

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

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

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***:: Week in Review***

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

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**[Global Religious and Faith-Based Organization Leaders Issue Call and Commitment to End Extreme Poverty by 2030](#)**

PRESS RELEASE

*"Ending Extreme Poverty: A Moral and Spiritual Imperative"*

April 9, 2015—Over 30 leaders from major world religions and heads of global faith-based organizations today launched a clarion call to action to end extreme poverty by 2030, a goal shared by the World Bank Group.

*Ending Extreme Poverty: A Moral and Spiritual Imperative* notes that remarkable progress has been made in reducing extreme poverty. Over 25 years the world has gone from nearly 2 billion people to fewer than 1 billion living in extreme poverty. Now, for the first time in human history there exists both the capacity and moral responsibility to ensure that no one has to live in extreme poverty's grip.

"We have ample evidence from the World Bank Group and others showing that we can now end extreme poverty within fifteen years," the Moral Imperative statement notes. "In 2015, our governments will be deciding upon a new global sustainable development agenda that has the potential to build on our shared values to finish the urgent task of ending extreme poverty."

"We in the faith community embrace this moral imperative because we share the belief that the moral test of our society is how the weakest and most vulnerable are faring. Our sacred texts also call us to combat injustice and uplift the poorest in our midst."

The Moral Imperative statement seeks to generate the necessary social and political will by inspiring greater commitments from others to join in this cause, tapping into many of the shared convictions and beliefs that unify the world's major religions around the call and responsibility to combat poverty.

The announcement today from global faith leaders arose from the World Bank's "Faith Based and Religious Leaders Roundtable" held on February 18, the first high-level meeting between World Bank Group President Jim Yong Kim and faith leaders...

...World Bank Group President Jim Yong Kim responded to the launch of this moral imperative, stating, "Faith leaders and the World Bank Group share a common goal – to realize a world free of extreme poverty in just 15 years. The moral imperative can help drive the movement to end poverty by 2030 by inspiring large communities to act now and to advocate for governments to do the same. These commitments from religious leaders come at just the right time – their actions can help hundreds of millions of people lift themselves out of poverty. The statement closes by framing the imperative in stark terms: "Poverty's imprisonment of more than a billion men, women and children must end. Now is the time to boldly act to free the next generation from extreme poverty's grip."..

### **Statement: [Ending Extreme Poverty: A Moral and Spiritual Imperative](#)**

08 April 2015

Faith2EndPoverty: <https://www.rebelmouse.com/faith2endpoverty/>

#### **OUR COMMON UNDERSTANDING**

As leaders from diverse religious traditions, we share a compelling vision to end extreme poverty by the year 2030. For the first time in human history, we can do more than simply envision a world free of extreme poverty; we can make it a reality. Accomplishing this goal will take two commitments: to act guided by the best evidence of what works and what doesn't; and to use our voices to compel and challenge others to join us in this urgent cause inspired by our deepest spiritual values.

The world has achieved remarkable progress in the past two decades in cutting in half the number of people living in extreme poverty. We have ample evidence from the World Bank Group and others showing that we can now end extreme poverty within fifteen years. In 2015, our governments will be deciding upon a new global sustainable development agenda that has the potential to build on our shared values to finish the urgent task of ending extreme poverty.

We in the faith community embrace this moral imperative because we share the belief that the moral test of our society is how the weakest and most vulnerable are faring. Our sacred texts also call us to combat injustice and uplift the poorest in our midst. No one, regardless of sex, age, race, or belief, should be denied experiencing the fullness of life.

#### OUR SHARED MORAL CONSENSUS

This is why the continued existence of extreme poverty in a plentiful world offends us so deeply. Our faith is tested and our hearts are broken when, in an age of unprecedented wealth and scientific advancement, so many still live in degrading conditions. We know too well that extreme poverty thwarts human purpose, chokes human potential, and affronts human dignity. In our increasingly interconnected world, there is enough to ensure that no one has to fight for their daily survival.

Ending extreme poverty will require a comprehensive approach that tackles its underlying causes—including preventable illness, a lack of access to quality education, joblessness, corruption, violent conflicts, and discrimination against women, ethnic minorities and other groups. It will also necessitate a change in the habits that cause poverty—greed and waste, numbness to the pain of others, and exploitation of people and the natural world. It calls for a holistic and sustainable approach that transforms cultures and institutions, and hearts as well as minds.

In too many parts of the world, women and girls are consigned to second class status, denied access to education and employment, and victimized by violence, trafficking, and rape. Until each and every person is afforded the same basic rights, none of us can truly flourish.

We must also state unequivocally that ending extreme poverty without mitigating climate change and combating inequality will be impossible. Climate change is already disproportionately hurting people living in poverty. Extreme inequality, within and between countries, contradicts our shared religious values, exacerbates social and political divisions, and will impede progress. What is needed is a new paradigm of socially inclusive and environmentally sustainable economic growth.

#### OUR CALL TO ACTION

We believe that now is the time to end the scourge of extreme poverty—by restoring right relationships among people, affirming human dignity, and opening the door to the holistic development of all people. If we were more committed to living these common values there would be less poverty in the world.

Our shared convictions call us to empower and uplift—not denigrate—those living in poverty, so that they can become agents of their own transformation. We must abandon a politics that too often marginalizes their voices, blames them for their condition, and exacerbates extremes of inequality. Now is the time to turn fatigue into renewed commitment, indifference into compassion, cynicism into hope, and impotence into a greater sense of agency that we can and will end extreme poverty by 2030.

We commit to working together to end the scandal of extreme poverty. We will act, advocate, educate, and collaborate, both among ourselves and with broader initiatives. And we commit to holding all levels of leadership accountable—public and private, domestic and international.

Our approach to this staggering need must be holistic, rooted in the spiritual visions of our respective faiths, and built on a shared recognition of the intrinsic dignity and value of every life on Earth.

Realizing this shared goal will require a revolution in social and political will, as well as new innovations and greater collaboration across sectors. We call on international organizations, governments, corporations, civil society, and religious communities, to play their essential parts and join with us in this critical cause.

Poverty's imprisonment of more than a billion men, women and children must end. Now is the time to boldly act to free the next generation from extreme poverty's grip.

**ENDORSERS\***

Actalliance, General Secretary, Dr. John Nduna  
American Jewish Committee, International Director of Interreligious Affairs, Chief Rabbi David Rosen  
American Jewish World Service, President, Ms. Ruth Messinger  
Anglican Alliance, Joint Executive Director, Rev. Rachel Carnegie  
Bibliotheca Alexandria, Founding Director, Dr. Ismail Serageldin  
Baha'i International Community, Principle Representative to the United Nations, Ms. Bani Dugal  
Buddhist Global Relief, Chairperson, Venerable Bhikkhu Bodhi  
Bread for the World, President, Rev. David Beckmann  
Caritas Internationalis, Secretary General, Mr. Michel Roy  
Catholic Relief Services, President and Chief Executive Officer, Dr. Carolyn Woo  
Church World Service, President and Chief Executive Officer, Rev. John McCullough  
Community of Protestant Churches of Europe, President, Rev. Dr. Thomas Wipf  
EcoSikh, Board Member, Mr. Suneet Singh Tuli  
Forum for Peace in Islamic Societies, President, H.E. Shaykh Abdullah bin Bayyah  
Indigenous People Ancestral Spiritual Council, President, Priestess Beatriz Schultheiss  
Islamic Relief International, Chief Executive Officer, Dr. Mohamed Ashmawey  
Islamic Society of North America, Office of Interfaith & Community Alliances Director, Dr. Sayyid Syeed  
Interfaith WASH Alliance, Co-Founder, H.H. Pujya Swami Chidanand Saraswatiji  
Joint Distribution Committee, Chief Executive Officer, Mr. Alan Gill  
Milstein Center for Interreligious Dialogue, Director, Rabbi Dr. Burt Visotzky  
Muhammadiyah, President, Dr. Din Syamsuddin  
Organization of African Instituted Churches, General Secretary, Rev. Nicta Lubaale  
Religions For Peace, Secretary General, Dr. William Vendley  
Rissho Kosei-Kai, President-Designate, Rev. Kosho Niwano  
Religious Action Center, Director, Rabbi Jonah Pesner  
Sojourners, President and Chief Executive Officer, Rev. Jim Wallis  
Salvation Army, General, General Andre Cox  
Sarvodaya Shramadana Movement, General Secretary, Dr. Vinya Ariyaratne  
World Council of Churches, General Secretary, Rev. Dr. Olav Fykse Tveit  
World Evangelical Alliance, Secretary General and CEO, Bishop Efraim Tendero  
World Relief, President and Chief Executive Officer, Mr. Stephan Bauman  
World Vision International, President, Mr. Kevin Jenkins  
- Uganda Muslim Supreme Council, Grand Mufti, H.E. Sheikh Shaban Ramadhan Mubaje

\* For the initial launch we have focused on global faith-inspired organizations. Moving forward more endorsers from countries and regions around the world will be joining the initiative.

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## **GOVERNMENTS, BUSINESSES & NGOS URGED TO INVEST IN SOCIAL PROGRESS TO "UNLEASH ECONOMIC SUCCESS"**

April 9, 2015

Social Progress Imperative and Deloitte Touche Tohmatsu Limited (Deloitte Global)

- *Inclusive growth must be focused on delivering economic + social progress*
- *World earns "a failing grade" on progress say experts*
- *Norway ranks top in this year's Index, Canada is top of G7; Brazil is the top BRIC nation*

The most effective way to improve people's quality of life across the world, in both rich and poor countries, is to invest in social progress. This is according to the Social Progress Index 2015 published today by US-based nonprofit, the Social Progress Imperative, and released at the 2015 Skoll World Forum on Social Entrepreneurship. The Index, ranked 133 countries based on their social and environmental performance and, including countries for which partial data was found, measured the social progress of 99% of the world's population – using 52 separate indicators to arrive at a ranking for the issues that matter most to people.

The Index found that the world performs strongest in the areas of 'nutrition' and 'basic medical care' but weakest in 'access to advanced education' and 'ecosystem sustainability'. The findings also show that many aspects of social progress improve with income. Wealthier countries, such as Norway – which achieves the top ranking this year – generally deliver better social outcomes than lower income countries.

But researchers say that GDP is far from being the sole determinant of social progress. "Inclusive growth requires achieving both economic and social progress. A striking finding is that GDP is far from being the sole determinant of social progress. The pitfalls of focusing on GDP alone are evident in the findings of the 2015 Social Progress Index," Professor Michael E. Porter of Harvard Business School, who chairs the Index's Advisory Board, said. "Countries must invest in social progress, not just economic institutions, to create the proper foundation for economic growth."

Costa Rica (28th ranking) with a GDP per capita of \$13,431 achieves a much higher level of social progress than both Italy and South Korea, which have more than twice Costa Rica's GDP per capita (\$34,167 and \$32,708 respectively). On the other hand the US, with a GDP per capita of \$51,340, scores relatively poorly across many of the components measured by the Index, including on 'health and wellness', finishing behind countries with a lower GDP per capita including Canada (6th) and the UK (11th).

Sally Osberg, President and CEO of the Skoll Foundation, said: "This year's Social Progress Index reported the world's progress, rolling up the collective results from 133 countries. Sadly, as a whole, the world earned a failing grade, ranking in the bottom 40 percent of countries. Of particular concern is the world's performance on 'opportunity', which very closely correlates to personal well-being. This is a wake-up call rich and poor countries alike should heed!"

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### **OECD: Development aid stable in 2014 but flows to poorest countries still falling**

08/04/2015 - Development aid flows were stable in 2014, after hitting an all-time high in 2013, but aid to the poorest countries continued to fall, according to official data collected by the OECD Development Assistance Committee (DAC).

Net official development assistance (ODA) from DAC members totalled USD 135.2 billion, level with a record USD 135.1 billion in 2013, though marking a 0.5% decline in real terms. Net ODA as a share of gross national income was 0.29%, also on a par with 2013. ODA has increased by 66% in real terms since 2000, when the Millennium Development Goals were agreed.

Bilateral aid to the least-developed countries fell by 16% in real terms to USD 25 billion, according to provisional data. Much of this drop is explained by exceptionally high debt relief for Myanmar in 2013, but even excluding debt relief ODA to the poorest countries fell by 8%.

Bilateral aid is channelled directly by donors to partner countries and equates to roughly two-thirds of total ODA.

"I am encouraged to see that development aid remains at a historic high at a time when donor countries are still emerging from the toughest economic crisis of our lifetime," said OECD Secretary-General Angel Gurria. "Our challenge as we finalise post-2015 development goals this year will be to find ways to get more of this aid to the countries that need it most and to ensure we are getting as much as we can out of every dollar spent."

Thirteen countries reported a rise in net ODA, with the biggest increases in Finland, Germany, Sweden and Switzerland. Fifteen DAC members reported lower ODA, with the biggest declines in Australia, Canada, France, Japan, Poland, Portugal and Spain.

Looking in addition at several non-DAC members who also reported their aid flows to the OECD body, the United Arab Emirates posted the highest ODA/GNI ratio in 2014 at 1.17%.

ODA makes up more than two thirds of external finance for least-developed countries. The OECD will call at the International Conference on Financing for Development in Addis Ababa in July for more of this money to be used as a lever to generate private investment and domestic tax revenues in poor countries. OECD work on combatting tax avoidance and illicit financial flows out of least-developed countries also aims to reduce dependence on aid.

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### **UNESCO: Education for All 2000-2015: Only a third of countries reached global education goals**

08.04.2015

Paris/New Delhi, - Just one third of countries have achieved all of the measurable Education for All (EFA) goals set in 2000. Only half of all countries have achieved the most watched goal of universal primary enrolment. An extra \$22 billion a year is needed on top of already

ambitious government contributions in order to ensure we achieve the new education targets now being set for the year 2030.

These are the key findings of the 2015 EFA Global Monitoring Report (GMR) "Education for All 2000-2015: Achievements and Challenges", produced by UNESCO which has tracked progress on these goals for the past 15 years.

"The world has made tremendous progress towards Education for All," said UNESCO Director-General Irina Bokova. "Despite not meeting the 2015 deadline, millions more children are in school than would have been had the trends of the 1990s persisted. However, the agenda is far from finished. We need to see specific, well-funded strategies that prioritize the poorest – especially girls – , improve the quality of learning and reduce the literacy gap so that education becomes meaningful and universal."

Released today, one month before the World Education Forum in Incheon (Republic of Korea), the Report reveals the following findings:

*Goal 1. Expand early childhood care and education, especially for the most vulnerable children.*  
Forty seven percent of countries reached the goal and another eight percent were close. Twenty percent were very far from the goal. Yet, in 2012, nearly two-thirds more children were enrolled in early childhood education than in 1999.

*Goal 2. Achieve universal primary education, particularly for girls, ethnic minorities and marginalized children.*

Fifty-two percent of countries achieved this goal; ten percent are close and the remaining thirty-eight percent are far or very far from achieving it. This leaves almost 100 million children not completing primary education in 2015. A lack of focus on the marginalized has left the poorest five times less likely to complete a full cycle of primary education than the richest and over a third of out of school children living in conflict affected zones. There have been important successes: Around 50 million more children are enrolled in school now than were in 1999. Education is still not free in many places, but cash transfer and school feeding programmes have had a positive impact on school enrolment for the poor.

*Goal 3. Ensure equal access to learning and life skills for youth and adults.*

Forty-six percent of countries reached universal lower secondary enrolment. Globally, numbers in lower secondary education increased by 27% and more than doubled in sub-Saharan Africa. Nonetheless, one third of adolescents in low income countries will not complete lower secondary school in 2015.

*Goal 4. Achieving a 50 per cent reduction in levels of adult illiteracy by 2015.*

Only 25% of countries reached this goal; 32% remain very far from it. While globally the percentage of illiterate adults fell from 18% in 2000 to 14% in 2015, this progress is almost entirely attributed to more educated young people reaching adulthood. Women continue to make up almost two-thirds of the illiterate adult population. Half of sub-Saharan African women do not have basic literacy skills.

