



center for governance, evidence, ethics, policy, practice

human rights action :: humanitarian response :: health :: education :: holistic development :: sustainable resilience

## ***The Sentinel***

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

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***Week ending 6 February 2016***

*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.*

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

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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, Heritage Stewardship, 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.*

**Zika** [to 6 February 2016]

*Public Health Emergency of International Concern (PHEIC)*

**WHO statement on the first meeting of the International Health Regulations (2005) (IHR 2005) Emergency Committee on Zika virus and observed increase in neurological disorders and neonatal malformations**

WHO statement

1 February 2016

Based on the advice of the International Health Regulations (2005) Emergency Committee on Zika virus the Director-General declared a Public Health Emergency of International Concern (PHEIC) on 1 February 2016. The Director-General endorsed the Committee's advice and issued them as Temporary Recommendations under IHR (2005).

**UN OHCHR** Office of the United Nations High Commissioner for Human Rights [to 6 February 2016]

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

**Upholding women's human rights essential to Zika response - Zeid**

GENEVA (5 February 2016) – Upholding women's human rights is essential if the response to the Zika health emergency is to be effective, UN High Commissioner for Human Rights Zeid Ra'ad Al Hussein said Friday, adding that laws and policies that restrict access to sexual and reproductive health services in contravention of international standards, must be repealed and concrete steps must be taken so that women have the information, support and services they require to exercise their rights to determine whether and when they become pregnant.

"Clearly, managing the spread of Zika is a major challenge to the governments in Latin America," Zeid said. "However, the advice of some governments to women to delay getting pregnant, ignores the reality that many women and girls simply cannot exercise control over whether or when or under what circumstances they become pregnant, especially in an environment where sexual violence is so common."

"In Zika-affected countries that have restrictive laws governing women's reproductive rights, the situation facing women and girls is particularly stark on a number of levels," the UN Human Rights Chief said. "In situations where sexual violence is rampant, and sexual and reproductive health services are criminalized, or simply unavailable, efforts to halt this crisis will not be enhanced by placing the focus on advising women and girls not to become pregnant. Many of the key issues revolve around men's failure to uphold the rights of women and girls, and a range of strong measures need to be taken to tackle these underlying problems."

The World Health Organization has declared a Public Health Emergency of International Concern amid concerns of a possible association between upsurges in reported cases of Zika virus disease and of microcephaly in Latin America. A causative link between Zika and microcephaly (babies born with abnormally small heads), and Zika and Guillain-Barré Syndrome (a neurological condition), is still under investigation.

Amid the continuing spread of the Zika virus, authorities must ensure that their public health response is pursued in conformity with their human rights obligations, in particular relating to health and health-related rights.

"Upholding human rights is essential to an effective public health response and this requires that governments ensure women, men and adolescents have access to comprehensive and affordable quality sexual and reproductive health services and information, without discrimination," Zeid said, noting that comprehensive sexual and reproductive health services include contraception -- including emergency contraception -- maternal healthcare and safe abortion services to the full extent of the law.

"Health services must be delivered in a way that ensures a woman's fully informed consent, respects her dignity, guarantees her privacy, and is responsive to her needs and perspectives," he added....

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## **Syria Pledging Conference – London, 4 February 2016**

### **Record \$10 billion pledged in humanitarian aid for Syria at UN co-hosted conference in London**

UN News Service - 4 February 2016 – An international conference on war-torn Syria in London today pledged a record \$10 billion after United Nations Secretary-General Ban Ki-moon laid out three main objectives: raising \$7 billion in immediate humanitarian aid, mustering long-term support, and protecting civilians.

"Never has the international community raised so much money on a single day for a single crisis," he told a news briefing at the end of the day-long conference, co-hosted by the UN and the Governments of the United Kingdom, Kuwait, Germany and Norway.

More than half of the pledged amount is earmarked to meet immediate needs in 2016 in a country where nearly five years of war has killed over 250,000 people, sent over 4 million fleeing Syria, displaced 6.5 million internally, and put 13.5 million people inside the country in urgent need of humanitarian aid.

Today, let us change the narrative. Let us, by and with our solidarity and generosity, and compassionate leadership, bring true hope to the people of Syria and the region.

"Today's pledges will enable humanitarian workers to continue reaching millions of people with life-saving aid," Mr. Ban said. "The promises of long-term funding and loans mean that humanitarian and development partners will be able to work together to get children back into school, design employment programmes and begin rebuilding infrastructure.

The commitment of countries hosting large numbers of refugees to open up their labour markets is a breakthrough, he added, thanking the Governments of Jordan, Lebanon and Turkey "for choosing solidarity over fear."

He hailed the commitment to get 1.7 million children in Jordan, Lebanon and Turkey into school, and to increase access to learning opportunities for children inside Syria.

"Perhaps most important, I welcome the shared commitment of today's attendees to use their influence to end sieges and other grave human rights abuses," he said. "What will most help the people of Syria is not just food for today, but hope for tomorrow. Yet the parties to the conflict remain deeply divided – even on improving the humanitarian situation."...

***Editor's Note:***

In addition to those links just below, a number of organizations, including UN agencies and NGOs, released statements on the pledging conference. Please see links to this content as captured with other news by organization title: UNDP, UNESCO, FAO, World Bank, IMF, US Department of State, EU, DFID, Care, HelpAge, IRC, Islamic Relief, NRC, Oxfam, Save the Children, The Elders, Interaction...

**[Sudden Spike in Military Action, Insufficient Humanitarian Access 'Deeply Disturbing', Secretary-General Tells Supporting Syria Conference](#)**

4 February 2016 SG/SM/17512

**[Syrian Arab Republic: Under-Secretary-General for Humanitarian Affairs and Emergency Relief Coordinator, Stephen O'Brien Remarks at Syria Conference Plenary Session, London, 4 February 2016](#)**

04 Feb 2016

**[Syria Pledging Conference: ICRC President's call to the international community](#)**

04 February 2016

*Speech given by Peter Maurer, President of the International Committee of the Red Cross, at the Syria Pledging Conference 2016 in London.*

Excellencies, Ladies and gentlemen,

When my colleagues arrived in Madaya three weeks ago, Fatma, a little girl maybe six years old, walked up to them and said 'We have been waiting for you. Did you bring any food?' Every person my colleagues talked to, hundreds of them, malnourished, with pale green skin, asked them: 'Did you bring food?'

Anyone who has been to Syria knows the people's extraordinary hospitality and great pride. For a six year-old girl to walk up to a stranger, to ask for food – this shows in a nutshell what the crisis has done to the spirit of the people of Syria.

*So how did we get here?*

The answer is alarmingly easy: constant violations of international humanitarian law: use of illegal weapons and the illegal use of weapons, an epidemic of sieges, urban warfare destroying electricity and water infrastructure, deliberate attacks on schools and hospitals have cumulated into full system failure, forcing more than half of the Syrian population from their homes. Over four and a half million Syrians have fled abroad, the vast majority to countries neighbouring Syria. But twice as many – twice as many! – About 8 million people – are displaced inside Syria, until the next attack forces them to flee yet again. These people need help, they need protection; they need you to work for their safety, urgently.

Let me be clear: attacks on civilians are not collateral damage. Bombing civilians is a standard practice of warfare in Syria – but that does not make it acceptable. While the fronts have hardly moved over the last years, the civilian population's suffering has surged. The letter and spirit of international humanitarian law aims to protect people from direct and indiscriminate attacks; from blind violence; from unacceptable pain. It does not outlaw warfare or strategy, but it outlaws the deliberate creation of humanitarian catastrophes, like the one we witness in Syria today.

We got here also because of the lack of political action and ambition to resolve the crisis. International attention outweighs political investment to find a long-term solution to the crisis, allowing for people to resume their lives, safely, in dignity. At the same time, humanitarian aid is becoming a bargaining chip in political negotiations.

