Organization.

The Gavi Board endorsed plans that could see up to US\$ 300 million committed to procure the vaccines, to be used to immunise at risk populations in affected countries. Up to an

additional US\$ 90 million could be used to support countries to introduce the vaccines and to rebuild devastated health systems and restore immunisation services for all vaccines in Ebola-affected countries.

[Dr Flavia Bustreo appointed Vice Chair of Gavi Board](#)

11 December 2014

WHO Assistant Director-General will also chair the Board's Governance Committee

Geneva, 11 December 2014 - Gavi, the Vaccine Alliance has today appointed World Health Organization Assistant Director-General for Family, Women's and Children's Health Dr Flavia Bustreo as the new Vice Chair of its Board.

Global Fund [to 13 December 2014]

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

Press releases

11 December 2014 - [New Approach on Buying HIV Drugs Will Save \\$100 Million](#)

GENEVA – The Global Fund to Fight AIDS, Tuberculosis and Malaria is putting into place a new agreement for purchasing HIV medication that will save close to US\$100 million over two years, money that can be reinvested in lifesaving drugs and programs all over the world.

By using a Pooled Procurement Mechanism, the agreement means lower prices, swifter delivery and more predictable and sustainable long-term supply – delivering on the goals of the Global Fund's Market Shaping Strategy.

It also yields greater transparency, reducing risks and expenses for countries that implement programs treating people with HIV. The new approach will also deliver better HIV medication options for children.

The improvements were achieved by bundling the purchase of, high volume drugs with lower volume ones which are sometimes more difficult to obtain. Negotiators also focused on improved shelf life and active pharmaceutical ingredient security.

The Global Fund is entering agreements with eight suppliers, with three of them as long-term strategic partnerships...

10 December 2014 - [Côte d'Ivoire Launches Giveaway of 13 Million Nets to Fight Malaria](#)

09 December 2014 - [UNAIDS and Global Fund Sign Cooperation Agreement](#)

GENEVA – UNAIDS and the Global Fund to Fight AIDS, Tuberculosis and Malaria signaled their strong partnership with a renewed cooperation agreement to help countries achieve Fast-Track targets to end the AIDS epidemic as a global health threat by 2030.

At the core of the agreement is an improved way of collaborating that strengthens coordination mechanisms, and information-sharing at all levels and mutual accountability.

The UNAIDS Fast-Track approach emphasizes the need to focus on the countries, cities and communities most affected by HIV and recommends that resources be concentrated on the areas with the greatest impact. The new agreement will focus on maximizing support to countries and optimizing investments and impact at country level...

ODI [to 13 December 2014]

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

[Climate finance: is it making a difference? A review of the effectiveness of multilateral climate funds](#)

Publication - December 2014

[Smita Nakhooda](#), [Marigold Norman](#), [Sam Barnard](#), [Charlene Watson](#), [Romilly Greenhill](#), [Alice Caravani](#), [Nella Canales Trujillo](#) and [Graham Banton](#)

This report reviews the effectiveness of multilateral public climate finance and asks whether it is making a difference in reducing emissions and increasing resilience to climate change.

The Sphere Project [to 13 December 2014]

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

[Core Humanitarian Standard being launched today](#)

12 December 2014

The Core Humanitarian Standard will be launched in Copenhagen on 12 December. The event will include a roundtable discussion featuring Sphere India CEO Vikrant Mahajan among other panellists.

Start Network [Consortium of British Humanitarian Agencies] [to 13 December 2014]

http://www.start-network.org/news-blog/#.U9U_O7FR98E

[Humanitarian interoperability: is humanitarianism coming of age?](#)

December 10, 2014

David Hockaday, Transition Manager

At the heart of the December 2014 UNOCHA global humanitarian policy conference was the concept of "humanitarian interoperability". It is likely, as with all new buzzwords, that this concept will gather increasing momentum over the next 12 months, as practitioners, policy makers and decision-makers grapple to make sense of this new addition to the humanitarian lexicon...

Central to humanitarian interoperability will be common standards, values and principles, particularly as the currently insular aid system will need to collaborate with the new voices needed to be able to take gains to the necessary scale to meet the challenges of the 21st century.

These normative standards could be the uniting force, which help the aid agencies and private sector, business and commercial organisations find a common ground in the humanitarian endeavour..

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:: 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>

10 December 2014

[Foundation Launches New Grants in Detroit to Expand Grassroots Participation and Strengthen Civic Fabric as City Exits Bankruptcy](#)

Commitment to people of Detroit extends beyond Grand Bargain

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.wkcf.org/news-and-media#pp=10&p=1&f1=news>

[Statement of Support: New public-private initiative will boost high-quality early childhood education](#)

Dec. 10, 2014

BATTLE CREEK, Mich. – The W.K. Kellogg Foundation applauds President Barack Obama and his administration for their leadership in expanding access to high-quality early childhood education. Today's announcement of \$750 million in federal grants, more than \$330 million in corporate and philanthropic support and the launch of the "Invest in US" challenge will catalyze momentum for public and private investment in early childhood education for all children. The announcements made at the White House Summit on Early Childhood Education are critical steps in the right direction toward improving and increasing access to early childhood education.

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>

[500+ Organizations Launch Global Coalition to Accelerate Access to Universal Health Coverage](#)

Dec 12, 2014

The coalition was launched today, on the first-ever Universal Health Coverage Day, to stress the importance of universal access to health services for saving lives, ending extreme poverty, building resilience against the health effects of climate change and ending deadly epidemics

[The Rockefeller Foundation, The African Development Bank, and the United Nations Economic Commission for Africa Convene Forum on Africa's Growth](#)

Dec 09, 2014

The fund will provide support for innovations designed to accelerate the development of an inclusive economies agenda in Africa.

Robert Wood Johnson Foundation

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

[Robert Wood Johnson Foundation Statement on the Federal Health IT Strategic Plan 2015-2020](#)

December 10, 2014 | News Release

Praise from the foundation's John R. Lumpkin for the Office of the National Coordinator for Health IT's new Federal Health IT Strategic Plan.

Wellcome Trust

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

No new digest content identified.

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:: 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 Infection Control

Volume 42, Issue 12, p1255-13413 December 2014

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

[Reviewed earlier]

American Journal of Preventive Medicine

Volume 47, Issue 6, p689-852, e11-e14 December 2014

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

[Reviewed earlier]

American Journal of Public Health

Volume 104, Issue 12 (December 2014)

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

[Reviewed earlier]

American Journal of Tropical Medicine and Hygiene

December 2014; 91 (6)

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

[Reviewed earlier]

BMC Health Services Research

(Accessed 13 December 2014)

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

[No new relevant content]

BMC Infectious Diseases

(Accessed 13 December 2014)

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

Study protocol

Multicenter case–control study protocol of pneumonia etiology in children: Global Approach to Biological Research, Infectious diseases and Epidemics in Low-income countries (GABRIEL network)

Valentina Sanchez Picot, Thomas Bénet, Melina Messaoudi, Jean-Noël Telles, Monidarin Chou, Tekchheng , Jianwei Wang, Kunling Shen, Jean-William Pape, Vanessa Rouzier, Shally Awasthi, Nitin Pandey, Ashish Bavdekar, Sonali Sanghvi, Annick Robinson, Bénédicte Contamin, Jonathan Hoffmann, Maryam Sylla, Souleymane Diallo, Pagbajabyn Nymadawa, Budragchaagiin Dash-Yandag, Graciela Russomando, Wilma Basualdo, Marilda M Siqueira, Patricia Barreto, Florence Komurian-Pradel, Guy Vernet, Hubert Endtz, Philippe Vanhems, Gláucia Paranhos-Baccalà* and on behalf of the pneumonia GABRIEL network

Author Affiliations

BMC Infectious Diseases 2014, 14:635 doi:10.1186/s12879-014-0635-8

Published: 10 December 2014

Abstract (provisional)

Background

Data on the etiologies of pneumonia among children are inadequate, especially in developing countries. The principal objective is to undertake a multicenter incident case-control study of <5-year-old children hospitalized with pneumonia in developing and emerging countries, aiming to identify the causative agents involved in pneumonia while assessing individual and microbial factors associated with the risk of severe pneumonia.

