

The Sentinel

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

7 February 2015

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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GE2P2 – Center for Governance, Evidence, Ethics, Policy, Practice

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

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

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:: Journal Watch - Key articles and abstracts from 100+ peer-reviewed journals

:: Ebola/EVD Watch

:: Week in Review

A highly selective capture of strategic developments, research, commentary, analysis and (1/16) 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.

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Women and Girls at Risk of Female Genital Mutilation/Cutting in the United States

The Population Reference Bureau (PRB): Data Brief

Mark Mather and Charlotte Feldman-Jacobs

6 February 2015

Summary of Methods: <http://www.prb.org/pdf15/prb-unitedstates-fgmc-methodology.pdf>

The Population Reference Bureau (PRB) data included in this data brief are preliminary. A new Centers for Disease Control and Prevention (CDC) report on female genital mutilation/cutting in the United States also will be released soon, providing additional information on women and girls at risk.

[Excerpt]

...The Risk of FGM/C in the United States

In 2013, there were up to 507,000 U.S. women and girls who had undergone FGM/C or were at risk of the procedure, according to PRB's preliminary data analysis. This figure is more than twice the number of women and girls estimated to be at risk in 2000 (228,000).⁴ The rapid increase in women and girls at risk reflects an increase in immigration to the United States, rather than an increase in the share of women and girls at risk of being cut. The estimated U.S. population at risk of FGM/C is calculated by applying country- and age-specific FGM/C prevalence rates to the number of U.S. women and girls with ties to those countries...

...Just three sending countries—Egypt, Ethiopia, and Somalia—accounted for 55 percent of all U.S. women and girls at risk in 2013 (see Table 1). These three countries stand out because they have a combination of high FGM/C prevalence rates and a relatively large number of immigrants to the United States. The FGM/C prevalence rate for women and girls ages 15 to 49 is 91 percent in Egypt, 74 percent in Ethiopia, and 98 percent in Somalia. About 97 percent of U.S. women and girls at risk were from African countries, while just 3 percent were from Asia (Iraq and Yemen)...

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Joint statement on Humanitarian principles

Danish Refugee Council Press release

04.02.15

During the World Humanitarian Summit Budapest consultations, the Danish Refugee Council along with 34 other concerned humanitarian organizations presented a joint statement on the universality of humanitarian principles. Check out our four recommendations.

Today, the humanitarian sector faces an unprecedented number of protracted and acute humanitarian crises, such as the crisis in Syria, in Central African Republic, in South Sudan or the regional Ebola crisis, compelling humanitarian actors to stretch existing structures and practices to breaking point. Considering the role the World Humanitarian Summit may play in the future of humanitarian action, it is of utmost importance that the international community uses this opportunity to reaffirm the shared value of humanitarian principles of humanity, neutrality, impartiality and independence.

The humanitarian principles emerged from International Humanitarian Law and are based on a common understanding that humanitarian action is driven by a sense of humanity, a willingness to relieve human suffering, regardless of culture, origins or religion. They are encompassed within the core of key humanitarian references, such as the Code of Conduct for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations (NGOs) in Disaster Relief or the European Consensus on Humanitarian Aid.

NGOs are operating in exceptionally volatile and insecure environments where political agendas are interfering with the delivery of humanitarian aid, causing increased threats to the safety and security of humanitarian aid workers and assets, and in some situations hamper impartial

access of affected population to relief operations. For example, the growing numbers of counter-terrorism laws and measures adopted by States and inter-governmental organizations are restricting humanitarian actor's ability to develop partnerships, run projects in complex environments, and are delaying programs implementation. The involvement of some donor states in stabilization operations in many contexts where humanitarian aid is needed, are increasingly blurring lines between political, military and humanitarian objectives, thus reducing humanitarian NGOs abilities to deliver aid. Therefore, due respect of the principles implies that governmental and institutional funding must remain detached from political or other agendas.

While affected states keep the primary responsibility to organize and deliver humanitarian support, they also have the fundamental duty to facilitate the work of other actors in situations when international solidarity is requested to answer the needs. Relief operations should not be considered as a challenge to State sovereignty nor the humanitarian imperative be undermined by making national sovereignty an excuse.

We concur that re-shaping aid is urgent with new actors and new donors playing bigger roles. Humanitarian aid must remain based on the needs as assessed by humanitarian actors and donors should abstain from using aid as a crisis management tool.

Consequently humanitarian NGOs, concerned about the threats posed on these principles, take the opportunity of the World Humanitarian Summit to strongly reassert their commitment to the humanitarian principles, as being critical in guaranteeing people in need will have safe access to humanitarian aid. The humanitarian principles must be fully supported and adequately implemented by states and all organizations, and systematically feed all policies and practices on humanitarian aid.

As humanitarian NGOs involved in crises around the world today, we strongly call upon Humanitarian actors, Donors, States and all parties involved in conflicts, to:

- :: Re-affirm their commitment to respect and to promote the humanitarian principles of humanity, neutrality, impartiality and independence, towards any stakeholders involved in humanitarian crises, and re-affirm the value of the humanitarian imperative;

- :: Review and design all humanitarian policies in compliance with the humanitarian principles and enhance existing commitments for good donor practices such as the GHD principles;

- :: Reaffirm and protect the fundamental right for affected populations to access humanitarian aid;

- :: Allow and support full unimpeded access to all people in need of assistance and promote the safety, protection and freedom of movement of humanitarian personnel.

We request that these recommendations be fully part of the outcomes of the World Humanitarian Summit.

The statement was signed by the following organisations:

Danish Refugee Council
ACF International

ACT Alliance
ACTED
CAFOD
CARE International
Caritas Internationalis Luxemburg
CBM International
ChildFund International
Christian Aid
Concern Worldwide US
DanChurchAid
Diakonie Katastrophenhilfe
Finnish Church Aid
Handicap International
HelpAge International
International Rescue Committee
International Medical Corps
Johanniter International Assistance
Life for Relief and Development
Malteser International
MEDAIR
Médecins du Monde
Mercy Corps
Norwegian Refugee Council
Première Urgence - Aide Médicale Internationale
Relief International
Secours Islamique France
Solidarités International
Terre des homes
The Lutheran World Federation
Welthungerhilfe
World Vision

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Facing the Facts: the truth about ageing and development

Age International - UK member of the global HelpAge network.

February 2015 :: 88 pages

Report available: <https://drive.google.com/folderview?id=0B-8FwpWcVk4NdEdlZXM5dS1VdXc&usp=sharing>

Foreword

We all know that we are living through a time of global population growth unprecedented in human history. The number of people in the world has doubled since 1970, and will grow further, from 7 to 10 billion, by 2050.

But less well-known is the fact that the world is ageing as well as growing. There are currently 868 million older people in the world, and by 2050 this number will have reached more than 2 billion – 21 per cent of the world's population. And most will live in developing countries.

Yet, to listen to most discussions about international development, you could be forgiven for thinking that it was only younger people who mattered.

We have produced this publication because, while the number and proportion of older people in the world grows so dramatically, discussions about international development do not give sufficient consideration to its implications – to the challenges and opportunities this remarkable reality present.

The articles within this report represent a range of views from high profile thought leaders, development experts and academics, about how population ageing should be taken into account in development thinking. The message that resonates throughout the report is that older people have a right to be valued for who they are, have needs that must be taken into account and are a global asset, making contributions to their families and communities that need to be recognised and supported.

It is worth noting that there have been attempts in recent years to raise the profile of older people: in a global context. The Madrid International Plan of Action on Ageing (MIPAA), agreed by 159 states in 2002, recognises older people as contributors to the development of their societies. However, this agreement is not legally binding and is relatively unknown in policy-making circles.

The fact that it has only been mentioned twice in this report implies that MIPAA has had limited impact. As our authors suggest, far more needs to be done to ensure people of all ages are respected, protected, and enabled to continue contributing and participating throughout their lives.

We all experience different challenges and have different needs at different stages of life. Each one of us should be supported to fulfil our potential at every age: in childhood, youth, middle-age and later life.

We hope this publication will help us to face the facts of global population ageing in international development; and in turn, to explore what must be done to respond to the benefits and challenges this worldwide phenomenon brings.

Selected Quotes from Press Release Launching Report

Chris Roles, Director of Age International, said: "Our analysis highlights how population ageing affects every aspect of development, but simply isn't being given the attention it deserves. We need policies that are fit for the world around us and the future ahead, not ones based on out of date views of who lives in developing countries.

"For example, our experience tells us that older people are far too often invisible in emergency humanitarian situations as well as longer term development programmes. Ignoring the ageing population is no longer an option."

Mary Robinson said: "The world has more older people today than ever before, yet too many older people still face prejudice and discrimination. 'Facing the Facts' is a welcome and much-needed step towards greater recognition of the rights, dignity and value of older people around the world."

Margaret Chan said: "The health needs of the world's population are being transformed by global ageing yet governments, development and health practitioners have been slow to react. The increase in the number of older people is one of the success stories of international development and how we respond to this reality will be one of the keys to prosperity in the future."

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World Report 2015 – Events of 2014

Human Rights Watch

February 2015 :: 660 pages

pdf: http://www.hrw.org/sites/default/files/wr2015_web.pdf

World Report 2015 is Human Rights Watch's 25th annual review of human rights practices around the globe. It summarizes key human rights issues in more than 90 countries and territories worldwide.

In his keynote in the report, Human Rights Watch Executive Director Kenneth Roth reflects on a year so tumultuous, "it can seem as if the world is unraveling." Surveying several of the year's most daunting security challenges—including the rise of the extremist group Islamic State (also known as ISIS), China's crackdown on Uighurs in Xinjiang, and Mexico's abuse-riddled war on drugs—Roth stresses the important role that human rights violations played in fomenting and aggravating those crises.

The report "reflects extensive investigative work that Human Rights Watch staff undertook in 2014, usually in close partnership with human rights activists in the country in question. It also reflects the work of our advocacy team, which monitors policy developments and strives to persuade governments and international institutions to curb abuses and promote human rights."

The book is divided into two main parts: an essay section, and country-specific chapters.

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Editor's Note:

We bring forward from our *Foundation Watch* section below two Ford Foundation announcement's which we considered to warrant fuller treatment here.

New \$25 million fund for South African civil society groups working to advance constitutionalism

Ford Foundation

5 February 2015

Joint statement from the Open Society Foundations, Ford Foundation and Atlantic Philanthropies

Today the Open Society Foundations, Ford Foundation and Atlantic Philanthropies announced the launch of a joint fund to support local organizations promoting and advancing constitutionalism in South Africa, to mark the first 20 years of South African democracy.

The three contributing foundations, each of which has decades of experience working in South Africa, and which ordinarily support civil society organizations, the local philanthropic community and also government, will provide a collective \$25 million to South African organizations whose purpose is to advance a democratic and open society.

Twenty years after the adoption of the South African Constitution, described as the world's most progressive, South Africa still has many challenges. Delivering on the civil, political and socioeconomic aspirations embedded in that Constitution requires a society that is transparent, open, non-discriminatory and operates according to the highest standards of Constitutional accountability.

Responding to these challenges, and recognizing the significant innovative and leadership role that South African civil society organizations play in both articulating these challenges and providing appropriate responses rooted in the rule of law, the three foundations will in implementing the fund rely extensively on an independent local Selection Panel, chaired by

former Constitutional Court Justice Yvonne Mokgoro, to advise the foundations on allocating resources from the fund to South African organizations that meet the criteria of the fund...

Ford Foundation Expands Creative Commons Licensing for All Grant-Funded Projects

A change consistent with organization's longtime commitment to transparency, knowledge-sharing

3 February 2015:

(New York) – The Ford Foundation announced today that it is adopting an open licensing policy for all grant-funded projects and research to promote greater transparency and accessibility of materials. Effective February 1, grantees and consultants will be required to make foundation-funded materials subject to a Creative Commons license allowing others, free of charge and without requesting permission, the ability to copy, redistribute, and adapt existing materials, provided they give appropriate credit to the original author.

The Ford Foundation has long supported transparency—including open licensing, which is an alternative to the traditional “all rights reserved” copyright and encourages sharing intellectual property in a digital global commons. By moving to broadly disseminate a large amount of educational and research materials resulting from its funding, the foundation hopes to make its work and the work of its grantees more accessible and ultimately, increase its impact.

“Our organization is committed to being as transparent and open as possible, and this philosophy extends to the work we fund and the valuable materials we and our grantees produce,” said Darren Walker, president of the Ford Foundation. “This policy change will help grantees and the public more easily connect with us and build upon our work, ensure our grant dollars go further and are more impactful, and—most importantly—increase our ability to advance social justice worldwide.”

The Ford Foundation plans to use the most recent [Creative Commons Attribution License](#) (CC BY 4.0), the most open license offered by Creative Commons, a nonprofit organization and Ford Foundation grantee dedicated to facilitating the sharing and use of materials through simple, standardized open licenses...

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IMF Establishes a Catastrophe Containment and Relief Trust to Enhance Support for Eligible Low Income Countries Hit by Public Health Disasters

IMF Press Release No. 15/34

February 5, 2015

The Ebola epidemic in parts of West Africa is a humanitarian disaster that has drawn the attention of the international community to the threat posed by the rapid spread of life-threatening infectious diseases, both within and across international boundaries.

On February 4, 2015, the Executive Board of the International Monetary Fund (IMF) met to consider how the Fund could better support low-income countries hit by such public health disasters. This would take into account both the humanitarian case for providing such support and the wider international interest in supporting vigorous action to contain and halt a potential regional or global pandemic at the earliest possible stage.

To help meet these objectives, the Board approved the establishment of a new Catastrophe Containment and Relief (CCR) Trust, as a vehicle to provide exceptional support to countries confronting major natural disasters, including life-threatening, fast-spreading epidemics but also

other types of catastrophic disasters, such as massive earthquakes. For eligible countries confronting epidemics that meet specified criteria, the IMF would use CCR trust fund resources to provide grants as a supplement to its conventional loan support. The grants would be used to pay off future debt service payments, thus reducing the country's debt burden and freeing up resources to tackle relief and recovery challenges.

Subject to Board approval of requests from the individual countries, it is expected that the CCR trust would provide grants-for-debt relief of close to \$100 million for the three countries affected by Ebola in West Africa –Liberia, Sierra Leone, and Guinea. These funds would come in addition to the \$130 million of assistance provided in September 2014 and to a second round of new concessional loans amounting to about \$160 million to be considered soon by the Executive Board.

At the conclusion of the Executive Board meeting on the CCR, IMF Managing Director Christine Lagarde stated: "I welcome the establishment of the Catastrophe Containment Relief Trust. It aims at enhancing our support to the countries in Africa hit by Ebola, as well as other low income countries that may be affected by public health disasters in the future. This is a strong example of the IMF demonstrating flexibility and innovation in responding to the needs of our global membership."

Background

The primary tool through which the Fund supports low income countries confronting natural disasters is through the speedy provision of its interest-free loans to the affected countries, whether by expanding the amounts being provided under a pre-existing Fund financial program with the member or by disbursing funds under the Rapid Credit Facility (RCF).

In their November 2014 meeting in Brisbane, the G-20 called on the Bretton Woods Institutions to continue their strong support to countries severely affected by the Ebola outbreak through a combination of concessional loans, debt relief and grants, and asked the institutions to explore new, flexible mechanisms to address the economic effects of future comparable crises. The CCR Trust is the Fund's response to that call. It replaces the Post-Catastrophe Debt Relief (PCDR) Trust established on June 25, 2010 in the wake of a massive earthquake in Haiti, and expands the circumstances under which the Fund can provide exceptional assistance to its low income members to include public health disasters.

Through the new instrument, the Fund is able to quickly and flexibly adjust its policies in the face of unexpected international developments, including pandemics, to serve the needs of its membership, especially the most vulnerable.

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EBOLA/EVD [to 7 February 2015]

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

Please see end of this edition for additional UNMEER daily reporting content.

WHO: Ebola Situation Report – 4 February 2015

[Excerpt; Editor's text bolding]

SUMMARY

:: Weekly case incidence increased in all three countries for the first time this year.

There were 124 new confirmed cases reported in the week to 1 February: 39 in Guinea, 5 in Liberia, and 80 in Sierra Leone.

:: Continued community resistance, increasing geographical spread in Guinea and widespread transmission in Sierra Leone, and a rise in incidence show that the EVD response still faces significant challenges.

:: As the wet season approaches, there is an urgent need to end the outbreak in as wide an area as possible, especially in remote areas that will become more difficult to access.

:: Guinea reported 39 new confirmed cases, compared with 30 the previous week. An unsafe burial that took place in early January in the eastern prefecture of Lola, on the border with Côte d'Ivoire, has so far resulted in an outbreak of 11 confirmed cases. A further confirmed case in the northern prefecture of Siguiri, on the border with Mali, also originated in Lola.