Last year, the ICRC and the Syrian Arab Red Crescent aided over 16 million people inside Syria, but we can't reach everyone and for those we do reach, we can't do nearly enough.

Humanitarian aid is always just a quick fix, and never enough. Because the reality is that access to people is restricted; cities are under siege; we estimate that nearly half a million people are completely cut off from the world. As long as this goes on, people will lack food, so they will get weak. They have no fuel for heating, so they get sick. They have no medicine, so they get sicker. And they have no hospitals, so, eventually, they die.

*So how do we get out of here?*

Ladies and gentlemen, Lift all sieges immediately.

Fatma isn't here today, so on her behalf, I say to you:

:: Start putting Syrians first, and your own interests second.

:: Find a political solution, urgently.

:: In the meantime, ensure that international humanitarian law is respected by you and your partners, whoever they are.

:: And - give us access so we can bring food and medicine to Fatma and all the other children, women and men in Syria.

We need you to show more political ambition to open impartial humanitarian spaces and less political meddling in humanitarian work.

The Red Cross and Red Crescent Movement is by far the foremost humanitarian actor in Syria today. In five years, 58 of our colleagues died, while they tried to save people. Our principles, neutrality, independence, impartiality, have not changed. The ICRC and the Syrian Arab Red Crescent can still do more, together, but we need unimpeded access, and we need your support. Movement partners also need your support to help more Syrians in the region, and beyond.

Ladies and gentlemen,

When my colleagues got ready to leave Madaya three weeks ago, after offloading food, blankets and medicine, a family stopped them. They had prepared food, saying "You saved us. You have to eat with us."

Ensure that the dignity, pride and generosity of the Syrian people will survive. Thank you.

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## **International Day of Zero Tolerance to Female Genital Mutilation**

### **New statistical report on female genital mutilation shows harmful practice is a global concern – UNICEF**

NEW YORK, 5 February 2016 – At least 200 million girls and women alive today have undergone female genital mutilation in 30 countries, according to a new statistical report published ahead of the United Nations' International Day of Zero Tolerance for Female Genital Mutilation.

The report – [Female Genital Mutilation/Cutting: A Global Concern](#) – notes that half of the girls and women who have been cut live in three countries - Egypt, Ethiopia and Indonesia - and refers to smaller studies and anecdotal accounts that provide evidence FGM is a global human rights issue affecting girls and women in every region of the world. Female genital mutilation refers to a number of procedures. Regardless of which form is practiced, FGM is a violation of children's rights.

"Female genital mutilation differs across regions and cultures, with some forms involving life-threatening health risks. In every case FGM violates the rights of girls and women. We must all accelerate efforts - governments, health professionals, community leaders, parents and families – to eliminate the practice," said UNICEF Deputy Executive Director Geeta Rao Gupta.

According to the data, girls 14 and younger represent 44 million of those who have been cut, with the highest prevalence of FGM among this age in Gambia at 56 per cent, Mauritania 54 per cent and Indonesia where around half of girls aged 11 and younger have undergone the practice. Countries with the highest prevalence among girls and women aged 15 to 49 are Somalia 98 per cent, Guinea 97 per cent and Djibouti 93 per cent. In most of the countries the majority of girls were cut before reaching their fifth birthdays...

### **'We Can End Female Genital Mutilation within a Generation', Secretary-General Says in Message to Mark Global Zero-Tolerance Day for Harmful Practice**

4 February 2016

SG/SM/17513-OBV/1578-WOM/2058

### **Eliminate Female Genital Mutilation by 2030, say UNFPA and UNICEF**

*Joint statement by UNFPA Executive Director Dr. Babatunde Osotimehin and UNICEF Executive Director Anthony Lake on the 2016 International Day of Zero Tolerance for FGM*

NEW YORK, 5 February 2016 – "FGM is a violent practice, scarring girls for life -- endangering their health, depriving them of their rights, and denying them the chance to reach their full potential.

"FGM is widespread. It is a global problem that goes well beyond Africa and the Middle East, where the practice has been most prevalent -- affecting communities in Asia, Australia, Europe, North and South America. And the number of girls and women at risk will only get larger if current population trends continue, wiping out hard-won gains.

"FGM is discrimination. It both reflects and reinforces the discrimination against women and girls, perpetuating a vicious cycle that is detrimental to development and to our progress as a human family.

"FGM must end. In September at the United Nations Sustainable Development Summit, 193 nations unanimously agreed to a new global target of eliminating FGM by 2030. This recognition that FGM is a global concern is a critical milestone.

"But the recognition, while important, is not enough. To protect the wellbeing and dignity of every girl, we need to take responsibility as a global community for ending FGM.

"That means we need to learn more -- improving our data collection to measure the full extent of the practice -- and do more. We need to encourage more communities and families to abandon FGM. We need to work with larger numbers of medical communities -- including traditional and medical professionals -- persuading them to refuse to perform or support FGM. We need to support more women and girls who have undergone the harmful practice and provide them with services and help to overcome the trauma they have suffered. And we need to support and empower girls around the world to make their voices heard and call out to put an end to FGM.

"All of us must join in this call. There simply is no place for FGM in the future we are striving to create -- a future where every girl will grow up able to experience her inherent dignity, human rights and equality by 2030.

### **Statement by UN Women Executive Director Phumzile Mlambo-Ngcuka for International Day of Zero Tolerance for Female Genital Mutilation**

Date: 05 February 2016

The 2030 Agenda for Sustainable Development brings renewed urgency to the call for "Zero Tolerance for Female Genital Mutilation", explicitly naming this as an instance of a "harmful practice" that is targeted for elimination as part of our collective efforts to achieve gender equality and women's empowerment.

Today, we assert again every girl's right to live as a full human being with control over her own body and informed choice in what happens to it. Some 200 million women and girls in 30 countries have already undergone female genital mutilation (FGM). In most countries, the majority were cut before the age of five.

It is not a simple matter to challenge and change customary behaviours. Yet where those practices enforce gender inequality, this is what we must do, supported by collective international agreements that bring universal condemnation to this most private of violations.

One aspect of achieving change is legislation that bans FGM, with policies that securely implement the laws. While 41 Member States have already criminalized FGM, legislation is not yet having its desired impact in every country.

Next month, in a series of meetings and events that draw thousands of representatives from government and civil society, the Commission on the Status of Women will review global progress in ending violence against women and girls, including the practice of FGM, as a matter of urgency, within the context of the overall priority theme of women's empowerment and its link to sustainable development. The scope of this review underlines our understanding that a comprehensive approach is necessary to address the root causes of gender inequality, violence against women and girls, and harmful practices such as FGM.

The prevalence of FGM is decreasing in most countries – but it is far from zero. Eliminating FGM is also an essential step to realizing other Sustainable Development Goals, including targets on health and well-being, quality education, decent work and economic growth, all of which are underpinned by work that empowers women and girls and achieves gender equality.

There are success stories: national action plans are in place in a growing number of countries, through which governments are supporting community engagement in prevention activities, with hotlines to receive reports of FGM and provide information on support services, and specialized clinics to treat survivors.

Working with governments, the UN system, civil society, and the media, we must continue to change how girls are valued in their community, reduce the pressure they experience from their families, communities and peers, and help in the search for alternative rites of passage, and means of income for those who perform the ritual, finding creative solutions, for example, that engage men in culture change. Let this International Day of Zero Tolerance galvanize us in all our collective efforts to achieve our goals and eliminate FGM for good.