Methods/design

A multicenter case-control study, based on the GABRIEL network, is ongoing. Ten study sites are located in 9 countries over 3 continents: Brazil, Cambodia, China, Haiti, India, Madagascar, Mali, Mongolia, and Paraguay. At least 1,000 incident cases and 1,000 controls will be enrolled and matched for age and date. Cases are hospitalized children <5-years with radiologically

confirmed pneumonia, and the controls are children without any features suggestive of pneumonia. Respiratory specimens are collected from all enrolled subjects to identify 19 viruses and 5 bacteria. Whole blood from pneumonia cases is being tested for 3 major bacteria. S. pneumoniae-positive specimens are serotyped. Urine samples from cases only are tested for detection of antimicrobial activity. The association between procalcitonin, C-reactive protein and pathogens is being evaluated. A discovery platform will enable pathogen identification in undiagnosed samples.

Discussion

This multicenter study will provide descriptive results for better understanding of pathogens responsible for pneumonia among children in developing countries. The identification of determinants related to microorganisms associated with pneumonia and its severity should facilitate treatment and prevention.

BMC Medical Ethics

(Accessed 13 December 2014)

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

Debate

Community engagement and the human infrastructure of global health research

Katherine F King, Pamela Kolopack, Maria W Merritt and James V Lavery

BMC Medical Ethics 2014, 15:84 doi:10.1186/1472-6939-15-84

Published: 13 December 2014

Abstract (provisional)

Background

Biomedical research is increasingly globalized with ever more research conducted in low and middle-income countries. This trend raises a host of ethical concerns and critiques. While community engagement (CE) has been proposed as an ethically important practice for global biomedical research, there is no agreement about what these practices contribute to the ethics of research, or when they are needed.

Discussion

In this paper, we propose an ethical framework for CE. The framework is grounded in the insight that relationships between the researcher and the community extend beyond the normal bounds of the researcher-research participant encounter and are the foundation of meaningful engagement. These relationships create an essential "human infrastructure" - a web of relationships between researchers and the stakeholder community--i.e., the diverse stakeholders who have interests in the conduct and/or outcomes of the research. Through these relationships, researchers are able to address three core ethical responsibilities: (1) identifying and managing non-obvious risks and benefits; (2) expanding respect beyond the individual to the stakeholder community; and (3) building legitimacy for the research project.

Summary

By recognizing the social and political context of biomedical research, CE offers a promising solution to many seemingly intractable challenges in global health research; however there are increasing concerns about what makes engagement meaningful. We have responded to those concerns by presenting an ethical framework for CE. This framework reflects our belief that the value of CE is realized through relationships between researchers and stakeholders, thereby advancing three distinct ethical goals. Clarity about the aims of researcher-stakeholder relationships helps to make engagement programs more meaningful, and contributes to greater clarity about when CE should be recommended or required.

Research article

Shortcomings of protocols of drug trials in relation to sponsorship as identified by Research Ethics Committees: analysis of comments raised during ethical review

Marlies van Lent, Gerard A Rongen and Henk J Out

BMC Medical Ethics 2014, 15:83 doi:10.1186/1472-6939-15-83

Published: 10 December 2014

Abstract (provisional)

Background

Submission of study protocols to research ethics committees (RECs) constitutes one of the earliest stages at which planned trials are documented in detail. Previous studies have investigated the amendments requested from researchers by RECs, but the type of issues raised during REC review have not been compared by sponsor type. The objective of this study was to identify recurring shortcomings in protocols of drug trials based on REC comments and to assess whether these were more common among industry-sponsored or non-industry trials.

Methods

Retrospective analysis of 226 protocols of drug trials approved in 2010-2011 by three RECs affiliated to academic medical centres in The Netherlands. For each protocol, information on sponsorship, number of participating centres, participating countries, study phase, registration status of the study drug, and type and number of subjects was retrieved. REC comments were extracted from decision letters sent to investigators after review and were classified using a predefined checklist that was based on legislation and guidelines on clinical drug research and previous literature.

Results

Most protocols received comments regarding participant information and consent forms (n = 182, 80.5%), methodology and statistical analyses (n = 160, 70.8%), and supporting documentation, including trial agreements and certificates of insurance (n = 154, 68.1%). Of the submitted protocols, 122 (54.0%) were non-industry and 104 (46.0%) were industry-sponsored trials. Non-industry trials more often received comments on subject selection (n = 44, 36.1%) than industry-sponsored trials (n = 18, 17.3%; RR, 1.58; 95% CI, 1.01 to 2.47), and on methodology and statistical analyses (n = 95, 77.9% versus n = 65, 62.5%, respectively; RR, 1.18; 95% CI, 1.01 to 1.37). Non-industry trials less often received comments on supporting documentation (n = 72, 59.0%) than industry-sponsored trials (n = 82, 78.8%; RR, 0.83; 95% CI, 0.72 to 0.95).

Conclusions

RECs identified important ethical and methodological shortcomings in protocols of both industry-sponsored and non-industry drug trials. Investigators, especially of non-industry trials, should better prepare their research protocols in order to facilitate the ethical review process.

BMC Public Health

(Accessed 13 December 2014)

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

[No new relevant content]

BMC Research Notes

(Accessed 13 December 2014)

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

[No new relevant content]

British Medical Journal

13 December 2014(vol 349, issue 7987)

<http://www.bmj.com/content/349/7987>

Research

Innovative research methods for studying treatments for rare diseases: methodological review

Joshua J Gagne, assistant professor, Lauren Thompson, research assistant, Kelly O'Keefe, research manager, Aaron S Kesselheim, assistant professor

BMJ 2014; 349 doi: <http://dx.doi.org/10.1136/bmj.g6802> (Published 24 November 2014) Cite this as: BMJ 2014;349:g6802

Abstract

Objective To examine methods for generating evidence on health outcomes in patients with rare diseases.

Design Methodological review of existing literature.

Setting PubMed, Embase, and Academic Search Premier searched for articles describing innovative approaches to randomized trial design and analysis methods and methods for conducting observational research in patients with rare diseases.

Main outcome measures We assessed information related to the proposed methods, the specific rare disease being studied, and outcomes from the application of the methods. We summarize methods with respect to their advantages in studying health outcomes in rare diseases and provide examples of their application.

Results We identified 46 articles that proposed or described methods for studying patient health outcomes in rare diseases. Articles covered a wide range of rare diseases and most (72%) were published in 2008 or later. We identified 16 research strategies for studying rare disease.

Innovative clinical trial methods minimize sample size requirements ($n=4$) and maximize the proportion of patients who receive active treatment ($n=2$), strategies crucial to studying small populations of patients with limited treatment choices. No studies describing unique methods for conducting observational studies in patients with rare diseases were identified.

Conclusions Though numerous studies apply unique clinical trial designs and considerations to assess patient health outcomes in rare diseases, less attention has been paid to innovative methods for studying rare diseases using observational data.