:: The north Guinean prefecture of Tougué, which also borders Mali, has reported its first 2 confirmed cases. Both cases originated in the western prefecture of Dubreka.

:: In light of the recent increase in cases in northern Guinea, cross-border meetings between Guinea, Mali, and Senegal are planned to strengthen coordination of surveillance. A rapid-response team has also arrived in the border area between Lola, Guinea, and Côte d'Ivoire to assess risk and strengthen surveillance.

:: A total of 80 new cases were reported in Sierra Leone in the week to 1 February, compared with 65 the previous week. The western districts of Port Loko and the capital Freetown are the worst-affected areas. Nine of 14 districts in the country reported at least 1 confirmed case, up from 7 districts in the previous week.

:: The target is for 100% of new cases to arise among registered contacts, so that each and every chain of transmission can be tracked and terminated. In Guinea in the week to 25 January, 14 of 26 (54%) new confirmed and probable cases arose among registered contacts; in Liberia in the 9 days to 31 January, 7 of 7 (100%) new confirmed cases arose among registered contacts; and in Sierra Leone in the week to 18 January 26 of 121 (21%) confirmed cases arose among registered contacts.

:: The case fatality rate among hospitalized cases (calculated from all confirmed and probable hospitalized cases with a reported definitive outcome) is between 50% and 61% in the 3 intense-transmission countries.

:: A total of 822 confirmed health worker infections have been reported in the 3 intense-transmission countries; there have been 488 reported deaths.

:: A total of 10 of 34 prefectures in Guinea reported at least one security incident or other form of refusal to cooperate in the week to 1 February. No counties in Liberia and 3 districts in Sierra Leone reported at least one similar incident during the week to 27 January.

COUNTRIES WITH WIDESPREAD AND INTENSE TRANSMISSION

:: There have been almost 22 500 reported confirmed, probable, and suspected cases (Annex 1) of EVD in Guinea, Liberia and Sierra Leone (table 1), with almost 9000 reported deaths (outcomes for many cases are unknown). A total of 39 new confirmed cases were reported in Guinea, 5 in Liberia, and 80 in Sierra Leone in the 7 days to 1 February.

:: A stratified analysis of cumulative confirmed and probable cases indicates that the number of cases in males and females is similar (table 2). Compared with children (people aged 14 years

and under), people aged 15 to 44 are approximately three times more likely to be affected. People aged 45 and over are almost four times more likely to be affected than are children.
:: A total of 822 confirmed health worker infections have been reported in the 3 intense-transmission countries; there have been 488 reported deaths (table 3)....

:: 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 System Organizational Chart

:: 8.5" x 11" / 216 x 279 mm :: 11" x 17" / 279 x 432 mm

United Nations – Secretary General, Security Council, General Assembly

Selected Press Releases [to 7 February 2015]

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

3 February 2015

SG/SM/16512-OBV/1425-WOM/2013

[Breaking Silence, 'Disproving Myths' around Female Genital Mutilation First Steps to Eliminating It, Says Secretary-General in Message for International Day](#)

Following is UN Secretary-General Ban Ki-moon's message for the International Day of Zero Tolerance for Female Genital Mutilation, observed on 6 February.

2 February 2015

SG/SM/16509-ECOSOC/6665

[Despite Global Unemployment, Crises, Young People Have Resolve to Fight for Peace, Progress, Secretary-General Tells Youth Forum, Urging Them to 'Be Bold'](#)

Following are UN Secretary-General Ban Ki-moon's remarks, as prepared for delivery, to the Economic and Social Council Youth Forum, in New York today.

UN OHCHR Office of the United Nations High Commissioner for Human Rights [to 7 February 2015]

<http://www.ohchr.org/EN/NewsEvents/Pages/media.aspx?IsMediaPage=true>

Concluding Observations

On 4 February 2015, the UN Committee on the Rights of the Child issued its Concluding Observations from its 68th Session review of State implementation of the Convention on the Rights of the Child and the Optional Protocols. The session ran from 12-30 January 2015 and reviewed the following States: Cambodia, Dominican Republic, Turkmenistan, Sweden, Mauritius, Gambia, Tanzania, Jamaica, Uruguay, Colombia, Iraq and Switzerland.

SRSG/CAAC Office of the Special Representative of the Secretary-General for Children and Armed Conflict [to 7 February 2015]

<https://childrenandarmedconflict.un.org/virtual-library/press-release-archive/>

No new digest content identified.

SRSG/SVC Office of the Special Representative of the Secretary-General on Sexual Violence in Conflict [to 7 February 2015]

<http://www.un.org/sexualviolenceinconflict/media/press-releases/>

No new digest content identified.

UNHCR Office of the United Nations High Commissioner for Refugees [to 7 February 2015]

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

4 February 2015

[UNHCR Legal Position: Despite court ruling on Sri Lankans detained at sea, Australia bound by international obligations](#)

4 February 2015

[UNHCR welcomes the registration of South Sudanese citizens in Khartoum](#)

UNOCHA [to 7 February 2015]

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

06 Feb 2015

[South Sudan - UN Humanitarian Chief Valerie Amos and UNESCO Special Envoy for Peace and Reconciliation Forest Whitaker to brief the press regarding their visit to South Sudan](#)

05 Feb 2015

[Sierra Leone + 2 others - The last mile in the fight against Ebola will be the hardest](#)

03 Feb 2015

[World - Emergency Relief Coordinator Valerie Amos calls for global collaboration to reshape aid as needs rise](#)

03 Feb

[World - Under-Secretary-General and Emergency Relief Coordinator, Valerie Amos: Remarks to the World Humanitarian Summit Regional Consultation for Europe and Others, Budapest, 3 February 2015](#)

UNISDR UN Office for Disaster Risk Reduction [to 7 February 2015]

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

[Key role for health in new HFA](#)

4 Feb 2015

Efforts to finalise the successor to the world's most encompassing framework on disaster risk reduction have taken a leap forward, with the issue of health taking it into new territory

UNICEF [to 7 February 2015]

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

[First regular session of the UNICEF Executive Board](#)

3-5 February 2015, Conference Room 3, General Assembly (GA), UNHQ

[Session documents](#)

[PaperSmart portal](#)

Joint meeting of the Executive Boards of UNDP/UNFPA/UNOPS, UNICEF, UN-Women and WFP
2 February 2015, Conference Room 3, General Assembly (GA), UNHQ

[Meeting documents](#)

[PaperSmart portal](#)

Media Releases [selected]

[More than 16,000 children lost parents or caregivers to Ebola - many are taken in by the communities: UNICEF](#)

DAKAR, Senegal/GENEVA/NEW YORK, 6 February 2015 – Some 16,600 children are registered as having lost one or both parents, or their primary caregivers to Ebola in Guinea, Liberia and Sierra Leone, but less than 3 per cent have had to be placed outside family or community care, UNICEF said today.

[A call to action for health workers around the world to mobilize against Female Genital Mutilation](#)

NEW YORK, 6 February 2015 - A call to action for health workers around the world to mobilize against Female Genital Mutilation

[UNICEF: South Sudan on the edge of nutrition catastrophe if hostilities don't end now](#)

JUBA, South Sudan, 4 February 2015 – UNICEF urged warring groups in South Sudan to follow up fast on the ceasefire deal reached Monday or face potentially catastrophic food shortages in the conflict areas of the country.

UN Women [to 7 February 2015]

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

[Women Nobel Peace laureates visit Colombia to increase awareness of sexual violence](#)

Date : February 7, 2015

From 3-5 February, Ms. Ebadi and Jody Williams, a human rights activist from the United States who won the Nobel Peace Prize in 1997, visited Colombia to meet with women survivors of sexual violence in a conflict which has lasted more than 50 years.

[Executive Director urges accelerated action to end Female Genital Mutilation](#)

Date : February 6, 2015

[As delivered] Dr. Babtounde Osotimehin Your Excellencies, Distinguished colleagues from UNICEF, UNFPA, Ladies and gentlemen. Today, on International Day of Zero Tolerance for Female Genital Mutilation (FGM), I want to thank the seven permanent missions that have invited us here to speak out on this subject. [More](#)

[African Union Summit ends with strong call for women's empowerment](#)

Date : February 4, 2015

Gender was in the spotlight at the 24th Session of the African Union Heads of States' Summit held in Addis Ababa, Ethiopia from 30-31 January, which focused on the "Year of Women's Empowerment and Development towards Africa's Agenda 2063".

[As Ebola outbreak stabilizes, Gender Alert focuses on women's role in recovery](#)

Date : February 4, 2015

As of 21 January, the World Health Organization (WHO) reports that the cumulative number of Ebola cases in the countries with widespread and intense transmission (i.e. Guinea, Liberia and Sierra Leone) stands at 21,689, with 8,626 recorded deaths.

Permanent Forum on Indigenous Issues [to 7 February 2015]

<http://undesadspd.org/IndigenousPeoples.aspx>

No new digest content identified.

WHO & Regionals [to 7 February 2015]

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

:: **[136th WHO Executive Board session](#)**

26 January–3 February 2015

Geneva, Switzerland

[Documentation](#)

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

- Middle East respiratory syndrome coronavirus (MERS-CoV) – Saudi Arabia [3 February 2015](#)
- Human infection with avian influenza A(H7N9) virus – Canada [1 February 2015](#)

:: The **[Weekly Epidemiological Record \(WER\) 6 February 2015](#)**, vol. 90, 6 (pp. 33–40)

Contents

33 Chagas disease in Latin America: an epidemiological update based on 2010 estimates

43 Monthly report on dracunculiasis cases, January– November 2014

:: **[GIN January 2015 pdf, 1.82Mb](#)**

30 January 2015

:: **[Cholera prevention measures reduce transmission in South Sudan](#)**

6 February 2015 -- When violence erupted in South Sudan, tens of thousands of people fled the conflict and sought refuge in United Nations bases in the hopes of protection. As the rainy season approached it increased the risk of water-borne diseases, like cholera, and the potential for explosive outbreaks in congested camps. A timely decision to start cholera prevention and control measures, averted illness and death among the vulnerable camp inhabitants who had been at high-risk of the disease.

:: **[Preventing premature cancer deaths](#)**

4 February 2015 -- Annually there are 14 million new cases of cancer and over 8 million people die from cancer, with 60% of deaths in Africa, Asia and Central and South America. WHO is working with countries to build solutions to reduce premature deaths from cancers through its global drive to prevent premature deaths from NCDs by 25% by 2025.

[Read the commentary on cancer and tobacco](#)

WHO Regional Offices

WHO African Region AFRO

No new digest content identified.

WHO Region of the Americas PAHO

:: [PAHO/WHO says accessible, cost-effective measures can prevent premature cancer deaths](#) (02/02/2015)

WHO South-East Asia Region SEARO

:: [Beat cancer: Prevent, detect early](#) 04 February 2015

WHO European Region EURO

:: [WHO strengthens health operations in eastern Ukraine](#) 06-02-2015

:: [Influenza season underway in WHO European Region](#) 04-02-2015

WHO Eastern Mediterranean Region EMRO

No new digest content identified.

WHO Western Pacific Region

No new digest content identified.

UNAIDS [to 7 February 2015]

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

No new digest content identified.

UNFPA United Nations Population Fund [to 7 February 2015]

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

6 February 2015

News

[The start of a movement: Girls rising up against FGM](#)

TARIME, Tanzania – Female genital mutilation (FGM) is a human rights violation – one that can lead to haemorrhage, infection, complications during childbirth, infertility, and, in some cases, even death. Yet it remains...

5 February 2015

News

[Empowering women to lead the change: One woman's fight against FGM](#)

DOKA, Sudan – Like the vast majority of women in Sudan, Haja Aicha underwent female genital mutilation (FGM) as a child. And like many women, she says the procedure was agonizing. But unlike most people, Haja Aicha has...

3 February 2015

News

[Ebola survivors facing stigma, unemployment, exclusion](#)

MONROVIA, Liberia – After recovering from the near-death experience of an Ebola infection, survivors in Liberia are reporting that their ordeal is not yet over. Many say they are encountering hostility, exclusion and...

2 February 2015

News

[Amid brutal winter, safe births for Syrian refugees](#)

ZAATARI, Jordan – Syrian refugees in Jordan have endured frigid temperatures, powerful winds, and heavy snow and rainfall this winter. A dangerous mid-January snowstorm, named "Huda," collapsed tents and unleashed...

UNDP United Nations Development Programme [to 7 February 2015]

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

04 Feb 2015

[Early recovery key to Malawi flood victim's survival](#)

In a primary school in Nsanje, Southern Malawi, children have given up their classrooms and school yard for over 500 displaced families who fled the devastating floods that hit the poor African nation in January.

03 Feb 2015

[Helen Clark: Special Address at the Closing Session of the ECOSOC Youth Forum, "A Year of Opportunity for Youth"](#)

New York, New York

03 Feb 2015

[Mobile apps help map Ukraine's recovery needs](#)

While fighting rages in Ukraine's East, the United Nations Development Programme (UNDP) is helping people map damage to prepare for a swift recovery.

03 Feb 2015

[UNDP and the International Republican Institute ink agreement to boost global collaboration](#)

The United Nations Development Programme (UNDP) and the International Republican Institute (IRI) signed a memorandum of understanding (MOU) to boost their work together on democratic governance and inclusive political pluralism.

03 Feb 2015

[2015: Year of opportunity for youth](#)

Young leaders from around the world gathered with representatives from the United Nations, civil society and partner organizations for the 2015 Time for Global Action Youth Forum.

03 Feb 2015

[International community urged to boost efforts to end crisis in Central African Republic](#)

In Bangui, Head of UNDP in Africa stresses the urgency of the transition.

02 Feb 2015

[Battling Ebola and boosting business in Sierra Leone](#)

Sariatu Kamara owns a beauty salon in Sierra Leone's capital Freetown. Her business has been hit hard by Ebola. Through a UNDP supported programme, she and many others have been helped to weather the economic storm.

02 Feb 2015

[Iran's lost wetlands thirst for rehabilitation: World Wetlands Day 2015](#)

Iran's Lake Urmia, the largest in the Middle East, offers a chilling reminder of how a man-made catastrophe can take its toll on a thriving ecosystem.

02 Feb 2015

[Helen Clark: Statement on "Innovative Approaches to Programme Design and Implementation to Support the Operationalisation of the post-2015 Development Agenda" at the Joint Meeting of the Executive Boards of UNDP/UNFPA/UNOPS, UNICEF, UN Women, and WFP](#)

New York, New York

UN Division for Sustainable Development [to 7 February 2015]

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

No new digest content identified.

UNEP United Nations Environment Programme [to 7 February 2015]

<http://www.unep.org/newscentre/?doctypeID=1>

[Leading Scientists and Policymakers Gather to Chart Path for Energy Efficient Future](#)

Targeted energy efficiency measures have the potential to reduce global energy related emissions by 1.5 Gt in 2020 and generate US\$ 250-325 billion worth of savings per year
4-2-2015

[UN Report Calls for Wastewater Focus in Post-2015 Agenda, as 80% of Worlds Wastewater Discharged Untreated](#)

Pit Latrines Still Used by 1.77 Billion People Worldwide, Sparking Low-income Country Waste Treatment Innovations
2-2-2015

[UNEP Chief Discusses Sustainable Development with Group of African Small Islands Developing States](#)

Accelerating climate change is a global threat, but for many Small Island Developing States (SIDS) the challenges are more dramatic.
1-2-2015

DESA United Nations Department of Economic and Social Affairs [to 7 February 2015]

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

[Get excited for 2015 – a year of sustainability](#)

6 February 2015, New York

The year 2015 will be the year defined by global action. It will be a year of transformation, excitement and determination, as the world celebrates the successes of the MDGs, and the launch of the long-anticipated post-2015 sustainable development agenda. Not since the

publication of the Millennium Declaration in 2000 has the spotlight of the international community shone as brightly on international development and the means to implement lasting changes benefitting people and the planet as now.

[Young leaders show they are ready for global action](#)

5 February 2015, New York

The world's youth took their rightful place in the arena of international development this week, as hundreds of young leaders gathered at UN headquarters in New York to participate in the annual Economic and Social Council's (ECOSOC) Youth Forum. ECOSOC President Martin Sajdik welcomed the young participants and reiterated their vital role in the transition from the Millennium Development goals to the Sustainable Development Goals

[Embarking on journey towards new financing framework](#)

5 February 2015, New York

The Third International Conference on Financing for Development is expected to prepare the framework for financing the post-2015 sustainable development agenda, benefitting people and the planet. With only a few months left until this milestone conference will take place in Addis Ababa in July, the first drafting session of the outcome document kicked off at UN Headquarters in New York

UNODC United Nations Office on Drugs and Crime [to 7 February 2015]

<http://www.unodc.org/unodc/en/press/allpress.html?ref=fp>

04/02/2015

[Japan boosts support for conflict prevention, peace-building in Nigeria](#)

Abuja, 4 February 2015 - Tackling human trafficking and terrorism in Nigeria was bolstered this week following the launch of two new projects between the Government of Japan and the UN Office on Drugs and Crime (UNODC). Aimed at increasing national-level capacity in addressing these twin threats, the projects build on the [Plan of Action](#) signed between Japan and UNODC following the Fifth Tokyo International Conference on African Development (TICAD V). In the Plan, UNODC and Japan pledged to enhance regional cooperation, in particular with regard to crime prevention and criminal justice reform in Africa, Afghanistan and neighbouring countries, and South-East Asia.