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### **UN: [Draft Strategy for Global Initiative on Decent Jobs for Youth](#)**

HLCP Task Team on the Global Initiative on Decent Jobs for Youth

CEB/2015/HLCP-30/CRP.5 :: 28 pages

*[Excerpt]*

*...2 Vision and objective of the Global Initiative on Decent Jobs for Youth*

The vision of the Global Initiative on Decent Jobs for Youth is a world in which young women and men have greater access to decent jobs everywhere.

The objective of the Initiative is to facilitate increased impact and expanded country-level action on decent jobs for youth through multi-stakeholder partnerships, the dissemination of evidence-based policies and the scaling up of effective and innovative interventions.

This objective is directly linked to the achievement of the SDGs relating to youth employment and more specifically to the outcome document of the United Nations Summit for the adoption of the post-2015 development agenda titled "Transforming our World: The 2030 Agenda for Sustainable Development", annexed in draft resolution A/69/L.85. The outcome document

includes the following youth employment targets: (i) 4.4 “By 2030, increase the number of youth and adults who have relevant skills, including technical and vocational skills, for employment, decent jobs and entrepreneurship”; (ii) 8.5: “By 2030, achieve full and productive employment and decent work for all women and men, including for young people and persons with disabilities, and equal pay for work of equal value”; and (iii) 8.6: “By 2020, substantially reduce the proportion of youth not in employment, education or training”.<sup>11</sup>

The objective will be pursued by using the power of the United Nations system to convene multi-stakeholder partnerships and by pooling cutting-edge advice, expertise, resources and support. More specifically, the objective will be operationalized by:

- a) engaging stakeholders and world leaders in high-level policy action on youth employment;
- b) expanding and scaling up context-specific interventions at the national and regional levels for systematic and coherent policies and interventions on youth employment;
- c) pooling existing expertise and enhancing knowledge development and dissemination on what works for youth employment, including through the development of tools and capacity building; and
- d) leveraging resources from existing facilities and mobilizing additional resources...

#### *...4 Key elements*

The strategy includes the following inter-connected elements:

*[i] A strategic multi-stakeholder alliance.*

The Initiative addresses decent jobs for youth as an issue of global concern which requires the highest possible level of policy attention and action. It is a development imperative that builds on and transcends the action of any individual organization or actor. The alliance will be set up by leveraging the convening power of the United Nations system, its overarching policy frameworks and its multiple and diverse partners from governments and non-governmental entities. It will bring together major actors of substantive significance to the issue of decent jobs for youth, including national institutions, the private sector, the United Nations system and other multilateral organizations, representatives of academia, representatives of the social partners and youth organizations. It will be an umbrella forum for global advocacy and will raise existing activities on youth employment to a higher level of action and impact. The main functions of the alliance will be to: (1) advocate high-level policy commitment and action on youth employment; (2) support policy convergence and coherence; and (3) stimulate innovative thinking and resource mobilization to scale up youth employment interventions and their impact.

*[ii] Expanded and scaled up regional and country level action on decent jobs for youth.*

The Initiative will promote and monitor multi-pronged interventions through broad partnerships and joint action on decent jobs for youth. These interventions will focus on scalable and innovative solutions that have proved effective in improving youth employment outcomes at the regional and national levels with a view to developing sustainable policies and institutions. This element will respond to national development priorities, support United Nations country programming and be implemented through broad multi-stakeholder partnerships under the leadership of United Nations Country Teams (UNCTs). It will involve governmental and non-governmental institutions, private sector actors, representatives of the social partners, youth and other organizations active in the region and/or country. In particular, support will be provided to UNCTs that are engaged in the implementation of the employment and entrepreneurship priority of the Youth-SWAP.

[iii] *Knowledge facility on decent jobs for youth.*

The knowledge facility will promote the sharing of knowledge and experience, capacity building and peer learning, including through South-South and triangular cooperation mechanisms. It will facilitate the exchange of information and good practice on what works for youth employment, support the testing and evaluation of policy packages, encourage the development and implementation of innovative strategies and disseminate broadly evidence, guidelines and tools for the replication of effective and scalable youth employment responses. It will identify and document successful practices in the design, implementation, monitoring and evaluation of interventions for decent jobs for youth. Finally, it will support policy and multi-stakeholder dialogue during the implementation of youth employment initiatives in pilot countries.

[iv] *Funding modalities and resource mobilization.*

This component will pool domestic resources and those available from existing funds.<sup>12</sup> It will mobilize additional resources where required. Funding will support innovative initiatives that have the potential for wide replication and high impact in selected countries.<sup>13</sup> Resources will principally be used to support youth employment action at the country and local levels, including work undertaken through the knowledge facility that is instrumental for country-level implementation. Resources management will be based on the criteria of efficiency, cost-effectiveness, accountability and transparency...

*Press Release*

[UN initiative targets job creation and decent work conditions for young people](#)

*FAO to lead efforts for youth in agriculture and the rural economy*

1 February 2016, New York - FAO welcomed today the launch in New York of the *UN Global Initiative on Decent Jobs for Youth*, which includes a focus on promoting decent employment opportunities for young people in agriculture and the rural economy.

Under the lead of the International Labour Organization (ILO), the *Initiative* was developed by 19 international organizations that are committed to increasing the impact of youth employment policies and expanding country-level action on decent jobs for young women and men...

FAO will be leading one of the eight thematic areas of the strategy, on Youth in the Rural Economy, while contributing to others.

"Poverty and hunger cannot be eradicated without addressing the inadequacy of employment conditions and opportunities facing the world's young people, especially for young women and those living in rural areas," said Brave Ndisale, FAO Social Protection Division Deputy Director...

To date, in many parts of the world employment and entrepreneurial opportunities for young women and men remain limited, poorly remunerated and of poor quality, particularly for those living in economically stagnant rural areas of developing countries.

The majority of rural youth are employed in the informal economy as contributing family workers, subsistence farmers, home-based micro-entrepreneurs or unskilled workers. They typically earn low wages, are employed through casual or seasonal work arrangements and face unsafe, often exploitive working conditions that compel many to migrate to urban areas - or abroad...

FAO has placed the promotion of decent rural employment as one of its top priorities, and has established a specific programme of work targeting youth.



### **UN-Habitat to lead in planning Kenya's first Integrated Settlement in Kalobeyei, Turkana County**

Kenya, 04 February 2016 – UN-Habitat has joined in the implementation of Kalobeyei Integrated Socio-Economic Development Program (KISEDPP), a Turkana-based initiative that seeks to facilitate collaboration and coordination between the Kenyan Government, UN agencies, development actors, NGOs, private sector and civil society to build sustainable services and economic opportunities in Kalobeyei, a new settlement in Kenya that is expected to accommodate more than 60,000 refugees and host communities. The programme focuses on both short-term (humanitarian) and long-term (sustainable development) interventions and will be implemented through four thematic areas: sustainable integrated service delivery and skills development; spatial planning and infrastructure development; agriculture and livestock development and private sector and entrepreneurship.

UN-Habitat, having gained unique and universally-acknowledged expertise in human settlements development for the past 40 years, will lead the spatial planning and infrastructure development thematic area in close collaboration with the World Bank, Turkana County Government, United Nations High Commissioner for Refugees (UNHCR), national government agencies, refugees and host communities as well as humanitarian implementing partners such as Peace Winds Japan. UN-Habitat's intervention will be participatory and is expected to lead to the establishment of a support function for the county government of Turkana, sustainable livelihoods development for refugee and host communities and formulation of detailed re-settlement plan that will include an integrated spatial and investment plan...



### **Mercy Corps Pilots Refugee Cash Assistance Program in Serbia**

February 3, 2016 Presevo, Serbia – The global organization Mercy Corps has launched a new pilot program to distribute MasterCard prepaid debit cards to an estimated 5,600 eligible refugees traveling through Serbia, in partnership with the Serbian Ministry of Labor. Families will receive cards of 210 Euros, and individuals will receive cards of 70 Euros, which can be used to purchase what they need most. It is the first such program in the region to use an international payment mechanism to help the tens of thousands of refugees and migrants seeking haven in Europe.