Clinical Review

Ebola virus disease

BMJ 2014; 349 doi: <http://dx.doi.org/10.1136/bmj.g7348> (Published 10 December 2014) Cite this as: BMJ 2014;349:g7348

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 12, December 2014, 849-924

<http://www.who.int/bulletin/volumes/92/12/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 13 December 2014]
<http://www.conflictandhealth.com/>
[No new relevant content]

Cost Effectiveness and Resource Allocation

(Accessed 13 December 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>
[Reviewed earlier]

Disability and Rehabilitation: Assistive Technology

Volume 10, Number 1 (January 2015)
<http://informahealthcare.com/toc/idt/current>
[New issue; No relevant content]

Disaster Medicine and Public Health Preparedness

Volume 8 - Issue 05 - October 2014
<http://journals.cambridge.org/action/displayIssue?jid=DMP&tab=currentissue>
[Reviewed earlier]

Disaster Prevention and Management

Volume 23 Issue 5

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

Disasters

January 2015 Volume 39, Issue 1 Pages 1–184

<http://onlinelibrary.wiley.com/doi/10.1111/disa.2015.39.issue-1/issuetoc>

Social media and disasters: a functional framework for social media use in disaster planning, response, and research

J. Brian Houston^{1,*}, Joshua Hawthorne², Mildred F. Perreault³, Eun Hae Park⁴, Marlo Goldstein Hode⁵, Michael R. Halliwell⁶, Sarah E. Turner McGowen⁷, Rachel Davis⁸, Shivani Vaid⁹, Jonathan A. McElderry¹⁰ and Stanford A. Griffith¹¹

Article first published online: 22 SEP 2014

DOI: 10.1111/disa.12092

Abstract

A comprehensive review of online, official, and scientific literature was carried out in 2012–13 to develop a framework of disaster social media. This framework can be used to facilitate the creation of disaster social media tools, the formulation of disaster social media implementation processes, and the scientific study of disaster social media effects. Disaster social media users in the framework include communities, government, individuals, organisations, and media outlets. Fifteen distinct disaster social media uses were identified, ranging from preparing and receiving disaster preparedness information and warnings and signalling and detecting disasters prior to an event to (re)connecting community members following a disaster. The framework illustrates that a variety of entities may utilise and produce disaster social media content. Consequently, disaster social media use can be conceptualised as occurring at a number of levels, even within the same disaster. Suggestions are provided on how the proposed framework can inform future disaster social media development and research.

Predicting support for non-pharmaceutical interventions during infectious outbreaks: a four region analysis

Francesca Matthews Pillemer^{1,*}, Robert J. Blendon², Alan M. Zaslavsky³ and Bruce Y. Lee⁴

Article first published online: 22 SEP 2014

DOI: 10.1111/disa.12089

Abstract

Non-pharmaceutical interventions (NPIs) are an important public health tool for responding to infectious disease outbreaks, including pandemics. However, little is known about the individual characteristics associated with support for NPIs, or whether they are consistent across regions. This study draws on survey data from four regions—Hong Kong, Singapore, Taiwan, and the United States—collected following the Severe Acute Respiratory Syndrome (SARS) outbreak of 2002–03, and employs regression techniques to estimate predictors of NPI support. It finds that characteristics associated with NPI support vary widely by region, possibly because of cultural variation and prior experience, and that minority groups tend to be less supportive of NPIs when arrest is the consequence of noncompliance. Prior experience of face-mask usage also results in increased support for future usage, as well as other NPIs. Policymakers should be attentive to local preferences and to the application of compulsory interventions. It is speculated here that some public health interventions may serve as ‘gateway’ exposures to future public health interventions.

Emergency Medicine Journal

December 2014, Volume 31, Issue 12

<http://emj.bmj.com/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 6, 01 December 2014

<http://eurpub.oxfordjournals.org/content/24/6>

[Reviewed earlier]

Food Policy

Volume 49, Part 1, In Progress (December 2014)

<http://www.sciencedirect.com/science/journal/03069192>

[Reviewed earlier]

Food Security

Volume 6, Issue 6, December 2014

<http://link.springer.com/journal/12571/6/6/page/1>

[Reviewed earlier]

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=8beccd89a51b49fc94adf1a5c9768f4f&pi=0>

[Reviewed earlier]

Global Health: Science and Practice (GHSP)

December 2014 | Volume 2 | Issue 4

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

It's not Ebola ... it's the systems

Victor K Barbiero

Glob Health Sci Pract 2014;2(4):374-375. First published online October 31, 2014.

<http://dx.doi.org/10.9745/GHSP-D-14-00186>

The 2014 Ebola outbreak in West Africa demonstrates key deficiencies in investment in health systems. Despite some modest investment in health systems, our field has instead largely chosen to pursue shorter-term, vertical efforts to more rapidly address key global health issues such as smallpox, polio, malaria, and HIV/AIDS. While those efforts have yielded substantial benefits, we have paid a price for the lack of investments in general systems strengthening. The Ebola deaths we have seen represent a small portion of deaths from many other causes resulting from weak systems. Major systems strengthening including crucial nonclinical elements will not happen overnight but should proceed in a prioritized, systematic way.

[Full Text](#) [Full Text \(PDF\)](#)

COMMENTARIES

The future of routine immunization in the developing world: challenges and opportunities

Angela K Shen, Rebecca Fields, Mike McQuestion

Glob Health Sci Pract 2014;2(4):381-394. <http://dx.doi.org/10.9745/GHSP-D-14-00137>

[Full Text](#) [Full Text \(PDF\)](#)

Vaccine costs in the developing world have grown from < US\$1/child in 2001 to about \$21 for boys and \$35 for girls in 2014, as more and costlier vaccines are being introduced into national immunization programs. To address these and other challenges, additional efforts are needed to strengthen 8 critical components of routine immunization: (1) policy, standards, and guidelines; (2) governance, organization, and management; (3) human resources; (4) vaccine, cold chain, and logistics management; (5) service delivery; (6) communication and community partnerships; (7) data generation and use; and (8) sustainable financing.

Strategies to reduce risks in ARV supply chains in the developing world

Chris Larson, Robert Burn, Anja Minnick-Sakal, Meaghan O'Keefe Douglas, Joel Kuritsky

Glob Health Sci Pract 2014;2(4):395-402. <http://dx.doi.org/10.9745/GHSP-D-14-00105>

[Full Text](#) [Full Text \(PDF\)](#)

Key strategies of the main ARV procurement program for PEPFAR to reduce supply chain risks include: (1) employing pooled procurement to reduce procurement and shipping costs and to accommodate changing country needs by making stock adjustments at the regional level, and (2) establishing regional distribution centers to facilitate faster turnaround of orders within defined catchment areas.

VIEWPOINTS

A stewardship approach to shaping the future of public health supply chain systems

Alan Bornbusch, Todd Dickens, Carolyn Hart, Chris Wright

Glob Health Sci Pract 2014;2(4):403-409. First published online October 29, 2014.

<http://dx.doi.org/10.9745/GHSP-D-14-00123>

[Full Text](#) [Full Text \(PDF\)](#)

Guiding Principles: (1) Governments should see themselves as stewards of supply chains, providing vision, guidance, and oversight, not necessarily as operators of supply chains. (2)

Governments should not be afraid to leverage the multiple supply chain actors and diverse options available; these can be woven into a coherent, integrated system, providing flexibility and reducing risk. (3) Governments will need new skills in leadership, regulation, market research, contract design, oversight of outsourced providers, financial analysis, and alliance-building.

Global Health Governance

[Accessed 13 December 2014]

<http://blogs.shu.edu/ghg/category/complete-issues/summer-2013/>

[No new relevant content]

Global Public Health

Volume 10, Issue 1, 2015

http://www.tandfonline.com/toc/rqph20/10/1#.VI0Y33tW_4U

[The integration of water, sanitation and hygiene services into the US President's Emergency Plan for AIDS Relief: A qualitative study](#)

Lyana B. Mahmoudia, Jennifer L. Plattb & Jay P. Grahamac*

DOI:10.1080/17441692.2014.966736

pages 1-14

Abstract

Water, sanitation and hygiene (WASH) interventions have been associated with improving the health of people living with HIV/AIDS (PLHIV). WASH is increasingly integrated into the HIV sector and is now considered a key component of the transition from an emergency response to a better incorporated and coordinated AIDS response. However, limited research exists on integration efforts. This qualitative research study aims to address the limited body of research on WASH integration into HIV programmes through examining the US President's Emergency Plan for AIDS Relief (PEPFAR). PEPFAR is the US government's initiative to combat AIDS in the most afflicted countries. This study analyses the perceptions of people who have worked or are working on WASH integration into PEPFAR, highlighting their views on accomplishments, challenges and areas for improvement. It concludes with recommendations for moving forward.