*Goal 5. Achieve gender parity and equality*

Gender parity will be achieved at the primary level in 69% of countries by 2015. At secondary level, only 48% of countries will reach the goal. Child marriage and early pregnancy continue to hinder girls' progress in education as does the need for teacher training in gender sensitive approaches and curriculum reform.

*Goal 6. Improve the quality of education and ensure measurable learning outcomes for all*

The numbers of pupils per teacher decreased in 121 of 146 countries between 1990 and 2012 at the primary level, but 4 million more teachers are still needed to get all children into school. Trained teachers remain in short supply in one third of countries; in several sub-Saharan African countries, less than 50 percent are trained. However, education quality has received increased attention since 2000; the number of countries carrying out national learning assessments has doubled.

Funding and political will

Since 2000 many governments significantly increased their spending on education: 38 countries increased their commitment to education by one percentage point or more of GNP. However funding remains a major obstacle at all levels.

"Unless concerted action is taken and education receives the attention that it failed to get during the past 15 years, millions of children will continue to miss out and the transformative vision of the new Sustainable Development agenda will be jeopardized," said GMR Director, Aaron Benavot. "Governments must find ways to mobilize new resources for education. International partners must ensure that aid is distributed to those most in need."

The GMR makes the following recommendations:

*Complete the EFA agenda:*

Governments should make at least one year of pre-primary education compulsory. Education must be free for all children: fees for tuition, textbooks, school uniforms and transport must be abolished. Policy makers should identify and prioritize skills to be acquired by the end of each stage of schooling. Literacy policies should link up with the needs of communities. Teacher training should be improved to include gender-focused strategies. Teaching styles should better reflect student needs and the diversity of classroom contexts.

*Equity:*

Governments, donors and civil society must develop programmes and target funding to meet the needs of the most disadvantaged so no child is left behind. Governments should close critical data gaps in order to be able to direct resources to those most in need.

Post-2015: Future education targets for education must be specific, relevant and realistic. At current rates, only half of all children in low-income countries are expected to complete lower secondary education by 2030. In many countries even the core goal of achieving universal primary education will remain out of reach without concerted efforts.

*Close the finance gap:*

The international community, in partnership with countries, must find the means to bridge the US\$22 billion annual finance gap for quality pre-primary and basic education for all by 2030. Clear education finance targets must be established within the Sustainable Development Goals where none currently exist.

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## **ILO - Older workers: What age means for the labour force**

International Labour Organization

07 April 2015

The global economy is moving into a new period which will see unemployment continuing to rise over the coming years.

By 2019, more than 212 million people will be out of work, up from the current 201 million, according to the World Employment and Social Outlook – Trends 2015, a publication of the International Labour Organization. Part of what's causing this is the slowdown in the supply of labour -- and that -- is partly affected by the world's ageing population.

ILO senior economist Ekkehard Ernst explains: "The number of older people is rising everywhere in the world. The share of older workers aged 55 or above in the world's workforce expanded from 10.5 per cent in 1990 to an as yet unseen 14.3 per cent in 2014."

Ekkehard suggests that by 2030, the number of older workers in the labour force is likely to increase by a further 270 million to almost 750 million workers. That translates into more than 18 per cent of the total labour force.

The older a workforce gets, the higher the likelihood of slowdowns in economic growth. But it's not the age of the labour force per se that's the issue...but rather it's the ageing of the labour force that makes an economy more vulnerable to slackening economic growth.

Ekkehard explains the difference: "Actually, economies that have a labour force that is older on average are likely to have accelerations in growth. Older workers are seen as giving a boost to an economy because of their greater work experience and that might help them to judge more accurately for instance whether a new technology will be beneficial to work processes. But, when the labour force itself is rapidly ageing, there might be skill mismatches that cost more to deal with, as companies need to shift the workplace to the needs of older workers."

In general, older workers may be inclined to adopt new technologies given that technological progress often works in their favour, letting them replace physically demanding jobs with cognitive tasks, and they may be better suited to these than younger colleagues.

So how will countries offset their ageing supply of labour? Ekkehard says older workers should be enticed to stay in jobs. And another part of the solution lies in employing more women.

Ekkehard: "Economies with higher labour force participation rates of women experience fewer growth downturns. More women workers not only make economies more resilient to adverse economic shocks but a labour force with more women also presents a powerful anti-poverty device."

For women, policy incentives include things like flex-time, maternity and childcare benefits. For older workers, they mean such policies as lifting tax penalties for pensioners.

*Listen to ILO senior economist Ekkehard Ernst tease out the difference between the age and the ageing of the labour market and how it affects economic growth. Audio:  
<https://soundcloud.com/international-labour-organization/what-age-means-for-the-labour-force>*

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### **EBOLA/EVD** [to 11 April 2015]

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

#### **Ebola Situation Report - 8 April 2015**

*[Excerpts]*

##### **SUMMARY**

**:: A total of 30 confirmed cases of Ebola virus disease (EVD) were reported in the week to 5 April. This is the lowest weekly total since the third week of May 2014.**

Case incidence in Guinea decreased to 21, compared with 57 confirmed cases the previous week. Liberia reported no confirmed cases. Sierra Leone reported a fifth consecutive weekly decrease from 25 confirmed cases in the week to 29 March to 9 in the week to 5 April...

**:: ...In the context of falling case incidence and a receding zone of transmission, treatment capacity exceeds demand in Liberia and Sierra Leone. Accordingly, and with technical guidance from WHO, national authorities in both countries have begun to implement plans for the phased safe decommissioning of surplus facilities. Each country will retain a core capacity of high-quality Ebola treatment centres, strategically located to ensure complete geographic coverage, with additional rapid-response capacity held in reserve...**

**:: ...There were no new health worker infections in the week to 5 April, with the cumulative total remaining at 861 since the start of the outbreak. In accordance with the 45-day reinforcement of emergency measures declared in western Guinea, several private clinics have been closed after EVD cases were treated on the premises.**

##### **COUNTRIES WITH WIDESPREAD AND INTENSE TRANSMISSION**

**:: There have been a total of 25,515 reported confirmed, probable, and suspected cases of EVD in Guinea, Liberia and Sierra Leone (figure 1, table 1), with over 10,000 reported deaths (outcomes for many cases are unknown)...**

#### **WHO Director-General declares that the Ebola outbreak in Guinea, Liberia and Sierra Leone continues to constitute a Public Health Emergency of International Concern**

*WHO statement: 5th meeting of the IHR Emergency Committee regarding the Ebola outbreak in West Africa*

10 April 2015

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

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

## **United Nations 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**

[to 11 April 2015]

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

*Selected Press Releases/Meetings Coverage*

7 April 2015

SG/SM/16647-AFR/3107

[Unite behind Peace, Dignity, Equality, Secretary-General Urges at Commemoration of Rwanda Genocide](#)

**UN OHCHR** Office of the United Nations High Commissioner for Human Rights [to 11 April 2015]

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

4/10/2015

*Press Release*

[They are not disposable – UN experts remind States that street children have rights too](#)

4/9/2015

*Press Release*

[Malaysia: Draft anti-terror and sedition laws seriously undermine freedom of expression and opinion – Zeid](#)

GENEVA (9 April 2015) – UN High Commissioner for Human Rights Zeid Ra'ad Al Hussein today urged the Government of Malaysia to withdraw its proposed amendments to the 1948 Sedition Act, warning that the new provisions would seriously undermine the freedom of expression and opinion in the country, in breach of Malaysia's Federal Constitution and its international human rights obligations.

Zeid also expressed concern at the passage of the Prevention of Terrorism Act (POTA) in the lower house of Parliament on Tuesday this week. Among the serious human rights shortcomings in the law are provisions that allow the indefinite detention of individuals without trial and grant sweeping powers to law enforcement authorities without sufficient safeguards to prevent abuses...

4/8/2015

*Press Release*

[Yemen: The world must be prepared for rapid collapse into mass displacement crisis – UN expert](#)

**SRSG/CAAC** Office of the Special Representative of the Secretary-General for Children and Armed Conflict [to 11 April 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 11 April 2015]

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

07 Apr 15

[Croatia: Bill to Compensate Survivors of Wartime Rape a Welcome Step in Addressing the Legacy of Sexual Violence in Conflict](#)

**UNHCR** Office of the United Nations High Commissioner for Refugees [to 11 April 2015]

<http://www.unhcr.org/cgi-bin/texis/vtx/search?page=&comid=4a0950336&cid=49aea93a7d&scid=49aea93a40>

10 April 2015

[UNHCR reports some 900 refugee arrivals in Horn of Africa from Yemen, operations inside Yemen continue](#)

9 April 2015

[Aid agencies urgently appeal for USD 174 million to help Nigerian refugees in Cameroon, Chad and Niger](#)

**UNOCHA** [to 11 April 2015]

<http://www.unocha.org/media-resources/press-releases>

10 Apr 2015

[Yemen: Humanitarian coordinator for Yemen, Johannes van der Klaauw remarks to the press in Geneva, 10 April 2015](#)

[Vanuatu: Vanuatu: One month on, thousands remain in need of water, food and shelter](#)

09 Apr 2015

[Niger: Aid agencies urgently appeal for USD 174 million to help Nigerian refugees in Cameroon, Chad and Niger](#)

[Democratic People's Republic of Korea: UN Calls for US\\$111 Million to Respond to Urgent Humanitarian Priorities in DPR Korea in 2015](#)

08 Apr 2015

[Micronesia \(Federated States of\): United Nations Team Arrives in Micronesia to Support Typhoon Maysak Response](#)

[Democratic Republic of the Congo: Déclaration de Joseph Inganji, chef de bureau OCHA-RDC par intérim, sur les attaques armées des sites des personnes déplacées internes dans le sud Irumu](#)

**UNISDR** UN Office for Disaster Risk Reduction [to 11 April 2015]

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

9 Apr 2015

[Urban resilience goes on-line](#)

Disaster risk reduction has entered the exciting world of E-learning with the launch of an on-line course aimed at officials and practitioners working to strengthen urban resilience.

**UNICEF** [to 11 April 2015]

[http://www.unicef.org/media/media\\_78364.html](http://www.unicef.org/media/media_78364.html)

[Survey shows sharp drop in childhood stunting in Tanzania](#)

DAR ES SALAAM, Tanzania, 10 April 2015 – The results of a National Nutrition Survey released in Tanzania show that between 2010 and 2014, chronic malnutrition – stunting, or low height for age – among children under five in the country fell from 42 per cent to 35 per cent.

[Medical supplies for children being unloaded now at Sana'a Airport](#)

SANA'A/AMMAN, 10 April 2015 – A first airlift of urgent medical and other supplies from UNICEF is being unloaded now on the tarmac at Sana'a International Airport, as the conflict in Yemen continues to exact a heavy toll on children and their families.

[Sudan: Children abducted in Abyei released after UN mediation](#)

KHARTOUM, Sudan, 9 April, 2015 – UNICEF confirms that a group of four children recently abducted by an armed group in Abyei has been released.

[Airstrike on Al Rasheedi school in Yemen - Statement](#)

SANA'A/AMMAN, 8 April 2015 – "Yesterday's airstrike on Al Rasheedi school in Yemen's Ibb governorate, which left at least two children dead and two injured, is a stark reminder of the appalling risks facing children as the conflict in Yemen intensifies.

[Increasing violence in Yemen taking intolerable toll on children: UNICEF](#)

SANA'A/AMMAN, 6 April 2015 – With conflict escalating in many parts of Yemen, children continue to be killed, injured, displaced and put at increasing risk from disease, UNICEF said today.

**UN Women** [to 11 April 2015]

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

[Quito: a city committed to preventing sexual harassment in public spaces](#)

Date : April 9, 2015

Sexual harassment and other forms of sexual violence in public spaces are an everyday occurrence for women and girls around the world. This reality reduces women's and girls' freedom of movement and ability to participate in school, work and in public life. It limits their access to essential services, and enjoyment of cultural and recreational opportunities. It also negatively impacts their health and well-being.

[Young Palestinians push for a gender-equal Constitution](#)

Date : April 8, 2015

More than 700 young Palestinians have received leadership and gender-sensitivity training and several have collectively drafted an alternative constitution that challenges the status quo.

[Rural women access early cancer screening in Turkey](#)

Date : April 7, 2015

"I would not have found the opportunity to even go [get screened at all had it not been for this service]," says 65-year-old Ümmügül, from a farming family in the village of Hamamkarahisar, located an hour away from Eskisehir – a central Anatolian city in Turkey. She is one of the 659 rural women living on the outskirts of the city that have already been screened at the Cancer Early Diagnosis, Screening and Information Centre in Eskisehir since rural outreach efforts began in October 2014.

## **Permanent Forum on Indigenous Issues** [to 11 April 2015]

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

*No new digest content identified.*

## **WHO & Regionals** [to 11 April 2015]

### **WHO responds to urgent health needs in Yemen**

April 2015 -- WHO is responding to increasing shortages in medicines and medical supplies in Yemen as a result of the ongoing conflict. Health facilities in affected governorates are reporting critical shortages in trauma and surgical medicines and supplies for the treatment of injured patients, and shortages are also reported in medicines for chronic diseases.

### **Building a global emergency workforce ready to go**

8 April 2015 -- WHO's new registration system will help build a global roster of foreign medical response teams ready to deploy for emergencies. The Global Foreign Medical Teams Registry sets minimum standards for international health workers and allows teams to clearly outline their services and skills. This new system helped ensure a fast and efficient international response to the cyclone in Vanuatu and help create better coordination between aid providers and recipients.

[More on the Global Foreign Medical Teams Registry](#)

### **Guidance for immunization programmes in the African Region in the context of Ebola**

WHO information note

Publication date: updated 30 March 2015 Number of pages: 3 Languages: English

WHO reference number: WHO/IVB/14.08.rev2

#### *Overview*

The specific purpose of this document is to assist countries to:

- Maintain and/or restart immunization services.
- Continue to disseminate educational and social mobilization messages and contribute to Ebola surveillance.
- Provide guidance on infection prevention and control during vaccination.

As the situation evolves, this guidance will be revised if necessary.

:: The [Weekly Epidemiological Record \(WER\) 10 April 2015](#), vol. 90, 15 (pp. 149–160) includes:

- Progress towards measles elimination, Philippines, 1998–2014

### **Global Alert and Response (GAR) – Disease Outbreak News (DONs)**

- [9 April 2015](#) - Middle East respiratory syndrome coronavirus (MERS-CoV) – Saudi Arabia

## **:: WHO Regional Offices**

### **WHO African Region AFRO::**

#### **:: Dr Moeti: Strong health systems critical in addressing health threats in the African Region**

Brazzaville, 8 April 2015 – The World Health Organization (WHO) Regional Director for Africa, Dr Matshidiso Moeti has called on the Diplomatic Corps accredited to the Republic of Congo to advocate with their national governments to strengthen health systems to be able to address the health challenges facing the African Region. She briefed the diplomats about the on-going Ebola epidemic in West Africa, current and emerging health threats in the WHO African Region, progress towards the Millennium Development Goals (MDGs), and the strategic priorities for WHO's work in the Region for 2015-2020...