"At Mercy Corps, we believe cash assistance is the most rapid, efficient and dignified manner of providing humanitarian aid," says Rebecca Thompson, Mercy Corps' team leader for its refugee response in the Balkans. "Even a small amount of cash lets people choose how they prioritize their individual needs, in addition to offering a measure of protection. And an important side benefit is that this kind of program infuses cash into the economy and markets of the communities that are hosting refugees."

The stream of people journeying to Europe continues steadily despite the harsh winter weather, with an estimated 1,000 to 3,000 people traveling through the Balkans every day. Mercy Corps

is focusing its distributions on people who are the most vulnerable: people with disabilities, the elderly, women traveling alone, those in financial need and others at particular risk. The card can be used anywhere in the world that accepts MasterCard. It comes pre-loaded with the estimated funds families would need to buy essential supplies and obtain shelter over the 72-hour period typically spent in Serbia.

"Although we are able to help several thousand people over the next two months, the reality is that thousands more urgently need assistance," says Thompson.

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### **Urban Institute Announces New Partnership to Develop Solutions for Social Mobility in America**

WASHINGTON, DC, February 5, 2016 — Today, the Urban Institute announced a grant from the Bill & Melinda Gates Foundation to establish The US Partnership on Mobility from Poverty, a new collaborative aimed at discovering permanent ladders of mobility for the poor.

The partnership will be made up of 24 leading experts, advocates, and academics from across the country. Over the next two years, the group will identify breakthrough solutions that can be put into action by philanthropy, practitioners, and the public and private sectors. The initiative will also be a resource for the field: all its work will be public, sharing insights and ideas with those poised for action.

The partnership will uncover the country's most successful programs, collaborate with outside innovative organizations to test promising new models, and identify new approaches to improving social mobility in America. It will be chaired by well-known poverty and social policy scholar David Ellwood, the Scott M. Black Professor of Political Economy at Harvard University, who also served as Dean of the John F. Kennedy School of Government from 2004 to 2015.

"Working with communities across the country, we will develop an action plan that builds on what works and deploys new ideas," said Ellwood. "Our approach will be geographically agnostic and politically nonpartisan; our findings will be transparent and available to all. We will consult widely, seeking out diverse voices and expertise as we examine the causes of persistent poverty and stagnant mobility. Rather than producing a single report, this partnership will regularly release its findings and ideas as we do our work. We hope that as a result, we can reset our country's approach to social mobility."...

Sarah Rosen Wartell, president of the Urban Institute, noted: "The partnership is about putting the country's best ideas into practice and learning from diverse voices, experiences, and research. The approach of the partnership will be grounded, pragmatic, and action-oriented."

The partnership will operate independently of the Bill & Melinda Gates Foundation, which has committed \$3.7 million toward the effort. It also will be independent of any other potential private or public funders. The partnership will be staffed and supported by the Urban Institute, but it will engage other institutions and experts.

"This partnership is being created to serve as a resource for the field that we hope will provide insight, analysis, and expertise around causes of persistent poverty and approaches to improving mobility out of poverty," said Sue Desmond-Hellmann, CEO of the Bill & Melinda Gates Foundation. "While education is one of the most important interventions for improving mobility in the United States—and the focus of our investments here—it is not the only intervention that is needed to improve opportunity. We look forward to working with the partnership to better understand those factors, in addition to education, that shape long-term outcomes for children, families, and individuals."...

#### List of partnership members

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#### **Editor's Note:**

We include the full text of the *Marrakesh Declaration* below and the overview of the conference which produced it. Additional content is available on the [Declaration website](#).

#### **Marrakesh Declaration**

##### ***Executive Summary of the Marrakesh Declaration on the Rights of Religious Minorities in Predominantly Muslim Majority Communities***

25th-27th January 2016

WHEREAS, conditions in various parts of the Muslim World have deteriorated dangerously due to the use of violence and armed struggle as a tool for settling conflicts and imposing one's point of view;

WHEREAS, this situation has also weakened the authority of legitimate governments and enabled criminal groups to issue edicts attributed to Islam, but which, in fact, alarmingly distort its fundamental principles and goals in ways that have seriously harmed the population as a whole;

WHEREAS, this year marks the 1,400th anniversary of the Charter of Medina, a constitutional contract between the Prophet Muhammad, God's peace and blessings be upon him, and the people of Medina, which guaranteed the religious liberty of all, regardless of faith;

WHEREAS, hundreds of Muslim scholars and intellectuals from over 120 countries, along with representatives of Islamic and international organizations, as well as leaders from diverse religious groups and nationalities, gathered in Marrakesh on this date to reaffirm the principles of the Charter of Medina at a major conference;

WHEREAS, this conference was held under the auspices of His Majesty, King Mohammed VI of Morocco, and organized jointly by the Ministry of Endowment and Islamic Affairs in the Kingdom of Morocco and the Forum for Promoting Peace in Muslim Societies based in the United Arab Emirates;

AND NOTING the gravity of this situation afflicting Muslims as well as peoples of other faiths throughout the world, and after thorough deliberation and discussion, the convened Muslim scholars and intellectuals:

DECLARE HEREBY our firm commitment to the principles articulated in the Charter of Medina, whose provisions contained a number of the principles of constitutional contractual citizenship, such as freedom of movement, property ownership, mutual solidarity and defense, as well as principles of justice and equality before the law; and that,

The objectives of the Charter of Medina provide a suitable framework for national constitutions in countries with Muslim majorities, and the United Nations Charter and related documents, such as the Universal Declaration of Human Rights, are in harmony with the Charter of Medina, including consideration for public order.

NOTING FURTHER that deep reflection upon the various crises afflicting humanity underscores the inevitable and urgent need for cooperation among all religious groups, we

AFFIRM HEREBY that such cooperation must be based on a "Common Word," requiring that such cooperation must go beyond mutual tolerance and respect, to providing full protection for the rights and liberties to all religious groups in a civilized manner that eschews coercion, bias, and arrogance.

BASED ON ALL OF THE ABOVE, we hereby:

Call upon Muslim scholars and intellectuals around the world to develop a jurisprudence of the concept of "citizenship" which is inclusive of diverse groups. Such jurisprudence shall be rooted in Islamic tradition and principles and mindful of global changes.

Urge Muslim educational institutions and authorities to conduct a courageous review of educational curricula that addresses honestly and effectively any material that instigates aggression and extremism, leads to war and chaos, and results in the destruction of our shared societies;

Call upon politicians and decision makers to take the political and legal steps necessary to establish a constitutional contractual relationship among its citizens, and to support all formulations and initiatives that aim to fortify relations and understanding among the various religious groups in the Muslim World;

Call upon the educated, artistic, and creative members of our societies, as well as organizations of civil society, to establish a broad movement for the just treatment of religious minorities in Muslim countries and to raise awareness as to their rights, and to work together to ensure the success of these efforts.

Call upon the various religious groups bound by the same national fabric to address their mutual state of selective amnesia that blocks memories of centuries of joint and shared living on the same land; we call upon them to rebuild the past by reviving this tradition of conviviality, and restoring our shared trust that has been eroded by extremists using acts of terror and aggression;

Call upon representatives of the various religions, sects and denominations to confront all forms of religious bigotry, vilification, and denigration of what people hold sacred, as well as all speech that promote hatred and bigotry; AND FINALLY,

AFFIRM that it is unconscionable to employ religion for the purpose of aggressing upon the rights of religious minorities in Muslim countries.