[An economic framework for transitioning to capacity building](#)

Eric Baranicka, Aaron Bairdb* & Ajay Vinzecz

DOI:10.1080/17441692.2014.964745

pages 15-27

Abstract

Global Health Organizations (GHOs) often focus on resource provisioning strategies to assist communities in need, especially when disaster strikes. While such strategies are commendable, how should GHOs approach the challenge of developing sustainable strategic objectives after critical needs have been addressed? Leveraging the context of GHOs partnering with communities in need of support after disaster strikes, we propose an economic framework for use in strategic assessment and transition planning. We focus on a strategic process by which GHOs can systematically assess and manage the temporal shift from resource provisioning to capacity building strategies. The proposed framework is applied to pragmatic field experiences undertaken by the American Red Cross in the aftermath of the 2007 Peru earthquake. We specifically develop and propose: (1) An economic strategy assessment framework for GHOs seeking to provide support to communities characterised by high risk variances, incentive

complexities and contingencies, and, (2) A practical strategic transition model for GHOs that emphasises proactively moving towards capacity building programme objectives through an emphasis on co-creation of value with community partners.

Globalization and Health

[Accessed 13 December 2014]

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

Research

Integration of community home based care programmes within national primary health care revitalisation strategies in Ethiopia, Malawi, South-Africa and Zambia: a comparative assessment

Aantjes C, Quinlan T and Bunders J Globalization and Health 2014, 10:85 (11 December 2014)

Commentary

Non-Communicable Diseases (NCDs) in developing countries: a symposium report

Islam SMS, Purnat TD, Phuong NTA, Mwingira U, Schacht K and Fröschl G Globalization and Health 2014, 10:81 (11 December 2014)

Health Affairs

December 2014; Volume 33, Issue 12

<http://content.healthaffairs.org/content/current>

Children's Health

How A New Funding Model Will Shift Allocations From The Global Fund To Fight AIDS, Tuberculosis, And Malaria

Victoria Y. Fan^{1,*}, Amanda Glassman² and Rachel L. Silverman³

Author Affiliations

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Corresponding author

Abstract

Policy makers deciding how to fund global health programs in low- and middle-income countries face important but difficult questions about how to allocate resources across countries. In this article we present a typology of three allocation methodologies to align allocations with priorities. We then apply our typology to the Global Fund to Fight AIDS, Tuberculosis, and Malaria. We examined the Global Fund's historical HIV allocations and its predicted allocations under a new funding model that creates an explicit allocation methodology. We found that under the new funding model, substantial shifts in the Global Fund's portfolio are likely to result from concentrating resources in countries with more HIV cases and lower per capita incomes. For example, South Africa, which had 15.8 percent of global HIV cases in 2009, could see its Global Fund HIV funding more than triple, from historic levels that averaged 3.0 percent to 9.7 percent of total Global Fund allocations. The new funding model methodology is expected, but not guaranteed, to improve the efficiency of Global Fund allocations in comparison to historical practice. We conclude with recommendations for the Global Fund and other global

health donors to further develop their allocation methodologies and processes to improve efficiency and transparency.

International Survey Of Older Adults Finds Shortcomings In Access, Coordination, And Patient-Centered Care

Robin Osborn^{1,*}, Donald Moulds², David Squires³, Michelle M. Doty⁴ and Chloe Anderson⁵

Author Affiliations

1Robin Osborn (ro@cmwf.org) is vice president and director of the International Health Policy and Practice Innovations program at the Commonwealth Fund, in New York City.

2Donald Moulds is executive vice president for programs at the Commonwealth Fund.

3David Squires is senior researcher to the president at the Commonwealth Fund.

4Michelle M. Doty is vice president of survey research and evaluation at the Commonwealth Fund.

5Chloe Anderson is a research associate in the International Health Policy and Practice Innovations program at the Commonwealth Fund.

Corresponding author

Abstract

Industrialized nations face the common challenge of caring for aging populations, with rising rates of chronic disease and disability. Our 2014 computer-assisted telephone survey of the health and care experiences among 15,617 adults age sixty-five or older in Australia, Canada, France, Germany, the Netherlands, New Zealand, Norway, Sweden, Switzerland, the United Kingdom, and the United States has found that US older adults were sicker than their counterparts abroad. Out-of-pocket expenses posed greater problems in the United States than elsewhere. Accessing primary care and avoiding the emergency department tended to be more difficult in the United States, Canada, and Sweden than in other surveyed countries. One-fifth or more of older adults reported receiving uncoordinated care in all countries except France. US respondents were among the most likely to have discussed health-promoting behaviors with a clinician, to have a chronic care plan tailored to their daily life, and to have engaged in end-of-life care planning. Finally, in half of the countries, one-fifth or more of chronically ill adults were caregivers themselves.

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 10 - Special Issue 01 January 2015

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

SPECIAL ISSUE: Global Financial Crisis, Health and Health Care

[Reviewed earlier].

Health Policy and Planning

Volume 29 Issue 8 December 2014

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

[Reviewed earlier]

Health Research Policy and Systems

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

[Accessed 13 December 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

[Reviewed earlier]

Human Service Organizations Management, Leadership & Governance

Volume 38, Issue 5, 2014

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

[Reviewed earlier]

Humanitarian Exchange Magazine

ISSUE 62 September 2014

<http://www.odihpn.org/humanitarian-exchange-magazine/issue-62>

[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 13 December 2014]

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

[No new relevant content]

International Health

Volume 6 Issue 4 December 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>

[Reviewed earlier]

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>

[Reviewed earlier]

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 6, 2014

<http://www.tandfonline.com/toc/tsdw20/current#.VIORRslDg2>

[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

December 10, 2014, Vol 312, No. 22

<http://jama.jamanetwork.com/issue.aspx>
[New issue; No relevant content]

JAMA Pediatrics

December 2014, Vol 168, No. 12
<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.bmj.com/content/current>
[Reviewed earlier]

Journal of Global Ethics

Volume 10, Issue 2, 2014
<http://www.tandfonline.com/toc/rjge20/.U2V-Elf4L0l#.VAJEj2N4WF8>
Tenth Anniversary Forum: The Future of Global Ethics
[Reviewed earlier]

Journal of Health Care for the Poor and Underserved (JHCPU)

Volume 25, Number 4, November 2014
http://muse.jhu.edu/journals/journal_of_health_care_for_the_poor_and_underserved/toc/hpu.25.4.html
[Reviewed earlier]

Journal of Humanitarian Logistics and Supply Chain Management

Volume 4 Issue 2
<http://www.emeraldinsight.com/toc/jhlscm/4/2>
[Reviewed earlier]

Journal of Immigrant and Minority Health

Volume 16, Issue 6, December 2014

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

[Reviewed earlier]

Journal of Immigrant & Refugee Studies

Volume 12, Issue 4, 2014

<http://www.tandfonline.com/toc/wimm20/current#.VFWeF8l4WF9>

Special Issue: New Forms of Intolerance in European Political Life

[Reviewed earlier]

Journal of Infectious Diseases

Volume 210 Issue 12 December 15, 2014

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

[Reviewed earlier]

Journal of International Development

November 2014 Volume 26, Issue 8 Pages 1097–1196

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

[Reviewed earlier]

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

December 2014, Volume 40, Issue 12

<http://jme.bmj.com/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 6 (2014) December 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

Dec 13, 2014 Volume 384 Number 9960 p2083-2172 e63-e66

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

Editorial

Universal health coverage post-2015: putting people first

The Lancet

DOI: [http://dx.doi.org/10.1016/S0140-6736\(14\)62355-2](http://dx.doi.org/10.1016/S0140-6736(14)62355-2)

Summary

Dec 12, 2014 marks the world's first Universal Health Coverage (UHC) Day. Defined in the [World Health Report 2010](#), UHC means that all people who need quality, essential health services (prevention, promotion, treatment, rehabilitation, and palliation) receive them without enduring financial hardship. UHC also means different things to different people. Vivian Lin, health systems director (WHO regional office for the Western Pacific), told The Lancet, "some define UHC as a journey or an aspiration but it is actually a strategy to get to equitable and sustainable outcomes".