UN-HABITAT United Nations Human Settlements Programme [to 7 February 2015]

<http://unhabitat.org/media-centre/press-releases/>

No new digest content identified.

FAO Food & Agriculture Organization [to 7 February 2015]

<http://www.fao.org/news/archive/news-by-date/2015/en/>

[Food crisis escalates in South Sudan](#)

A staggering 2.5 million people – about one-fifth of the population – remain in either Crisis or Emergency level food insecurity as fighting continues in South Sudan, according to the latest Integrated Food Security Phase Classification (IPC) report, released this week.

6-02-2015

[FAO food price index declines in January, cereal output poised for record](#)

The FAO Food Price Index continued to decline in January, averaging 182.7 points for the month, or 1.9 percent below its December 2014 level. Lower prices reflect strong production expectations as FAO also raised its 2014 forecast for world cereal production to a record high and noted that early indications for crops in 2015 are favourable.

5-02-2015

[Incumbent Director-General only candidate for election](#)

José Graziano da Silva, the current FAO Director-General, will be only candidate for the Organization's top leadership post in upcoming elections.

1-02-2015

IFAD International Fund for Agricultural Development [to 7 February 2015]

<http://www.ifad.org/media/press/index.htm>

No new digest content identified.

ILO International Labour Organization [to 7 February 2015]

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

ILO-UNCTAD book

[Transforming economies](#)

The ILO-UNCTAD book [Transforming Economies: Making industrial policies work for growth, jobs and development](#), provides a deeper understanding of the process of structural and technological change, and distills lessons and principles for the design of policies that effectively create sustained and inclusive growth and quality jobs. The book is based on eight case studies (Costa Rica, Republic of Korea, Brazil, China, South Africa, Sub-Saharan Africa, the United States and the software industry in India), as well as cross-country and regional studies.

ICAO International Civil Aviation Organization [to 7 February 2015]

<http://www.icao.int/Newsroom/Pages/default.aspx>

[ICAO Forges Clear Strategic Agreement amongst States and Industry as Landmark High Level Safety Event Draws to Successful Conclusion](#)

MONTREAL, 6 FEBRUARY 2015 – The International Civil Aviation Organization (ICAO) concluded its second High Level Safety Conference (HLSC) yesterday, with over 850 participants from its Member States and industry showing strong and united support for the UN body's near- and long-term strategic planning and priorities for global aviation safety.

Besides forging global consensus on two particularly challenging emerging safety issues – flight tracking and conflict zone risk mitigation – the event also delivered clear affirmations for the objectives now being pursued in every world region under the ICAO Global Aviation Safety Plan.

Also recognized was the instrumental coordinating role now being performed by ICAO's Regional Aviation Safety Groups (RASGs), and that sector-wide safety performance is a critical prerequisite for the sustainable development of air transport and the social and economic development benefits it fosters in States and Regions.

"Importantly, our Member States have reinforced their collective responsibility for aviation safety at this event, and that its enhancement will only continue to be possible through

cooperative, collaborative and coordinated efforts among all stakeholders under the leadership of ICAO,” commented ICAO Council President Dr. Olumuyiwa Benard Aliu. “This is a clear testament to our ongoing mission and role and to the historic progress we have realized as a united global community.”

As the world continues to respond to the ongoing Ebola outbreak in Western Africa, the ICAO conference also stressed its recognition of the role played by aviation in responding to public health emergencies and the importance of collaboration between the aviation and public health sectors in preparedness planning and response to public health events....

IMO International Maritime Organization [to 7 February 2015]

<http://www.imo.org/MediaCentre/Pages/Home.aspx>

No new digest content identified.

WMO World Meteorological Organization [to 7 February 2015]

<https://www.wmo.int/media/?q=news>

[WMO Issues The Climate in Africa in 2013](#)

5 February 2015

The World Meteorological Organization has issued a report on the Climate in Africa 2013, the first in what is intended to be an annual series. It examines temperatures, rainfall and extreme events on a continent which is especially vulnerable to natural climate variability and long-term climate change due to greenhouse gas emissions.

The year 2013, was one of the warmest years on the continent since at least 1950, with temperatures above average in most regions. Precipitation at the continental scale was near average, according to the report.

[African Ministers and Meteorologists Seek to Boost Resilience to Climate Change](#)

3 February 2015

Weather and Climate Services Underpin Sustainable Development

3 February 2014, Geneva/Cabo Verde (WMO) - The urgent need to boost Africa’s resilience to natural hazards like the devastating floods which recently hit southern Africa is high on the agenda of meetings of ministers responsible for meteorological services and their directors. The African Ministerial Conference on Meteorology (AMCOMET) on 13-14 February will focus on how to improve the provision and use of weather and climate services which will be vital to help the continent cope with shocks caused by extreme weather and climate change. It will be preceded by a meeting from 3-9 February of Permanent Representatives of African countries with WMO, who are directors of National Meteorological and Hydrological Services and by Technical preparation meeting for AMCOMET on 10-12 February. All meetings are being hosted by the Government of Cabo Verde.

[Warming Trend Continues in 2014](#)

2 February 2015

14 of 15 Hottest Years Have Been in 21st Century

Geneva, 2 February 2015 (WMO) The World Meteorological Organization (WMO) has ranked 2014 as the hottest year on record, as part of a continuing trend. After consolidating leading international datasets, WMO noted that the difference in temperature between the warmest years is only a few hundredths of a degree – less than the margin of uncertainty.

Average global air temperatures over land and sea surface in 2014 were 0.57 °C (1.03°F) above the long-term average of 14.00°C (57.2 °F) for the 1961-1990 reference period. By comparison, temperatures were 0.55 °C (1.00°F) above average in 2010 and 0.54°C (0.98°F) above average in 2005, according to WMO calculations. The estimated margin of uncertainty was 0.10°C (0.18°F).

UNIDO United Nations Industrial Development Organization [to 7 February 2015]

<http://www.unido.org/en/news-centre/news.html>

Monday, 02 February 2015

[UNIDO teams up with International Trade Centre to help developing countries in Africa and Asia](#)

VIENNA, 3 February 2015 – The United Nations Industrial Development Organization (UNIDO) and the International Trade Centre (ITC) will intensify joint activities in support of developing countries in Africa and Asia.

This was discussed in Vienna during a meeting between LI Yong, the Director General of UNIDO, and Dorothy Tembo, ITC Deputy Executive Director, and at subsequent meetings with representatives of relevant Branches, and then formulated in a joint communique signed by Tembo and Taizo Nishikawa, the Deputy to the Director General of UNIDO.

The communique suggests that the two organizations will strengthen cooperation in the areas of trade capacity building, value chain development, investment and export promotion, industrial upgrading and enterprise competitiveness, as well as youth employment and entrepreneurship.

Enhanced collaboration is especially envisaged in Ethiopia and Senegal – within the framework of the Country Partnership Programmes aimed at fostering inclusive and sustainable industrial development – and in Sri Lanka, in the context of an initiative to strengthen the trade capacities and performance of the country's SMEs.

UN WTO World Tourism Organization [to 7 February 2015]

<http://media.unwto.org/news>

6 February 2015

[UNWTO/UNESCO World Conference on Tourism and Culture gathers Ministers of Tourism and Culture for the first time](#)

Over 900 participants, including over 45 Ministers and Vice Ministers of Tourism and Culture, international experts, speakers and guests from 100 countries, gathered at the UNWTO/UNESCO World Conference on Tourism and Culture in Siem Reap, Cambodia, to explore and advance new partnership models between tourism and culture (4-6 February 2015).

5 February 2015

[Middle East & North Africa: Tourism adapts to challenges and gains new momentum](#)

The tourism sector in the Middle East and North Africa has been largely able to adapt and recover in recent times and even bounce back over the past year. Against this backdrop, several tourism ministers of the region, Spanish authorities and private sector representatives focused on future tourism prospects at the third Ministerial Round Table on Tourism Development in the MENA Region, during the Madrid International Tourism Fair (29 January, FITUR Madrid).

3 February 2015

[Investour 2015: Africa needs a stronger brand](#)

Branding and promotion, foreign direct investment, human resources development and visa facilitation were among the key topics in focus at the VI Investment and Tourism Business Forum for Africa (INVESTOUR). 16 Tourism Ministers from Africa and the Middle East and experts from different areas attended the yearly Forum, held on the occasion of the International Tourism Fair (FITUR). The debates focused particularly on the need to work towards a stronger Brand Africa (Madrid, Spain, 29 January 2015).

ITU International Telecommunications Union [to 7 February 2015]

http://www.itu.int/net/pressoffice/press_releases/index.aspx?lang=en#.VF8FYcl4WF8
04.02.2015

[ITU marks World Radio Day 2015 in Geneva, 13 February](#)

Live global broadcast, exhibitions, demos, hackathon, debates, features highlight theme: Youth and Innovation in Radio...

UNESCO [to 7 February 2015]

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

03 February 2015

[UNESCO alarmed by news of mass destruction of books in Mosul](#)

03 February 2015

[First Meeting on promoting the rights of persons with disabilities in Uganda through the use of inclusive technologies](#)

31 January 2015

[Sharm El Sheikh Statement: Setting the scene for education post-2015](#)

Building effective channels for regional cooperation, advancing quality education and lifelong learning, and advocating for education provision in countries affected by conflict and those hosting refugees to be accepted as a global responsibility, are among the main highlights of the Sharm El Sheikh Statement that Arab ministers of education adopted today, concluding the Arab Regional Conference for Education post-2015....

[The Statement](#)

WIPO World Intellectual Property Organization [to 7 February 2015]

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

No new digest content identified.

CBD Convention on Biological Diversity [to 7 February 2015]

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

[The Government of Oman improves its coverage of protected areas by adding two new sites, reflecting the high attention afforded to the environment and conservation of natural resources.](#)

2015-02-04

[Five new press sheets available that explain the role of wetlands for: the Aichi Biodiversity Targets; Ecosystem services; SDGs, as well as Challenges of the future and the value of wetlands.](#)

2015-01-30

[Wetlands are among our most valuable ecosystems. The values of benefits provided by wetlands, per unit area, have been consistently shown to be orders of magnitude higher than for other ecosystems, with the major benefit delivered through improved water security.](#)

2015-01-30

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USAID [to 7 February 2015]

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

[Statement from USAID Administrator Shah on Launch of the 2015 National Security Strategy](#)

February 6, 2015

The 2015 National Security Strategy, released today by President Obama, demonstrates that global development is a key pillar of our national security and prosperity. As the Strategy says, "the United States is safer and stronger when fewer people face destitution, when our trading partners are flourishing, and when societies are freer."

[All Children Reading: A Grand Challenge for Development Announces Round 2 Grantees for Technology-Based Literacy Solutions](#)

February 3, 2015

Innovative, scalable solutions to impact children in developing countries

The U.S. Agency for International Development (USAID), in partnership with World Vision and the Australian Government, announced today 14 grantees for the second call of All Children Reading: A Grand Challenge for Development. Innovators across the world were selected for their low-cost, technology-based solutions and programs that confront fundamental literacy issues and empower children to read...

Round 2 grantees include:

Mother Tongue Instruction and Reading Materials

:: Agora Center, the University of Jyväskylä - Zambia

Introduces GraphoGame, a science-based eLearning environment for literacy and teacher training.

:: Creative Associates International - Zambia

Develops a community-based, scalable model for using mobile technology to create and disseminate mother tongue reading materials to families with early grade children.

:: Kampuchean Action for Primary Education - Cambodia

Develops mother tongue instruction and reading materials, with electronic readers having interactive features for Grades 2 and 3 readers.

:: Little Thinking Minds - Jordan

Builds a child-centered ICT-based Arabic literacy program consisting of e-books and associated mobile applications that can supplement traditional school-based learning at home or in the classroom.

:: Réseau d'Acteurs pour le Renouveau de l'Education - Mali
Uses mobile technology to improve the teaching and learning of reading and writing in bilingual curriculum schools.

Family and Community Engagement

:: ChildFund International - Afghanistan
Transmits radio messages and stories to families of struggling readers, using solar-charged mobile phones.

:: Oeuvre Malienne d'Aide à l'Enfance du Sahel - Mali
Uses Stepping Stone, a low-cost mobile lesson creation tool, to determine how access to interactive digital audio and texts might enhance pre-reading and reading skills.

:: Qué Funciona para el Desarrollo A.C. - Mexico
Introduces MATCH, a technology-based platform that provides children and their parents with a selection of Spanish-written books that are tailored to the child's reading level and coincide with his/her topics of interest.

:: Sesame Workshop India Trust - India
Strengthens family and community engagement in promoting mother tongue reading skills among early primary grade children.

Children with Disabilities

:: Benetech - India
Creates texts in local languages by developing accessible audio books paired with the most current braille-focused reading methods.

:: Catholic Relief Services - Lesotho
Improves the reading outcomes of visually impaired children through the use of the Mountbatten Pro Braille (MB Pro) and the Jot-a-Dot portable Braille.

:: Institute for Disabilities Research and Training, Inc. - Morocco
Develops computer software that enables educators to efficiently create instructional materials with Moroccan Sign Language graphics.

:: Resources for the Blind, Inc. - Philippines
Develops technology to create and upload accessible versions of supplementary reading materials, and provides equipment needed by visually impaired students to access the materials.

:: Studio ADC - Georgia
Develops and tests electronic versions of books and learning materials for hearing impaired children.

DFID [to 7 February 2015]

<https://www.gov.uk/government/latest?departments%5B%5D=department-for-international-development>

[New deal to help businesses bounce back from Ebola in Sierra Leone](#)

Published 6 February 2015 News story DFID

[African communities called on to end FGM in a generation](#)

Published 6 February 2015 Press release DFID

[Ending Female Genital Mutilation: Cardiff group praised for campaign](#)

Published 3 February 2015 Press release DFID

[Working for peace and long-term stability in the Middle East and North Africa](#)

Updated 3 February 2015 Policy DFID, FCO and MOD

[Factsheet: The UK's humanitarian aid response to the Syria crisis](#)

Updated 3 February 2015 Statistics DFID

[DFID Smart Rules: Better Programme Delivery](#)

Updated 2 February 2015 Guidance DFID

ECHO [to 7 February 2015]

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

[New EU strategy mobilises €1 billion for Syria and Iraq](#)

06/02/2015

The European Commission and the EU High Representative for Foreign Affairs and Security Policy are presenting the first EU comprehensive strategy to tackle the crises in Syria and Iraq allocating €1 billion in funding for the next two years.

[Statement by Commissioner Stylianides, EU Ebola Coordinator, on rising Ebola case numbers](#)

05/02/2015

"Ebola cases in West Africa are on the rise again. For the first time this year, we saw an increase in new infections in the week to 1 February – with 124 new confirmed cases across Sierra Leone, Guinea and Liberia. This is very worrying...

[EU allocates €3 million to help flood victims in Southern Africa](#)

05/02/2015

The European Commission is giving €3 million in humanitarian aid to assist the people affected by severe flooding in Malawi, Mozambique and Madagascar. "The current heavy rains in the region have caused floods that destroyed houses, schools,...

....

African Union [to 7 February 2015]

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

Feb.05.2015

[German President Commends Work of the African Court for Human and Peoples' Rights](#)

Feb.05.2015

[AU ECHO - The newsletter of the AU Commission Issue 1 2015](#)

Feb.03.2015

[Newly Elected Chair of the African Union, President Robert Mugabe interacts with officials and staff of the AU Commission](#)

Feb.03.2015

[Timeline of AU Response to the Ebola Outbreak](#)

Feb.02.2015

[AUC signs MoU with Huawei for Partnership on ICT](#)

The African Development Bank Group [to 7 February 2015]

<http://www.afdb.org/en/news-and-events/press-releases/>

[African Development Bank participates in High-Level Event on Ebola Recovery hosted by UNDP in New York](#)

02/02/2015 - On January 29, 2015, the African Development Bank, represented by Janvier Kpourou Litse, Acting Vice-President of Operations, in charge of Country and Regional Programs and Policy, participated in a High-Level United Nations Development Programme meeting on Ebola Recovery in New York.