*Marrakesh*

*January 2016, 27<sup>th</sup>*

#### *Pre-Conference Overview*

#### [The Rights of Religious Minorities in Predominantly Muslim Lands: Legal Framework and a Call to Action](#)

In order to examine more deeply what entails the rights of religious minorities in Muslim lands, both in theory and practice, His Highness, King Muhammad VI of Morocco, will host a conference in Marrakesh in the Kingdom of Morocco. The Ministry of Endowments and Islamic Affairs of the Kingdom of Morocco and the Forum for Promoting Peace in Muslim Societies, based in the U.A.E., will jointly organize the conference, scheduled to be held from 25th – 27th January, 2016 (15th – 17th Rabi al-Thani, 1437).

A large number of ministers, muftis, religious scholars, and academics from various backgrounds and schools of thought will, God willing, participate in this conference. Representatives from various religions, including those pertinent to the discussion, from the Muslim world and beyond, as well as representatives from various international Islamic associations and organizations will be in attendance.

The conference's discussions and research will focus on the following areas:

- :: Grounding the discussion surrounding religious minorities in Muslim lands in Sacred Law utilizing its general principles, objectives, and adjudicative methodology;
- :: exploring the historical dimensions and contexts related to the issue;
- :: and examining the impact of domestic and international rights.

This conference, with God's help and providence, aims to begin the historic revival of the objectives and aims of the Charter of Medina, taking into account global and international treaties and utilizing enlightening, innovative case studies that are good examples of working towards pluralism. The conference also aims to contribute to the broader legal discourse surrounding contractual citizenship and the protection of minorities, to awaken the dynamism of Muslim societies and encourage the creation a broad-based movement of protecting religious minorities in Muslim lands...

.....  
.....

#### [The Neglected Dimension of Global Security: A Framework to Counter Infectious Disease Crises](#) (2016)

Commission on a Global Health Risk Framework for the Future; National Academy of Medicine, Secretariat

National Research Council. Washington, DC: The National Academies Press, 2016.

doi:10.17226/21891 :: 145 pages

Pdf:

[http://www.nap.edu/login.php?record\\_id=21891&page=http%3A%2F%2Fwww.nap.edu%2Fdownload.php%3Frecord\\_id%3D21891](http://www.nap.edu/login.php?record_id=21891&page=http%3A%2F%2Fwww.nap.edu%2Fdownload.php%3Frecord_id%3D21891)

### *Description*

Since the 2014 Ebola outbreak many public- and private-sector leaders have seen a need for improved management of global public health emergencies. The effects of the Ebola epidemic go well beyond the three hardest-hit countries and beyond the health sector. Education, child protection, commerce, transportation, and human rights have all suffered. The consequences and lethality of Ebola have increased interest in coordinated global response to infectious threats, many of which could disrupt global health and commerce far more than the recent outbreak.

In order to explore the potential for improving international management and response to outbreaks the National Academy of Medicine agreed to manage an international, independent, evidence-based, authoritative, multistakeholder expert commission. As part of this effort, the Institute of Medicine convened four workshops in summer of 2015. This commission report considers the evidence supplied by these workshops and offers conclusions and actionable recommendations to guide policy makers, international funders, civil society organizations, and the private sector.

\* \* \* \*

### ***:: 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 – Secretary General, Security Council, General Assembly**

[to 6 February 2016]

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

*Selected Press Releases/Meetings Coverage*

5 February 2016

SOC/4834

### **[Urging Inclusion of Persons with Disabilities in 2030 Agenda-Based Policies, Speakers Hail Historic Gains at Social Development Commission Discussion](#)**

There was now a common understanding that social policies inclusive of persons with disabilities were a “sound” investment in society and that their exclusion from decisions came with economic costs that countries could no longer ignore, the Special Rapporteur on the Rights of Persons with Disabilities told the Commission for Social Development today, outlining ways to ensure the new 2030 Agenda for Sustainable Development built on historic gains in their recognition.

4 February 2016

SG/SM/17512

### **[Sudden Spike in Military Action, Insufficient Humanitarian Access ‘Deeply Disturbing’, Secretary-General Tells Supporting Syria Conference](#)**

4 February 2016

SG/SM/17513-OBV/1578-WOM/2058

**'We Can End Female Genital Mutilation within a Generation', Secretary-General Says in Message to Mark Global Zero-Tolerance Day for Harmful Practice**

3 February 2016

SOC/4832

**Despite 'Enormous' Gains since Copenhagen Declaration, Inclusive Progress Must Reach Millions More, Delegates Tell Social Development Commission**

While "enormous" gains had been made since the World Summit for Social Development had resulted in the Copenhagen Declaration in 1995, progress remained uneven — both within and among countries — with millions of people still excluded from access to the very rights, services and income-generating activities that underpinned a sustainable future for all, delegates said today as the Commission for Social Development opened the substantive segment of its fifty-fourth session.

2 February 2016

SG/SM/17507

**Secretary-General, in Message for Meeting on Mass Atrocity Crimes, Hails Growing Commitment to Preventing 'Brutal Acts that Defy Our Common Humanity'**

**UN OHCHR** Office of the United Nations High Commissioner for Human Rights [to 6 February 2016]

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

*Selected Press Releases*

**Upholding women's human rights essential to Zika response - Zeid**

GENEVA (5 February 2016) – Upholding women's human rights is essential if the response to the Zika health emergency is to be effective, UN High Commissioner for Human Rights Zeid Ra'ad Al Hussein said Friday, adding that laws and policies that restrict access to sexual and reproductive health services in contravention of international standards, must be repealed and concrete steps must be taken so that women have the information, support and services they require to exercise their rights to determine whether and when they become pregnant.

*[see Week in Review above for more details]*

**Press briefing note on Israel**

5 February 2016

Subject: Israel

We are extremely concerned at the rapidly deteriorating health of Mohammed Al-Qiq, a Palestinian journalist who is on hunger strike in Israel to protest against his administrative detention and the ill-treatment he alleges since his arrest on 21 November 2015.

**Julian Assange arbitrarily detained by Sweden and the UK, UN expert panel finds**

5 February 2016

**Sudan: UN expert urges protection of unarmed civilians after new escalation of violence in Darfur**

5 February 2016

**Committee on the Rights of the Child** [to 6 February 2016]

<http://www.ohchr.org/EN/HRBodies/CRC/Pages/CRCIndex.aspx>

*Selected Announcements*

**[UN child rights experts issue findings on Senegal, Iran, Latvia, Oman, France, Ireland, Peru, Haiti, Zimbabwe, Maldives, Brunei, Benin, Kenya, Zambia](#)**

4 February 2016

**[Best interests of the child must come first, UN child rights committee reminds Australia](#)**

3 February 2016

**Special Rapporteur on the sale of children, child prostitution and child pornography**

[to 6 February 2016]

<http://www.ohchr.org/EN/Issues/Children/Pages/ChildrenIndex.aspx>

*No new digest content identified.*

**SRSG/CAAC** Office of the Special Representative of the Secretary-General for Children and Armed Conflict [to 6 February 2016]

<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 6 February 2016]

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

05 Feb 2016

**[United Nations Under-Secretary-General Zainab Hawa Bangura praises 'heroine' Rebecca Masika Katsuva](#)**

New York, 05 February 2016) United Nations Under-Secretary-General and Special Representative of the Secretary-General on Sexual Violence in Conflict, Zainab Hawa Bangura, is saddened to hear of the passing away on 2 February of Rebecca Masika Katsuva, a rape survivor and women's rights activist who had dedicated her life to helping others in the Democratic Republic of the Congo.

"Masika opened her home to victims of sexual violence and children born of rape. She countered the violence of rape with love and support for victims. Through her work with communities, she helped many women and girls to return to their husbands and families despite the stigma of rape. She is a heroine whose work will continue to inspire us," said Under-Secretary-General Bangura...