Comment

Meningococcal carriage: the dilemma of 4CMenB vaccine

Muhammed-Kheir Taha, Ala-Eddine Deghmane

Published Online: 18 August 2014

DOI: [http://dx.doi.org/10.1016/S0140-6736\(14\)60935-1](http://dx.doi.org/10.1016/S0140-6736(14)60935-1)

Summary

The prevalence of acute bacterial meningitis and septicaemia due to *Haemophilus influenzae* b (Hib), *Streptococcus pneumoniae*, and *Neisseria meningitidis* has greatly decreased in Europe and North America since the successful introduction of capsular polysaccharide conjugate vaccines targeting Hib, serogroup C (and ACWY in the USA) meningococci, and *S pneumoniae*. Incidence of meningitis due to *N meningitidis* serogroup A has also decreased in sub-Saharan Africa since the introduction of the meningococcal serogroup A conjugate vaccine (MenAfriVac).

Comment

Ebola and human rights in west Africa

Patrick M Eba

Published Online: 19 September 2014

DOI: [http://dx.doi.org/10.1016/S0140-6736\(14\)61412-4](http://dx.doi.org/10.1016/S0140-6736(14)61412-4)

Summary

The fear caused by the Ebola outbreak in west Africa, which is projected to infect some 20 000 people, is understandable.¹ However, the disproportionate measures recently adopted in some of the affected countries are a cause for concern. Some 25 years ago, Jonathan Mann, then Director of WHO's Global Programme on AIDS, warned world leaders alarmed at the relentless spread of HIV:

Comment

Offline: Making it happen for women and girls

Richard Horton

DOI: [http://dx.doi.org/10.1016/S0140-6736\(14\)62046-8](http://dx.doi.org/10.1016/S0140-6736(14)62046-8)

Summary

It was not a matter of forgetting. "There were forces within the UN that didn't want to include contraception." Dr Babatunde Osotimehin is the Executive Director of the United Nations Population Fund (UNFPA) and doesn't mince his words. He was speaking last week at the launch of the Guttmacher Institute's signature report, Adding It Up. Sexual and reproductive health and rights were "deliberately" dropped by the UN back in 2000, he argued. Those forces are still active today. And they are "more nimble in pushing back".

Articles

Effect of a quadrivalent meningococcal ACWY glycoconjugate or a serogroup B meningococcal vaccine on meningococcal carriage: an observer-blind, phase 3 randomised clinical trial

Prof Robert C Read, MD, David Baxter, PhD, David R Chadwick, PhD, Prof Saul N Faust, FRCPH, Prof Adam Finn, PhD, Prof Stephen B Gordon, MD, Prof Paul T Heath, FRCPCH, Prof David J M Lewis, MD, Prof Andrew J Pollard, PhD, David P J Turner, PhD, Rohit Bazaz, MD Amitava Ganguli, MRCP, Tom Havelock, MRCP, Prof Keith R Neal, MD, Ifeanyichukwu O Okike, MD, Begonia Morales-Aza, BSc, Kamlesh Patel, BSc, Matthew D Snape, MD, John Williams, MRCP, Stefanie Gilchrist, MSc, Steve J Gray, PhD, Prof Martin C J Maiden, PhD, Daniela Toneatto, MD, Huajun Wang, MSc, Maggie McCarthy, MPH, Peter M Dull, MD, Prof Ray Borrow, PhD

Published Online: 18 August 2014

DOI: [http://dx.doi.org/10.1016/S0140-6736\(14\)60842-4](http://dx.doi.org/10.1016/S0140-6736(14)60842-4)

Summary

Background

Meningococcal conjugate vaccines protect individuals directly, but can also confer herd protection by interrupting carriage transmission. We assessed the effects of meningococcal quadrivalent glycoconjugate (MenACWY-CRM) or serogroup B (4CMenB) vaccination on meningococcal carriage rates in 18–24-year-olds.

Methods

In this phase 3, observer-blind, randomised controlled trial, university students aged 18–24 years from ten sites in England were randomly assigned (1:1:1, block size of three) to receive two doses 1 month apart of Japanese Encephalitis vaccine (controls), 4CMenB, or one dose of MenACWY-CRM then placebo. Participants were randomised with a validated computer-generated random allocation list. Participants and outcome-assessors were masked to the treatment group. Meningococci were isolated from oropharyngeal swabs collected before

vaccination and at five scheduled intervals over 1 year. Primary outcomes were cross-sectional carriage 1 month after each vaccine course. Secondary outcomes included comparisons of carriage at any timepoint after primary analysis until study termination. Reactogenicity and adverse events were monitored throughout the study. Analysis was done on the modified intention-to-treat population, which included all enrolled participants who received a study vaccination and provided at least one assessable swab after baseline. This trial is registered with ClinicalTrials.gov, registration number [NCT01214850](https://clinicaltrials.gov/ct2/show/study/NCT01214850).

Findings

Between Sept 21 and Dec 21, 2010, 2954 participants were randomly assigned (987 assigned to control [984 analysed], 979 assigned to 4CMenB [974 analysed], 988 assigned to MenACWY-CRM [983 analysed]); 33% of the 4CMenB group, 34% of the MenACWY-CRM group, and 31% of the control group were positive for meningococcal carriage at study entry. By 1 month, there was no significant difference in carriage between controls and 4CMenB (odds ratio 1·2, 95% CI 0·8–1·7) or MenACWY-CRM (0·9, [0·6–1·3]) groups. From 3 months after dose two, 4CMenB vaccination resulted in significantly lower carriage of any meningococcal strain (18·2% [95% CI 3·4–30·8] carriage reduction), capsular groups BCWY (26·6% [10·5–39·9] carriage reduction), capsular groups CWY (29·6% [8·1–46·0] carriage reduction), and serogroups CWY (28·5% [2·8–47·5] carriage reduction) compared with control vaccination. Significantly lower carriage rates were also noted in the MenACWY-CRM group compared with controls: 39·0% (95% CI 17·3–55·0) carriage reduction for serogroup Y and 36·2% (15·6–51·7) carriage reduction for serogroup CWY. Study vaccines were generally well tolerated, with increased rates of transient local injection pain and myalgia in the 4CMenB group. No safety concerns were identified.

Interpretation

Although we detected no significant difference between groups at 1 month after vaccine course, MenACWY-CRM and 4CMenB vaccines reduced meningococcal carriage rates during 12 months after vaccination and therefore might affect transmission when widely implemented.

Funding

Novartis Vaccines.

The Lancet Global Health

Dec 2014 Volume 2 Number 12 e672 – 736

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

[Reviewed earlier]

The Lancet Infectious Diseases

Dec 2014 Volume 14 Number 12 p1163 – 1292

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

[Reviewed earlier]

Maternal and Child Health Journal

Volume 18, Issue 10, December 2014

<http://link.springer.com/journal/10995/18/10/page/1>

Special Issue: Island Maternal and Child Health

[20 articles covering a range of health topics pertinent to the special issue theme]

[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 516 Number 7530 pp143-282 11 December 2014

http://www.nature.com/nature/current_issue.html

[New issue; No relevant content]

New England Journal of Medicine

December 11, 2014 Vol. 371 No. 24

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

Perspective

[Ebola Vaccine — An Urgent International Priority](#)

Rupa Kanapathipillai, M.D., Ana Maria Henao Restrepo, M.D., Patricia Fast, M.D., Ph.D., David Wood, Ph.D., Christopher Dye, D.Phil., Marie-Paule Kieny, Ph.D., and Vasee Moorthy, B.M., B.Ch., Ph.D.

N Engl J Med 2014; 371:2249-2251 [December 11, 2014](#)

DOI: 10.1056/NEJMp1412166

This article was published on October 7, 2014, at NEJM.org.