### **WHO Region of the Americas PAHO**

#### **:: Caesarean sections should only be performed when medically necessary** (04/10/2015)

#### **:: Peruvian chef Gastón Acurio joins PAHO/WHO campaign to prevent foodborne diseases** (04/07/2015)

#### **:: Unsafe foods cause over 200 illnesses** (04/06/2015)

### **WHO South-East Asia Region SEARO**

*No new digest content identified.*

### **WHO European Region EURO**

*No new digest content identified.*

### **WHO Eastern Mediterranean Region EMRO**

#### **:: Sudan receives 2 million doses of measles vaccines in response to the outbreak**

8 April 2015

#### **:: WHO deplores deaths of health care workers in Yemen**

6 April 2015

#### **:: Lack of funding and vaccines challenges measles outbreak response in Sudan**

6 April 2015

### **WHO Western Pacific Region**

*No new digest content identified.*

### **UNAIDS [to 11 April 2015]**

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

#### **ECOSOC underlines need to fast-track AIDS response**

09 April 2015

The Economic and Social Council (ECOSOC) passed a [resolution on UNAIDS](#) encouraging accelerated action and investment in the next five years to be on track to end AIDS as a public health threat by 2030.

Adopted by consensus on 8 April 2015 during ECOSOC's coordination and management meeting in New York, the resolution welcomes significant gains made in the AIDS response, while underlying that AIDS is not over and that challenges remain...

[Belarus confirms it applies no restrictions on entry, stay and residence for people living with HIV](#)  
09 April 2015 | [PDF](#)

**UNFPA** United Nations Population Fund [to 11 April 2015]  
<http://www.unfpa.org/public/>  
8 April 2015  
*Press Release*  
[Former UNFPA Executive Director, African NGO Win 2015 UN Population Award](#)

**UNDP** United Nations Development Programme [to 11 April 2015]  
<http://www.undp.org/content/undp/en/home/presscenter.html>  
09 Apr 2015

[Political will and sustained financing needed to ensure Africa's poor are not left behind](#)

The strong political will of Africa's leaders is needed to ensure increased and sustained financing for social protection initiatives, if the continent is to lift millions of people out of poverty and onto the path to prosperity.

09 Apr 2015  
[Helen Clark: Lecture on "Youth, Innovation, Sustainable Development and The Commonwealth in a Post-2015 World"](#)  
London, United Kingdom

08 Apr 2015  
[Africa, Brazil team up to ensure the poor share in growth, can withstand crises](#)  
As momentum builds towards the adoption of the new global Sustainable Development Goals later this year, some 13 African countries and Brazil have come together to share experiences on social protection, focused on ensuring that Africa's poor are not left behind in the drive for economic growth, and have the means to better weather shocks and crises.

07 Apr 2015  
[Developing Asia needs a deep, robust financial sector to sustain growth](#)  
The newly released Asian Development Outlook 2015 report—“Financing Asia’s Future Growth” analyses the trends and challenges of financing for the Asia-Pacific region, which is extremely timely and relevant for the broader ongoing inter-governmental discussion, both on Financing for Development and on post-2015 Development Agenda.

**UN Division for Sustainable Development** [to 11 April 2015]  
<http://sustainabledevelopment.un.org/>  
*No new digest content identified.*

**UNEP** United Nations Environment Programme [to 11 April 2015]  
<http://www.unep.org/newscentre/?doctypeID=1>  
*Selected Press Releases*  
[The Swiss expedition "Race for Water Odyssey" Reaches New York](#)

The world's oceans receive an enormous amount of litter each year, much of which is persistent and creates marine pollution that is global and intergenerational.

09/04/2015

[UNEP Chief Confident About the Future of Renewable Energy](#)

Achim Steiner shares the reasons for optimism with the Atlantic Council.  
07/04/2015

**DESA** United Nations Department of Economic and Social Affairs [to 11 April 2015]

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

[Preparing the world for important population changes](#)

10 April 2015, New York

In 2015, the world will adopt a new set of goals, guiding the efforts to achieve a more sustainable and fairer world where no-one is left behind. In designing and implementing the post-2015 agenda, it is important to understand and account for demographic changes that are likely to unfold in the future.

[High-level UN forum seeks answers to questions on how to make sustainable development reality](#)

9 April 2015, Incheon

As the Economic and Social Council began today its Development Cooperation Forum in Incheon, Republic of Korea, senior United Nations officials emphasized the need to build on the success of the Millennium Development Goals and to deliver sustainable development for all by finding strategies to mobilize significant financial resources.

[At thematic debate, UN chief urges efficient private sector funding for post-2015 development](#)

8 April 2015, New York

The international community needs a financial framework capable of confronting the multifaceted crises of the day in a predictable and effective manner if it is to delineate a successful post-2015 sustainable development agenda, United Nations Secretary-General Ban Ki-moon confirmed.

**UNODC** United Nations Office on Drugs and Crime [to 11 April 2015]

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

*No new digest content identified.*

**UN-HABITAT** United Nations Human Settlements Programme [to 11 April 2015]

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

*No new digest content identified.*

**FAO** Food & Agriculture Organization [to 11 April 2015]

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

[Global agencies call for urgent action to avoid irreversible groundwater depletion](#)

FAO, UNESCO, the World Bank, GEF and the International Association of Hydrogeologists have today called for action by the global community to manage the increasingly urgent depletion and degradation of limited groundwater resources.

10-04-2015

[Emergency cattle vaccination campaign underway along Syria-Lebanon border](#)

Concerns over the spread of high impact transboundary animal diseases are mounting in Lebanon and neighbouring countries as some of the 1.5 million refugees fleeing the conflict in Syria have brought with them large numbers of unvaccinated sheep, goats, cattle, and other animals.

9-04-2015

[Learn about FAO's strategic objectives and progress towards achieving them](#)

FAO's work is driven by five cross-cutting strategic objectives that are closely aligned with the most relevant and urgent development problems faced by our member countries and the development community. Learn more via this brochure.

9-04-2015

[For developing countries, new opportunities in geothermal energy](#)

Geothermal energy, the flow of heat energy radiating from the earth's core, provides unique opportunities for cost efficient, sustainable food production and processing in developing countries, says a new report published by FAO today.

7-04-2015

**IFAD** International Fund for Agricultural Development [to 11 April 2015]

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

*No new digest content identified.*

**ILO** International Labour Organization [to 11 April 2015]

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

*Summit of the Americas*

[Ryder: 'Economic slowdown in Latin America and the Caribbean is affecting employment'](#)

10 April 2015

*Older workers*

[What age means for the labour force](#)

*Listen to ILO senior economist Ekkehard Ernst tease out the difference between the age and the ageing of the labour market and how it affects economic growth. Audio:*

<https://soundcloud.com/international-labour-organization/what-age-means-for-the-labour-force>  
[see more extensive treatment in Week in Review above]

**ICAO** International Civil Aviation Organization [to 11 April 2015]

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

[ICAO Goes Live With New Online Conflict Zone Information Repository](#)

MONTRÉAL, 10 April 2015 – The International Civil Aviation Organization (ICAO) launched its prototype conflict zone risk information repository last week, responding directly to Member State recommendations which came out of the UN agency's High-level Safety Conference in February.

The new repository is accessible via ICAO's [public website homepage](#) for representatives from States, airlines and the general public. As it becomes populated with submissions, it will provide up-to-date information on potential risks to civil aviation arising from armed conflict.

"This centralized repository is meant to enhance the existing global framework whereby each State is responsible for assessing risks to civil aviation in their airspace, and for making that information promptly available to other States and airlines," stressed ICAO's Council President, Dr. Olumuyiwa Benard Aliu. "But while it does not alter these essential State responsibilities, it very much does respond to the strong international consensus we have seen around the proposal that the safety of our worldwide network would benefit from greater information sharing on conflict zone risks."...

**IMO** International Maritime Organization [to 11 April 2015]

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

[IMO welcomes newest Member State](#)

*High Commissioner visit marks Zambia's membership of IMO*

Briefing: 10, April 8, 2015

**WMO** World Meteorological Organization [to 11 April 2015]

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

*No new digest content identified.*

**UNIDO** United Nations Industrial Development Organization [to 11 April 2015]

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

[Helping improve private sector labour productivity in Viet Nam](#)

Wednesday, 08 April 2015

HANOI, 8 April 2015 – A Corporate Social Responsibility (CSR) forum on labour practices and ways to improve productivity ended in Hanoi today. The two-day event was jointly organized by the United Nations Industrial Development...

[New initiative to double global industrial energy efficiency rate by 2030](#)

Tuesday, 07 April 2015

VIENNA, 7 April 2015 - With the support of the UN Industrial Development Organization (UNIDO) a new collaboration aimed at doubling the pace of energy efficiency gains in industries around the world by bringing together...

**UNWTO** World Tourism Organization [to 11 April 2015]

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

*No new digest content identified.*

**ITU** International Telecommunications Union [to 11 April 2015]  
[http://www.itu.int/net/pressoffice/press\\_releases/index.aspx?lang=en#.VF8FYcl4WF8](http://www.itu.int/net/pressoffice/press_releases/index.aspx?lang=en#.VF8FYcl4WF8)  
*No new digest content identified.*

**UNESCO** [to 11 April 2015]  
<http://www.unesco.org/new/en/media-services/for-the-press/press-releases/>  
10.04.15  
[International community supports UNESCO's #Unite4Heritage campaign in Timbuktu](#)  
*Ambassadors and representatives of Morocco, South Africa, the European Union, France, Germany, Switzerland and the World Bank brought their support to UNESCO's #Unite4Heritage campaign in a visit to the World Heritage site of Timbuktu.*

The reconstruction of the Timbuktu's World Heritage monuments has entered its final stage. Launched in March last year, the rehabilitation of the 14 mausoleums that were destroyed by armed groups in 2012, is scheduled to be completed in July 2015...

08.04.15  
Report: [Education for All 2000-2015: Only a third of countries reached global education goals](#)  
*[see more extensive treatment in Week in Review above]*

**WIPO** World Intellectual Property Organization [to 11 April 2015]  
<http://www.wipo.int/pressroom/en/>  
*No new digest content identified.*

**CBD** Convention on Biological Diversity [to 11 April 2015]  
<http://www.cbd.int/press-releases/>  
*No new digest content identified.*

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**USAID** [to 11 April 2015]  
<http://www.usaid.gov/news-information/press-releases>  
[White House announces new USAID programs supporting Youth Development in Central America, the Caribbean](#)

April 10, 2015  
The White House announced at the Seventh Summit of the Americas that starting this year, the U.S. Agency for International Development (USAID) will invest \$35 million in a new higher education program designed to strengthen the capacity of technical training institutions in the region to provide market-relevant training for disadvantaged populations in Central America and the Caribbean.

[Dr. Barbara O. Schneeman Joins USAID as Agency's Higher Education Coordinator](#)  
April 10, 2015  
Coordinator role will increase engagement between USAID and higher education community

Dr. Barbara O. Schneeman is the U.S. Agency for International Development's first Higher Education Coordinator for this administration. In this role, Dr. Schneeman will work with the higher education community to improve awareness of USAID opportunities and increase engagement avenues for the agency. She will champion higher education as a tool to solve development challenges and drive economic growth.

**DFID** [to 11 April 2015]

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

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

Updated 7 April 2015 Statistics DFID

**ECHO** [to 11 April 2015]

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

[Joint EU-Oxfam campaign EUsaveLIVES takes part in Middle East Festival in Florence](#)

10/04/2015

A joint photo exhibition on the plight of people living in refugee camps in Lebanon and Jordan will be launched on Saturday 11 April. The photos were taken by the photo-reporter Luigi Baldelli, following a recent mission to the region.

[EU increases its emergency aid in Yarmouk refugee camp, Syria](#)

07/04/2015

Responding to the rapidly deteriorating humanitarian situation in Yarmouk refugee camp in Syria, the European Union is providing emergency funding of €2.5 million to the United Nations Relief and Works Agency for Palestinian Refugees (UNRWA)...

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**African Union** [to 11 April 2015]

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

Apr.07.2015 [Commemoration of the 21st Anniversary of the Rwanda Genocide](#)

**The African Development Bank Group** [to 11 April 2015]

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

[AfTra and CBI join forces in spreading market information for African exporters on 25 EU sectors](#)

10/04/2015 - The Africa Trade Fund (AfTra) will support the Centre for the Promotion of Imports from developing countries (CBI), in providing and disseminating critical European market information to African exporters. The market information, which is produced and periodically updated by CBI makes it easier for African exporters and Business Support Organizations to identify business opportunities in more than 25 European market sectors

**ASEAN** [to 11 April 2015]

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

[ASEAN, Germany Launch Programme on Biodiversity](#)

on Thursday, 09 April 2015.

JAKARTA, 9 April 2015 - A programme that will protect the biological diversity, promote the sustainable management of natural ecosystems, and improve the livelihoods of local population in the ASEAN region was launched on 7 April by the ASEAN Centre for Biodiversity (ACB) and Germany in Jakarta, Indonesia. Titled "Protection of Biological Diversity in the ASEAN Member States in Cooperation with the ASEAN Centre for Biodiversity," the launch coincided with the programme's planning workshop on 7-10 April.

[ASEAN Congratulates Myanmar on Ceasefire Agreement](#)

on Thursday, 09 April 2015.

JAKARTA, 9 April 2015 - The implementation of Myanmar's Nationwide Ceasefire Agreement will be conducive to the realisation of a peaceful, united and harmonious Myanmar, said H.E. Le Luong Minh, Secretary-General of ASEAN.

**UNCTAD** [to 11 April 2015]

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

08 Apr 2015 –

[Impact of plunging prices for oil and other commodities on developing countries to be examined at UNCTAD forum](#)

[Français](#) | [Español](#)

**World Trade Organisation** [to 11 April 2015]

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

*[We generally limit coverage to regional and global level initiatives, recognizing that a number of country-level announcements are added each week]*

[Azevêdo: WTO has achieved a great deal over 20 years but "there is much, much more to do"](#)

Director-General Roberto Azevêdo, in a speech at a conference of African Trade Ministers marking the WTO's 20th anniversary in Marrakesh, Morocco, on 8 April 2015, said that "we need to do more to help developing countries, particularly in Africa, to use trade as a means to leverage growth and development ... and we need to accelerate our negotiating work". Positive outcomes in the major challenges and milestones facing the WTO this year "would be the best way to mark our 20th anniversary," he added. [Full speech](#)

**OECD** [to 11 April 2015]

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

*[We generally limit coverage to regional and global level initiatives, recognizing that a number of country-level announcements are added each week]*

[Development aid stable in 2014 but flows to poorest countries still falling](#)

08/04/2015 - Development aid flows were stable in 2014, after hitting an all-time high in 2013, but aid to the poorest countries continued to fall, according to official data collected by the OECD Development Assistance Committee (DAC).

*[see more extensive treatment in Week in Review above]*

## **Group of 77**

<http://www.g77.org/>

*[We generally limit coverage to regional and global level initiatives, recognizing that a number of country-level announcements are added each week]*

[United Nations Open-ended Informal Consultative Process on Oceans and the Law of the Sea](#)

Statement on behalf of the Group of 77 and China by Mr Mahlatse Mminele, Deputy Permanent Representative of South Africa to the United Nations, during the Sixteenth Meeting (New York, 6 April 2015)

## **IMF** [to 11 April 2015]

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

*[We generally limit coverage to regional and global level initiatives, recognizing that a number of country-level announcements are added each week]*

*World Economic Outlook (WEO)*

[Uneven Growth: Short- and Long-Term Factors](#)

April 2015

Analytical Chapters 3 & 4 Released:

*Chapter 3. Where Are We Headed? Perspectives on Potential Output*

This chapter finds that potential output growth across advanced and emerging market economies has declined in recent years. In advanced economies, this decline started as far back as the early 2000s and worsened with the global financial crisis. In emerging market economies, in contrast, it began only after the crisis. The chapter's analysis suggests that potential output growth in advanced economies is likely to increase slightly from current rates as some crisis-related effects wear off, but to remain below precrisis rates in the medium term. The main reasons are aging populations and the gradual increase in capital growth from current rates as output and investment recover from the crisis. In contrast, in emerging market economies, potential output growth is expected to decline further, owing to aging populations, weaker investment, and lower total factor productivity growth as these economies catch up to the technological frontier.