**UN OCHA** [to 6 February 2016]

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

05 Feb 2016

**[South Sudan: Humanitarian community calls for NGO bill to be subject to public consultation following formation of transitional government](#)**

Source: UN Office for the Coordination of Humanitarian Affairs Country: South Sudan (Juba, 5 February 2016): Following the adoption of the Non-Governmental Organizations (NGO) Bill by the National Legislative Assembly, the humanitarian community has called on the Government of the Republic of South Sudan to ensure that the Bill is submitted to a process of public consultation following the formation of the Transitional Government of National Unity (TGoNU).

04 Feb 2016

**Syrian Arab Republic: Under-Secretary-General for Humanitarian Affairs and Emergency Relief Coordinator, Stephen O'Brien Remarks at Syria Conference Plenary Session, London, 4 February 2016**

03 Feb 2016

**Democratic Republic of the Congo: D.R. Congo government and humanitarian actors launch plan to assist 6 million people in complex humanitarian crisis**

Source: UN Office for the Coordination of Humanitarian Affairs Country: Democratic Republic of the Congo

(Kinshasa, 2 February 2016): The Government of the Democratic Republic of Congo (DRC) and its humanitarian partners today appealed for USD 690 million aimed at providing life-saving aid to some 7.5 million people, the vast majority of which live in eastern DRC where access to health services, food and water is very limited.

02 Feb 2016

**World: Under-Secretary-General and Emergency Relief Coordinator Stephen O'Brien - Briefing to Member States - Preparations for the World Humanitarian Summit**

02 Feb 2016

**Mali: US \$354 million requested in 2016 for humanitarian aid in Mali**

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

(Bamako, 2 February, 2016): – Humanitarian organizations in Mali are seeking to raise 354 million dollars (approximately 200 billion CFA) in 2016 to help people affected by the crisis in the country. These funds are required to implement the third and last component of the 2014-2016 Humanitarian Response Plan developed by humanitarian actors in Mali.

01 Feb 2016

**Syrian Arab Republic: USD\$1.4 billion needed to get every Syrian child back in school, say aid agencies [EN/AR]**

Source: Government of the United Kingdom, Government of Canada, Norwegian Refugee Council, INTERSOS, US Department of State, UN Relief and Works Agency for Palestine Refugees in the Near East, UN Office for the Coordination of Humanitarian Affairs, World Food Programme, US Agency for International Development, Mercy Corps, UN Children's Fund, International Medical Corps, European Union, Save the Children, UN High Commissioner for Refugees, World Vision, UN Women

**UNICEF** [to 6 February 2016]

[http://www.unicef.org/media/media\\_89711.html](http://www.unicef.org/media/media_89711.html)

*Selected Press Releases*

### **[New statistical report on female genital mutilation shows harmful practice is a global concern – UNICEF](#)**

NEW YORK, 5 February 2016 – At least 200 million girls and women alive today have undergone female genital mutilation in 30 countries, according to a new statistical report published ahead of the United Nations' International Day of Zero Tolerance for Female Genital Mutilation.

### **[Eliminate Female Genital Mutilation by 2030, say UNFPA and UNICEF](#)**

NEW YORK, 5 February 2016 – "FGM is a violent practice, scarring girls for life -- endangering their health, depriving them of their rights, and denying them the chance to reach their full potential.

### **[On articles in the Israeli press related to children and violence](#)**

NEW YORK, 5 February, 2016 - With regard to recent articles in the Israeli press quoting UNICEF National Committees about abuse and violence committed against and by children, our National Committees are legally independent non-governmental organizations.

### **[As Zika spreads, UNICEF works to help keep communities safe](#)**

NEW YORK/PANAMA/GENEVA, 2 February 2016 – With the Zika virus now a public health emergency affecting more than 20 countries in Latin America and the Caribbean, UNICEF is working with governments to mobilize communities to protect themselves from infection.

### **[More children and women seek safety in Europe: UNICEF](#)**

GENEVA, 2 February 2016 – For the first time since the start of the refugee and migrant crisis in Europe, there are more children and women on the move than adult males, says UNICEF.

### **[US\\$1.4 billion needed to get every Syrian child back in school, say aid agencies](#)**

AMMAN, Jordan, 2 February 2016 – The future of a generation of Syrian children and youth is in jeopardy unless donors meeting in London this week prioritise the funding needed to get them back to school, say aid agencies leading the response to the brutal conflict ravaging the country.

### **[UNICEF Innovation Fund to invest in open source technology start-ups](#)**

NEW YORK, 1 February 2016 – UNICEF is inviting technology start-ups developing solutions with the potential to improve the lives of the world's most vulnerable children to apply for funding from its recently launched Innovation Fund.

### **[Pneumonia kills half a million children under five in sub-Saharan Africa, UNICEF says as it launches campaign to curb the disease](#)**

NEW YORK/ADDIS ABABA, Ethiopia, 31 January 2016 – UNICEF and global partners launched a campaign today urging African leaders to increase funding for pneumonia interventions and adopt policy changes to strengthen its treatment at the community level. More than 490,000 children under-five died from the disease last year in sub-Saharan Africa...

... Pneumonia kills nearly 1 million children under the age of five around the world, causing more deaths than HIV/AIDS, diarrhea and malaria combined. Progress in the fight against the disease has been slow compared to progress in other leading diseases. Childhood pneumonia deaths have fallen by just 50 per cent compared to an 85 per cent decline in measles deaths,

and 60 per cent in deaths from malaria, AIDS and tetanus in the last 15 years. Funding has also remained low: For every global health dollar spent in 2011, only 2 cents went to pneumonia.

The campaign, Every Breath Counts, seeks to raise awareness among leaders, donors and policy makers of the need for increased funding and more adequate policies for pneumonia interventions. Such measures would help:

- :: Prevent pneumonia by immunizing children, reducing household air pollution and improving hygiene practices;

- :: Protect new born babies from pneumonia through exclusive breastfeeding;

- :: Facilitate community access to effective and timely diagnosis and treatment with amoxicillin as well as oxygen for severe cases.

Every Breath Counts was launched during the African Union Summit at the General Assembly of the Organisation of African First Ladies against HIV/AIDS (OAFLA)...

**UNHCR** Office of the United Nations High Commissioner for Refugees [to 6 February 2016]

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

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

*Press Releases*

1 February 2016

**[UNHCR calls for nominations of 'unsung heroes' for Nansen Refugee Award 2016](#)**

**IOM / International Organization for Migration** [to 6 February 2016]

<http://www.iom.int/press-room/press-releases>

02/05/16

**[Mediterranean Migrant Deaths Reach 374; Arrivals in Greece Top 68,000 in 2016](#)**

Greece - IOM estimates that Mediterranean migrant and refugee arrivals in Italy and Greece reached 74,676 through February 4th.

**[IOM: Migrants Must Be Included in Zika Virus Response Plans](#)**

02/05/16

Switzerland - IOM DG William Lacy Swing has called on governments to include migrants and mobile populations in Zika Virus preparedness and response plans.

**[IOM Guinea Supports Psychosocial, Socio-economic Recovery of Ebola Survivors](#)**

02/05/16

Guinea - IOM has launched a programme to distribute cash grants to Ebola survivors as part of community-led projects in Boke in the northwestern part of the country.

**[IOM Tracks New Displacement in Burundi](#)**

02/05/16

Burundi - IOM Burundi has released its second Displacement Tracking Matrix (DTM) report for three provinces - Makamba, Kirundo and Rutana. It shows a total of 25,081 internally displaced persons (IDPs), of whom 46 per cent are men and 54 per cent women.

**[IOM, Central American States Promote Regular Flights of Stranded Cuban Migrants](#)**

02/05/16

### **Migrant Deaths in January Top 360; Arrivals in Greece Top 62,000**

02/02/16

Greece - Fatalities of migrants and refugees in the Mediterranean in January topped 360 due to a particularly deadly final weekend of the month.