Nonprofit and Voluntary Sector Quarterly

December 2014; 43 (6)

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

[Reviewed earlier]

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]

Pediatrics

December 2014, VOLUME 134 / ISSUE 6

<http://pediatrics.aappublications.org/current.shtml>
[Reviewed earlier]

PLOS Currents: Disasters

[Accessed 13 December 2014]

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

Communicable Diseases Surveillance System in East Azerbaijan Earthquake: Strengths and Weaknesses

December 8, 2014 · [Research article](#)

Background:

A Surveillance System was established for 19 diseases/syndromes in order to prevent and control communicable diseases after 2012 East Azerbaijan earthquakes. This study was conducted to investigate the strengths and weaknesses of the established SS.

Methods:

This study was carried out on an interview-based qualitative study using content analysis in 2012. Data was collected by semi-structured deep interviews and surveillance data. Fifteen interviews were conducted with experts and health system managers who were engaged in implementing the communicable disease surveillance system in the affected areas. The selection of participants was purposeful. Data saturation supported the sample size. The collected data was analyzed using the principles suggested by Strauss and Corbin.

Results:

Establishment of the disease surveillance system was rapid and inexpensive. It collected the required data fast. It also increased confidence in health authorities that the diseases would be under control in earthquake-stricken regions. Non estimated denominator for calculating the rates (incidence & prevalence), non-participation of the private sector and hospitals, rapid turnover of health staff and unfamiliarity with the definitions of the diseases were the weak points of the established disease SS.

Conclusion:

During the time when surveillance system was active, no significant outbreak of communicable diseases was reported. However, the surveillance system had some weaknesses. Thus, considering Iran's susceptibility to various natural hazards, repeated exercises should be conducted in the preparedness phase to decrease the weaknesses. In addition, other types of surveillance system such as web-based or mobile-based systems should be piloted in disaster situations for future.

PLOS Currents: Outbreaks

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

(Accessed 13 December 2014)

Assessment of the Risk of Ebola Importation to Australia

December 10, 2014 · [Research](#)

Objectives:

To assess the risk of Ebola importation to Australia during the first six months of 2015, based upon the current outbreak in West Africa.

Methodology:

We assessed the risk under two distinct scenarios: (i) assuming that significant numbers of cases of Ebola remain confined to Guinea, Liberia and Sierra Leone, and using historic

passenger arrival data into Australia; and, (ii) assuming potential secondary spread based upon international flight data. A model appropriate to each scenario is developed, and parameterised using passenger arrival card or international flight data, and World Health Organisation case data from West Africa. These models were constructed based on WHO Ebola outbreak data as at 17 October 2014 and 3 December 2014. An assessment of the risk under each scenario is reported. On 27 October 2014 the Australian Government announced a policy change, that visas from affected countries would be refused/cancelled, and the predicted effect of this policy change is reported.

Results:

The current probability of at least one case entering Australia by 1 July 2015, having travelled directly from West Africa with historic passenger arrival rates into Australia, is 0.34. Under the new Australian Government policy of restricting visas from affected countries (as of 27 October 2014), the probability of at least one case entering Australia by 1 July 2015 is reduced to 0.16. The probability of at least one case entering Australia by 1 July 2015 via an outbreak from a secondary source country is approximately 0.12.

Conclusions:

Our models suggest that if the transmission of Ebola remains unchanged, it is possible that a case will enter Australia within the first six months of 2015, either directly from West Africa (even when current visa restrictions are considered), or via secondary outbreaks elsewhere. Government and medical authorities should be prepared to respond to this eventuality. Control measures within West Africa over recent months have contributed to a reduction in projected risk of a case entering Australia. A significant further reduction of the rate at which Ebola is proliferating in West Africa, and control of the disease if and when it proliferates elsewhere, will continue to result in substantially lower risk of the disease entering Australia.

PLOS Medicine

(Accessed 13 December 2014)

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

Open Access

Policy Forum

[From Joint Thinking to Joint Action: A Call to Action on Improving Water, Sanitation, and Hygiene for Maternal and Newborn Health](#)

Yael Velleman mail, Elizabeth Mason, Wendy Graham, Lenka Benova, Mickey Chopra, Oona M. R. Campbell, Bruce Gordon, Sanjay Wijesekera, Sennen Hounton, Joanna Esteves Mills, Val Curtis, Kaosar Afsana, Sophie Boisson, [...], Oliver Cumming , [view all]

Published: December 12, 2014

DOI: 10.1371/journal.pmed.1001771

Summary Points

:: There is sufficient evidence that water, sanitation, and hygiene (WASH) may impact maternal and newborn health (MNH) to warrant greater attention from all stakeholders involved in improving MNH and achieving universal WASH access.

:: Enabling stronger integration between the WASH and health sectors has the potential to accelerate progress on MNH; this should be accompanied by improving monitoring of WASH in health care facilities providing MNH services as part of routine national-level monitoring, and at the global level through international instruments.

:: Global and national efforts to reduce maternal and newborn mortality and morbidity should adequately reflect WASH as a pre-requisite for ensuring the quality, effectiveness, and use of health care services.

:: The Post-2015 development framework is an opportunity for a stronger, more inter-sectoral response to the MNH challenge, and the goals and targets aimed at maximizing healthy lives and increasing access to quality health care should adequately embed WASH targets and success indicators.

:: Further implementation research is needed to identify effective interventions to improve WASH at home and in health care facilities, and to impact on MNH in different health system contexts.

PLoS Neglected Tropical Diseases

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

(Accessed 13 December 2014)

Risk Factors Associated with Malnutrition in One-Year-Old Children Living in the Peruvian Amazon

Serene A. Joseph, Martín Casapía, Brittany Blouin, Mathieu Maheu-Giroux, Elham Rahme, Theresa W. Gyorkos

Research Article | published 11 Dec 2014 | PLOS Neglected Tropical Diseases
10.1371/journal.pntd.0003369

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

Kazuyo Ichimori, Jonathan D. King, Dirk Engels, Aya Yajima, Alexei Mikhailov, Patrick Lammie, Eric A. Ottesen

Policy Platform | published 11 Dec 2014 | PLOS Neglected Tropical Diseases
10.1371/journal.pntd.0003328

PLoS One

[Accessed 13 December 2014]

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

Research Article

The Link between Inequality and Population Health in Low and Middle Income Countries: Policy Myth or Social Reality?

Ioana van Deurzen mail, Wim van Oorschot, Erik van Ingen

Published: December 11, 2014

DOI: 10.1371/journal.pone.0115109

Abstract

An influential policy idea states that reducing inequality is beneficial for improving health in the low and middle income countries (LMICs). Our study provides an empirical test of this idea: we utilized data collected by the Demographic and Health Surveys between 2000 and 2011 in as much as 52 LMICs, and we examined the relationship between household wealth inequality and two health outcomes: anemia status (of the children and their mothers) and the women's experience of child mortality. Based on multi-level analyses, we found that higher levels of household wealth inequality related to worse health, but this effect was strongly reduced when we took into account the level of individuals' wealth. However, even after accounting for the differences between individuals in terms of household wealth and other characteristics, in those

LMICs with higher household wealth inequality more women experienced child mortality and more children were tested with anemia. This effect was partially mediated by the country's level and coverage of the health services and infrastructure. Furthermore, we found higher inequality to be related to a larger health gap between the poor and the rich in only one of the three examined samples. We conclude that an effective way to improve the health in the LMICs is to increase the wealth among the poor, which in turn also would lead to lower overall inequality and potential investments in public health infrastructure and services.

PLoS Pathogens

<http://journals.plos.org/plospathogens/>

(Accessed 13 December 2014)

[No new relevant content]

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

(Accessed 13 December 2014)

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

[No new relevant content]

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 3 November 2014

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

Special Symposium on Dual Loyalties: Health Providers Working for the State

[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 4 December 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

[Reviewed earlier]

Risk Analysis

October 2014 Volume 34, Issue 10 Pages 1775–1967

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

[Reviewed earlier]

Science

12 December 2014 vol 346, issue 6215, pages 1261-1424

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

[New issue; No relevant content]

Social Science & Medicine

Volume 126, *In Progress* (February 2015)

<http://www.sciencedirect.com/science/journal/02779536/126>

[Latent and manifest empiricism in Q'eqchi' Maya healing: A case study of HIV/AIDS](#)

Original Research Article

Pages 9-16

James B. Waldrum, Andrew R. Hatala

Abstract

Highlights

- :: Develops a framework for understanding the empirical nature of Indigenous healing.
- :: Argues for compatibility of traditional medicine and biomedicine.
- :: Presents ethnographic case study of treatment of HIV/AIDS by Q'eqchi' Maya healers.
- :: Argues the need for communication between traditional medicine and biomedicine.