*Chapter 4. Private Investment: What's the Holdup?*

Private fixed investment in advanced economies contracted sharply during the global financial crisis, and there has been little recovery since. Investment has generally slowed more gradually in the rest of the world. Although housing investment fell especially sharply during the crisis, business investment accounts for the bulk of the slump, and the overriding factor holding it back has been the overall weakness of economic activity. In some countries, other contributing factors include financial constraints and policy uncertainty. These findings suggest that addressing the general weakness in economic activity is crucial for restoring growth in private investment.

## **World Bank** [to 11 April 2015]

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

*[We generally limit coverage to regional and global level initiatives, recognizing that a number of country-level announcements are added each week]*

[World Bank Group, IDB and CAF United to Protect Social Gains in Latin America and the Caribbean](#)

*At the 7th Summit of the Americas, International Development Organizations Commit Efforts and Resources to Promote Inclusive Economic Growth*

Panama City, April 10, 2015 – On the eve of the Seventh Summit of the Americas, the main international financial institutions of the region, the World Bank Group (WBG), the Inter-American Development Bank (IDB) and CAF – Development Bank of Latin America, today reiterated their commitment to support countries in the region in their efforts to preserve and expand the economic and social gains of the last decade, at a time when the external factors that contributed to those gains have changed. “Multilateral organizations are ready to help them respond to the call coming from the main theme of this historic Summit, ‘Prosperity with Equity: The Challenge of Cooperation in the Americas,’ by contributing global knowledge, financing and convening capacity,” said Jorge Familiar, World Bank Vice President for Latin America and the Caribbean.

Date: April 10, 2015

[Global Agencies Call for Urgent Action to Avoid Irreversible Groundwater Depletion](#)

*New Vision and Global Framework for Action on Groundwater Governance*

DAEGU, April 10, 2015— The FAO, UNESCO, World Bank, GEF and International Association of Hydrogeologists this week called for action by the global community to manage the increasingly urgent depletion and degradation of limited groundwater resources. Ahead of the 7th World Water Forum in Daegu and Gyeongbuk next week, the group proposed a set of principles governments can use for better groundwater management. The 2030 Vision and Global Framework for Action represents a bold call for collectively responsible action among governments and the global community to ensure sustainable use of groundwater. For too long, groundwater governance has been an area of policy neglect, resulting in its degradation and depletion. Global groundwater abstraction has tripled over the past half century. More than a fourth of current withdrawal is non-sustainable. Widespread groundwater pollution is threatening humans and the environment.

Date: April 10, 2015

Type: Press Release

[Equal Opportunities for Europe's Roma: An Economic Imperative in an Ageing Europe](#)

The countries of Central Europe stand out within the European Union with populations that are ageing and shrinking faster and differently compared to their neighbors. Unlike in Western Europe where ageing has been driven mainly by increases in longevity, countries in Central Europe (and the Baltics) have been ageing largely as a result of low fertility and emigration. Demographic change is significant: For example, Bulgaria has seen its population shrink by more than 15 percent since 1990, Romania and Hungary by more than 5 percent. UN population projections show that this trend is expected to continue and even accelerate. Shrinking labor forces put economic growth at risk and contribute to fiscal pressures. A recent World Bank report argues that countries in Central Europe can respond to these challenges by promoting active, healthy and productive ageing. The heart of the policy response is to invest in people to ensure that current and future cohorts are well skilled and healthy...

Date: April 9, 2015

Type: Opinion

**PRESS RELEASE**

[Global Religious and Faith-Based Organization Leaders Issue Call and Commitment to End Extreme Poverty by 2030](#)

April 9, 2015

"Ending Extreme Poverty: A Moral and Spiritual Imperative"

, April 9, 2015—Over 30 leaders from major world religions and heads of global faith-based organizations today launched a clarion call to action to end extreme poverty by 2030, a goal shared by the World Bank Group. [Ending Extreme Poverty: A Moral and Spiritual Imperative](#) notes that remarkable progress has been made in reducing extreme poverty. Over 25 years the world has gone from nearly 2 billion people to fewer than 1 billion living in extreme poverty. Now, for the first time in human history there exists both the capacity and moral responsibility to ensure that no one has to live in extreme poverty's grip....

*[see more extensive treatment in Week in Review above]*

Speeches & Transcripts

[Remarks by IFC Country Manager for Ghana Ronke Ogunsulire at the Launch of the Africa Corporate Governance Program](#)

Ronke Ogunsulire, IFC Country Manager for Ghana

Launch of the Africa Corporate Governance Program in Ghana

April 8, 2015

[Speech by World Bank Group President Jim Yong Kim: Ending Extreme Poverty by 2030: The Final Push](#)

Date: April 7, 2015

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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 announcement, programs or appeals.*

**Amref Health Africa** [to 11 April 2015]

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

*No new digest content identified.*

**Aravind Eye Care System** [to 11 April 2015]

<http://www.aravind.org/default/currentnewscontent>

*No new digest content identified.*

**BRAC** [to 11 April 2015]

<http://www.brac.net/content/stay-informed-news#.VPstwC5nBhV>

[Entrepreneur from BRAC Pakistan receives award](#)

BRAC Pakistan's entrepreneur Abida Perveen and her loan officer Nasreen Akhtar from Multan received the award for 'Most Innovative MFI' during the ninth Citi-PPAF Micro-entrepreneurship

Awards 2014 held at Serena Hotel, Islamabad on 31 March 2015. Abida Perveen and Nasreen Akhtar also received USD 1,165 (PKR 120,000) as cash prize along with the award.

Jointly organised by Citi Foundation, a philanthropic arm of Citibank, and Pakistan Poverty Alleviation Fund (PPAF), the awards aim to recognise best practices, entrepreneurial skills, and leadership qualities of individual micro-entrepreneurs in Pakistan...

*[undated]*

**CARE International** [to 11 April 2015]

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

[World Health Day: Three in Ten Syrian Refugee Families Cannot Access Health Services](#)

JORDAN

7 APRIL 2015

CARE International voices its concern about the deteriorating health situation of more than 600,000 Syrian refugees living in Jordan.

**Danish Refugee Council** [to 11 April 2015]

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

*No new digest content identified.*

**Casa Alianza** [to 11 April 2015]

**Covenant House** [to 11 April 2015]

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

<https://www.covenanthouse.org/>

*No new digest content identified.*

**ECPAT** [to 11 April 2015]

<http://www.ecpat.net/news>

*No new digest content identified.*

**Fountain House** [to 11 April 2015]

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

*No new digest content identified.*

**Handicap International** [to 11 April 2015]

[http://www.handicap-international.us/press\\_releases](http://www.handicap-international.us/press_releases)

*No new digest content identified.*

**Heifer International** [to 11 April 2015]

<http://www.heifer.org/about-heifer/press/press-releases.html>

*No new digest content identified.*

**HelpAge International** [to 11 April 2015]

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

[World Health Day 2015: Age Demands Action on access to age-friendly health services for older people](#)

Today (7 April) on World Health Day, Age Demands Action campaigners are calling for access to age-friendly health services for older people to bring a halt to exclusion, discrimination and stigma.

Posted: 07 April 2015

**International Rescue Committee** [to 11 April 2015]

<http://www.rescue.org/press-release-index>

[Fire leaves 700 people homeless in Thailand refugee camp; the IRC responds](#)

Posted by Peter Biro on April 10, 2015

Nearly 200 houses were destroyed in a fire that broke out in the Ban Mai Nai Soi camp in Thailand on April 7. The camp is home to 13,000 mostly Karen refugees from Myanmar (Burma)

**ICRC - International Committee of the Red Cross** [to 11 April 2015]

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

[Yemen: Aid supplies arrive amid fears for safety of medical staff](#)

News release

10 April 2015

Sana'a / Geneva (ICRC) – Urgently needed medical supplies were brought into Yemen by plane today by the International Committee of the Red Cross (ICRC). They will be distributed to hospitals countrywide to treat the wounded following days of intense fighting.

The plane, carrying 16.4 tonnes of medicines, bandages, IV fluids and surgical equipment (enough to treat between 700 and 1,000 badly wounded people), landed in the capital Sana'a as reports emerged of medical facilities and staff coming under attack...

[Syria: Civilians in Yarmouk Camp need immediate help](#)

News release

09 April 2015

Damascus/Geneva - The International Committee of the Red Cross (ICRC) is calling for immediate access for humanitarian assistance to Yarmouk refugee camp and expressed alarm at the plight of thousands of civilians enduring clashes that have put their lives at great risk...

...The ICRC has not been able to enter Yarmouk camp since October 2014, when it delivered medical and water purification supplies in collaboration with the SARC and the Palestine Red Crescent Society.

**IRCT** [to 11 April 2015]

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

*No new digest content identified.*

**MSF/Médecins Sans Frontières** [to 11 April 2015]

<http://www.doctorswithoutborders.org/news-stories/press/press-releases>

*Press release*

[\*\*MSF and MOAS to Launch Lifesaving Operation for Migrants in Mediterranean\*\*](#)

April 09, 2015

*Search, rescue, and medical aid operation to begin in May.*

AMSTERDAM/NEW YORK—The international medical humanitarian organization Doctors Without Borders/Médecins Sans Frontières (MSF) and the [Migrant Offshore Aid Station \(MOAS\)](#) will launch a joint search, rescue, and medical aid operation in the central Mediterranean to assist people fleeing crises and risking their lives to reach safe haven in Europe, at a time of reduced European maritime assistance to migrants, the groups announced today.

The lifesaving operation will take place between May and October, when thousands of people are expected to attempt crossing the waters between Africa and Europe. More than 3,400 people died trying to reach Europe last year, the deadliest on record for people traversing the Mediterranean. This year the death toll is predicted to be even higher, with even less assistance available to boats in distress. The Italian navy's search and rescue operation, Mare Nostrum, was discontinued in November 2014 due to a lack of funding from European governments. It has not been replaced.

"Europe has turned its back on people fleeing some of the worst humanitarian crises of our time," said Arjan Hohenkamp, MSF's general director. "The decision to close doors and build fences means that men, women, and children are forced to risk their lives and take a desperate journey across the sea. Ignoring this situation will not make it go away. Europe has both the resources and the responsibility to prevent more deaths on its doorstep and must act in order to do so," he said.

A joint MSF and MOAS team will be stationed in the central Mediterranean aboard the MY Phoenix, a 40-meter rescue ship. Equipped with high-speed, rigid-hull inflatable boats and surveillance drones, and with a crew of 20, the ship will provide lifesaving support to those in distress...

*Press release*

[\*\*Yemen: Medical Supplies and Staff Reach Aden, but More Help Needed\*\*](#)

April 08, 2015

SANA'A, YEMEN/NEW YORK—A boat carrying urgently needed medical supplies arrived today at the port city of Aden in [Yemen](#), the international medical humanitarian organization Doctors Without Borders/Médecins Sans Frontières (MSF), which operates a hospital in the city, announced.

*Press release*

[\*\*Community Management of Acute Malnutrition Can Work in India\*\*](#)

April 07, 2015

Barcelona/New Delhi—The international humanitarian medical organization Doctors Without Borders/Médecins Sans Frontières (MSF) recently published evidence from its community-based management of acute malnutrition (CMAM) program in Bihar, which revealed that it has successfully achieved a cure rate of 88.4 percent among severely acute malnourished children who completed their treatment.

This conclusion was part of a study entitled "[Community-Based Management of Severe Acute Malnutrition in India: New evidence from Bihar](#)," which was published on April 1, 2015 in The American Journal of Clinical Nutrition, the world's highest-ranked peer-reviewed medical journal

in the field of nutrition. This observational analysis was conducted by MSF in collaboration with Darbhanga Medical College Hospital, and is based on results from the CMAM program that has been operational in Bihar's Darbhanga district since 2009...

**Mercy Corps** [to 11 April 2015]

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

*No new digest content identified.*

**Operation Smile** [to 11 April 2015]

[http://www.operationsmile.org/news\\_events/media-room/](http://www.operationsmile.org/news_events/media-room/)

*Upcoming Mission Schedule [Home page]*

Apr 5 - 11 | Taganrog, Russia

Apr 6 - 10 | Hanoi, Vietnam

Apr 8 - 18 | Cape Coast, Ghana

**OXFAM** [to 11 April 2015]

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

[Juan Alberto Fuentes appointed chair of Oxfam International](#)

10 April 2015

Oxfam International is delighted to announce the formal appointment of Guatemala's former Minister of Finance Dr. Juan Alberto Fuentes as its new chair.

[Prices rocket as Oxfam warns of a major food and fuel crisis in Yemen](#)

8 April 2015

Food has doubled in price and fuel has quadrupled in some areas as basic commodities run dangerously low in Yemen, warns Oxfam

**Partners In Health** [to 11 April 2015]

<http://www.pihi.org/blog>

Apr 09, 2015

[Partners In Health Clinician Leaves Hospital Free of Ebola](#)

The Partners In Health clinician recovering from Ebola virus disease was discharged earlier today from the National Institutes of Health.

Apr 08, 2015

[PIH, Sierra Leone Address Needs of Pregnant Women amid Ebola](#)

Caring for women with pregnancy complications during the Ebola outbreak has been difficult, but clinicians are making progress with a specialized unit at a Freetown hospital.

Apr 07, 2015

[Karin Huster: Fairness in Ebola Treatment](#)

Nurse Karin Huster, a PIH clinical lead in Sierra Leone, writes on the need to ask tough questions in "All Lives Matter," published April 6, 2015, in Slate.

**PATH** [to 11 April 2015]  
<http://www.path.org/news/index.php>  
*No new digest content identified.*

**Plan International** [to 11 April 2015]  
<http://plan-international.org/about-plan/resources/media-centre>  
*No new digest content identified.*

**Save The Children** [to 11 April 2015]  
<http://www.savethechildren.org/site/c.8rKLIXMGIpI4E/b.6150563/k.D0E9/Newsroom.htm>  
*No new digest content identified.*

**SOS-Kinderdorf International** [to 11 April 2015]  
<http://www.sos-childrensvillages.org/about-sos/press/press-releases>  
*No new digest content identified.*

**Tostan** [to 11 April 2015]  
<http://www.tostan.org/latest-news>  
*No new digest content identified.*

**Women for Women International** [to 11 April 2015]  
<http://www.womenforwomen.org/press-releases>  
*No new digest content identified.*

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**ChildFund Alliance** [to 11 April 2015]  
<http://childfundalliance.org/>  
*No new digest content identified.*

**Disasters Emergency Committee** [to 11 April 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 11 April 2015]  
<http://www.elrha.org/news/elrha>  
*No new digest content identified.*

**END Fund** [to 11 April 2015]

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

*No new digest content identified.*

**GAVI** [to 11 April 2015]

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

*No new digest content identified.*

**Global Fund** [to 11 April 2015]

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

*No new digest content identified.*

**Hilton Prize Laureates Collaborative** [to 11 April 2015]

<http://hiltonprizelaureatescollaborative.net/>

*No new digest content identified.*

**ODI** [to 11 April 2015]

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

*Press Releases*

[\\$74 billion to deliver universal healthcare as part of 'social compact' with world's poor - new report](#)

Press release - global

Embargoed until Monday 13 April 2015 00:01

Free basic universal healthcare would cost \$74 billion a year to deliver in poor countries – equivalent to 0.15% of what the world's richest countries spend on healthcare a year, according to a new report from the Overseas Development Institute (ODI).

In 'Financing the Future', researchers at ODI calculate that a 'new social compact' comprising universal health, free primary and secondary education, and income support to protect the poorest, will cost around \$148 billion in low income countries. They argue the costs for this must be shared by rich and poor countries.

The report says that while there have been enormous strides in poverty reduction over the past two decades, progress will not be so easy in the coming years, as the poor are increasingly concentrated in conflict-prone states, mainly in sub-Saharan Africa....