### **Resettlement of Syrians from Lebanon to Canada Passes 8,000**

02/02/16

Lebanon - The ongoing resettlement operation has moved over 8,200 Syrian refugees to Canada.

### **IOM Helps Iraqi Migrants Voluntarily Return Home from Belgium**

02/02/16

Iraq - On Monday, February 1, 106 Iraqi nationals departed voluntarily from Belgium to Baghdad under IOM's Assisted Voluntary Return and Reintegration (AVRR) programme.

### **IOM, UNDP Support Consolidation of Brazil's Migration and Refugee Policy**

02/02/16

Brazil- IOM and UNDP have signed an agreement to support the efforts of the Government of Brazil in consolidating its Refugee and Migration Policy, under a project agreed between the Brazilian National Secretariat of Justice and UNDP: Strengthening Institutional Capacity and Social Participation in the Justice Policy [Fortalecimento da Capacidade Institucional e da Participação Social na Política de Justiça].

**UN Women** [to 6 February 2016]

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

Date: 05 February 2016

### **Statement by UN Women Executive Director Phumzile Mlambo-Ngcuka for International Day of Zero Tolerance for Female Genital Mutilation**

*[see Week in Review above for more detail]*

### **Statement by UN Women Executive Director Phumzile Mlambo-Ngcuka on the establishment of the Syrian Women's Advisory Board to contribute to peace talks**

Date: 03 February 2016

### **A snapshot of UN Women's work in response to the crisis in Syria**

Date: 02 February 2016

During the ongoing conflict in Syria, UN Women has been actively working to highlight the distinct needs of women and girls, including protection and resilience, and promote their role as meaningful participants in conflict-resolution, peacebuilding and eventual recovery and development.

### **Ahead of CSW, Latin American and Caribbean countries prioritize gender equality goal**

Date: 02 February 2016

Ministers, officials and authorities of national women's machineries from Latin America and the Caribbean met from 26–28 January in Santiago, Chile, calling for full implementation of the

commitments to gender equality and the empowerment of women within the Sustainable Development Goals.

## **WHO & Regionals** [to 6 February 2016]

### **Zero tolerance for female genital mutilation**

February 2016 -- More than 125 million girls and women alive today have undergone some form of female genital mutilation. WHO opposes all forms of female genital mutilation, which can cause a wide range of both short- and long-term health risks, and which is a grave violation of the human rights of women and girls.

#### **:: WHO Regional Offices**

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

#### **:: Dr Moeti urges vigilance amid spread of Zika virus**

Brazzaville, 4 February 2016 - Countries from the WHO African Region have been urged to be watchful and prepare to tackle any signs of the Zika virus disease. The call was made by Dr Matshidiso Moeti, the WHO Regional Director for Africa. "The most effective forms of prevention are reducing mosquito populations by eliminating their potential breeding sites, and using personal protection measures to prevent mosquito bites. I call upon countries in the Region to strengthen vector control, surveillance and laboratory detection of Zika virus disease and neurological complications, as well as public awareness", said Dr Moeti..

#### **:: Delegates adopted recommendations on Exchange of Best Practices to Reaching Every District/Community, equity and integration of child survival interventions in ESA –**

Cape Town, 29 January 2016 - The first ever workshop on Exchange of Best Practices to Reaching Every District/Community (RED/REC), equity and integration of child survival interventions in East and Southern African (ESA) jointly organized by WHO, UNICEF and JSI, MCSP/USAID, ended with delegates agreeing on recommendations to address inequities in coverage of child survival interventions and make progress towards achieving Universal Health Coverage.

One hundred forty six (146) delegates drawn from the Ministries of Health child health and immunization programmes, partner organizations namely, WHO, UNICEF, JSI/MCSP, CDC, Bill and Melinda Gates Foundation, Sabin Vaccine Institute, the Gavi Alliance and PATH agreed for WHO and partners to develop a framework for integration of child survival interventions to address inequities and make progress towards achieving Universal Health Coverage. Additionally EPI managers were called upon to use findings and recommendations from the workshop to brief their respective ministers in preparation for the impending Ministerial Conference on Immunization in Africa scheduled to take place from February 24-25 in Addis Ababa, Ethiopia...

...The meeting agreed on the following recommendations:

...Countries to further review the best practices identified, adapt and plan for use in the national context, and develop an operation framework based on the integrated RED/REC strategic approach

...The African Region and partners to adapt the current RED strategic approach guidelines to include the expansion of RED components with equity and integration

...EPI managers to brief their respective ministers on the need to capitalize on the gains and expand RED approach to address inequities before the ministerial meeting

...WHO and partners should develop a regional framework for equitable and integrated delivery of child survival interventions in order to address inequities and make progress towards achieving Universal Health Coverage...

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

:: [PAHO Director calls for political commitment and more resources to fight Zika in the Americas](#) (02/03/2016)

:: [PAHO Director to brief ministers of health on microcephaly/Zika in the Americas](#) (02/03/2016)

:: [Films with smoking scenes should be rated "R" to protect children from tobacco addiction](#) (02/01/2016)

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

:: [WHO calls for preventive measures against Zika virus disease](#)

New Delhi, 02 February 2016: WHO South-East Asia Regional Director Dr Poonam Khetrpal Singh is urging countries in the Region to strengthen surveillance and take preventive measures against the Zika Virus disease which is strongly suspected to have a causal relation with clusters of microcephaly and other neurological abnormalities.

WHO has declared the recent clusters of microcephaly and other neurological abnormalities reported in the Americas region as a Public Health Emergency of International Concern.

The Zika virus is of concern in the WHO South-East Asia Region as the *Aedes aegypti* mosquito, responsible for its spread, is found in many areas and there is no evidence of immunity to the Zika virus in many populations of the Region.

In the past sporadic Zika virus cases were reported from Thailand and Maldives...

### **WHO European Region EURO**

:: [Preventing cancer - The European code against cancer](#) 04-02-2016

:: [Statement - WHO urges European countries to prevent Zika virus disease spread now](#) 03-02-2016

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

:: [WHO calls on countries of the Region to take steps to prevent Zika virus](#)

Cairo, 31 January 2016 -- As the Zika virus outbreak continues to spread reaching 24 countries in the Americas (as of 27 January), WHO's Regional Director for the Eastern Mediterranean Dr Ala Alwan is calling on governments to work together to keep the Region protected.

### **WHO Western Pacific Region**

*No new digest content identified.*

### **UNAIDS** [to 6 February 2016]

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

04 February 2016

### **On World Cancer Day 2016, UNAIDS calls for greater integration of health services to save women's lives**

On World Cancer Day, UNAIDS calls for greater investment in the prevention and treatment of cervical cancer and underlines the additional benefits to be achieved for women and adolescent girls from a coordinated response to HIV and cervical cancer...

**UNFPA** United Nations Population Fund [to 6 February 2016]

<http://www.unfpa.org/press/press-release>

*Press Release*

3 February 2016

**[UNFPA to Strengthen Support for Health, Safety of Syrian Women, Girls](#)**

UNITED NATIONS, New York – UNFPA, the United Nations Population Fund, is seeking \$107.1 million to meet the urgent needs of more than 5 million women and girls from Syria affected by the world's largest humanitarian crisis. About \$51.93 million of the sum is to keep women and girls inside Syria healthy and safe, while \$55.17 million will be used to tackle the special needs of refugees in neighbouring countries...

**UNDP** United Nations Development Programme [to 6 February 2016]

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

Feb 4, 2016

**[Helen Clark: Statement at the Support Syria and the Region Conference](#)**

Queen Elizabeth II Conference Center - London, United Kingdom

**[Strong Support for resilience at Syria pledging conference](#)**

Feb 4, 2016

UNDP welcomes the major pledges made for responses to the Syria crisis in London today at the conference co-hosted by UK, Germany, Kuwait, Norway and the UN.