[Inequalities in social capital and health between people with and without disabilities](#)

Original Research Article

Pages 26-35

Johanna Mithen, Zoe Aitken, Anne Ziersch, Anne M. Kavanagh

Abstract

Highlights

- :: Australian adults with disabilities have less access to social capital.
- :: Australian adults with disabilities have poorer self-rated health.

:: Lower levels of social capital explain little of the health inequalities.
:: People with psychological and intellectual impairments fare worst.

Stability: International Journal of Security & Development

[accessed 13 December 2014]

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

Losses of Humanity in Times of War: The Actions of Alternative Subjects of Justice

Julia Monárrez

10 Dec 2014

Abstract

This article discusses loss of humanity due to violence in Ciudad Juarez (2008–2014) and the actions of alternative subjects of justice – the organized civil society – seeking to address it. This paper resonates with theoretical currents of feminism and humanism, both of which have created a critical apparatus for thinking about social inequality in the context of life, death, and injustice. The discussion draws on the theoretical concepts of discourse societies, necropolitics, private government and actions. With this theoretical structure, the paper seeks to understand the political actions of eight civil society organizations aiming to recover the right to the body, to space and to be a political subject for a community shattered by violence. The paper argues that, through these actions, they helped to prevent crime, enhance public safety and stabilise a society suffering from continued violence due in large part to the war on drugs.

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

[No relevant content]

Tropical Medicine & International Health

January 2015 Volume 20, Issue 1 Pages 1–119

<http://onlinelibrary.wiley.com/doi/10.1111/tmi.2014.20.issue-1/issuetoc>

Original Article

Participation in medical research as a resource-seeking strategy in socio-economically vulnerable communities: call for research and action

Raffaella M. Ravinetto^{1,2,*}, Muhammed O. Afolabi^{3,4}, Joseph Okebe^{3,4}, Jennifer Ilo Van uil^{5,6},

Pascal Lutumba^{7,8}, Hypolite Muhindo Mavoko⁸, Alain Nahum⁹, Halidou Tinto¹⁰, Adamu Addissie¹¹, Umberto D'Alessandro^{3,4,12} and Koen Peeters Grietens^{12,13,14}

Article first published online: 10 OCT 2014

DOI: 10.1111/tmi.12396

Abstract

The freedom to consent to participate in medical research is a complex subject, particularly in socio-economically vulnerable communities, where numerous factors may limit the efficacy of the informed consent process. Informal consultation among members of the Switching the Poles Clinical Research Network coming from various sub-Saharan African countries, that is Burkina Faso, The Gambia, Rwanda, Ethiopia, the Democratic Republic of Congo (DRC) and Benin, seems to support the hypothesis that in socio-economical vulnerable communities with inadequate access to health care, the decision to participate in research is often taken irrespectively of the contents of the informed consent interview, and it is largely driven by the opportunity to access free or better quality care and other indirect benefits. Populations' vulnerability due to poverty and/or social exclusion should obviously not lead to exclusion from medical research, which is most often crucially needed to address their health problems. Nonetheless, to reduce the possibility of exploitation, there is the need to further investigate the complex links between socio-economical vulnerability, access to health care and individual freedom to decide on participation in medical research. This needs bringing together clinical researchers, social scientists and bioethicists in transdisciplinary collaborative research efforts that require the collective input from researchers, research sponsors and funders.

UN Chronicle

Vol.LI No. 2 2014 September 2014

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

[Reviewed earlier]

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

[Reviewed earlier]

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: Additional Coverage

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 13 December 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.

[12 December 2014](#) | *UNMEER External Situation Report*

Key Political and Economic Developments

1. UN Secretary-General Ban Ki-moon yesterday announced the appointment of Ismail Ould Cheikh Ahmed of Mauritania as his new Special Representative and Head of UNMEER. Mr. Ould Cheikh Ahmed will succeed Anthony Banbury, who will return to New York in early January 2015. The Secretary-General expressed his gratitude to Mr. Banbury for his vision and leadership of UNMEER, and for his commitment to fighting this unprecedented EVD outbreak. Bringing more than 28 years of development and humanitarian assistance experience with the United Nations in Africa, the Middle East and Eastern Europe, Mr. Ould Cheikh Ahmed is currently Deputy Special Representative of the Secretary-General and Deputy Head of the United Nations Support Mission in Libya (UNSMIL), United Nations Resident Coordinator, Humanitarian Coordinator and United Nations Development Programme (UNDP) Resident Representative. He served as Resident Coordinator, Humanitarian Coordinator and UNDP Resident Representative in Syria (2008-2012) and Yemen (2012-2014).

2. The Red Cross warned on Thursday of a possible rise in the rate of EVD infections in West Africa as people travel across the region during the festive holidays. Urging people to take extra care to limit the spread of the virus, International Federation of the Red Cross and Red Crescent Societies (IFRC) Secretary General Elhadj As Sy said increasing rates were not inevitable but were a real risk. "Now is the time to be even more vigilant," he told an audience at the Royal Institute of International Affairs in London. "We all welcome the plateauing and the signs of declines we are seeing in some places, but that should not be a reason for complacency."

Response Efforts and Health

5. The Liberian Ministry of Health and Social Welfare (MOHSW) and UNDP visited eleven out of the fifteen counties to verify, and in some cases create, lists of Ebola response workers that are still to be paid. The MOHSW committed to paying eight of the counties this week for three months back-dated pay, though payments are yet to be verified with the Ministry of Finance. Challenges to making payments continue to emerge, including that in several counties individuals refuse to open bank accounts because they have never had bank accounts before and are not comfortable opening one for the first time.

Resource Mobilisation

11. Saudi Arabia's King Abdullah has granted US\$ 35 million to fight EVD, the Islamic Development Bank said Thursday. The grant will provide schools and airports in West Africa with heat sensors and medical equipment to help prevent and treat the illness, Ahmed Mohamed Ali, president of the Jeddah-based IDB, said in a statement. The funds will also help to establish specialized treatment centers in the most affected countries -- Sierra Leone, Guinea and Liberia.

12. The OCHA Ebola Virus Outbreak Overview of Needs and Requirements, now totaling US\$ 1.5 billion, has been funded for \$ 1.05 billion, which is around 70 percent of the total ask.

13. The Ebola Response Multi-Partner Trust Fund currently has US\$ 108.2 million in commitments. In total \$ 131 million has been pledged.

Outreach and Education

15. According to WHO, on 9 December there were a total of 21 sub-prefectures across Guinea where EVD response efforts are facing community resistance. These sub-prefectures are located in the three main areas affected by the epidemic: the Forest Region; central-northern Guinea and Conakry and adjacent prefectures. Resistance is often due to insufficient sensitization, lack of trust stemming from the non-delivery on promises by EVD responders (such as ambulance transportation or kit distribution) and the fact that many patients admitted to the ETCs are not surviving. The National Ebola Response Cell (NERC), with UNMEER support, is taking action to resolve bottlenecks in the delivery of hygiene and supply kits and the establishment of Community Watch Committees which are critical to stop transmission and lift resistance.

[11 December 2014](#) | *UNMEER External Situation Report*

Key Political and Economic Developments

2. US magazine TIME has declared the Ebola fighters their "Person of the Year 2014". In explaining its choice, the magazine noted: "The rest of the world can sleep at night because a group of men and women are willing to stand and fight. For tireless acts of courage and mercy, for buying the world time to boost its defenses, for risking, for persisting, for sacrificing and saving, the Ebola fighters are TIME's 2014 Person of the Year." The magazine also notes the importance of learning from this outbreak, to strengthen healthcare and response services and be better prepared in future.