ASEAN [to 7 February 2015]

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

[22nd ASEAN-EU Joint Cooperation Committee \(JCC\) Meeting Convenes in Jakarta](#)

05 February 2015

The 22nd Meeting of the ASEAN-EU Joint Cooperation Committee (JCC) was held on 5 February 2015 in Jakarta.

The meeting confirmed the excellent momentum in strengthening ASEAN-EU relations, as highlighted by the successful ASEAN-EU Ministerial Meeting held in Brussels on 23 July 2014 and the informal ASEAN-EU Leaders' meeting held in Milan in October 2014.

UNCTAD [to 7 February 2015]

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

No new digest content identified.

World Trade Organisation [to 7 February 2015]

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

[US donates USD 1 million for training programmes for developing countries](#)

05.02.2015

The United States has contributed an additional USD 1 million (CHF 917,000) to the WTO Doha Development Agenda (DDA) Global Trust Fund. The main objective of this funding is to help developing countries implement the new Trade Facilitation Agreement.

OECD [to 7 February 2015]

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

[First steps towards implementation of OECD/G20 efforts against tax avoidance by multinationals](#)

6-February-2015

The agreed mandate authorises the formation of an ad-hoc negotiating group, open to participation from all states. The group will be hosted by the OECD and will hold its first meeting by July 2015, with an aim to conclude drafting by 31 December 2016.

IMF [to 7 February 2015]

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

[IMF Establishes a Catastrophe Containment and Relief Trust to Enhance Support for Eligible Low Income Countries Hit by Public Health Disasters](#)

Press Release No. 15/34

February 5, 2015

[see full treatment in Week in Review above]

World Bank [to 7 February 2015]

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

No new digest content identified...we limit coverage to regional and global level initiatives, recognizing that a number of country-level announcements are added each week]

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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 7 February 2015]

<http://amref.org/news/news/>

[Speed up Efforts to End Female Genital Mutilation, Urges Amref Health Africa](#)

International Day against Female Genital Mutilation – February 6, 2015

The International Day against Female Genital Mutilation (FGM), also known as Female Genital Cutting, has been designated by the United Nations to raise awareness about the dangers of the practice. FGM is the intentional invasive injuring of the female genitalia for non-medical reasons. It is a painful damaging of the genitals aimed at subduing women, an extreme form of discrimination against women that reflects deep-rooted inequality between the sexes. It has been recognised as a severe violation of the rights of women and girls...

...Amref Health Africa has implemented programmes to eliminate FGM since 2007, including regional programmes across East Africa and Ethiopia. Amref Health Africa's innovative anti-FGM work, especially the community-led Alternative Rites of Passage, has been widely recognised as safe and acceptable to the community.

On this International Day against Female Genital Mutilation, Amref Health Africa renews its commitment to working hand in hand with governments, development partners and civil society organisations to:

- :: Explore innovative ways of engaging the communities to accelerate the abandonment of FGM and to inform programming in working with communities
- :: Work hand in hand with relevant bodies and institutions to build skills of frontline health workers in dealing with the effects of FGM
- :: Mobilise health workers against medicalisation of FGM
- :: Increase health education and health promotion among girls and women

Amref Health Africa realises that governments are solely responsible for ensuring the right to health for their citizenry and commits to supporting the governments to meet this objective. To that extent, Amref Health Africa urges governments as well as their development partners to meet the following obligations for accelerating the abandonment of FGM:

- :: Allocate adequate resources to support the abandonment of FGM and increase the empowerment of women and adolescents
- :: Ensure frontline workers are knowledgeable and skilled in the care of FGM-related complications
- :: Support the implementation of innovative approaches to engage communities towards abandonment of FGM
- :: Invest in research to understand the underlying factors that cause FGM to thrive.

Aravind Eye Care System [to 7 February 2015]

Inauguration of Prayana

Aravind - Madurai, January 9

Prayana - A Museum of Library at Aravind was inaugurated in the premises of Aravind Library and Information Centre. The centre was inaugurated by Pamela C Sieving, Former Biomedical librarian/Informationist, NIH Library Bethesda, & Bette Anton, Librarian Emerita, University of California, Berkeley in the presence of senior leadership team of Aravind. The museum holds rare pictures right from the beginning of Aravind Eye Care System, manuscripts, old equipment and instruments used for diagnostic purposes.

BRAC [to 7 February 2015]

Maya Apa - Help at hand - Bangladesh's first app by women for women

02 February 2015, Dhaka.

In partnership with BRAC, maya.com.bd has launched the first ever one-touch help service app for women in Bangladesh. 'Maya Apa' is an android-based mobile application, designed, developed, and implemented by female engineers, doctors, and entrepreneurs. It allows women (or any other user) to post questions anonymously, on health, legal and psychosocial issues. Within 48 hours, experts respond with tailor-made answers...

BRAC launches new research website

01 February 2015, Dhaka.

BRAC's research and evaluation division launched its new website research.brac.net today. This new initiative was taken with the aim to disseminate its research publications to a wider audience as well as to bring research more prominently in development discussions. Integrating many features of web 2.0, the new website presents augmented user interactivity and mobile friendliness with clear navigations. The publications can be now read online plus social media tools...

CARE International [to 7 February 2015]

Nutrition Critical as 2.5 Million South Sudanese Face Severe Hunger

SOUTH SUDAN

3 FEBRUARY 2015

Conflict and failed harvests contribute to 2.5 million people facing severe hunger in the coming months.

[CARE Welcomes Ceasefire in South Sudan but a Comprehensive Peace Settlement Must be Reached](#)

SOUTH SUDAN

3 FEBRUARY 2015

Ceasefire in South Sudan provides hope for a new future if settlements can be reached in upcoming peace talks.

Danish Refugee Council [to 7 February 2015]

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

[Joint statement on Humanitarian principles](#) (04.02.15)

During the World Humanitarian Summit Budapest consultations, the Danish Refugee Council along with 34 other concerned humanitarian organizations presented a joint statement on the universality of humanitarian principles....

[Vulnerable groups exposed in Libyan chaos](#) (04.02.15)

The Danish Refugee Council (DRC) is among the few humanitarian actors still operational on the ground in Libya where a spiral of violence and fighting poses an increasing threat to vulnerable groups...

Casa Alianza [to 7 February 2015]

Covenant House [to 7 February 2015]

<http://www.casa-alianza.org.uk/news>

[New Housing Program in Toronto for Sex-Trafficked Victims](#)

With the launch of the city's first specialized, longer-term housing program, young, female victims of sex trafficking will find critically needed support to rebuild their lives in a new facility operated by Covenant House Toronto.

[Covenant House On CNN](#)

In this CNN report, Covenant House New York Executive Director Creighton Drury talks about how Covenant House responds to the needs of homeless youth during snowstorms and every night of the year.

ECPAT [to 7 February 2015]

No new digest content identified.

Fountain House [to 7 February 2015]

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

No new digest content identified.

Handicap International [to 7 February 2015]

No new digest content identified. [See START Network announcement below]

Heifer International [to 7 February 2015]

No new digest content identified

HelpAge International [to 7 February 2015]

2 FEBRUARY 2015

[Developing countries face ageing revolution](#)

In 2050, just 35 years' time, there will be more older people worldwide (aged 60 and over) than children under 16 for the first time in history[1].

Today, almost two-thirds (62%) of the 868 million people in the world aged over 60 live in developing countries[2]; this proportion is expected to increase to 80% in 2050[3].

That more people are living longer in developing countries is a cause for celebration, but this new reality also brings new challenges if it goes unrecognised. New analysis by Age International finds that diseases commonly associated with ageing (ischaemic heart disease, stroke and COPD) make up three of the top four causes of death in low- and middle-income countries[4]. The increase in prevalence of non-communicable diseases shows the need to invest in the kinds of services and programmes which people require later in life.

These findings come in a new publication 'Facing the facts: the truth about ageing and development' which brings together expert opinion on the trends, challenges and opportunities presented by a global ageing population... *[see full treatment in Week in Review above]*

International Rescue Committee [to 7 February 2015]

[Fleeing violence in Nigeria: photos, updates \[Storify\]](#)

Posted by The IRC on February 6, 2015

In Nigeria and Niger, the IRC is providing emergency support to thousands of people fleeing a violent insurgency that has plagued the region. IRC country director Matias Meier is tweeting updates and photos from the Niger response.

ICRC - International Committee of the Red Cross [to 7 February 2015]

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

[Central African Republic: Violence continues to take toll on civilians](#)

Central African Republic: Violence continues to take toll on civilians Violence has been on the rise again in the capital Bangui in recent weeks, with reports of armed robberies and abductions in neighbourhoods ...

04-02-2015 | News release

[Ukraine: ICRC appalled by shelling of yet another hospital in Donetsk](#)

Ukraine: ICRC appalled by shelling of yet another hospital in Donetsk The International Committee of the Red Cross (ICRC) is appalled by the repeated damage caused to medical facilities on both sides of the ...

04-02-2015 | News release

[Ukraine: Civilians caught in crossfire](#)

Ukraine: Civilians caught in crossfire Heavy shelling of residential areas in Donetsk and towns like Debaltsevo has continued over the weekend. Despite dangerous conditions, teams from the International ...

03-02-2015 | News release

IRCT [to 7 February 2015]

No new digest content identified

MSF/Médecins Sans Frontières [to 7 February 2015]

Selected Press Releases/Field News

[Ebola Drug Trial in Liberia Halted](#)

February 04, 2015

BRUSSELS/NEW YORK—A trial of the experimental Ebola drug brincidofovir in Liberia has officially ended due to a significant drop in the number of new Ebola cases and the drug manufacturer's decision to withdraw from the trial, the international medical humanitarian organization Doctors Without Borders/Médecins Sans Frontières said Tuesday.

Mercy Corps [to 7 February 2015]

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

[PRESIDENT'S BUDGET INSUFFICIENT TO MEET GROWING GLOBAL HUMANITARIAN NEEDS](#)

February 4, 2015

*CONGRESS SHOULD REVERSE CUTS TO HUMANITARIAN ASSISTANCE AND SUPPORT
INCREASES IN DEVELOPMENT FUNDING*

Washington, DC — The global humanitarian organization Mercy Corps says the Obama administration's FY2016 budget request is a mixed bag for the world's most vulnerable people. On the one hand, the Administration calls for a 20 percent cut in funding for refugees and an eight percent cut for internally displaced people. On the other hand, development accounts, which can address the root causes of fragility in countries frequently affected by conflict and natural disasters, receive a significant increase in funding.

"Congress must reject the proposed cuts to humanitarian assistance," says Andrea Koppel, vice president of Global Engagement and Policy at Mercy Corps. "With more than 51 million people displaced from their homes, the highest number since the end of World War II, and crises in Syria, South Sudan and other countries showing no signs of abating, the U.S. must maintain its leadership role in responding to acute needs in fragile states."

[MERCY CORPS FORMS GLOBAL LEADERSHIP COUNCIL](#)

February 2, 2015

*WORLD LEADERS JOIN MERCY CORPS' ADVISORY COMMITTEE TO HELP SHAPE AGENCY'S
FUTURE STRATEGY*

Portland, Ore. — Seven world political, business and economic leaders have joined Mercy Corps' new Global Leadership Council to help enhance the organization's strategic impact and influence and further strengthen responses to humanitarian and economic challenges around the world.

"We are facing an unprecedented number of complex humanitarian crises on multiple continents," says Neal Keny-Guyer, Chief Executive Officer of Mercy Corps. "Our Global Leadership Council will help Mercy Corps continue to wisely navigate and adapt to today's dynamic, rapidly changing environment."

Linda Mason, Honorary Chair of Mercy Corps' board of directors, will chair the Global Leadership Council. The council's founding members are:

- :: Carolina Barco, Advisor on Sustainable Urban Development in Latin America and the Caribbean to the Inter-American Development Bank, former Minister of Foreign Affairs of Colombia and former Ambassador to the United States
- :: Mohamed El-Erian, Chief Economic Adviser at Allianz
- :: Fadi Ghandour, Founder and Vice Chairman of Aramex, Executive Chairman of Wamda Ventures and Managing Partner of MENA Venture Investments
- :: Mo Ibrahim, Founder and Chair of the Mo Ibrahim Foundation and Founding Chairman of Satya Capital Limited
- :: Indra Nooyi, Chairman and CEO of PepsiCo
- :: George Papandreou, former Prime Minister and former Minister of Foreign Affairs of Greece
- :: Robert Zoellick, Chairman of Goldman Sachs' International Advisors and former President of the World Bank Group.

"These global citizens are among the foremost experts in their fields," says Keny-Guyer. "Mercy Corps is deeply grateful for their strategic counsel and unwavering commitment to addressing the world's toughest challenges."

Operation Smile [to 7 February 2015]

Upcoming Mission Schedule

- Feb 5 - 9 | Balabac, Palawan, Philippines
- Feb 12 - 20 | Guadalajara, Mexico
- Feb 15 - 21 | Cauayan, Isabela, Philippines
- Feb 18 - 21 | Cobarruguis, Quirino, Philippines
- Feb 19 - 27 | Tegucigalpa, Honduras

OXFAM [to 7 February 2015]

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

No new digest content identified.

Partners In Health [to 7 February 2015]

Feb 06, 2015

[Ophelia Dahl on the Vaccination Debate](#)

Ophelia Dahl, co-founder and executive director of Partners In Health, discussed with broadcaster Katie Couric this week a letter Dahl's father wrote 27 years ago about the importance of vaccinations.

Feb 06, 2015

[PIH Continues Mobile Clinic amid Malawi Flooding](#)

Severe flooding in Malawi in January and February has displaced thousands of people. Partners In Health's Malawian sister organization has responded to health-related issues with a weekly mobile clinic. [Read More](#) ▶

Feb 04, 2015

[World Cancer Day: Oncology Services in Haiti](#)

PATH [to 7 February 2015]

Press release | February 06, 2015

[PATH names Kathy Cahill as vice president for International Development](#)

Public health expert to serve on executive leadership team and oversee PATH's international presence

[Innovative health sector financing: the Vaccine Independence Initiative](#)

30 January 2015

This week the UNICEF Board is considering expanding the Vaccine Independence Initiative (VII). This financing mechanism was launched almost 25 years ago in 1991 to decouple the procurement of vaccines from the payment for these vaccines by countries out of national budgets. We caught up with PATH's chief strategy officer Amie Batson, who has an intimate connection with this program....Q: What is next for the VII? A: During its meeting this week, the UNICEF Board is considering expanding the VII ten-fold (from \$10 million to \$100 million) to cover prefinancing of vaccines as well as many health products like bednets treated with long-lasting insecticide and supplies needed for Ebola response. As countries graduate from Gavi and other donor support, there are increasing demands for mechanisms such as the VII that create greater financial flexibility.

Plan International [to 7 February 2015]

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

[Plan International welcomes Liberian government's diligence to ensure schools are safe for children](#)

3 February 2015: Plan International has welcomed the Liberian government's diligence in ensuring schools are safe for children, having recently announced students will now go back to school on 16 February.

Schools in Liberia were originally set to open on 2 February, but the date has been pushed back, as the country says it is not yet fully prepared to prevent the spread of Ebola.

Plan has been urging governments to adequately prepare schools for classes, as many schools return, or prepare to return to normal in Guinea, Liberia and Sierra Leone. Children at risk

"The Ebola crisis has forced schools to close across the affected countries," said Plan CEO Nigel Chapman. "As a result, children's education has been severely interrupted and their learning needs unmet for several months. Children who are out of school, or those who have become orphaned, are at risk of early and forced marriage and other forms of abuse and exploitation, including child labour.

"Plan welcomes the decision to re-open schools in Ebola-affected countries and advises care and caution to ensure that best interests of children are served."...

Save The Children [to 7 February 2015]

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

[The Lottery of Birth: New Report Reveals World's Most Disadvantaged Children are Being Left Behind in Global Efforts to Improve Child Survival](#)

FAIRFIELD, Conn. (Feb. 4, 2015) — Despite historic global progress in reducing under-five child mortality rates over the past 15 years, new research conducted by Save the Children has found that large groups of children are still being left behind, simply because of where they live and the circumstances in which they are born.

Many factors, including whether a child lives in a rural area or belongs to a disadvantaged ethnic group, play a huge role in a child's chances of survival. Save the Children describes this situation as a "lottery of birth."

The "[Lottery of Birth](#)" report, based on inaugural analysis of disaggregated data from 87 low and middle income countries around the world, reveals that in more than three quarters of these countries, inequalities in child survival rates are actually worsening, resulting in some groups of children making far slower progress than their better-off peers... [see full treatment in Week in Review above]

SOS-Kinderdorf International [to 7 February 2015]

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

[After Ebola: Orphaned children find home at SOS Children's Villages Sierra Leone](#)

04.02.2015 - For the first time since June 2014 new cases of Ebola in Sierra Leone have fallen below 100 per week. As the outbreak slows, focus shifts to how to care for the thousands of children left orphaned by Ebola.