... Among the report's other key recommendations are:

- New global funds should be created or the mandates of existing organisations expanded to support the introduction of universal health coverage, income support and the provision of education in humanitarian emergencies.
- 50% of aid should be provided to least developed countries, over the long term, to ensure no one is left behind by progress.
- Development must be locally-led; therefore foreign aid must work to increase local capacities so that fragile states and other poor countries can use aid effectively...

*Research Reports and Studies*

[Strengthening disaster risk governance: UNDP support during the HFA implementation period 2005-2015](#)

Research reports and studies, April 2015

Alexandra Galperin and Emily Wilkinson

This report examines the strategies and methodologies employed by UNDP over the last decade to promote an enabling governance environment for disaster risk reduction (DRR).

**The Sphere Project** [to 11 April 2015]

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

*No new digest content identified.*

**Start Network** [to 11 April 2015]

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

*[Consortium of British Humanitarian Agencies]*

[Second Start Fund activation for Yemen provides £295K for displaced communities](#)

April 7, 2015

Posted by Tegan Rogers in News.

The Start Fund has awarded £294,720 to Action Against Hunger and International Medical Corps to respond to conflict and displacement in Yemen. This is the second Start Fund allocation for the ongoing conflict in Yemen, which has been classed as a forgotten emergency by ECHO, appearing in its forgotten crisis assessment (FCA) index every year for the past six years.

International Medical Corps raised the alert one week ago, following the recent escalation of violence in the country. The alert note described how "this complex crisis, though long standing, suddenly deteriorated at the onset of Saudi airstrikes." It went on to describe how there is a critical lack of support for those affected by the conflict, because many NGO staff operating in the area have been evacuated, access has been restricted, and supplies are limited.

The briefing note produced by ACAPS following the alert explains the impact of the recent deterioration...

**Muslim Charities Forum** [to 11 April 2015]

<https://www.muslimcharitiesforum.org.uk/media/news>

*[An umbrella organisation for Muslim-led international NGOs based in the UK. It was set up in 2007 and works to support its members through advocacy, training and research, by bringing charities together. Our members have a collective income of £150,000,000 and work in 71 countries.]*

*No new digest content identified.*

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**Active Learning Network for Accountability and Performance in Humanitarian Action (ALNAP)** [to 11 April 2015]

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

*No new digest content identified.*

### **CHS International Alliance**

[The Boards of HAP and People In Aid have decided to merge, creating the CHS International Alliance](#)

18 March 2015

**:: Humanitarian Practice Network (HPN)** [to 11 April 2015]

<http://www.odihpn.org/the-humanitarian-space/news/announcements>

*No new digest content identified.*

**:: People In Aid** [to 11 April 2015]

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

[Take part in the People Count 2015 survey](#)

You are invited to take part in the People Count 2015 survey that enables organisations to compare data on key HR and workforce metrics with their peers.

[Read the full story](#) (9 April 2015)

[New case study: Female mine deactivating teams in Laos provide a different perspective on women in the workplace](#)

This is the final article in our month-long series highlighting gender issues and women in leadership that began on International Women's Day, March 8. In this case study, the Mines Advisory Group (MAG) illustrates the context and conditions in which female mine deactivation teams work, and the challenges they face in the most bombed country in the world, Laos.

[Read the full story](#) (8 April 2015)

[How to unleash the human potential of your people to drive organisational effectiveness](#)

We are currently in The Human Age, a volatile and fast-changing new era that puts unprecedented value on human potential as the driver of business success. This is the view shared by ManpowerGroup, guest author in our research report, The State of HR 2014: A Question of Impact. Human talent is now the catalyst for economic, political and social change, as well as the source of inspiration, transformation, innovation and new developments according to ManpowerGroup. The Human Age also poses great challenges to businesses and leaders. The following is a short summary of the article, which can be accessed in full from the State of HR report.

[Read the full story](#) (7 April 2015)

**Professionals in Humanitarian Assistance and Protection (PHAP)** [to 11 April 2015]

<https://phap.org/>

*No new digest content identified.*

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

*We will primarily 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)** [to 11 April 2015]

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

APRIL 09, 2015

[New Chief Human Resources Officer Joins Bill & Melinda Gates Foundation](#)

SEATTLE (April 9, 2015) – The Bill & Melinda Gates Foundation today announced that Steven Rice will join as Chief Human Resources Officer. Rice joins the foundation from Juniper Networks, where he most recently served as Executive Vice President of Human Resources.

**Clinton Foundation** [to 11 April 2015]

<https://www.clintonfoundation.org/press-releases-and-statements>

*Press Release*

[Program Details Announced for Clinton Global Initiative Middle East & Africa Meeting, May 5-7 in Marrakech](#)

April 10, 2015

NEW YORK – The Clinton Global Initiative (CGI) today announced details for the CGI Middle East & Africa Meeting, an event to be held May 5 – 7, 2015, in Marrakech, Morocco. His Majesty, King Mohammed VI welcomes the gathering which will bring together regional and global leaders from business, government, and civil society to spotlight regional successes and address a range of relevant issues including education; public health systems; youth employment; infrastructure; and water, food, and energy resources. The meeting is an opportunity for leaders to come together across sectors to examine and amplify the progress underway in two of the most dynamic regions of the world...

**Ford Foundation** [to 11 April 2015]

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

7 April 2015:

[Foundation Launches Effort to Advance Arts, Culture, and Social Justice in the 21st Century](#)

*Building on the foundation's legacy of commitment to the arts, the distinguished visiting fellows will explore the power of culture.*

The Ford Foundation today announced a new effort centered on the roles art and culture play in illuminating and addressing urgent issues of equity, opportunity, and justice in the U.S. and around the globe. The yearlong exploration, The Art of Change, which builds on the foundation's decades-long commitment to advancing freedom of expression, reaffirms the central importance of creativity and cultural expression to healthy societies at a time when they are increasingly under threat.

"Changes in the world around us demand, more than ever, that we recognize and celebrate art, creativity, and freedom of expression as the revolutionary forces they are," said Darren Walker, president of Ford Foundation. "Widening inequality, growing extremism, evolving technology, and volatile markets render art—and its unique role in effecting social change—more important, not less, for societies today."

Over the next 12 months, the Ford Foundation will bring together leading thinkers, artists, cultural leaders, and activists from around the world for a series of provocative conversations to better understand the interplay of art, creativity, equality, and justice. The initiative will help

determine how the foundation can most effectively advance the arts—and by, extension, drive social change—in an increasingly diverse and evolving world...

7 April 2015:

[The Art of Change: Meet Our Visiting Fellows](#)

Drawn from around the world, each visiting fellow is renowned in their field for their resolute focus on themes of arts and equity.

**William and Flora Hewlett Foundation** [to 11 April 2015]

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

*No new digest content identified.*

**Conrad N. Hilton Foundation** [to 11 April 2015]

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

*No new digest content identified.*

**Kellogg Foundation** [to 11 April 2015]

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

*No new digest content identified.*

**MacArthur Foundation** [to 11 April 2015]

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

*Publication*

[Assessing State Spending on Substance Use Disorders](#)

Published April 9, 2015

In 2009, the United States spent \$24 billion on substance use disorder treatment, and most of that spending (69 percent) came from public sources including state and local governments, according to a report from the State Health Care Spending Project. The report assesses the country's substance use disorder challenges and states' role in addressing them. The State Health Care Spending Project is a collaboration between MacArthur and the Pew Charitable Trusts.

**Open Society Foundation** [to 11 April 2015]

[http://www.opensocietyfoundations.org/termsearch/8175/listing?f\[0\]=type%3Anews](http://www.opensocietyfoundations.org/termsearch/8175/listing?f[0]=type%3Anews)

*No new digest content identified.*

**David and Lucile Packard Foundation** [to 11 April 2015]

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

*No new digest content identified.*

**Rockefeller Foundation** [to 11 April 2015]

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

*No new digest content identified.*

**Robert Wood Johnson Foundation** [to 11 April 2015]

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

[U.S. Chamber Foundation and RWJF Launch New Initiative](#)

Tue Apr 07 14:54:00 EDT 2015

The Chamber Foundation's two-year "Better Health through Economic Opportunity" campaign will engage businesses in community wellness.

[What Front-Line Nurse Managers Need to Close Quality Improvement Gaps](#)

Mon Apr 06 18:00:00 EDT 2015

U.S. health care strives to create better population health while lowering costs. Nurses are a critical aspect of this—but few front-line nurse managers receive the training and tools to advance quality improvements throughout the profession.

**Skoll Foundation** [to 11 April 2015]

<http://www.skollfoundation.org/latest-news/>

[GOVERNMENTS, BUSINESSES & NGOS URGED TO INVEST IN SOCIAL PROGRESS TO "UNLEASH ECONOMIC SUCCESS"](#)

April 9, 2015 by [Social Progress Imperative](#) and Deloitte Touche Tohmatsu Limited (Deloitte Global)

*Inclusive growth must be focused on delivering economic + social progress*

*World earns "a failing grade" on progress say experts*

*Norway ranks top in this year's Index, Canada is top of G7; Brazil is the top BRIC nation*

The most effective way to improve people's quality of life across the world, in both rich and poor countries, is to invest in social progress. This is according to the Social Progress Index 2015 published today by US-based nonprofit, the [Social Progress Imperative](#), and released at the 2015 Skoll World Forum on Social Entrepreneurship. The Index, ranked 133 countries based on their social and environmental performance and, including countries for which partial data was found, measured the social progress of 99% of the world's population – using 52 separate indicators to arrive at a ranking for the issues that matter most to people.

*[see more extensive treatment in Week in Review above]*

**Wellcome Trust** [to 11 April 2015]

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

*No new digest content identified.*

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### **:: Journal Watch**

*The Sentinel will track key peer-reviewed journals which address a broad range of interests in human rights, humanitarian response, health and development. It is not intended to be exhaustive. We will add to those monitored below as we encounter relevant content and upon*

*recommendation from readers. We selectively provide full text of abstracts and other content but note that successful access to some of the articles and other content may require subscription or other access arrangement unique to the publisher. Please suggest additional journals you feel warrant coverage.*

**American Journal of Disaster Medicine**

Vol. 9, No. 3–Summer 2014

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

[Reviewed earlier]

**American Journal of Infection Control**

April 2015 Volume 43, Issue 4, p313-422

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

[Reviewed earlier]

**American Journal of Preventive Medicine**

April 2015 Volume 48, Issue 4, p365-490

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

[Reviewed earlier]

**American Journal of Public Health**

Volume 105, Issue S2 (April 2015)

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

[Reviewed earlier]

**American Journal of Tropical Medicine and Hygiene**

April 2015; 92 (4)

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

[Reviewed earlier]

**BMC Health Services Research**

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

(Accessed 11 April 2015)

[No new relevant content]

**BMC Infectious Diseases**

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

(Accessed 11 April 2015)

*Research article*

**Virologic and immunologic failure, drug resistance and mortality during the first 24 months postpartum among HIV-infected women initiated on antiretroviral therapy for life in the Mitra plus Study, Dar es Salaam, Tanzania**

Matilda Ngarina, Charles Kilewo, Katarina Karlsson, Said Aboud, Annika Karlsson, Gaetano Marrone, Germana Leyna, Anna Ekström, Gunnel Biberfeld BMC Infectious Diseases 2015, 15:175 (8 April 2015)

**Abstract**

**BMC Medical Ethics**

(Accessed 11 April 2015)

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

[No new relevant content]

**BMC Pregnancy and Childbirth**

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

(Accessed 11 April 2015)

[No new relevant content]

**BMC Public Health**

(Accessed 11 April 2015)

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

[No new relevant content]

**BMC Research Notes**

(Accessed 11 April 2015)

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

[No new relevant content]

**British Medical Journal**

11 April 2015(vol 350, issue 8003)

<http://www.bmjjournals.org/content/350/8003-1>

[No relevant content identified]

**Brown Journal of World Affairs**

Volume XXI Issue 1 Fall–Winter 2014

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

[Reviewed earlier]

**Bulletin of the World Health Organization**

Volume 93, Number 4, April 2015, 209-284

<http://www.who.int/bulletin/volumes/93/4/en/>

[Reviewed earlier]

### **Complexity**

March/April 2015 Volume 20, Issue 4 Pages C1–C1, 1–80

<http://onlinelibrary.wiley.com/doi/10.1002/cplx.v20.4/issuetoc>

[Reviewed earlier]

### **Conflict and Health**

[Accessed 11 April 2015]

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

[No new relevant content]

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

(Accessed 11 April 2015)

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

[No new relevant content]

### **Developing World Bioethics**

April 2015 Volume 15, Issue 1 Pages ii–iii, 1–57

<http://onlinelibrary.wiley.com/doi/10.1111/dewb.2015.15.issue-1/issuetoc>

[Reviewed earlier]

### **Development in Practice**

Volume 25, Issue 2, 2015

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

[Reviewed earlier]

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

Volume 10, Number 3 (May 2015)

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

[Reviewed earlier]

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

Volume 9 - Issue 01 - February 2015

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

[Reviewed earlier]

### **Disasters**

April 2015 Volume 39, Issue 2 Pages 185–405

<http://onlinelibrary.wiley.com/doi/10.1111/dis.2015.39.issue-2/issuetoc>

[Reviewed earlier]

**Emergency Medicine Journal**

April 2015, Volume 32, Issue 4

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

[Reviewed earlier]

**Epidemics**

Volume 11, In Progress (June 2015)

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

[Reviewed earlier]

**End of Life Journal**

2015, Volume 5, Issue 1

<http://eolj.bmjjournals.com/content/current>

[No relevant content identified]

**The European Journal of Public Health**

Volume 25, Issue 2, 01 April 2015

[http://eurpub.oxfordjournals.org/content/25/suppl\\_1](http://eurpub.oxfordjournals.org/content/25/suppl_1)

[Reviewed earlier]

**Food Policy**

Volume 52, In Progress (April 2015)

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

[Reviewed earlier]

**Food Security**

Volume 7, Issue 2, April 2015

<http://link.springer.com/journal/12571/7/2/page/1>

***Feeding More than 9 Billion by 2050: Challenges and Opportunities***

*Editorial*

**Feeding more than 9 billion by 2050: challenges and opportunities**

Richard Strange

This issue of Food Security contains papers (with one exception), which arose out of a workshop sponsored by the [OECD](#) Co-operative Research Programme on Biological Resource Management for Sustainable Agricultural Systems. I am indebted to the three guest editors whose photographs and biographies appear below for their invaluable help in preparing the papers for publication.