Response Efforts and Health

4. Sierra Leonean authorities have imposed a two-week lockdown in Kono district, where a major EVD flare-up has gone largely unreported until now. Although rapid reaction has helped contain the virus to about half of the 15 chiefdoms in Kono, WHO teams that arrived in the area 10 days ago were taken aback at the situation they encountered. In the space of 11 days, two WHO teams buried 87 victims, including a nurse and an ambulance driver enlisted to help dispose of corpses piling up in the local hospital. 25 people had died in a hastily cordoned off section of the hospital in the five days before the team arrived. "We are only seeing the ears of the hippo," said Dr. Amara Jambai, Sierra Leone's Director of Disease Prevention and Control,

expressing concern that the official figures underrepresent the size of the outbreak in Kono district.

5. UNDP has completed 2 prison isolation units for incoming prisoners in Freetown, Sierra Leone. The two facilities will serve as observation centers for new inmates (male and female separately) in Freetown's correctional centers, to help prevent an outbreak among the prison population. The units will open officially on Friday 12 December. Further, UNDP is scaling up a nationwide prison sensitization and equipment campaign to improve conditions and strengthen protection against the spread of EVD inside detention facilities.

[10 December 2014](#) | *UNMEER External Situation Report* *Key Political and Economic Developments*

1. The government of Liberia, with the support of UNMEER and regional participation from Sierra Leone, Guinea, Mali and Nigeria, organized a technical meeting on cross-border coordination on the prevention and control of EVD. In her opening statement, President Johnson Sirleaf emphasized the need to pool shared regional resources to counter EVD across the whole region. She also mentioned the cross-country coordination of specialized national institutions and the need for ease of access to resources available in border areas, as well as managing the porous borders. UNMEER SRSG Banbury stated the clear commitment of the UN to support the regional counter-EVD initiatives. A Strategic Framework for Cross-Border Collaboration on EVD Prevention and Control was elaborated at the meeting.

2. More foreign health workers are needed to help tackle the epidemic, which is spreading quickly in western Sierra Leone and deep in the forested interior of Guinea, Special Envoy Nabarro said in Geneva on Tuesday, adding that the outbreak is still flaming strongly in western Sierra Leone and some parts of the interior of Guinea. "We don't yet have the full number of functioning treatment centers and places where people who are ill can be kept away from others," he said. Dr. Nabarro expressed confidence that there will be an improvement in Freetown in the next few weeks. The rise in the spread of EVD in western Sierra Leone reflects the fact that tribal-led communities have yet to fully accept the outbreak and take action to avoid infection, he said.

3. EVD is still "running ahead" of efforts to contain it, WHO Director General Margaret Chan said, warning against complacency. The risk to the world "is always there" while the outbreak continues, Dr. Chan said. "It's not as bad as it was in September. But going forward we are now hunting the virus, chasing after the virus. Hopefully we can bring the number of cases down to zero." She said a key part of bringing the outbreak under control was ensuring communities understood EVD, as teams going into some areas were still facing resistance. Community participation is a critical success factor for EVD control, Dr. Chan said. "In all the outbreaks that WHO were able to manage successfully, that was a success element and this is not happening in this current situation."

Response Efforts and Health

6. Several doctors in Sierra Leone were on strike for a second day on Tuesday to demand better care for medical workers who catch EVD, after a spate of recent deaths. The doctors want assurances that they will have access to life saving equipment, like dialysis machines, if they become infected.

Outreach and Education

15. Yesterday, on Anti-Corruption Day, UNDP in collaboration with Liberia's Anti-Corruption Commission and the Carter Center set up public conversations on community radio stations in Bong, Lofa, Rural Montserrado and Nimba counties regarding how EVD response funds are used locally. County task forces collected and shared data for the wider public on who the donors

are, how much they are funding, what activities and equipment they are contributing to, and which groups are being targeted. Community members made suggestions on existing gaps and possible priorities. To encourage people to listen to the shows in remote areas, 1,200 solar radios manufactured by South Africa based NGO Lifeline Energy were distributed across the four counties. UNDP plans to scale up the initiative and distribute another 3,000 radios targeting patients in ETUs, survivors and others.

[9 December 2014](#) | *UNMEER External Situation Report*
Response Efforts and Health

4. Yesterday UNMEER received 20,000 sets of Personal Protective Equipment (PPE) from the Japan Disaster Relief Team. This is the first batch of 700,000 sets of PPEs committed by the government of Japan to UNMEER to help provide critical protection to healthcare workers in Guinea, Liberia, Sierra Leone and Mali. At the official handover ceremony in Accra, SRSB Banbury thanked the government of Japan and stressed the need for continued contributions from partners around the world to keep up the fight against EVD.

6. Community resistance increased in the past week in certain areas of Guinea, even leading to violent actions by local communities against EVD responders -- including a UNICEF contractor. At the same time, resistance has been overcome in other areas.

Essential Services

17. Two EVD-waste management machines have arrived in Freetown, Sierra Leone. The machines will be installed in two EVD treatment facilities: in a military hospital in Freetown and the Hastings Treatment Centre in Waterloo. Two medical waste advisors and two machinists will ensure the machines are installed properly, work effectively, and that staff are trained on how to use them safely. The sterilizing machines, known as autoclaves, decontaminate and compress used medical equipment and waste through several cycles of high-pressure steam and vacuuming, allowing for their safe disposal. The machines are the first of their kind in any of the Ebola-affected countries. UNDP expects a total of 11 autoclaves for ETCs across the country.

[8 December 2014](#) | *UNMEER External Situation Report*
Key Political and Economic Developments

1. Liberia's Supreme Court on Sunday lifted a government order suspending campaigning in and around the capital for next week's senate election, imposed on the grounds that campaigning risks spreading EVD. President Ellen Johnson Sirleaf's government imposed the executive order last week, banning the holding of political rallies in Montserrado County, which includes the capital. It was contested by her son, Robert Sirleaf, who is running as an independent candidate for the senate. He had appealed for a temporary lifting of the ban, arguing that to stop campaigning in just one part of the country is discriminatory. The court will hear a petition on Monday by some political parties, civil society groups and others to postpone national senate polls until EVD is defeated.

2. The National Coordinator of Guinea's National Ebola Response Cell (NERC) informed UNMEER that, on instructions from President Condé, a number of cabinet ministers left for the field to meet with local authorities and the population in sub-prefectures featuring community resistance. The ministers were instructed to sensitize and inform the population about the government's response strategy, reinforce the authority of the prefectural EVD response coordinators, and ensure the swifter deployment of comités de veille (community watch committees), which President Condé has criticized as progressing too slowly. President Condé

has also instructed the NERC and its pillar heads to start undertaking field missions from 8 December to show the government's resolve to intensify response efforts.

Human Rights

3. WHO informed that EVD contact tracing efforts had to be suspended in the village of Sanassia in Sanguiana sub-prefecture (Kouroussa prefecture, Guinea) as well as in the sub-prefecture of Watanga (Macenta prefecture) due to local community resistance, including alleged death threats against EVD response workers.

5. Around 20 United Nations peacekeepers placed under quarantine in Mali after they were potentially exposed to EVD more than three weeks ago have been released. The soldiers were being treated at a clinic in the capital Bamako for injuries sustained while serving in MINUSMA, when a nurse working at the facility died of EVD. The MINUSMA soldiers were then placed under quarantine, but have not presented symptoms of illness and have therefore been released. Mali has registered eight cases of EVD so far: 7 confirmed and 1 probable. 6 patients have died.

7. An UNMIL peacekeeper who contracted EVD has arrived in the Netherlands for treatment on Saturday. The Nigerian man was admitted to the University Medical Center in Utrecht. The Netherlands follows Germany, France and Switzerland in taking on EVD patients at the request of the World Health Organization.

Essential Services

19. UNICEF released essential drugs and supplies to three ngo partners to cover 40% of health facilities, as part of the restoration of essential health services effort in Liberia. countries back on the road to economic recovery and development."...

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