Tostan [to 7 February 2015]

February 6, 2015

[Tostan's contributions to ending FGC highlighted by Government and UN agencies at national press conference](#)

Dakar, Senegal - At a Press Conference held yesterday in Dakar, the Government of Senegal, the United Nations Population Fund (UNFPA) and the United Nations Children's Fund (UNICEF) shared the results of a recent government study on the practice of FGC in Senegal. According to this 86-page government report, Practices of Female Genital Mutilation/Cutting of Girls and Women in Senegal (December 2014), the country has seen significant decreases in the number of young girls affected by FGC. The study revealed that among girls aged 0-15, who have a mother and at least one sibling who have been cut, the prevalence of FGC dropped from 20% in 2005 to 6.2% in 2010—that's a 69% reduction over the course of five years.

The author of the study, Saturnin Kinson Kodjo, credited Tostan's approach of non-formal human rights education and community engagement to the increasing number of communities that are abandoning the practice of FGC. "The best solution to abandoning FGC is Tostan's approach of capacity building in communities and public declarations of abandonment," he said. He recommended the continuation of the Tostan program in Senegal in order to put an end the practice in the coming years.

Tostan's Chief Executive Officer, Molly Melching, was invited to talk about the success of Tostan's Community Empowerment Program in helping communities make the decision to abandon FGC...

Women for Women International [to 7 February 2015]

No new digest content identified.

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Disasters Emergency Committee [to 7 February 2015]

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

[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 7 February 2015]

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

6 February 2015

[Newton International Fellowships](#)

06.02.2015

This scheme is for non-UK scientists who are at an early stage of their research career and wish to conduct research in the UK. Sir Isaac Newton FRS (1642-1727) was...

[ESRC's Strategic Plan for 2015 and beyond](#)

The Economic and Social Research Council (ESRC) has published its Strategic Plan 2015 – setting out their focus and commitments for the next year. Their four main areas of activity...

[Royal Society-DFID Africa Capacity Building Initiative](#)

This programme is for scientists who want to develop collaborative research consortia between scientists in sub-Saharan Africa and a research institution in the UK. The overall aim of the scheme...

[Safeguarding health: a global health and humanitarian priority](#)

Aanjalie Collure and Leonard Rubenstein In late December 2014, the United Nations General Assembly passed what may become a landmark resolution calling for concerted and specific actions by States to...

END Fund

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

[Gates Annual Letter's Big 2030 Health Goals: How Do We Get Them Done?](#)

Feb 02, 2015

Ellen Agler, CEO, the END Fund and Jeffrey C. Walker, Vice Chairman, United Nation's Secretary General's Envoy for Health Finance and Malaria recently wrote a piece posted on the Huffington Post, reflecting on the 2015 Gates Annual Letter.

GAVI [to 7 February 2015]

<http://www.gavialliance.org/library/news/press-releases/>
No new digest content identified.

Global Fund [to 7 February 2015]
<http://www.theglobalfund.org/en/mediacenter/newsreleases/>
No new digest content identified.

ODI [to 7 February 2015]
<http://www.odi.org/media>
["Cookie cutter" development policies won't deliver for the world's poorest - new report](#)
Tuesday 3rd February 2015

A radically different approach to development is needed if progress in reaching the poorest is to be accelerated says a new report from the Overseas Development Institute (ODI).

In spite of aid flows and robust economic growth, the report, 'Adapting development: improving services for the poor', shows that some countries could still take 100 years or more to deliver some basic healthcare, sanitation and education services. *[see full treatment in Week in Review above]*

The Sphere Project [to 7 February 2015]
<http://www.sphereproject.org/news/>
No new digest content identified.

Start Network [Consortium of British Humanitarian Agencies] [to 7 February 2015]
http://www.start-network.org/news-blog/#.U9U_O7FR98E
[Collaborative advantage: why working together is like a marriage](#)
February 5, 2015

Posted by David Hockaday in Blog.

On the 12th February, Start Network agencies and CDAC- Network representatives will come together to discuss collaborative advantage under the DFID supported Disasters Emergency Preparedness Programme.

Collaborative advantage is a term which first appeared in the July 1994 Harvard Business Review, and is an interesting departure from literature and common thinking at the time which was advocating competitive advantage. In this paper the softer side (or as the author describes it "the art") of collaboration is explored in depth from over 500 interviews across 37 organisations and 11 countries.

The results are fascinating and have been used by the Start Network Team, in discussions with colleagues from the Partnership Brokers Association, to begin to frame a way of talking about and measuring the "value" or benefits of collaboration for the Network and its stakeholders. Three findings from this research are particularly striking.

:: Collaboration yields benefits that are more than just a 'deal'. It creates living systems that evolve progressively in their possibilities

:: Collaboration creates new value together rather than mere exchange.

:: Collaboration cannot be 'controlled' by formal systems but requires a dense web of interpersonal connections and internal infrastructures that enhances learning...

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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>

[Stanford launches major effort to expedite vaccine discovery with \\$50 million grant](#)

Stanford Report, January 29, 2015

[Excerpt]

Stanford University today announced that it has received a grant from the Bill & Melinda Gates Foundation to accelerate efforts in vaccine development. The \$50 million grant over 10 years will build on existing technology developed at Stanford and housed in the Human Immune Monitoring Core, and will establish the Stanford Human Systems Immunology Center. The center aims to better understand how the immune system can be harnessed to develop vaccines for the world's most deadly infectious diseases....

Ford Foundation

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

5 February 2015

[New \\$25 million fund for South African civil society groups working to advance constitutionalism](#)

Joint statement from the Open Society Foundations, Ford Foundation and Atlantic Philanthropies

Today the Open Society Foundations, Ford Foundation and Atlantic Philanthropies announced the launch of a joint fund to support local organizations promoting and advancing constitutionalism in South Africa, to mark the first 20 years of South African democracy. *[see full treatment in Week in Review above]*

3 February 2015:

[Ford Foundation Expands Creative Commons Licensing for All Grant-Funded Projects](#)

A change consistent with organization's longtime commitment to transparency, knowledge-sharing

(New York) – The Ford Foundation announced today that it is adopting an open licensing policy for all grant-funded projects and research to promote greater transparency and accessibility of materials. Effective February 1, grantees and consultants will be required to make foundation-funded materials subject to a Creative Commons license allowing others, free of charge and without requesting permission, the ability to copy, redistribute, and adapt existing materials, provided they give appropriate credit to the original author. *[see full treatment in Week in Review above]*

William and Flora Hewlett Foundation

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

Conrad N. Hilton Foundation

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

No new digest content identified.

Kellogg Foundation

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

No new digest content identified.

MacArthur Foundation

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

Press release

[Nine Nonprofits Recognized for Exceptional Creativity and Effectiveness, Awarded Up to \\$1 Million Each](#)

Published February 4, 2015

MacArthur today named nine organizations as recipients of the MacArthur Award for Creative and Effective Institutions. The Award, which recognizes exceptional nonprofit organizations that are engaged in the Foundation's core fields of work and helps ensure their long-term sustainability, provides each organization with \$350,000 to \$1 million, depending on the size of its budget.

"From tracking money in U.S. elections to protecting the vulnerable in Mexico to reinvigorating civics education, these extraordinary organizations are tackling some of the most difficult social challenges and achieving outsized impact," said MacArthur Vice President Elspeth Revere, who leads the awards program. "This award recognizes their leadership and success, and it is also a significant investment in their long-term future."

The recipients of the 2015 MacArthur Award for Creative and Effective Institutions are –

:: [Asistencia Legal por los Derechos Humanos](#) – Mexico City (\$350,000) protects the rights of vulnerable populations amidst justice reform in Mexico

:: [Firelight Media](#) – New York City (\$500,000) develops diverse documentary filmmakers to tell untold stories

:: [Forest Trends](#) – Washington, DC (\$1 million) brings the value of forests into the modern economy

:: [FrameWorks Institute](#) – Washington, DC (\$1 million) improves how we understand and talk about complex social issues

:: [Human Rights Center, University of California, Berkeley](#) – Berkeley, CA (\$1 million) applies cutting-edge science and research to protect human rights globally

:: [iCivics](#) – Washington, DC (\$750,000) reinvigorates civics education for a new generation of Americans

:: [John Howard Association of Illinois](#) – Chicago, IL (\$500,000) ensures humane and fair treatment of the incarcerated in Illinois through independent oversight

:: [National Institute on Money in State Politics](#) – Helena, MT (\$1 million) brings transparency to campaign finance data in all 50 states

:: [Roosevelt Campus Network](#) – New York City (\$750,000) galvanizes a new generation to participate in making public policy.

Organizations use this critical support, which is large relative to their budgets, to build cash reserves and endowments, develop strategic plans, and upgrade technology and physical infrastructure...

David and Lucile Packard Foundation

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

No new digest content identified.

Rockefeller Foundation

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

No new digest content identified.

Robert Wood Johnson Foundation

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

No new digest content identified.

Wellcome Trust

<http://www.wellcome.ac.uk/News/2015/index.htm>

[The Wellcome Trust pays tribute to Dr Allan Baxter](#)

The Wellcome Trust is deeply saddened to learn of the death of Dr Allan Baxter, its long-standing valued adviser.

6 February 2015

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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

February 2015 Volume 43, Issue 2, p99-198

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

[Reviewed earlier]

American Journal of Preventive Medicine

February 2015 Volume 48, Issue 2, p121-240

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

[Reviewed earlier]

American Journal of Public Health

Volume 105, Issue 2 (February 2015)

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

[Reviewed earlier]

American Journal of Tropical Medicine and Hygiene

February 2015; 92 (2)

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

Editorial

Perspectives on Ebola

Philip J. Rosenthal and Daniel G. Bausch

Am J Trop Med Hyg 2015 92:219-220; Published online January 12, 2015,

doi:10.4269/ajtmh.14-0831

[Free Access]

An unprecedented epidemic of Ebola virus disease (EVD) unfolded in West Africa in 2014. The epidemic has been well described in the popular press and in regular reports from public health authorities. The medical literature has necessarily been slower in describing the epidemic, but comprehensive reports are now appearing, offering valuable accounts of the clinical features, epidemiology, and public health consequences of this terrifying disease. The American Society of Tropical Medicine and Hygiene (ASTMH) has been deeply involved with the EVD outbreak. Numerous ASTMH members have played major roles in addressing the epidemic, including clinicians and epidemiologists working at the front lines of the epidemic at great personal risk, public health authorities guiding control efforts in Africa and elsewhere, and drug and vaccine experts working to rush effective products to the field. The annual meeting of the ASTMH served as a forum for timely expert discussions on EVD, but also highlighted the political challenges of this particular crisis, as some experts were prevented from attending the ASTMH meeting as a result of ill-founded concerns about the consequences of their recent travel to West Africa. In this issue of the American Journal of Tropical Medicine and Hygiene (AJTMH) we offer a series of Perspectives from individuals active in addressing the EVD epidemic.

As with other large disasters, the full toll of the EVD epidemic is difficult to fathom. The numbers are clear. As of the end of 2014, nearly 20,000 cases of EVD and 7,000 deaths have been reported to the World Health Organization (WHO). These numbers are likely underestimates caused by underreporting. Furthermore, although these numbers are much lower than those seen for our greatest tropical medicine challenges, the impact of the epidemic can easily be underappreciated. EVD is quite unique, even among severe infectious diseases, in causing massive disruption to societies, and in particular to the healthcare infrastructure. In affected areas of Africa, in addition to the huge direct toll of EVD, all aspects of healthcare have been torn apart. Management and control of the most important serious infectious diseases, including neonatal infections, human immunodeficiency virus (HIV) infection, tuberculosis, malaria, and other neglected diseases have been greatly disrupted. "Band-aid" solutions, such as widespread distribution of artemisinin-based combination therapies to decrease the incidence of non-Ebola febrile illnesses, have unknown efficacy, and may cause new problems, such as selection of drug resistance and loss of community confidence in the healthcare system. Outside of Africa, responses to the EVD epidemic have often been driven by fear, misguided estimates of risk, and political considerations.

Most often, we in the scientific community appropriately focus on the data—the numbers of cases, the epidemiologic characteristics, and the efficacies of new interventions. In this process we may lose sight of the fact that a crisis such as the EVD epidemic is inherently personal. People are getting infected, suffering, and dying. In the case of this epidemic, much more so than in most humanitarian disasters, many of the victims are the healthcare workers and scientists who have willingly put themselves in harm's way to help alleviate the suffering of others. In this issue of the AJTMH we offer Perspectives focusing on the personal side of the epidemic, considering in particular the points of view of health workers as caregivers at risk, as patients, and as those working to improve our ability to manage and control this epidemic. Two perspectives, from Adaora Igonoh and Will Pooley, offer accounts from those who put themselves at personal risk caring for patients with EVD, and then contracted the disease themselves. Another, from Lewis Robinson, offers an account of a potential Ebola virus exposure that led to complex consequences. Susan McClellan offers an account from one of the many non-African healthcare providers who eagerly put themselves at risk. Perspectives addressing an improved response to EVD include a discussion of how, despite some steps in the right direction, the public health community failed to best prepare for a potential hemorrhagic fever outbreak by Daniel Bausch, a consideration of rethinking discharge policy in seriously stressed EVD clinics by Tim O'Dempsey and others, and a comprehensive commentary on clinical preparedness for those providing EVD care from David Brett-Major and many others. Considering the political consequences of responses to the epidemic outside Africa, perspectives from groups led by Ramin Asgary and Piero Olliaro detail the consequences of the misguided effort of the State of Louisiana to protect public health by preventing attendance at the annual meeting of the ASTMH in New Orleans by anyone who had recently traveled to affected countries in West Africa.

The West African EVD epidemic is still unfolding. This enormous disaster is likely to have long-range consequences, with impacts on efforts to control all tropical diseases in addition to specific effects on viral hemorrhagic fever preparedness and far-reaching impacts on the affected countries. Regardless of the future overall course, the epidemic will remain deeply personal, with obvious consequences on affected patients and families, but also on health workers. We hope that the Perspectives in this issue of the AJTMH will help readers to appreciate the personal side of this epidemic, both as a major humanitarian disaster and as a formidable challenge for the international public health community.

Perspective Pieces

[My Experience as an Ebola Patient](#)

Adaora K. Igonoh

Am J Trop Med Hyg 2015 92:221-222; Published online December 22, 2014,
doi:10.4269/ajtmh.14-0763

[Full Text](#) [Full Text \(PDF\)](#) OPEN ACCESS ARTICLE

[Ebola: Perspectives from a Nurse and Patient](#)

Will Pooley

Am J Trop Med Hyg 2015 92:223-224; Published online January 5, 2015, doi:10.4269/ajtmh.14-0762

[Full Text](#) [Full Text \(PDF\)](#) OPEN ACCESS ARTICLE

From Clinician to Suspect Case: My Experience After a Needle Stick in an Ebola Treatment Unit in Sierra Leone

Lewis Robinson

Am J Trop Med Hyg 2015 92:225-226; Published online December 15, 2014,
doi:10.4269/ajtmh.14-0769

[Full Text](#) [Full Text \(PDF\)](#) OPEN ACCESS ARTICLE

Ebola: My Head is Full of Stories

Susan L. F. McLellan

Am J Trop Med Hyg 2015 92:227-228; Published online December 22, 2014,
doi:10.4269/ajtmh.14-0801

[Full Text](#) [Full Text \(PDF\)](#) OPEN ACCESS ARTICLE

The Year That Ebola Virus Took Over West Africa: Missed Opportunities for Prevention

Daniel G. Bausch

Am J Trop Med Hyg 2015 92:229-232; Published online January 5, 2015, doi:10.4269/ajtmh.14-0818

[Full Text](#) [Full Text \(PDF\)](#) OPEN ACCESS ARTICLE

Being Ready to Treat Ebola Virus Disease Patients

David M. Brett-Major, Shevin T. Jacob, Frederique A. Jacquerioz, George F. Risi, William A. Fischer II, Yasuyuki Kato, Catherine F. Houlihan, Ian Crozier, Henry Kyobe Bosa, James V. Lawler, Takuya Adachi, Sara K. Hurley, Louise E. Berry, John C. Carlson, Thomas C. Button, Susan L. McLellan, Barbara J. Shea, Gary G. Kuniyoshi, Mauricio Ferri, Srinivas G. Murthy, Nicola Petrosillo, Francois Lamontagne, David T. Porembka, John S. Schieffelin, Lewis Robinson, Tim O'Dempsey, Suzanne M. Donovan, Daniel G. Bausch, Robert A. Fowler, and Thomas E. Fletcher
Am J Trop Med Hyg 2015 92:233-237; Published online December 15, 2014,
doi:10.4269/ajtmh.14-0746

[Abstract](#) [Full Text](#) [Full Text \(PDF\)](#) OPEN ACCESS ARTICLE

Rethinking the Discharge Policy for Ebola Convalescents in an Accelerating Epidemic

Tim O'Dempsey, S. Humarr Khan, and Daniel G. Bausch

Am J Trop Med Hyg 2015 92:238-239; Published online December 1, 2014,
doi:10.4269/ajtmh.14-0719

[Abstract](#) [Full Text](#) [Full Text \(PDF\)](#) OPEN ACCESS ARTICLE

Ebola Policies That Hinder Epidemic Response by Limiting Scientific Discourse

Ramin Asgary, Julie A. Pavlin, Jonathan A. Ripp, Richard Reithinger, and Christina S. Polyak

Am J Trop Med Hyg 2015 92:240-241; Published online January 5, 2015, doi:10.4269/ajtmh.14-0803

[Abstract](#) [Full Text](#) [Full Text \(PDF\)](#) OPEN ACCESS ARTICLE

Out of (West) Africa—Who Lost in the End?