*Original Paper*

**Towards food security by 2050**

R. Quentin Grafton, Carsten Daugbjerg, M. Ejaz Qureshi Pages 179-183

*Original Paper*

**The challenges of sustainably feeding a growing planet**

Thomas W. Hertel Pages 185-198

*Original Paper*

**The debate over sustainable intensification**

H. Charles J. Godfray Pages 199-208

*Original Paper*

**Food and water gaps to 2050: preliminary results from the global food and water system (GFWS) platform**

R. Quentin Grafton, John Williams, Qiang Jiang Pages 209-220

*Original Paper*

**Sustainable food production: constraints, challenges and choices by 2050**

Fiona C. McKenzie, John Williams Pages 221-233

*Original Paper*

**Sustainable intensification: overcoming land and water constraints on food production**

Colin J. Chartres, Andrew Noble Pages 235-245

*Original Paper*

**Water productivity and food security: considering more carefully the farm-level perspective**

Dennis Wichelns Pages 247-260

*Original Paper*

**Feeding 9 billion by 2050 – Putting fish back on the menu**

Christophe Béné, Manuel Barange, Rohana Subasinghe, Per Pinstrup-Andersen... Pages 261-274

*Original Paper*

**The role of international trade in managing food security risks from climate change**

Uris Lantz C. Baldos, Thomas W. Hertel Pages 275-290

*Original Paper*

**Food and biosecurity: livestock production and towards a world free of foot-and-mouth disease**

Tom Kompas, Hoa Thi Minh Nguyen, Pham Van Ha Pages 291-302

*Original Paper*

**The coffee rust crises in Colombia and Central America (2008–2013): impacts, plausible causes and proposed solutions**

Jacques Avelino, Marco Cristancho, Selena Georgiou, Pablo Imbach... Pages 303-321

*Original Paper*

**Oil prices, biofuels production and food security: past trends and future challenges**

Hang To, R. Quentin Grafton Pages 323-336

*Original Paper*

**Tracking phosphorus security: indicators of phosphorus vulnerability in the global food system**

Dana Cordell, Stuart White Pages 337-350

*Original Paper*

**Input constraints to food production: the impact of soil degradation**

R. J. Rickson, L. K. Deeks, A. Graves, J. A. H. Harris, M. G. Kibblewhite... Pages 351-364

*Original Paper*

**The role of technology transfer to improve fertiliser use efficiency**

Miles Grafton, Ian Yule Pages 365-373

*Original Paper*

**Genomic breeding for food, environment and livelihoods**

John Rivers, Norman Wirthmann, Barry J. Pogson, Justin O. Borevitz Pages 375-382

*Original Paper*

**Food security and trade: reconciling discourses in the Food and Agriculture Organization and the World Trade Organization**

Arild Auvåg Farsund, Carsten Daugbjerg, Oluf Langhelle Pages 383-391

*Original Paper*

**Public policies for improving food and nutrition security at different scales**

M. Ejaz Qureshi, John Dixon, Mellissa Wood Pages 393-403

**Forum for Development Studies**

Volume 42, Issue 1, 2015

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

[Reviewed earlier]

**Genocide Studies International**

Volume 9, Number 1 /2015

<http://utpjournals.metapress.com/content/h3k3l734429m/?p=19a75d15156f4f52825de2a49ee054d1&pi=0>

***Issue Focus: The Ottoman Genocides of Armenians, Assyrians, and Greeks***

[Reviewed earlier]

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

March 2015 | Volume 3 | Issue 1

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

[Reviewed earlier]

**Global Health Governance**

<http://blogs.shu.edu/ghg/category/complete-issues/spring-autumn-2014/>

[Accessed 11 April 2015]

[No new relevant content]

**Global Public Health**

Volume 10, Issue 4, 2015

<http://www.tandfonline.com/toc/rgph20/current#.VPudJy5nBhU>

[Reviewed earlier]

**Globalization and Health**

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

[Accessed 11 April 2015]

[No new relevant content]

## **Health Affairs**

April 2015; Volume 34, Issue 4

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

*Cost & Quality Of Cancer Care*

### **[A New Priority For Low-Income Countries: Fighting Cancer](#)**

Joanne Silberner1

#### *Abstract*

For decades, infectious diseases were seen as the biggest health threat in the developing world. That's beginning to change.

## **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 - Issue 02 - April 2015

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

[Reviewed earlier]

## **Health Policy and Planning**

Volume 30 Issue 3 April 2015

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

[Reviewed earlier]

## **Health Research Policy and Systems**

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

[Accessed 11 April 2015]

[No new relevant content]

## **Human Rights Quarterly**

Volume 37, Number 1, February 2015

[http://muse.jhu.edu/journals/human\\_rights\\_quarterly/toc/hrq.37.1.html](http://muse.jhu.edu/journals/human_rights_quarterly/toc/hrq.37.1.html)

[Reviewed earlier]

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

Volume 39, Issue 1, 2015

<http://www.tandfonline.com/toc/wasw21/current#.VOAi4i5nBhV>

[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**

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

[Accessed 11 April 2015]

### *Scoping Review*

#### **Ebola, the killer virus**

Haider Ghazanfar<sup>1</sup>\*, Fizza Orooj<sup>1</sup>, Muhammad Ahmed Abdullah<sup>1</sup> and Ali Ghazanfar<sup>2</sup>

#### Author Affiliations

Infectious Diseases of Poverty 2015, 4:15 doi:10.1186/s40249-015-0048-y

Published: 8 April 2015

#### *Abstract*

Ebola virus disease (EVD) has mostly affected economically deprived countries as limited resources adversely affect a country's infrastructure and administration. Probing into the factors that led to the widespread outbreak, setting forth plans to counter EVD cases in developing countries, and devising definitive measures to limit the spread of the disease are essential steps that must be immediately taken. In this review we summarize the pathogenesis of EVD and the factors that led to its spread. We also highlight interventions employed by certain countries that have successfully limited the epidemic, and add a few preventive measures after studying the current data. According to the available data, barriers to prevent and control the disease in affected countries include irresolute and disorganized health systems, substandard sanitary conditions, poor personal hygiene practices, and false beliefs and stigma related to EVD. The public health sector along with the respective chief authorities in developing countries must devise strategies, keeping the available resources in mind, to deal with the outbreak before it occurs. As a first step, communities should be educated on EVD's symptoms, history, mode of transmission, and methods of protection, including the importance of personal hygiene practices, via seminars, newspapers, and other social media. A popular opinion leader (POL) giving this information would further help to remove the misconception about the nature of the disease and indirectly improve the quality of life of affected patients and their families.

## **International Health**

Volume 7 Issue 2 March 2015

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

*Special issue: Digital methods in epidemiology*

[Reviewed earlier]

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

Volume 6 Issue 1

<http://www.emeraldinsight.com/toc/ijdrbe/6/1>

[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 3, 2015

<http://www.tandfonline.com/toc/tsdw20/current#.VSi2SpMw1hX>

**[Deforestation of montane cloud forest in the Central Highlands of Guatemala: contributing factors and implications for sustainability in Q'eqchi' communities](#)**

DOI:10.1080/13504509.2014.998738

I. Popeab\*, D. Bowenc, J. Harbora, G. Shaod, L. Zanottie & G. Burniskeb

pages 201-212

*Abstract*

Cloud forest in the Central Highlands of Guatemala provides important ecosystem services for the Q'eqchi' Maya but has been disappearing at an increasing rate in recent decades. This research documents changes in cloud forest cover, explores some contributing factors to deforestation, and considers forest preservation and food security implications for Q'eqchi' communities. We used a transdisciplinary framework that synthesized remote sensing/GIS analysis of land cover change, focus group dialogs, and surveys. Expansion of subsistence agriculture is a key proximate cause of cloud forest removal, followed by extraction of fuelwood and larger-scale logging operations. Predisposing environmental factors such as rugged topography, steep slopes, and poor soils contribute to low agricultural productivity that contributes to increased conversion of forest to agricultural land. The key underlying driving forces for deforestation locally are population growth and subdivision of land. Population growth is increasing the demand for agricultural land and, as a result, the Q'eqchi' clear the forest to

meet the need for increased food production. Furthermore, population growth is driving subdivision of land, decreasing fallow periods, and putting additional strain on poor soils, all of which exacerbate land degradation. Given the increase in population in the region, food production must be improved on existing agricultural land to avoid the need to put more land into production to meet food requirements. Thus, efforts to sustainably increase agricultural productivity are fundamental to efforts to conserve the cloud forest and to safeguard essential ecosystem services.

### **Role of ecotourism in environmental conservation and socioeconomic development in Annapurna conservation area, Nepal**

DOI:10.1080/13504509.2015.1005721

Anup K.C.a\*, Kedar Rijalb & Ramesh Prasad Sapkotaa

pages 251-258

#### *Abstract*

Ecotourism as a component of the green economy is one of the fastest growing segments of the tourism industry, and focuses on environmental conservation, socioeconomic development and capitalist development. With an objective to identify and quantify impacts of ecotourism on environmental conservation, social and cultural heritage preservation, economic development and enhancement of livelihoods, this study was carried out in the Ghandruk Village Development Committee of Annapurna Conservation Area, Nepal. Two hundred and forty two households were interviewed, followed by three focus group discussions and five key informant interviews. It can be observed that socioeconomic variables had a positive effect on tourism participation with the exception of age and landholding status having a negative effect. Ecotourism helps in environmental conservation and socioeconomic development. It also helps in increasing employment and entrepreneurship at a local level. Income and expenditure of local people had increased because of ecotourism. Participation in ecotourism, the education level, an increase in productive human capital and an increase in income had enhanced people's livelihoods. So, awareness and education programmes related to tourism, and strategies to increase the length of stay of visitors would be recommended.

### **International Migration Review**

Spring 2015 Volume 49, Issue 1 Pages 3–268

<http://onlinelibrary.wiley.com/doi/10.1111/imre.2015.49.issue-1/issuetoc>

[Reviewed earlier]

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

March 2015 - Volume 13 - Issue 1 pp: 1-102

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

#### ***New Frontiers issue of Intervention***

[Reviewed earlier]

### **JAMA**

April 7, 2015, Vol 313, No. 13

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

*JAMA Patient Page*

**Measles Vaccination** FREE

Jill Jin, MD,

**JAMA Pediatrics**

April 2015, Vol 169, No. 4

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

*Viewpoint / April 2015*

**Program Science—A Framework for Improving Global Maternal, Newborn, and Child Health**

Maryanne Crockett, MD, MPH, FRCPC, DTM&H1; Lisa Avery, MD, MIH, FRCPC2; James Blanchard, MD, MPH, PhD3

Author Affiliations

JAMA Pediatr. 2015;169(4):305-306. doi:10.1001/jamapediatrics.2015.9.

*Extract*

In 2000, leaders from 189 countries set forth Millennium Development Goals, 2 of which focused on significant reductions in child mortality and maternal mortality by 2015. Despite substantial progress toward these goals, many countries are lagging, with increasing disparity among countries with differing resources. There is a strong consensus that much of this mortality could be prevented through the effective implementation of known evidence-based interventions.<sup>1- 3</sup> In particular, there is evidence that the greatest effect on mortality occurs when efforts are initially focused on the most vulnerable individuals.<sup>4</sup> Therefore, the main challenges in reducing mortality relate to how best to improve the availability, quality, and use of these critical interventions, especially for those who most need them. Meeting this challenge will require a better understanding of the distribution and configuration of health services, factors that are associated with enhancing and maintaining the quality of services, and the factors that promote and prevent use of these services along the continuum of care.<sup>5</sup> In this regard, academic institutions can and should contribute much more effectively to generate and translate scientific knowledge that will result in better programs to improve maternal, newborn, and child health (MNCH). To fulfill this important academic mission, “science must leave the ivory tower and enter the agora,” as Gibbons urged 17 years ago.<sup>6</sup>

*Editorial / April 2015*

**The Know, Do, and Quality Gaps in International Maternal and Child Health Care Interventions**

James M. Tielsch, PhD1

Author Affiliations

JAMA Pediatr. 2015;169(4):313-314. doi:10.1001/jamapediatrics.2014.3741.

*Extract*

Tremendous progress has been made in reducing the mortality rates for young children, especially in low- and middle-income countries, with annual deaths down from 12.6 million in 1990 to 6.3 million in 2013.<sup>1</sup> Although it is unlikely that number 4 (reduce child mortality) of the Millennium Development Goals set by the United Nations in 2001<sup>2</sup> will be achieved by the deadline this year, an even more ambitious goal for the elimination of preventable deaths among newborns and children younger than 5 years by 2030 is likely to be set by the United Nations General Assembly in the fall of 2015.<sup>3</sup> Discussions about these laudable goals often center on claims such as, “we know what works, we just need to do it.” In fact, estimates of coverage of proven interventions for child survival are significantly lower than needed to maximize the effects, with the most important coverage gaps seen in the areas of family planning, interventions for newborns, and case management of childhood diseases, such as

diarrhea, pneumonia, and malaria.<sup>4</sup> This is often referred to as the know-do gap. In this issue, Mohanan et al<sup>5</sup> provide a distressing description of this gap related to the diagnosis and treatment of diarrhea and pneumonia by health care practitioners in Bihar, India.

### **The Know-Do Gap in Quality of Health Care for Childhood Diarrhea and Pneumonia in Rural India**

Manoj Mohanan, PhD; Marcos Vera-Hernández, PhD; Veena Das, PhD; Soledad Giardili, MA; Jeremy D. Goldhaber-Fiebert, PhD; Tracy L. Rabin, MD; Sunil S. Raj, MD; Jeremy I. Schwartz, MD; Aparna Seth, MBA

Includes: Supplemental Content

*Editorial: International Maternal and Child Health Care Gaps; James M. Tielsch, PhD*

### **Journal of Community Health**

Volume 40, Issue 2, April 2015

<http://link.springer.com/journal/10900/40/2/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**

April 2015, Volume 69, Issue 4

<http://jech.bmjjournals.org/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>

[Reviewed earlier]

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

Volume 26, Number 1, February 2015

[http://muse.jhu.edu/journals/journal\\_of\\_health\\_care\\_for\\_the\\_poor\\_and\\_underserved/toc/hpu.2.6.1.html](http://muse.jhu.edu/journals/journal_of_health_care_for_the_poor_and_underserved/toc/hpu.2.6.1.html)

[Reviewed earlier]

**Journal of Humanitarian Logistics and Supply Chain Management**

Volume 4 Issue 2 2014

<http://www.emeraldinsight.com/toc/jhlscm/4/2>

[Reviewed earlier]

**Journal of Immigrant and Minority Health**

Volume 17, Issue 2, April 2015

<http://link.springer.com/journal/10903/17/2/page/1>**Special Focus: Food, Diet, and Nutrition***39 articles covering these themes in different ethic and national contexts*

[Reviewed earlier]

**Journal of Immigrant & Refugee Studies**

Volume 13, Issue 1, 2015

<http://www.tandfonline.com/toc/wimm20/current#.VQS0KOFnBhW>

[Reviewed earlier]

**Journal of Infectious Diseases**

Volume 211 Issue 8 April 15, 2015

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

[Reviewed earlier]

**Journal of International Development**

March 2015 Volume 27, Issue 2 Pages 155–312

<http://onlinelibrary.wiley.com/doi/10.1002/jid.v27.2/issuetoc>

[Reviewed earlier]

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

Spring 2015 Volume 43, Issue 1 Pages 6–166

<http://onlinelibrary.wiley.com/doi/10.1111/jlme.2015.43.issue-1/issuetoc>

[Reviewed earlier]

**Journal of Medical Ethics**

April 2015, Volume 41, Issue 4

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

[Reviewed earlier]

**Journal of the Pediatric Infectious Diseases Society (JPIDS)**

Volume 4 Issue 1 March 2015

<http://jpids.oxfordjournals.org/content/current>  
[Reviewed earlier]

### **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 May 2015; volume 12, issue 106

<http://rsif.royalsocietypublishing.org/content/current>

#### **[A review of back-calculation techniques and their potential to inform mitigation strategies with application to non-transmissible acute infectious diseases](#)**

Joseph R. Egan, Ian M. Hall

J. R. Soc. Interface 2015 12 20150096; DOI: 10.1098/rsif.2015.0096. Published 8 April 2015

#### *Abstract*

Back-calculation is a process whereby generally unobservable features of an event leading to a disease outbreak can be inferred either in real-time or shortly after the end of the outbreak. These features might include the time when persons were exposed and the source of the outbreak. Such inferences are important as they can help to guide the targeting of mitigation strategies and to evaluate the potential effectiveness of such strategies. This article reviews the process of back-calculation with a particular emphasis on more recent applications concerning deliberate and naturally occurring aerosolized releases. The techniques can be broadly split into two themes: the simpler temporal models and the more sophisticated spatio-temporal models. The former require input data in the form of cases' symptom onset times, whereas the latter require additional spatial information such as the cases' home and work locations. A key aspect in the back-calculation process is the incubation period distribution, which forms the initial topic for consideration. Links between atmospheric dispersion modelling, within-host dynamics and back-calculation are outlined in detail. An example of how back-calculation can inform mitigation strategies completes the review by providing improved estimates of the duration of antibiotic prophylaxis that would be required in the response to an inhalational anthrax outbreak.

### **Knowledge Management for Development Journal**

Vol 10, No 3 (2014)

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

### **The Lancet**

Apr 11, 2015 Volume 385 Number 9976 p1365-1476

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

#### *Editorial*

#### **[Achieving respectful care for women and babies](#)**

The Lancet

DOI: [http://dx.doi.org/10.1016/S0140-6736\(15\)60701-2](http://dx.doi.org/10.1016/S0140-6736(15)60701-2)

*Summary*

April 11 is the International Day for Maternal Health and Rights, which aims to encourage rights-based, respectful care of women during pregnancy and childbirth. The day was launched last year by the Center for Health and Gender Equity, and co-sponsored by a consortium of maternal health organisations, including Women Deliver and the International Planned Parenthood Federation. These organisations are calling on governments, international institutions, and the global community to officially recognise the day and promote and support this issue.

*Comment*

**Making sense of health estimates**

Irene Agyepong, Tumani Corrah, Yan Guo, Bruce Hollingsworth, Michael Klag, Kim Longfield, Maria de Fatima Marinho de Souza, Peter Piot, JVR Prasada Rao, John-Arne Røttingen, Peter Smith, Marc Sprenger, Trevor Sutton, Sarah Curran, Edmond SW Ng, on behalf of the Independent Advisory Committee to the Global Burden of Disease

Published Online: 18 March 2015

DOI: [http://dx.doi.org/10.1016/S0140-6736\(15\)60024-1](http://dx.doi.org/10.1016/S0140-6736(15)60024-1)

*Summary*

Epidemiological data provide the metrics from which burdens attributable to different diseases and conditions causing ill health can be estimated. Comprehensive, consistent, and coherent health estimates, together with information about any associated uncertainties, are indispensable for decision making by governments, non-governmental organisations, practitioners, and national and international funders in helping to gauge and track the changing demands and challenges presented by poor health. Estimates of disease burden are an essential platform for public health policy and priority setting, and for evaluating intervention programmes.

*Articles*

**Severe Ebola virus disease with vascular leakage and multiorgan failure: treatment of a patient in intensive care**

Timo Wolf, MD, Gerrit Kann, Prof Stephan Becker, MD, Christoph Stephan, MD, Hans-Reinhardt Brodt, MD, Philipp de Leuw, MD, Thomas Grünewald, MD, Thomas Vogl, MD, Prof Volkhard A J Kempf, MD, Prof Oliver T Keppler, MD, Prof Kai Zacharowski, MD

Published Online: 18 December 2014

DOI: [http://dx.doi.org/10.1016/S0140-6736\(14\)62384-9](http://dx.doi.org/10.1016/S0140-6736(14)62384-9)

*Supplementary video*

*Zacharovsky and colleagues demonstrate infection control procedures for Ebola. Audio/Video - Download File (43.75 MB)*

*Summary*

*Background*

In the current epidemic of Ebola virus disease in western Africa, many aid workers have become infected. Some of these aid workers have been transferred to specialised hospitals in Europe and the USA for intensified treatment, providing the potential for unique insight into the clinical course of Ebola virus disease under optimised supportive measures in isolation units.

*Methods*

A 38-year-old male doctor who had contracted an Ebola virus infection in Sierra Leone was airlifted to University Hospital Frankfurt, Germany, on day 5 after disease onset. Within 72 h of admission to the hospital's high-level isolation unit, the patient developed signs of severe multiorgan failure, including lungs, kidneys, and gastrointestinal tract. In addition to clinical

parameters, the diagnostic work-up included radiography, ultrasound, pulse contour cardiac output technology, and microbiological and clinical chemistry analyses. Respiratory failure with pulmonary oedema and biophysical evidence of vascular leak syndrome needed mechanical ventilation. The patient received a 3 day treatment course with FX06 (MChE-F4Pharma, Vienna, Austria), a fibrin-derived peptide under clinical development for vascular leak syndrome. After FX06 administration and concurrent detection of Ebola-virus-specific antibodies and a fall in viral load, vascular leak syndrome and respiratory parameters substantially improved. We gave broad-spectrum empiric antimicrobial therapy and the patient needed intermittent renal replacement therapy. The patient fully recovered.

#### Findings

This case report shows the feasibility of delivery of successful intensive care therapy to patients with Ebola virus disease under biosafety level 4 conditions.

#### Interpretation

The effective treatment of vascular leakage and multiorgan failure by combination of ventilatory support, antibiotic treatment, and renal replacement therapy can sustain a patient with severe Ebola virus disease until virological remission. FX06 could potentially be a valuable agent in contribution to supportive therapy.

#### Funding

University Hospital of Frankfurt.

### **The Lancet Global Health**

Apr 2015 Volume 3 Number 4 e178-e239

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

[Reviewed earlier]

### **The Lancet Infectious Diseases**

Apr 2015 Volume 15 Number 4 p361-486

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

[Reviewed earlier]

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

Volume 19, Issue 4, April 2015

<http://link.springer.com/journal/10995/19/4/page/1>

[Reviewed earlier]

### **The Milbank Quarterly**

*A Multidisciplinary Journal of Population Health and Health Policy*

March 2015 Volume 93, Issue 1 Pages 1–222

[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 520 Number 7546 pp131-258 9 April 2015

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

[New issue; No relevant content]

## **New England Journal of Medicine**

April 9, 2015 Vol. 372 No. 15

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

*Perspective*

### **The Next Epidemic — Lessons from Ebola**

Bill Gates

N Engl J Med 2015; 372:1381-1384 April 9, 2015 DOI: 10.1056/NEJMp1502918

*Extract*

Perhaps the only good news from the tragic Ebola epidemic in Guinea, Sierra Leone, and Liberia is that it may serve as a wake-up call: we must prepare for future epidemics of diseases that may spread more effectively than Ebola. There is a significant chance that an epidemic of a substantially more infectious disease will occur sometime in the next 20 years; after all, we saw major epidemics during the 20th century, including the Spanish influenza epidemic of 1918–1919 and the ongoing pandemic of human immunodeficiency virus. In fact, of all the things that could kill more than 10 million people around the world, the most likely is an epidemic stemming from either natural causes or bioterrorism...

#### ...A Global Call to Action

Despite efforts by the United States and a few other countries, there are still big holes in the world's ability to respond to an epidemic. Other countries may be more likely to step up if they see an overall plan and understand their role in it. We need a rigorous study of the cost of building a global warning and response system and a plan for contributions from various countries.

Through the United Nations, some global institution could be empowered and funded to coordinate the system. The United Nations and the WHO are studying the lessons from the Ebola epidemic and ways to improve international crisis management; these evaluations can provide a starting point for discussions of ways to strengthen the WHO's capacity and about which parts of the process it should lead and which ones others (including the World Bank and the G7 countries) should lead in close coordination. The conversation should include military alliances such as NATO, which should make epidemic response a priority. The final arrangement should include a reserve corps of experts with the broad range of skills needed in an epidemic. An epidemic is one of the few catastrophes that could set the world back drastically in the next few decades. By building a global warning and response system, we can prepare for it and prevent millions of deaths.

#### Recommendations for Preparing for Future Epidemics

The world needs to build a warning and response system for outbreaks. This system should

- be coordinated by a global institution that is given enough authority and funding to be effective,
- enable fast decision making at a global level,
- expand investment in research and development and clarify regulatory pathways for developing new tools and approaches,
- improve early warning and detection systems, including scalable everyday systems that can be expanded during an epidemic,
- involve a reserve corps of trained personnel and volunteers,
- strengthen health systems in low- and middle-income countries, and

- incorporate preparedness exercises to identify the ways in which the response system needs to improve.

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

April 2015; 44 (2)

<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**

April 2015, VOLUME 135 / ISSUE 4

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

[Reviewed earlier]

### **PLOS Currents: Disasters**

[Accessed 11 April 2015]

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

#### **Community Disaster Resilience: a Systematic Review on Assessment Models and Tools**

April 8, 2015 · Research article

**Introduction:** Recent years have witnessed community disaster resilience becoming one of the most heavily supported and advocated approach to disaster risk management. However, its application has been influenced by the lack of assessment tools. This study reviews studies conducted using the resilience concept and examines the tools, models, and methods adopted. It examines the domains, indicators, and indices have been considered in the tools. It provides a critical analysis of the assessment tools available for evaluating community disaster resilience (CDR).

**Methods:** We investigated international electronic databases including Scopus, MEDLINE through PubMed, ISI Web of Science, Cochrane Library, Cumulative Index to Nursing and Allied Health (CINAHL), and Google Scholar with no limitation on date, and type of articles. The search terms and strategy were as follow: (Disaster\* OR Emergenc\*) AND (Resilience OR Resilient OR Resiliency) that were applied for titles, abstracts and keywords. Extracted data were analyzed in terms of studied hazards, types of methodology, domains, and indicators of CDR assessment.

**Results:** Of 675 publications initially identified, the final analysis was conducted on 17 full text articles. These studies presented ten models, tools, or indices for CDR assessment. These evinced a diverse set of models with regard to the domains, indicators and the kind of hazard described. Considerable inter dependency between and among domains and indicators also emerged from this analysis.

Conclusion: The disparity between the articles using the resilience concept and those that offer some approach to measurement (675 vs. 17) indicates the conceptual and measurement complexity in CDR and the fact that the concept may be being used without regard to how CDR should be operationalized and assessed. Of those that have attempted to assess CDR, the level of conceptual diversity indicates limited agreement about how to operationalize the concept. As a way forward we summarize the models identified in the literature and suggest that, as a starting point for the systematic operationalization of CDR, that existing indicators of community disaster resilience be classified in five domains. These are social, economic, institutional, physical and natural domains. A need to use appropriate and effective methods to quantify and weigh them with regard to their relative contributions to resilience is identified, as is a need to consider how these levels interrelate to influence resilience. Although assessment of disaster resilience especially at the community level will inform disaster risk reduction strategies, attempts to systematically do so are in preliminary phases. Further empirical investigation is needed to develop a operational and measurable CDR model.

### **PLoS Currents: Outbreaks**

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

(Accessed 11 April 2015)

### **Public Knowledge, Perception and Source of Information on Ebola Virus Disease – Lagos, Nigeria; September, 2014**

April 8, 2015 · Research

**Background:** The first ever outbreak of Ebola virus disease (EVD) in Nigeria was declared in July, 2014. Level of public knowledge, perception and adequacy of information on EVD were unknown. We assessed the public preparedness level to adopt disease preventive behavior which is premised on appropriate knowledge, perception and adequate information.

**Methods:** We enrolled 5,322 respondents in a community-based cross-sectional study. We used interviewer-administered questionnaire to collect data on socio-demographic characteristics, EVD-related knowledge, perception and source of information. We performed univariate and bivariate data analysis using Epi-Info software setting p-value of 0.05 as cut-off for statistical significance.

**Results:** Mean age of respondents was 34 years ( $\pm 11.4$  years), 52.3% were males. Forty one percent possessed satisfactory general knowledge; 44% and 43.1% possessed satisfactory knowledge on mode of spread and preventive measures, respectively. Residing in EVD cases districts, male respondents and possessing at least secondary education were positively associated with satisfactory general knowledge (p-value: 0.01, 0.001 and 0.000004, respectively). Seventy one percent perceived EVD as a public health problem while 61% believed they cannot contract the disease. Sixty two percent and 64% of respondents will not shake hands and hug a successfully treated EVD patient respectively. Only 2.2% of respondents practice good hand-washing practice. Television (68.8%) and radio (55.0%) are the most common sources of information on EVD.

**Conclusions:** Gaps in EVD-related knowledge and perception exist. Targeted public health messages to raise knowledge level, correct misconception and discourage stigmatization should be widely disseminated, with television and radio as media of choice.

### **PLoS Medicine**

(Accessed 11 April 2015)

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

*Policy Forum*

**Improving Men's Participation in Preventing Mother-to-Child Transmission of HIV as a Maternal, Neonatal, and Child Health Priority in South Africa**

Wessel van den Berg, Kirsty Brittain, Gareth Mercer, Dean Peacock, Kathryn Stinson, Hanna Janson, Vuyiseka Dubula

Published: April 7, 2015

DOI: 10.1371/journal.pmed.1001811

*Summary Points*

- Involving male partners in programmes to prevent mother-to-child transmission of HIV may improve programme coverage and infant outcomes.
- Rates of male partner involvement remain low worldwide, and detailed guidelines to increase involvement are lacking in South Africa.
- We recommend that South African national and provincial guidelines and policies for preventing mother-to-child HIV transmission be adjusted to explicitly include a focus on increasing male partner involvement and that they include concrete descriptions of how to achieve this.
- We propose recommendations for improving male partner involvement at a policy, facility, and community level.
- Challenges to improving male partner involvement include the nature of relationships and family structures in South Africa and the capacity of health systems to implement recommendations.

**PLoS Neglected Tropical Diseases**

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

(Accessed 11 April 2015)

**Control, Elimination, and Eradication of River Blindness: Scenarios, Timelines, and Ivermectin Treatment Needs in Africa**

Young Eun Kim, Jan H. F. Remme, Peter Steinmann, Wilma A. Stolk, Jean-Baptiste Roungou, Fabrizio Tediosi Research Article | published 10 Apr 2015 | PLOS Neglected Tropical Diseases 10.1371/journal.pntd.0003664

*Research Article*

**Community-Centered Responses to Ebola in Urban Liberia: The View from Below**

Sharon Alane Abramowitz, Kristen E. McLean, Sarah Lindley McKune, Kevin Louis Bardosh, Mosoka Fallah, Josephine Monger, Kodjo Tehoungue, Patricia A. Omidian

Published: April 9, 2015

DOI: 10.1371/journal.pntd.0003706

*Abstract*

*Background*

The West African Ebola epidemic has demonstrated that the existing range of medical and epidemiological responses to emerging disease outbreaks is insufficient, especially in post-conflict contexts with exceedingly poor healthcare infrastructures. In this context, community-based responses have proven vital for containing Ebola virus disease (EVD) and shifting the epidemic curve. Despite a surge in interest in local innovations that effectively contained the epidemic, the mechanisms for community-based response remain unclear. This study provides baseline information on community-based epidemic control priorities and identifies innovative local strategies for containing EVD in Liberia.

### Methodology/Principal Findings

This study was conducted in September 2014 in 15 communities in Monrovia and Montserrado County, Liberia – one of the epicenters of the Ebola outbreak. Findings from 15 focus group discussions with 386 community leaders identified strategies being undertaken and recommendations for what a community-based response to Ebola should look like under then-existing conditions. Data were collected on the following topics: prevention, surveillance, caregiving, community-based treatment and support, networks and hotlines, response teams, Ebola treatment units (ETUs) and hospitals, the management of corpses, quarantine and isolation, orphans, memorialization, and the need for community-based training and education. Findings have been presented as community-based strategies and recommendations for (1) prevention, (2) treatment and response, and (3) community sequelae and recovery. Several models for community-based management of the current Ebola outbreak were proposed. Additional findings indicate positive attitudes towards early Ebola survivors, and the need for community-based psychosocial support.

### Conclusions/Significance

Local communities' strategies and recommendations give insight into how urban Liberian communities contained the EVD outbreak while navigating the systemic failures of the initial state and international response. Communities in urban Liberia adapted to the epidemic using multiple coping strategies. In the absence of health, infrastructural and material supports, local people engaged in self-reliance in order to contain the epidemic at the micro-social level. These innovations were regarded as necessary, but as less desirable than a well-supported health-systems based response; and were seen as involving considerable individual, social, and public health costs, including heightened vulnerability to infection.