Piero Olliaro, Estrella Lasry, and Amanda Tiffany

Am J Trop Med Hyg 2015 92:242-243; Published online December 15, 2014,
doi:10.4269/ajtmh.14-0753

[Full Text](#) [Full Text \(PDF\)](#) OPEN ACCESS ARTICLE

International Aid and Natural Disasters: A Pre- and Post-Earthquake Longitudinal Study of the Healthcare Infrastructure in Leogane, Haiti

Maxwell Kligerman, Michele Barry, David Walmer, and Eran Bendavid

Am J Trop Med Hyg 2015 92:448-453; Published online December 15, 2014,

doi:10.4269/ajtmh.14-0379

[Abstract](#) [Full Text](#) [Full Text \(PDF\)](#) [Supplementary File](#) [OPEN ACCESS ARTICLE](#)

BMC Health Services Research

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

(Accessed 7 February 2015)

Research article

Streamlined research funding using short proposals and accelerated peer review: an observational study

Adrian G Barnett^{12*}, Danielle L Herbert¹³, Megan Campbell¹², Naomi Daly²⁴, Jason A Roberts²⁴, Alison Mudge²⁴ and Nicholas Graves¹²

[Author Affiliations](#)

BMC Health Services Research 2015, 15:55 doi:10.1186/s12913-015-0721-7

Published: 7 February 2015

Abstract (provisional)

Background

Despite the widely recognised importance of sustainable health care systems, health services research remains generally underfunded in Australia. The Australian Centre for Health Services Innovation (AusHSI) is funding health services research in the state of Queensland. AusHSI has developed a streamlined protocol for applying and awarding funding using a short proposal and accelerated peer review.

Method

An observational study of proposals for four health services research funding rounds from May 2012 to November 2013. A short proposal of less than 1,200 words was submitted using a secure web-based portal. The primary outcome measures are: time spent preparing proposals; a simplified scoring of grant proposals (reject, revise or accept for interview) by a scientific review committee; and progressing from submission to funding outcomes within eight weeks. Proposals outside of health services research were deemed ineligible.

Results

There were 228 eligible proposals across 4 funding rounds: from 29% to 79% were shortlisted and 9% to 32% were accepted for interview. Success rates increased from 6% (in 2012) to 16% (in 2013) of eligible proposals. Applicants were notified of the outcomes within two weeks from the interview; which was a maximum of eight weeks after the submission deadline. Applicants spent 7 days on average preparing their proposal. Applicants with a ranking of reject or revise received written feedback and suggested improvements for their proposals, and resubmissions composed one third of the 2013 rounds.

Conclusions

The AusHSI funding scheme is a streamlined application process that has simplified the process of allocating health services research funding for both applicants and peer reviewers. The AusHSI process has minimised the time from submission to notification of funding outcomes.

BMC Infectious Diseases

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

(Accessed 7 February 2015)

Research article

[An outbreak following importation of wild poliovirus in Xinjiang Uyghur Autonomous Region, China, 2011](#)

Hai-Bo Wang, Wen-Zhou Yu, Xin-Qi Wang, Fuerhati Wushouer, Jian-Ping Wang, Dong-Yan Wang, Fu-Qiang Cui, Jing-Shan Zheng, Ning Wen, Yi-Xin Ji, Chun-Xiang Fan, Hui-Ling Wang, Gui-Jun Ning, Guo-Hong Huang, Dong-Mei Yan, Qi-Ru Su, Da-Wei Liu, Guo-Ming Zhang, Kathleen H Reilly, Jing Ning, Jian-Ping Fu, Sha-Sha Mi, Hui-Ming Luo, Wei-Zhong Yang BMC Infectious Diseases 2015, 15:34 (31 January 2015)

[Abstract](#) | [Provisional PDF](#) | [PubMed](#)

BMC Medical Ethics

(Accessed 7 February 2015)

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

[No new relevant content]

BMC Public Health

(Accessed 7 February 2015)

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

Research article

[Using a community-based definition of poverty for targeting poor households for premium subsidies in the context of a community health insurance in Burkina Faso](#)

Germain Savadogo, Aurelia Souarès, Ali Sié, Divya Parmar, Gilles Bibeau, Rainer Sauerborn BMC Public Health 2015, 15:84 (6 February 2015)

[Abstract \(provisional\)](#) [Provisional PDF](#)

Background

One of the biggest challenges in subsidizing premiums of poor households for community health insurance is the identification and selection of these households. Generally, poverty assessments in developing countries are based on monetary terms. The household is regarded as poor if its income or consumption is lower than a predefined poverty cut-off. These measures fail to recognize the multi-dimensional character of poverty, ignoring community members' perception and understanding of poverty, leaving them voiceless and powerless in the identification process. Realizing this, the steering committee of Nouna's health insurance devised a method to involve community members to better define 'perceived' poverty, using this as a key element for the poor selection. The community-identified poor were then used to effectively target premium subsidies for the insurance scheme.

Methods

The study was conducted in the Nouna's Health District located in northwest Burkina Faso. Participants in each village were selected to take part in focus-group discussions (FGD) organized in 41 villages and 7 sectors of Nouna's town to discuss criteria and perceptions of poverty. The discussions were audio recorded, transcribed and analyzed in French using the software NVivo 9.

Results

From the FGD on poverty and the subjective definitions and perceptions of the community members, we found that poverty was mainly seen as scarcity of basic needs, vulnerability, deprivation of capacities, powerlessness, voicelessness, indecent living conditions, and absence of social capital and community networks for support in times of need. Criteria and poverty groups as described by community members can be used to identify poor who can then be targeted for subsidies.

Conclusion

Policies targeting the poorest require the establishment of effective selection strategies. These policies are well-conditioned by proper identification of the poor people. Community perceptions and criteria of poverty are grounded in reality, to better appreciate the issue. It is crucial to take these perceptions into account in undertaking community development actions which target the poor. For most community-based health insurance schemes with limited financial resources, using a community-based definition of poverty in the targeting of the poorest might be a less costly alternative.

BMC Research Notes

(Accessed 7 February 2015)

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

[No new relevant content]

British Medical Journal

07 February 2015(vol 350, issue 7994)

<http://www.bmj.com/content/350/7994>

Editorials

Torture and doctors' dual obligation

BMJ 2015;350:h589 (Published 03 February 2015)

Health professionals need support to put the wellbeing of detainees first

Julian Sheather, deputy head of ethics¹, Rhian Beynon, communications manager²,
Tom Davies, Stop Torture campaign manager³, Kamran Abbasi, international editor⁴

Author affiliations

[Initial text]

People held in detention are vulnerable. Complex physical and psychological health needs are compounded by loss of freedom that constrains detainees' ability to assert their interests. The purpose of custodial institutions and environments is not therapeutic. Health professionals who look after detainees find themselves torn by divided loyalties: their primary obligation to patient wellbeing conflicts with their obligations to institutions and employers.¹

Involvement of health professionals in torture is indisputable. A recent report by the US Senate Intelligence Select Committee confirmed that the line between medical care and interrogation was breached by the Central Intelligence Agency (CIA) during the "war on terror."² Health professionals supervised waterboarding sessions and cleared detainees for enhanced interrogation. Medical staff were involved in rectal feeding and hydration, which the CIA considered useful in overcoming detainees' refusal of food and fluids despite no evidence of its benefit. Meanwhile in Saudi Arabia, a panel of ...

Analysis

International donations to the Ebola virus outbreak: too little, too late?

BMJ 2015;350:h376 (Published 03 February 2015)

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 93, Number 2, February 2015, 65-132

<http://www.who.int/bulletin/volumes/93/2/en/>

[Reviewed earlier]

Complexity

January/February 2015 Volume 20, Issue 3 Pages fmi–fmi, 1–92

<http://onlinelibrary.wiley.com/doi/10.1002/cplx.v20.3/issuetoc>

[Reviewed earlier]

Conflict and Health

[Accessed 7 February 2015]

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

[No new relevant content]

Cost Effectiveness and Resource Allocation

(Accessed 7 February 2015)

<http://www.resource-allocation.com/>

Research

[Cost-effectiveness of using a social franchise network to increase uptake of oral rehydration salts and zinc for childhood diarrhea in rural Myanmar](#)

Bishai D, Sachathap K, LeFevre A, Thant HNN, Zaw M, Aung T, McFarland W, Montagu D et al. Cost Effectiveness and Resource Allocation 2015, 13:3 (5 February 2015)

Abstract (provisional)

Introduction

This paper examines the cost-effectiveness of achieving increases in the use of oral rehydration solution and zinc supplementation in the management of acute diarrhea in children under 5 years through social franchising. The study uses cost and outcome data from an initiative by Population Services International (PSI) in 3 townships of Myanmar in 2010 to promote an ORS-Zinc product called ORASEL.

Background

The objective of this study was to determine the incremental cost-effectiveness of a strategy to promote ORS-Z use through private sector franchising compared to standard government and private sector practices.

Methods

Costing from a societal perspective included program, provider, and household costs for the 2010 calendar year. Program costs including ORASEL program launch, distribution, and

administration costs were obtained through a retrospective review of financial records and key informant interviews with staff in the central Yangon office. Household out of pocket payments for diarrheal episodes were obtained from a household survey conducted in the study area and additional estimates of household income lost due to parental care-giving time for a sick child were estimated. Incremental cost-effectiveness relative to status quo conditions was calculated per child death and DALY averted in 2010. Health effects included deaths and DALYs averted; the former modeled based on coverage estimates from a household survey that were entered into the Lives Saved Tool (LiST). Uncertainty was modeled with Monte Carlo methods.

Findings

Based on the model, the promotional strategy would translate to 2.85 (SD 0.29) deaths averted in a community population of 1 million where there would be 81,000 children under 5 expecting 48,373 cases of diarrhea. The incremental cost effectiveness of the franchised approach to improving ORASEL coverage is estimated at a median \$5,955 (IQR: \$3437-\$7589) per death averted and \$214 (IQR: \$127-\$287) per discounted DALY averted.

Interpretation

Investing in developing a network of private sector providers and keeping them stocked with ORS-Z as is done in a social franchise can be a highly cost-effective in terms of dollars per DALY averted.

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 25, Issue 1, 2015

<http://www.tandfonline.com/toc/cdip20/current>

[Reviewed earlier]

Disability and Rehabilitation: Assistive Technology

Volume 10, Number 2 (March 2015)

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

[Reviewed earlier]

Disaster Medicine and Public Health Preparedness

Volume 8 - Issue 06 - December 2014

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

[Reviewed earlier]

Disaster Prevention and Management

Volume 24 Issue 1

<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>

[Reviewed earlier]

Emergency Medicine Journal

February 2015, Volume 32, Issue 2

<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 25, Issue 1, 01 February 2015

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

[Reviewed earlier]

Food Policy

Volume 51, *In Progress* (February 2015)

<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>

[Reviewed earlier]

Global Health Governance

[Accessed 7 February 2015]

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

[No new relevant content]

Global Public Health

Volume 10, Issue 2, 2015

<http://www.tandfonline.com/toc/rgph20/10/2#.VM2Niy5nBhU>

Special Issue: Sexual and Reproductive Health and Rights for the next decades: What's been achieved? What lies ahead? [Reviewed earlier]

[Reviewed earlier]

Globalization and Health

[Accessed 7 February 2015]

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

Research

[Reverse innovation: an opportunity for strengthening health systems](#)

Anne W Snowdon^{12*}, Harpreet Bassi¹², Andrew D Scarffe¹² and Alexander D Smith¹²

Author Affiliations

Globalization and Health 2015, \$article.volume.volumeNumber:2 doi:10.1186/s12992-015-0088-x

Published: 7 February 2015

Abstract (provisional)

Background

Canada, when compared to other OECD countries, ranks poorly with respect to innovation and innovation adoption while struggling with increasing health system costs. As a result of its failure to innovate, the Canadian health system will struggle to meet the needs and demands of both current and future populations. The purpose of this initiative was to explore if a competition-based reverse innovation challenge could mobilize and stimulate current and future leaders to identify and lead potential reverse innovation projects that address health system challenges in Canada.

Methods

An open call for applications took place over a 4-month period. Applicants were enticed to submit to the competition with a \$50,000 prize for the top submission to finance their project. Leaders from a wide cross-section of sectors collectively developed evaluation criteria and graded the submissions. The criteria evaluated: proof of concept, potential value, financial impact, feasibility, and scalability as well as the use of prize money and innovation team.

Results

The competition received 12 submissions from across Canada that identified potential reverse innovations from 18 unique geographical locations that were considered developing and/or emerging markets. The various submissions addressed health system challenges relating to education, mobile health, aboriginal health, immigrant health, seniors health and women's health and wellness. Of the original 12 submissions, 5 finalists were chosen and publically profiled, and 1 was chosen to receive the top prize.

Conclusions

The results of this initiative demonstrate that a competition that is targeted to reverse innovation does have the potential to mobilize and stimulate leaders to identify reverse innovations that have the potential for system level impact. The competition also provided important insights into the capacity of Canadian students, health care providers, entrepreneurs, and innovators to propose and implement reverse innovation in the context of the Canadian health system.

Health Affairs

February 2015; Volume 34, Issue 2

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

Biomedical Innovation

[New issue; No new relevant content]

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 30 Issue 1 February 2015

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

[Reviewed earlier]

Health Research Policy and Systems

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

[Accessed 7 February 2015]

Commentary

Informing the establishment of the WHO global observatory on health research and development: a call for papers

Taghreed Adam, John-Arne Røttingen, Marie-Paule Kieny Health Research Policy and Systems 2015

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 63 January 2015

<http://www.odihpn.org/humanitarian-exchange-magazine/issue-63>

The Typhoon Haiyan response

[Reviewed earlier]

IDRiM Journal

Vol 4, No 2 (2014)

<http://idrimjournal.com/index.php/idrim/issue/view/12>

[Reviewed earlier]

Infectious Diseases of Poverty

[Accessed 7 February 2015]

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

Research Article

Incidence of human rabies exposure and associated factors at the Gondar Health Center, Ethiopia: a three-year retrospective study

Meseret Yibrah, Debasu Damtie Infectious Diseases of Poverty 2015, 4:3 (2 February 2015)

[Abstract](#) | [Provisional PDF](#) | [Editor's summary](#)

A three year retrospective study revealed a significant incidence of human rabies exposure in Ethiopia. This study also depicted being male and living in urban areas as a potential risk factor for human rabies exposure. Image: Canine rabies is a significant problem in Ethiopia.

Research Article

Assessment of research productivity of Arab countries in the field of infectious diseases using Web of Science database

Waleed M Sweileh, Samah W Al-Jabi, Alaeddin Abuzanat, Ansam F Sawalha, Adham S AbuTaha, Mustafa A Ghanim, Sa'ed H Zyoud *Infectious Diseases of Poverty* 2015, 4:2 (2 February 2015)

[Abstract](#) | [Provisional PDF](#) | [Editor's summary](#)

Arab countries, like other developing poor countries, suffer from various types of infectious diseases. Some of these diseases might be endemic or unique to the Arab countries. However, Arab countries are still lagging behind in research in the field of infectious diseases. More efforts and further financial support are needed to encourage research and publications in this field.

Image: Dr. Adham Abu Taha doing microbiological testing for specimens at An-Najah National University.