### Author Summary

In this study the authors analyzed data from the 2014 Ebola outbreak in Monrovia and Montserrado County, Liberia. The data were collected for the purposes of program design and evaluation by the World Health Organization (WHO) and the Government of Liberia (GOL), in order to identify: (1) local knowledge about EVD, (2) local responses to the outbreak, and (3) community-based innovations to contain the virus. At the time of data collection, the international Ebola response had little insight into how much local Liberian communities knew about Ebola, and how communities managed the epidemic when they could not get access to care due to widespread hospital and clinic closures. Methods included 15 focus group discussions with community leaders from areas with active Ebola cases. Participants were asked about best practices and what they were currently doing to manage EVD in their respective communities, with the goal of developing conceptual models of local responses informed by local narratives. Findings reveal that communities responded to the outbreak in numerous ways that both supported and discouraged formal efforts to contain the spread of the disease. This research will inform global health policy for both this, and future, epidemic and pandemic responses.

### **PLoS One**

[Accessed 11 April 2015]

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

### **Can Reproductive Health Voucher Programs Improve Quality of Postnatal Care? A Quasi-Experimental Evaluation of Kenya's Safe Motherhood Voucher Scheme**

Claire Watt, Timothy Abuya, Charlotte E. Warren, Francis Obare, Lucy Kanya, Ben Bellows  
Research Article | published 02 Apr 2015 | PLOS ONE 10.1371/journal.pone.0122828

**PLoS Pathogens**

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

(Accessed 11 April 2015)

[No new relevant content]

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

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

(Accessed 11 April 2015)

**Robust and sustained immune activation in human Ebola virus infection**

Judith N. Mandla and Mark B. Feinberg, 1

**Author Affiliations*****Extract***

Ebola viruses (EBOV) are zoonotic infectious agents that are highly pathogenic in humans, causing severe hemorrhagic fever with fatality rates of ~50–70% (1). This genus of negative single-stranded RNA viruses consists of five known species that are part of the Filoviridae family. The current EBOV outbreak in western Africa began in March 2014 and has since resulted in >24,000 cases and >10,000 deaths (1). This 25th known EBOV outbreak is unprecedented in its magnitude, duration, and societal impact. Given the likelihood of future EBOV outbreaks, significant efforts are being devoted to develop vaccines that block EBOV transmission and novel therapeutic interventions to treat infected individuals (2, 3). Progress in these pursuits requires better understanding of what key elements of the immune response correlate with virus replication control and protection from disease. In PNAS, McElroy et al. report the results of their study of the cellular and humoral immune responses of four EBOV-infected people treated at Emory University (all of whom received experimental therapies) (4). Their data provide critical insight into aspects of the host response in humans to EBOV that have not previously been examined using contemporary immunologic methods, and provide the foundation for future studies, elucidating immune responses mediating effective virus control.

**Prehospital & Disaster Medicine**

Volume 30 - Issue 02 - April 2015

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

[Reviewed earlier]

**Public Health Ethics**

Volume 8 Issue 1 April 2015

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

[Reviewed earlier]

**Qualitative Health Research**

April 2015; 25 (4)

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

*Special Issue: Perceptions of Caregivers*  
[Reviewed earlier]

**Refugee Survey Quarterly**

Volume 34 Issue 1 March 2015

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

***Special Issue: The Role of International Organizations and Human Rights Monitoring Bodies in Refugee Protection***

[Reviewed earlier]

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

Volume 3, Issue 1, 2015

<http://www.tandfonline.com/toc/resi20/current#.VOkz6y5nBhW>

[Reviewed earlier]

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

February 2015 Vol. 37, No. 2

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

*ARTÍCULOS DE INVESTIGACIÓN ORIGINAL / ORIGINAL RESEARCH ARTICLES*

**[An adequacy evaluation of a maternal health intervention in rural Honduras: the impact of women](#)** [Evaluación de la suficiencia de una intervención de salud materna en un entorno rural de Honduras: repercusión de la participación de los hombres y el empoderamiento de las mujeres]

Peter R. Berti, Salim Sohani, Edith da Costa, Naomi Klaas, Luis Amendola, and Joel Duron  
*TEMAS DE ACTUALIDAD / CURRENT TOPIC*

**[Trends in research involving human beings in Brazil](#)** [Tendencias en la investigación con seres humanos en el Brasil]

Ricardo Eccard da Silva, Maria Rita Carvalho Novaes, Elza Martínez Pastor, Elena Barragan, and Angélica Amorim Amato

**Risk Analysis**

February 2015 Volume 35, Issue 2 Pages 179–344

<http://onlinelibrary.wiley.com/doi/10.1111/risa.2015.35.issue-2/issuetoc>

[Reviewed earlier]

**Science**

10 April 2015 vol 348, issue 6231, pages 153-256

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

*Editorial*

**[NIH research: Think globally](#)**

Anthony S. Fauci<sup>1</sup>, Francis S. Collins<sup>2</sup>,

<sup>1</sup>Anthony S. Fauci is director of the U.S. National Institute of Allergy and Infectious Diseases, National Institutes of Health, Bethesda, MD.

<sup>2</sup>Francis S. Collins is director of the U.S. National Institutes of Health, Bethesda, MD.

The U.S. National Institutes of Health (NIH) has for more than 60 years supported research to improve the health and prolong the lives of people in the United States and around the world. Mean life expectancy worldwide has doubled to more than 70 years, due in large part to medical and public health interventions developed with NIH funding. Now, in the face of serious fiscal constraints, the idea has reemerged from some congressional leaders and disease constituency groups to more closely align NIH funding for disease research with disease burden in the United States. Although the nation must maintain robust research support for diseases that cause illness and death among large numbers of Americans, it would be unwise to deemphasize diseases that exact their largest toll elsewhere in the world. The United States has a vital interest in the health of people around the globe, rooted in an enduring tradition of humanitarian concern as well as in enlightened self-interest. Engagement in global health protects the nation's citizens, enhances the economy, and advances U.S. interests abroad.

People from all walks of life understand and appreciate the moral imperative to alleviate human suffering, regardless of where it occurs. Polls show that Americans support efforts to improve health in developing countries, both for the sake of those individuals and for the sake of Americans exposed to infectious diseases that transcend national boundaries. The recent outbreak of Ebola virus disease in West Africa, which quickly found its way to the United States, is one more reminder of how global health challenges can become domestic. The concept of medical diplomacy—winning the hearts and minds of people in poor countries by exporting medical interventions, expertise, and personnel to improve their health—also resonates with many Americans, as does reducing instability in places where the United States has substantial economic and political interests.

The U.S. government, the largest funder of global health research and development, has played a central role in developing medical interventions that have saved countless lives in the world's poorest countries. Smallpox has been eradicated, polio nearly eliminated, and important infectious diseases of childhood controlled with vaccines. An extraordinary 7.6 million AIDS deaths were averted in low- and middle-income countries between 2003 and 2013 by the development and distribution of antiretroviral drugs to treat HIV infection. Future products, including improved drugs for tuberculosis, treatments for parasitic diseases, vaccines for malaria, and new strategies to prevent and treat HIV infection could save millions more lives. Also, studying such complex diseases provides new insights that can advance how we diagnose, treat, and prevent other health challenges, including many commonly seen in the United States. For example, the treatment of hepatitis B virus infection has been revolutionized by antiviral drugs originally developed to treat HIV infection.

History shows that the tools of modern biology offer the opportunity to practically eliminate major diseases that sap human health and exacerbate instability in areas where the United States has substantial interests. It is imperative that the nation sustain momentum and work with its global partners to deliver the fruits of global research to the people who need them most, both at home and abroad. Without such a commitment, we may miss opportunities to curtail or even eliminate important diseases such as AIDS and also risk the resurgence of major global health threats such as drug-resistant bacteria, tuberculosis, and malaria, for which new interventions are badly needed.

In 1940, President Franklin D. Roosevelt noted that "NIH speaks the universal language of humanitarianism... [it] has recognized no limitations imposed by international boundaries and

has recognized no distinctions of race, of creed, or of color." The NIH—and the United States—must continue to live by these words.

### **Social Science & Medicine**

Volume 131, In Progress (April 2015)

<http://www.sciencedirect.com/science/journal/02779536/131>

[Reviewed earlier]

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

[accessed 11 April 2015]

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

[No new relevant content]

### **Sustainability**

Volume 7, Issue 3 (March 2015), Pages 2274-3514

<http://www.mdpi.com/2071-1050/7/3>

Article: [\*\*Sustainability Education in Massive Open Online Courses: A Content Analysis Approach\*\*](#)

by Zehui Zhan, Patrick S.W. Fong, Hu Mei, Xuhua Chang, Ting Liang and Zicheng Ma

Sustainability 2015, 7(3), 2274-2300; doi:[10.3390/su7032274](https://doi.org/10.3390/su7032274)

Received: 28 November 2014 / Revised: 12 February 2015 / Accepted: 13 February 2015 /

Published: 25 February 2015

[PDF Full-text](#) (437 KB) |

(*This article belongs to the Special Issue Sustainability Approaches in Education*)

Article: [\*\*Soil Quality Indices for Evaluating Smallholder Agricultural Land Uses in Northern Ethiopia\*\*](#)

by Aweke M. Gelaw, B. R. Singh and R. Lal

Sustainability 2015, 7(3), 2322-2337; doi:[10.3390/su7032322](https://doi.org/10.3390/su7032322)

Received: 12 January 2015 / Revised: 11 February 2015 / Accepted: 15 February 2015 /

Published: 27 February 2015

| [PDF Full-text](#)

(*This article belongs to the Special Issue Enhancing Soil Health to Mitigate Soil Degradation*)

Article: [\*\*Neighborhood Sustainability Assessment: Evaluating Residential Development Sustainability in a Developing Country Context\*\*](#)

by Tan Yigitcanlar, Md. Kamruzzaman and Suharto Teriman

Sustainability 2015, 7(3), 2570-2602; doi:[10.3390/su7032570](https://doi.org/10.3390/su7032570)

Received: 12 December 2014 / Revised: 14 February 2015 / Accepted: 16 February 2015 /

Published: 3 March 2015

| [PDF Full-text](#)

(*This article belongs to the Special Issue Planning, Development and Management of Sustainable Cities*)

### **TORTURE Journal**

Volume 24, Nr. 1, 2014

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

[Reviewed earlier]

## **Tropical Medicine and Health**

Vol. 43(2015) No. 1

[https://www.jstage.jst.go.jp/browse/tmh/43/0/\\_contents](https://www.jstage.jst.go.jp/browse/tmh/43/0/_contents)

[Reviewed earlier]

## **Tropical Medicine & International Health**

May 2015 Volume 20, Issue 5 Pages 553–680

<http://onlinelibrary.wiley.com/doi/10.1111/tmi.2015.20.issue-5/issuetoc>

*Systematic Review*

### **[Rehabilitation experiences after obstetric fistula repair: systematic review of qualitative studies](#)**

Ladeisha Lombard<sup>1,\*</sup>, Jenna de St. Jorre<sup>1</sup>, Rosemary Geddes<sup>1,2</sup>, Alison M. El Ayadi<sup>3</sup> and Liz Grant<sup>1</sup>

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Free access Pdf: <http://onlinelibrary.wiley.com/doi/10.1111/tmi.12469/epdf>

*Abstract*

#### **Objectives**

To synthesise evidence on women's experiences surrounding rehabilitation and reintegration after obstetric fistula repair in sub-Saharan Africa and explore recommendations from women and health service providers.

#### **Method**

Systematic literature review of qualitative studies surrounding rehabilitation experiences of women in sub-Saharan Africa who have undergone obstetric fistula repair. Using a pre-defined search strategy, seven databases, relevant source publications and grey literature were searched for primary qualitative studies. Data from ten studies were collected, and thematic analysis based on the framework approach was used to analyse the findings.

#### **Results**

The most important rehabilitating factor for women was fulfilment of social roles. Health service perspectives were more frequent than women's perspectives. Counselling and health education were the most common recommendations from both perspectives.

#### **Conclusion**

Little qualitative evidence is available on rehabilitation after obstetric fistula repair in sub-Saharan Africa. Counselling services and community health education are priorities. Further research should emphasise women's perspectives to better inform interventions aimed at addressing the physical and social consequences of obstetric fistula.

*Original Article*

### **[Using multi-country household surveys to understand who provides reproductive and maternal health services in low- and middle-income countries: a critical appraisal of the Demographic and Health Surveys](#)**

K. Footman<sup>1,\*</sup>, L. Benova<sup>1</sup>, C. Goodman<sup>2</sup>, D. Macleod<sup>1</sup>, C. A. Lynch<sup>1</sup>, L. Penn-Kekana<sup>1</sup> and O. M. R. Campbell<sup>1</sup> Article first published online: 5 MAR 2015

DOI: 10.1111/tmi.12471 You have full text access to this OnlineOpen article

## *Abstract*

### Objective

The Demographic and Health Surveys (DHS) are a vital data resource for cross-country comparative analyses. This study is part of a set of analyses assessing the types of providers being used for reproductive and maternal health care across 57 countries. Here, we examine some of the challenges encountered using DHS data for this purpose, present the provider classification we used, and provide recommendations to enable more detailed and accurate cross-country comparisons of healthcare provision.

### Methods

We used the most recent DHS surveys between 2000 and 2012; 57 countries had data on family planning and delivery care providers and 47 countries had data on antenatal care. Every possible response option across the 57 countries was listed and categorised. We then developed a classification to group provider response options according to two key dimensions: clinical nature and profit motive.

### Results

We classified the different types of maternal and reproductive healthcare providers, and the individuals providing care. Documented challenges encountered during this process were limitations inherent in household survey data based on respondents' self-report; conflation of response options in the questionnaire or at the data processing stage; category errors of the place vs. professional for delivery; inability to determine whether care received at home is from the public or private sector; a large number of negligible response options; inconsistencies in coding and analysis of data sets; and the use of inconsistent headings.

### Conclusions

To improve clarity, we recommend addressing issues such as conflation of response options, data on public vs. private provider, inconsistent coding and obtaining metadata. More systematic and standardised collection of data would aid international comparisons of progress towards improved financial protection, and allow us to better characterise the incentives and commercial nature of different providers.

## **UN Chronicle**

Vol. LI No. 3 2014 December 2014

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

[Reviewed earlier]

## **Vulnerable Children and Youth Studies**

*An International Interdisciplinary Journal for Research, Policy and Care*

Volume 10, Issue 2, 2015

<http://www.tandfonline.com/toc/rvch20/current#.Uzq2bFcWNdc>

### **Training and capacity development: the foundation of interventions to support young children affected by HIV and AIDS in sub-Saharan Africa**

Linda Richterab\*, Julia Louwa & Sara Naicker

DOI:10.1080/17450128.2015.1029035

pages 105-117

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*Abstract*

Many programs to support young children and families affected by HIV and AIDS depend substantially on a model of cascaded training from international nongovernmental organizations, through in-country groups and organizations to services on the ground. In this paper, we describe the training and capacity building – as described in proposals, progress reports, and individualized questionnaires – offered by 10 international organizations funded by the Conrad N. Hilton Foundation to provide supportive services for young children and their families in five southern and eastern African countries. We related the findings to effective features of training described in the literature. Training and capacity development were found to be the most substantial activities in rendering services to children and families, both in terms of effort and human and financial resources. A total of 67 trainings were conducted over a period of 18 months. Almost all trainings combine lecture-based instruction, group work/discussions, and role play, but only half of the trainings report some form of mentoring, supervision or coaching following the training. Drawing on the literature, it is likely that more purposeful planning is required in terms of the selection of trainees, local adaptation and development of materials, participatory training approaches, and techniques to develop and sustain skills as well as knowledge. Demonstration and mentorship in the field together with quality assurance procedures, pre-and post-assessment to evaluate training, processes to transfer learning into subsequent practice, as well as certification, are all fundamental steps to ensure that training plays a supportive role in the behavior changes necessary to support young children affected by HIV and AIDS and their families.

**World Heritage Review**

n°74 - January 2015

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

[Reviewed earlier]

**Yale Human Rights & Development Law Journal**

Volume XIV, Issue 2

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

[Reviewed earlier]

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