International Health

Volume 109 Issue 2 February 2015

<http://trstmh.oxfordjournals.org/content/109/2.toc>

Special issue: Innovative community-based vector control interventions for improved dengue and Chagas disease prevention in Latin America

[Reviewed earlier]

International Journal of Epidemiology

Volume 43 Issue 6 December 2014

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

[Reviewed earlier]

International Journal of Disaster Resilience in the Built Environment

Volume 5 Issue 4 2014

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

[Reviewed earlier]

International Journal of Disaster Risk Reduction

Volume 11, Pages 1-78 (March 2015)

<http://www.sciencedirect.com/science/journal/22124209/11>

[Reviewed earlier]

International Journal of Infectious Diseases

April 2015 Volume 33, p1

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

[Reviewed earlier]

International Journal of Mass Emergencies & Disasters

November 2014 (VOL. 32, NO. 3)

<http://www.ijmed.org/issues/32/3/>

[Reviewed earlier]

International Journal of Sustainable Development & World Ecology

Volume 22, Issue 1, 2015

<http://www.tandfonline.com/toc/tsdw20/current#.VIORRslLDg2>

[Reviewed earlier]

International Migration Review

Winter 2014 Volume 48, Issue 4 Pages 921–1110

<http://onlinelibrary.wiley.com/doi/10.1111/imre.2014.48.issue-4/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

February 3, 2015, Vol 313, No. 5

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

Viewpoint | February 3, 2015

Digital Multimedia: A New Approach for Informed Consent?

Alan R. Tait, PhD^{1,2}; Terri Voepel-Lewis, PhD, RN¹

¹Department of Anesthesiology, University of Michigan Health System, Ann Arbor

²Center for Bioethics and Social Sciences in Medicine, University of Michigan Health System, Ann Arbor

JAMA. 2015;313(5):463-464. doi:10.1001/jama.2014.17122.

This Viewpoint discusses use of digital multimedia as a strategy to enhance study participants' understanding of research information.

The bioethical principle of respect for persons requires that individuals participating in research studies are provided with sufficient information to allow them to make autonomous and informed decisions. In general, the process of informed consent requires that investigators disclose pertinent information regarding procedures to be performed, risks, and benefits, etc, in a manner that participants can understand. In most cases, this information is reinforced by having the study participant or parent/guardian read a consent document, which is then signed to authorize participation...

JAMA Pediatrics

February 2015, Vol 169, No. 2

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

[New issue; No relevant content]

Journal of Community Health

Volume 40, Issue 1, February 2015

<http://link.springer.com/journal/10900/40/1/page/1>

[Reviewed earlier]

Journal of Development Economics

Volume 114, *In Progress* (May 2015)

<http://www.sciencedirect.com/science/journal/03043878/114>

[Reviewed earlier]

Journal of Epidemiology & Community Health

February 2015, Volume 69, Issue 2

<http://jech.bmj.com/content/current>

[Reviewed earlier]

Journal of Global Ethics

Volume 10, Issue 3, 2014

<http://www.tandfonline.com/toc/rjge20/.U2V-Elf4L0l#.VAJEj2N4WF8>

Tenth Anniversary Forum: The Future of Global Ethics

[Reviewed earlier]

Journal of Global Infectious Diseases (JGID)

January-March 2015 Volume 7 | Issue 1 Page Nos. 1-50

<http://www.jgid.org/currentissue.asp?sabs=n>

Editorial

[State of Globe: Rabies: The lethality since antiquity!](#)

Inder Maurya, Ketan Vagholkar, Bhavesh Patel, Mohsin Siddiqui, Shreshtha Tiwari, Premkumar Maurya

DOI:10.4103/0974-777X.150880

[\[HTML Full text\]](#) [\[PDF\]](#)

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 17, Issue 1, February 2015

<http://link.springer.com/journal/10903/17/1/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 211 Issue 5 March 1, 2015

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

[New issue; No new relevant content]

Journal of International Development

January 2015 Volume 27, Issue 1 Pages 1–154

<http://onlinelibrary.wiley.com/doi/10.1002/jid.v27.1/issuetoc>

[Reviewed earlier]

The Journal of Law, Medicine & Ethics

Winter 2014 Volume 42, Issue 4 Pages 408–602

<http://onlinelibrary.wiley.com/doi/10.1111/jlme.2014.42.issue-4/issuetoc>

Special Issue: SYMPOSIUM: The Buying and Selling of Health Care

[Reviewed earlier]

Journal of Medical Ethics

February 2015, Volume 41, Issue 2

<http://jme.bmj.com/content/current>

[New issue; No relevant content]

Journal of Public Health Policy

Volume 36, Issue 1 (February 2015)

<http://www.palgrave-journals.com/jphp/journal/v36/n1/index.html>

[Reviewed earlier]

Journal of the Royal Society – Interface

06 February 2015; volume 12, issue 103

<http://rsif.royalsocietypublishing.org/content/current>
[New issue; No relevant content]

Knowledge Management for Development Journal

Vol 10, No 2 (2014)

<http://journal.km4dev.org/journal/index.php/km4dj/index>
[Reviewed earlier]

The Lancet

Feb 07, 2015 Volume 385 Number 9967 p481-576 e5-e6

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

Editorial

Don't forget health when you talk about human rights

The Lancet

Last week, Human Rights Watch (HRW) released [World Report 2015](#), their 25th annual global review documenting human rights practices in more than 90 countries and territories in 2014. The content is based on a comprehensive investigation by HRW staff, together with in-country human rights activists. In his opening essay, HRW's Executive Director, Kenneth Roth, writes, "The world has not seen this much tumult in a generation...it can seem as if the world is unravelling". Indeed, this 656-page report is a grim read in a year marked by extensive conflict and extreme violence.

Comment

FGM: the mutilation of girls and young women must stop

Audrey Ceschia


DOI: [http://dx.doi.org/10.1016/S0140-6736\(15\)60176-3](http://dx.doi.org/10.1016/S0140-6736(15)60176-3)

Summary

Feb 6, 2015, marks International Day of Zero Tolerance for Female Genital Mutilation/Cutting, a day to reflect on one of the most cruel of human practices—an ancestral tradition that became a social norm—which has been tolerated for far too long. "Female genital mutilation (FGM) comprises all procedures that involve partial or total removal of the external female genitalia, or other injury to the female genital organs for non-medical reasons", according to WHO's definition. More than 125 million women have undergone FGM in 29 countries across Africa and the Middle East where FGM is concentrated.

Comment

Health in an ageing world—what do we know?

Richard Suzman, John R Beard, Ties Boerma, Somnath Chatterji 

Published Online: 05 November 2014

DOI: [http://dx.doi.org/10.1016/S0140-6736\(14\)61597-X](http://dx.doi.org/10.1016/S0140-6736(14)61597-X)

Summary

The ageing of populations is poised to become the next global public health challenge. During the next 5 years, for the first time in history, people aged 65 years and older in the world will outnumber children aged younger than 5 years.¹ Advances in medicine and socioeconomic development have substantially reduced mortality and morbidity rates due to infectious conditions and, to some extent, non-communicable diseases. These demographic and epidemiological changes, coupled with rapid urbanisation, modernisation, globalisation, and

accompanying changes in risk factors and lifestyles, have increased the prominence of chronic conditions.

Series

Ageing

Causes of international increases in older age life expectancy

Colin D Mathers, Gretchen A Stevens, Ties Boerma, Richard A White, Martin I Tobias

540

[Summary](#) [Full-Text HTMLPDF](#)

Ageing

The burden of disease in older people and implications for health policy and practice

Martin J Prince, Fan Wu, Yanfei Guo, Luis M Gutierrez Robledo, Martin O'Donnell, Richard Sullivan, Salim Yusuf

549

[Summary](#) [Full-Text HTMLPDF](#)

Ageing

Health, functioning, and disability in older adults—present status and future implications

Somnath Chatterji, Julie Byles, David Cutler, Teresa Seeman, Emese Verdes

563

[Summary](#) [Full-Text HTMLPDF](#)

The Lancet Global Health

Feb 2015 Volume 3 Number 2 e62-e112

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

Editorial

All about the money

Zoë Mullan

Open Access

DOI: [http://dx.doi.org/10.1016/S2214-109X\(15\)70003-3](http://dx.doi.org/10.1016/S2214-109X(15)70003-3)

Summary

It's finally 2015: a year by the end of which extreme poverty and hunger are to be eradicated, maternal and child mortality are to be drastically reduced, and the trajectory of the global incidence of HIV, tuberculosis, and malaria are to be reversed. Much has been written about where the Millennium Development Goals succeeded and failed as global targets, and what has changed in the world since 2000. Much work has also been done to establish what happens next. In his synthesis [report](#) on the post-2015 agenda released last month, UN Secretary-General Ban Ki-Moon summarised and annotated this work, ultimately backing the [17 goals](#) proposed by the Open Working Group on Sustainable Development Goals as the basis for a truly transformative agenda.

Articles

Effect of self-collection of HPV DNA offered by community health workers at home visits on uptake of screening for cervical cancer (the EMA study): a population-based cluster-randomised trial

Dr [Silvina Arrossi](#), PhD, [Laura Thouyaret](#), BSc, [Rolando Herrero](#), PhD, [Alicia Campanera](#), MD, [Adriana Magdaleno](#), BSc, [Milca Cuberli](#), MSc, [Paula Barletta](#), BSc, [Rosa Laudi](#), MD, [Liliana Orellana](#), PhD, [the EMA Study team](#)

EMA Study team members listed at end of reportOpen Access

DOI: [http://dx.doi.org/10.1016/S2214-109X\(14\)70354-7](http://dx.doi.org/10.1016/S2214-109X(14)70354-7)

Open access funded by the Author(s)

Summary

Background

Control of cervical cancer in developing countries has been hampered by a failure to achieve high screening uptake. HPV DNA self-collection could increase screening coverage, but implementation of this technology is difficult in countries of middle and low income. We investigated whether offering HPV DNA self-collection during routine home visits by community health workers could increase cervical screening.

Methods

We did a population-based cluster-randomised trial in the province of Jujuy, Argentina, between July 1, 2012, and Dec 31, 2012. Community health workers were eligible for the study if they scored highly on a performance score, and women aged 30 years or older were eligible for enrolment by the community health worker. 200 community health workers were randomly allocated in a 1:1 ratio to either the intervention group (offered women the chance to self-collect a sample for cervical screening during a home visit) or the control group (advised women to attend a health clinic for cervical screening). The primary outcome was screening uptake, measured as the proportion of women having any HPV screening test within 6 months of the community health worker visit. Analysis was by intention to treat. This trial is registered with ClinicalTrials.gov, number [NCT02095561](https://clinicaltrials.gov/ct2/show/study?term=NCT02095561).

Findings

100 community health workers were randomly allocated to the intervention group and 100 were assigned to the control group; nine did not take part. 191 participating community health workers (94 in the intervention group and 97 in the control group) initially contacted 7650 women; of 3632 women contacted by community health workers in the intervention group, 3049 agreed to participate; of 4018 women contacted by community health workers in the control group, 2964 agreed to participate. 2618 (86%) of 3049 women in the intervention group had any HPV test within 6 months of the community health worker visit, compared with 599 (20%) of 2964 in the control group (risk ratio 4·02, 95% CI 3·44–4·71).

Interpretation

Offering self-collection of samples for HPV testing by community health workers during home visits resulted in a four-fold increase in screening uptake, showing that this strategy is effective to improve cervical screening coverage. This intervention reduces women's barriers to screening and results in a substantial and rapid increase in coverage. Our findings suggest that HPV testing could be extended throughout Argentina and in other countries to increase cervical screening coverage.

Funding

Instituto Nacional del Cáncer (Argentina).

The Lancet Infectious Diseases

Feb 2015 Volume 15 Number 2 p131-248

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

[New issue; No relevant content]

Maternal and Child Health Journal

Volume 19, Issue 2, February 2015

<http://link.springer.com/journal/10995/19/1/page/1>

Special Issue : MCH Leadership

[19 articles focused around MCH leadership themes]

The Milbank Quarterly

A Multidisciplinary Journal of Population Health and Health Policy

December 2014 Volume 92, Issue 4 Pages 633–840

[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 518 Number 7537 pp5-132 5 February 2015

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

[New issue; No relevant content]

New England Journal of Medicine

February 5, 2015 Vol. 372 No. 6

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

Editorial

[Ebola in West Africa at One Year — From Ignorance to Fear to Roadblocks](#)

Jeffrey M. Drazen, M.D., Edward W. Campion, M.D., Eric J. Rubin, M.D., Ph.D., Stephen Morrissey, Ph.D., and Lindsey R. Baden, M.D.

N Engl J Med 2015; 372:563-564 [February 5, 2015](#) DOI: 10.1056/NEJMe1415398

It has been a year since the first case associated with the current Ebola virus outbreak in West Africa was identified and just over 8 months since we first started reporting on the outbreaks that stemmed from that patient in Guinea.¹ Today's posts at NEJM.org include an anniversary update on the fight against Ebola virus disease (EVD).² It is painfully clear that the world's initial handling of this dangerous outbreak was far from optimal, but we now appear to be making progress in the battle. This headway is evidenced by the observations that the rate of appearance of new cases is not as high as had been predicted by the World Health Organization or the U.S. Centers for Disease Control and Prevention in September 2014 and that outcomes may be improving at some Ebola treatment units.^{2,3}

Patients in the hardest-hit areas are able to receive care at one of many Ebola treatment units that have been set up in West Africa. These units now offer hope for patients with EVD in places where 6 months ago there was little care available and little hope. The ongoing case finding and contact tracing are essential to preventing new outbreak clusters. Staffing the treatment units, tracing contacts, and providing basic health care services for the populations in the most severely affected areas, where the health care infrastructure has been devastated, are just a few of the tasks that must be performed if the battle against Ebola is to be won. If we don't bring this outbreak to a halt now, it may again expand throughout the region and spread to other parts of the world. To deliver a victory, we need more volunteers who are willing to serve, to live in austere conditions, and to put themselves in harm's way. All estimates indicate that the number of personnel needed far exceeds the current supply. We need to make it easier for those who want to help in the fight against Ebola to do so.

That brings us to academic medical centers in the United States. As the Ebola outbreak has burned its way deep into Guinea, Liberia, and Sierra Leone, in one of the worst acute public health crises in 50 years, our academic medical centers have sat largely on the sidelines. They have spent a fortune preparing their facilities and staff for the much-feared scenario of a local patient with possible Ebola virus infection. What has been lacking is leadership to help quell the crisis where it is actually happening. The problem is more than a lack of effective, positive leadership, as Rosenbaum reports⁴: the difficulties created by many academic medical centers for trainees and staff who want to go to West Africa to help control this outbreak are more akin to roadblocks. This response stands in contrast to that in the United Kingdom, where the Wellcome Trust has encouraged academic institutions to join the fight and has provided emergency funding for their research initiatives, and to that of the U.S. National Institute of Allergy and Infectious Diseases, which is offering extensions for grant renewals to people who have taken time to participate in Ebola mitigation efforts.

The medical centers that have helped pave the way for their personnel to fight Ebola deserve praise. The leaders of academic medical centers that have put roadblocks in the path of those wishing to serve need to rethink their priorities. They should be making it easier, not harder, for altruistic physicians, nurses, and other health care providers to help care for the sick and control the Ebola epidemic in West Africa. Our medical centers have immense resources and expertise; the countries wracked by Ebola have almost none. Something is wrong when some of the greatest health care centers in the world are not helping in the fight against this disastrously dangerous threat to human health. We ask the leaders of every medical center in the country to figure out how to make it possible for their staff, and even qualified trainees, to help on the ground in West Africa. And once the leaders have decided what to do, they need to tell their risk managers and their lawyers to make it work, rather than make decisions based on the worst-case scenarios and risks to their reputation, image, and market share painted by corporate advisors and legal staff. If in a year's time this epidemic has not been controlled, we will have only ourselves to blame.

Nonprofit and Voluntary Sector Quarterly

February 2015; 44 (1)

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

[Reviewed earlier]

Oxford Monitor of Forced Migration

Volume 4, No. 2 December 2014

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

[Reviewed earlier]

Pediatrics

February 2015, VOLUME 135 / ISSUE 2

<http://pediatrics.aappublications.org/current.shtml>

[New issue; No relevant content]

PLOS Currents: Disasters

[Accessed 7 February 2015]

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

[No new relevant content]

PLoS Currents: Outbreaks

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

(Accessed 7 February 2015)

[Measles Vaccination Coverage Survey in Moba, Katanga, Democratic Republic of Congo, 2013: Need to Adapt Routine and Mass Vaccination Campaigns to Reach the Unreached](#)

February 2, 2015 · Research

[Julita Gil Cuesta](#), [Narcisse Mukembe](#), [Palle Valentiner-Branth](#), [Pawel Stefanoff](#), [Annick Lenglet](#)

The Democratic Republic of Congo (DRC) has committed to eliminate measles by 2020. In 2013, in response to a large outbreak, Médecins Sans Frontières conducted a mass vaccination campaign (MVC) in Moba, Katanga, DRC. We estimated the measles vaccination coverage for the MVC, the Expanded Programme on Immunization routine measles vaccination (EPI) and assessed reasons for non-vaccination.

We conducted a household-based survey among caretakers of children aged 6 months-15 years in Moba from November to December 2013. We used a two-stage-cluster-sampling, where clusters were allocated proportionally to village size and households were randomly selected from each cluster. The questionnaire included demographic variables, vaccination status (card or oral history) during MVC and EPI and reasons for non-vaccination. We estimated the coverage by gender, age and the reasons for non-vaccination and calculated 95% confidence intervals (95% CI).

We recruited 4,768 children living in 1,684 households. The MVC coverage by vaccination card and oral history was 87% (95% CI 84-90) and 66% (95% CI 61-70) if documented by card. The EPI coverage was 76% (95% CI 72-81) and 3% (95% CI 1-4) respectively. The MVC coverage was significantly higher among children previously vaccinated during EPI 91% (95% CI 88-93), compared to 74% (95% CI 66-80) among those not previously vaccinated. Six percent (n=317) of children were never vaccinated. The main reason for non-vaccination was family absence 68% (95% CI 58-78).

The MVC and EPI measles coverage was insufficient to prevent the recurrence of outbreaks in Moba. Lack of EPI vaccination and lack of accessibility by road were associated with lower MVC coverage. We recommend intensified social mobilization and extended EPI and MVCs to increase the coverage of absent residents and unreached children. Routine and MVCs need to be adapted accordingly to improve coverage in hard-to-reach populations in DRC.

Conclusions

We estimated 87% coverage of the MVC in response to the measles outbreak in Moba territory. This coverage may be insufficient to prevent future outbreaks. Lack of a EPI vaccination and lack of accessibility by road were associated with lower MVC campaign coverage. Absence during the MVC and EPI vaccination were the main reasons for non-vaccination. On the basis of these conclusions, we recommend more accessible vaccination sites for each village in order to improve vaccination coverage during EPI and MVCs. We recommend improved social mobilization of the population through extended vaccination time in less accessible villages and to give notice well ahead of vaccination days. Campaign staff must emphasise children and their

parents the importance of keeping the vaccination cards. EPI and MVCs need to be adapted accordingly to face these logistical and communication barriers. Hence, the vaccination of hard-to-reach children can contribute to meet the goal of measles elimination in DRC and similar settings.

PLoS Medicine

(Accessed 7 February 2015)

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

Enabling Dynamic Partnerships through Joint Degrees between Low- and High-Income Countries for Capacity Development in Global Health Research: Experience from the Karolinska Institutet/Makerere University Partnership

Nelson Sewankambo, James K. Tumwine, Göran Tomson, Celestino Obua, Freddie Bwanga, Peter Waiswa, Elly Katabira, Hannah Akuffo, Kristina Persson, Stefan Peterson

Health in Action | published 03 Feb 2015 | PLOS Medicine 10.1371/journal.pmed.1001784

Summary Points

:: Partnerships between universities in high- and low-income countries have the potential to increase research capacity in both settings.

:: We describe a partnership between the Karolinska Institutet in Sweden and Makerere University in Uganda that includes a joint PhD degree program and sharing of scientific ideas and resources.

:: Ten years of financial support from the Swedish International Development Cooperation Agency has enabled 44 graduated PhD students and more than 500 peer-reviewed articles, the majority with a Ugandan as first author.

:: The collaborative research environment is addressing Ugandan health and health system priorities, in several cases resulting in policy and practice reforms.

:: Even though all Ugandan PhD graduates have remained in the country and 13 have embarked on postdoc training, remaining institutional challenges include developing functioning research groups, grant writing, network building at Makerere, and continued funding on both sides of the partnership.

PLoS Neglected Tropical Diseases

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

(Accessed 7 February 2015)

[No new relevant content]

PLoS One

[Accessed 7 February 2015]

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

[No new relevant content]

PLoS Pathogens

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

(Accessed 7 February 2015)

[No new relevant content]

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

(Accessed 7 February 2015)

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

[No new relevant content]

Prehospital & Disaster Medicine

Volume 30 - Issue 01 - February 2015

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

[Professionalization of Anesthesiologists and Critical Care Specialists in Humanitarian Action: A Nationwide Poll Among Italian Residents](#)

Alba Ripoll Gallardo, Pier Luigi Ingrassia, Luca Ragazzoni, Ahmadreza Djalali, Luca Carenzo, Frederick M. Burkle, Jr. and Francesco Della Corte

Prehospital and Disaster Medicine / Volume 30 / Issue 01 / February 2015, pp 16 - 21

DOI: <http://dx.doi.org/10.1017/S1049023X14001320> (About DOI), Published online: 15

December 2014

[Abstract](#)

Comprehensive Review

[Multi-disciplinary Care for the Elderly in Disasters: An Integrative Review](#)

Heather L. Johnson^{a1 c1}, Catherine G. Ling^{a1} and Elexis C. McBee^{a2}

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Abstract

Introduction

Older adults are disproportionately affected by disaster. Frail elders, individuals with chronic diseases, conditions, or disabilities, and those who live in long-term care facilities are especially vulnerable.

Purpose

The purpose of this integrative review of the literature was to describe the system-wide knowledge and skills that multi-disciplinary health care providers need to provide appropriate care for the elderly during domestic-humanitarian and disaster-relief efforts.

Data sources

A systematic search protocol was developed in conjunction with a research librarian. Searches of PubMed, CINAHL, and PsycINFO were conducted using terms such as Disaster, Geological Processes, Aged, Disaster Planning, and Vulnerable Populations. Forty-six articles met criteria for inclusion in the review.

Conclusions

Policies and guidance regarding evacuating versus sheltering in place are lacking. Tenets of elderly-focused disaster planning/preparation and clarification of legal and ethical standards of care and liability issues are needed. Functional capacity, capabilities, or impairments, rather than age, should be considered in disaster preparation. Older adults should be included in disaster planning as population-specific experts.

Implications for Practice

A multifaceted approach to population-specific disaster planning and curriculum development should include consideration of the biophysical and psychosocial aspects of care, ethical and legal issues, logistics, and resources.

Special Report

Cardiopulmonary Resuscitation in Resource-limited Health Systems—Considerations for Training and Delivery

Jason Friesen, Dean Patterson and Kevin Munjal

Prehospital and Disaster Medicine / Volume 30 / Issue 01 / February 2015, pp 97 - 101

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DOI: <http://dx.doi.org/10.1017/S1049023X14001265> (About DOI), Published online: 19 November 2014

Abstract

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

February 2015; 25 (2)

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

Special Issue: Responses to Treatment

[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#.VF7VUsl4WF9>

[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

December 2014 Volume 34, Issue 12 Pages 2063–2188

<http://onlinelibrary.wiley.com/doi/10.1111/risa.2014.34.issue-12/issuetoc>

[Reviewed earlier]

Science

6 February 2015 vol 347, issue 6222, pages 581-688

<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>

[Reviewed earlier]

Stability: International Journal of Security & Development

[accessed 7 February 2015]

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

[No new relevant content]

Sustainability

Volume 7, Issue 1 (January 2015), Pages 1-

<http://www.mdpi.com/2071-1050/7/1>

[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

March 2015 Volume 20, Issue 3 Pages 251–406

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

Original Article

[Getting the basic rights – the role of water, sanitation and hygiene in maternal and reproductive health: a conceptual framework](#)

Oona M. R. Campbell^{1,*}, Lenka Benova¹, Giorgia Gon¹, Kaosar Afsana² and Oliver Cumming³
Article first published online: 22 DEC 2014
DOI: 10.1111/tmi.12439

Abstract

Objective

To explore linkages between water, sanitation and hygiene (WASH) and maternal and perinatal health via a conceptual approach and a scoping review.

Methods

We developed a conceptual framework iteratively, amalgamating three literature-based lenses. We then searched literature and identified risk factors potentially linked to maternal and perinatal health. We conducted a systematic scoping review for all chemical and biological WASH risk factors identified using text and MeSH terms, limiting results to systematic reviews or meta-analyses. The remaining 10 complex behavioural associations were not reviewed systematically.

Results

The main ways poor WASH could lead to adverse outcomes are via two non-exclusive categories: 1. 'In-water' associations: (a) Inorganic contaminants, and (b) 'water-system' related infections, (c) 'water-based' infections, and (d) 'water borne' infections. 2. 'Behaviour' associations: (e) Behaviours leading to water-washed infections, (f) Water-related insect-vector infections, and (g-i) Behaviours leading to non-infectious diseases/conditions. We added a gender inequality and a life course lens to the above framework to identify whether WASH affected health of mothers in particular, and acted beyond the immediate effects. This framework led us to identifying 77 risk mechanisms (67 chemical or biological factors and 10 complex behavioural factors) linking WASH to maternal and perinatal health outcomes.

Conclusion

WASH affects the risk of adverse maternal and perinatal health outcomes; these exposures are multiple and overlapping and may be distant from the immediate health outcome. Much of the evidence is weak, based on observational studies and anecdotal evidence, with relatively few systematic reviews. New systematic reviews are required to assess the quality of existing evidence more rigorously, and primary research is required to investigate the magnitude of effects of particular WASH exposures on specific maternal and perinatal outcomes. Whilst major gaps exist, the evidence strongly suggests that poor WASH influences maternal and reproductive health outcomes to the extent that it should be considered in global and national strategies.

UN Chronicle

Vol. LI No. 3 2014 December 2014

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

Conference Diplomacy

This issue commemorates the bicentennial of the Congress of Vienna (1814-15) by looking at the development and effectiveness of multilateral conference diplomacy within the context of the United Nations.

Vulnerable Children and Youth Studies

An International Interdisciplinary Journal for Research, Policy and Care

Volume 10, Issue 1, 2015

<http://www.tandfonline.com/toc/rvch20/current#.Uzg2bFcWNdc>
[New issue; No content selected]

World Heritage Review

n°74 - January 2015

<http://whc.unesco.org/en/review/74/>

World Heritage: Fostering resilience

In focus

:: Fostering resilience: Towards reducing disaster risks to World Heritage, p. 4
World Heritage sites are exposed to a wide variety of natural and human-induced hazards, such as earthquakes, cyclones or fires, which can have devastating effects on their value as well as on the lives and assets of the communities concerned.

:: Post-disaster reconstruction: Xijie historic quarter in Dujiangyan, Sichuan province, p. 16
The reconstruction project combined the objectives of heritage conservation, post-disaster reconstruction and social equity through broad community participation and close cooperation among concerned government agencies, stateowned enterprises, local residents and universities.

:: Building resilience at iSimangaliso Wetland Park, p. 22
iSimangaliso has built ecological and social resilience, dealing with risks to the site, and is implementing a broad-based strategy that will mitigate the social and ecological stressors associated with predicted environmental change.

:: Post-disaster heritage initiative in Pakistan, p. 28
The post-disaster development programmes undertaken by the Heritage Foundation of Pakistan are designed to nurture traditional and creative skills, particularly of women in marginalized sections of society.

:: The 3rd World Conference on Disaster Risk Reduction, p. 38
The 3rd UN World Conference on Disaster Risk Reduction, which will take place in Sendai (Japan) from 14 to 18 March 2015, is the most important intergovernmental gathering on disaster risks in ten years. The conference is expected to adopt the post-2015 international policy on Disaster Risk Reduction...

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 [to 7 February 2015]

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

Editor's Note: UNMEER's [website](#) is aggregating and presenting content from various sources including its own External Situation Reports, press releases, statements and other formats.

We present a composite below from the week ending 7 February 2015. We also note that 1) a regular information category in these reports – human rights – has apparently eliminated as it no longer appears in any of the continuing updates, and 2) the content level of these reports continues, in our view, to trend less informative and less coherent. We will review continuing coverage of this material over the next few weeks.

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.

:: **07 Feb 2015** *UNMEER External Situation Report*
No report posted.

:: **05 Feb 2015** *UNMEER External Situation Report*
KEY POINTS

- :: Case incidence increased in all three countries for the first time this year
- :: Community resistance remains a concern in pockets of affected countries
- :: Logistics Cluster continues to coordinate delivery of critical relief items

Response Efforts and Health

4. Continued community resistance, increasing geographical spread in Guinea and widespread transmission in Sierra Leone, and a rise in incidence show that the EVD response still faces significant challenges. A total of 10 of 34 prefectures in Guinea reported at least one security incident or other form of refusal to cooperate in the week to 1 February. No counties in Liberia and 3 districts in Sierra Leone reported at least one similar incident during the week to 27 January. As the wet season approaches, there is an urgent need to end the outbreak in as wide an area as possible, especially in remote areas that will become more difficult to access.

8. In Sierra Leone, UNDP and UNMEER continue to provide support to the efforts of the National Ebola Response Centre (NERC), to implement the revised Hazard Policy payment aimed at re-classifying Ebola Response Workers (ERWs) based on real risks and further ensuring fiduciary sustainability and compliance. Biometric verification of ERWs commenced last week in Western Area. As of 1 February about 10,000 ERWs were verified, with several fraudulent ERWs in the Western Area discovered and reported to the Anti-Corruption Commission.

Essential Services

16. The Periodic Intensified Routine Immunization (PIRI) campaign teams reported community resistance in some parts of the districts at the IMS meeting in Grand Gedeh County. The misconception about Ebola vaccines trials, ongoing in Monrovia, persists in various districts

(Cavalla, Gbao and Putu districts) where some of the town chiefs rejected the vaccination exercise in their communities.

:: **04 Feb 2015** *UNMEER External Situation Report*

Logistics

8. WFP, in coordination with the Government of Liberia, UNMEER and UNICEF, is providing logistics support for the transportation of WASH supplies for the safe re-opening of schools in Liberia. Dispatches are planned to commence on 4 February in Nimba County and are planned to be completed in all 15 counties by 15 February ahead of the school start date on 2 March. Dispatches will be conducted by road, air and sea transport. In total over 7,000 kits (some 2,700m³) will be delivered to over 4,000 schools serving one million students.

9. The WFP-led Emergency Telecommunications Cluster is providing Internet access for 1,112 humanitarian staff in 59 locations across Guinea, Liberia and Sierra Leone.

Essential Services

15. UNICEF Guinea distributed more than 31,720 household hygiene kits to 222,040 people in Ebola-affected areas. This brings the total number of household kits distributed since the beginning of the outbreak to 81,252 and the number of beneficiaries to 568,764. In support of government efforts as students returned to schools and universities, UNICEF distributed 25,800 school hygiene kits benefitting 1,467,252 students.

17. UNMEER facilitated a rapid assessment of three border crossing points along the Liberia/Bong country - Guinea border, namely Jowah, Gboata and Garmu. The joint team composed of the CDC and UNMEER was led by the Director of Operations in the Bureau of Immigration and Naturalization (BIN), Liberia. The joint team interacted with border officials who reported the crossing were officially closed in July 2014, but illegal crossings continue due to extensive family, cultural and economic ties on both sides. The border officials reported that each border post is manned by 10-15 personnel, which is insufficient for ensuring the necessary patrolling of the border area. The CDC experts also held extensive discussions with the medical personnel at Joseph Clinic in Jowah, a regional medical facility that provides medical care for the population across 5 areas, including to patients from Guinea (especially before the outbreak). Medical personnel at Jowah Clinic emphasized the need for a joint health team and Infection Prevention and Control (IPC) resources before officially re-opening the borders.

:: **03 Feb 2015** *UNMEER External Situation Report*

Key Political and Economic Developments

1. WHO reports that 3 phase III trial collaborations are planned: a ring vaccination trial in Guinea, organized through a large international collaboration including WHO and MSF; a randomized-controlled trial in Liberia, under a Liberian government-US-NIH collaboration, due to begin week of 2 February; and a stepped-wedge trial in Sierra Leone under a Sierra Leonean-US-CDC collaboration. Strong emphasis is being given to effective communication and engagement with communities to build trust, address concerns about clinical trials and vaccination campaigns and ensure that volunteers can make informed choices. WHO will continue its facilitator role as trials move forward, in particular by ensuring that national regulatory oversight and patient safety remain top priorities. WHO's efforts in R&D for Ebola have had one overriding objective: to help end the epidemic and provide insurance against future epidemics.

3. The Ministry of Education in Liberia has postponed the reopening of schools to allow for continued preparation for the safe re-opening of schools. Schools were initially planned to re-open on 2 February.

:: [02 Feb 2015](#) *UNMEER External Situation Report*
Response Efforts and Health

5. In the previous week, WFP supplied food commodities to quarantined households and six quarantined communities in Port Loko District, Sierra Leone. In addition, WFP provided one month rations in Kenema Township where 29 new households were recently quarantined and to hotspots in Kono District. With CIDO, WFP completed food distributions for over 5,800 beneficiaries in Rotifunk community in Moyamba.

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