**[Helen Clark: Closing Remarks to 2016 ECOSOC Youth Forum](#)**

Feb 2, 2016 United Nations - New York, USA

**[UNDP stands ready to act on Zika virus](#)**

Feb 2, 2016

UNDP stands ready to join an international response, led by the World Health Organization, to an outbreak of microcephaly and other severe neurological abnormalities, which may have been associated with the mosquito-borne Zika virus.

**UN Division for Sustainable Development** [to 6 February 2016]

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

*No new digest content identified.*

**UN Statistical Commission :: UN Statistics Division** [to 6 February 2016]

<http://unstats.un.org/unsd/default.htm>

<http://unstats.un.org/unsd/statcom/commission.htm>

<http://unstats.un.org/sdgs/>

**[United Nations Statistical Commission- 47th Session \(2016\)](#)**

The documents of the forty-seventh session of the Statistical Commission, to be held in New York from 8 - 11 March 2016 are [available here](#).

## 47th session documents

**UNEP** United Nations Environment Programme [to 6 February 2016]

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

05/02/2016

### **Kenya Green Universities Network Launched to Promote Sustainability Practices in Higher Education Institutions**

With 70 public and private universities in Kenya, there is great potential to promote sustainability both through education and practice.

02/02/2016

### **More than a Billion People Depend on Wetlands for Livelihoods, Says Ramsar Convention Secretariat on World Wetlands Day**

Today marks the 45th anniversary of signing the Ramsar Convention on Wetlands.

**UNISDR** UN Office for Disaster Risk Reduction [to 6 February 2016]

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

*No new digest content identified.*

**UN DESA** United Nations Department of Economic and Social Affairs [to 6 February 2016]

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

5 February 2016, New York

### **Young leaders brainstorm on SDG implementation at Youth Forum**

More than 900 young leaders and Government representatives gathered at the United Nations Headquarters in New York this week for the annual ECOSOC Youth Forum. The meetings this year focused on the instrumental role that young people play in the implementation and realization of the 2030 Agenda for Sustainable Development.

1 February 2016, New York

### **At opening of Youth Forum, UN launches new initiative to tackle employment crisis**

As more than 800 young leaders gather in New York for the annual United Nations Economic and Social Council (ECOSOC) Youth Forum, UN officials today launched a new initiative to tackle youth unemployment, making it clear that success in fighting poverty and inequality will largely depend on them being a driving force.

**UNESCO** [to 6 February 2016]

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

*Selected Press Releases/News*

05 February 2016

### **Reporters Without Borders and UNESCO launch new edition of safety guide for journalists in high-risk environments**

04 February 2016

## **Director-General advocates for increased investment in education at London Syria Conference**

04 February 2016

### **900-year-old consecration ceremony held for the Timbuktu mausoleums**

A consecration ceremony of the Timbuktu mausoleums, last held in the 11th century, was held today at the initiative of the local community. This is the final phase of the cultural rebirth of the Timbuktu mausoleums after their destruction by the armed groups who occupied the city in 2012.

02 February 2016

### **250 Syrian refugees to attend secondary school newly rehabilitated by UNESCO in Kawergosk Camp**

**UNODC** United Nations Office on Drugs and Crime [to 6 February 2016]

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

*No new digest content identified.*

**UN-HABITAT** United Nations Human Settlements Programme [to 6 February 2016]

<http://unhabitat.org/media-centre/news/>

Posted February 5, 2016

### **Over 700 applicants to International Design Collaboration for Kenya Competition**

– The application for the International Design Collaboration for Kenya Competition completed midnight Feb 1. The competition saw a large number of applicants (over 700) from all over the world. The applicants will now...

## **Urban Youth Take Action to Implement the 2030 Agenda**

New York, 04, February 2016 – Hundreds of young people gathered at United Nations Headquarters in New York City for the 5th Economic and Social Council (ECOSOC) Youth Forum on February 1-2.

Posted February 4, 2016

### **UN-Habitat to lead in planning Kenya's first Integrated Settlement in Kalobeyei, Turkana County**

Kenya, 04 February 2016 – UN-Habitat has joined in the implementation of Kalobeyei Integrated Socio-Economic Development Program (KISEDPP), a Turkana-based initiative that seeks to facilitate collaboration and coordination between the Kenyan Government, UN agencies, development actors, NGOs,...

Posted February 4, 2016

*[see Week in Review above for more details]*

**FAO** Food & Agriculture Organization [to 6 February 2016]

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

4-02-2016

### **FAO Food Price Index starts 2016 dropping to nearly 7-year low**

The FAO Food Price Index fell in January, slipping 1.9 percent below its level in the last month of 2015, as prices of all the commodities it tracks fell, sugar in particular.

### **[Support for agriculture in Syria critical with massive food insecurity adding to suffering](#)**

As world leaders met in London today to raise funds in support of millions of people affected by the ongoing conflict in Syria, FAO stressed the urgent need to help farming families produce food to meet basic needs.

4-02-2016

### **[UN initiative targets job creation and decent work conditions for young people](#)**

Under the lead of the International Labour Organization (ILO), the Initiative was developed by 19 international organizations that are committed to increasing the impact of youth employment policies and expanding country-level action on decent jobs for young women and men.

1-02-2016

*[see Week in Review above for more details]*

**IFAD** International Fund for Agricultural Development [to 6 February 2016]

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

4 February 2016 –

### **[17-18 February 2016: International leaders gather in Rome for annual IFAD event](#)**

[French](#) | [Italian](#) | [Spanish](#)

3 February 2016 –

### **[UN agency to build climate resilience among pastoralists in Tajikistan](#)**

1 February 2016 –

### **[Benin and IFAD work together to boost food and nutrition security while creating jobs for young people](#)**

[French](#)

**ILO** International Labour Organization [to 6 February 2016]

<http://www.ilo.org/global/about-the-ilo/newsroom/news/lang--en/index.htm>

*Global Initiative on Decent Jobs for Youth*

### **[Guy Ryder announces Global Youth Initiative](#)**

01 February 2016

...The Global Initiative on Decent Jobs for Youth was launched at UN headquarters today by Guy Ryder, the Director-General of the International Labour Organization (ILO), at the opening of the UN's annual Youth Forum.

In describing the Initiative, Ryder stated that it is a unique partnership with governments, the UN system, businesses, academic institutions, youth organizations and other groups to scale-up action to create new opportunities and avenues for quality employment in the global economy and “assist young people in developing the skills needed to compete in today’s job market”...

*Blog*

### **[How do we know if we're really helping migrant workers?](#)**

05 February 2016

The ILO GMS Triangle project has provided counseling and support services to over 60,000 migrant workers across the Greater Mekong Subregion and Malaysia. But understanding if those services were really helping them to realize their rights proved easier said than done. In our latest blog post, researcher Ben Harkins explains his approach.

**ICAO** International Civil Aviation Organization [to 6 February 2016]

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

5/2/16

**[ICAO Council President Aliu, UNSG Ban Ki-moon, Explore Opportunities to Assist African Member States](#)**

4/2/16

**[ICAO Council President Advances Aviation Cooperation in Africa](#)**

**IMO** International Maritime Organization [to 6 February 2016]

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

03/02/2016

**[UN Secretary-General visits IMO](#)**

Secretary-General Ban commends IMO for its contribution to the fight to combat climate change.

**WMO** World Meteorological Organization [to 6 February 2016]

<https://www.wmo.int/media/news>

1 February 2016

**[UAE Awards for Rain Enhancement Science](#)**

Research groups from Japan, the United Arab Emirates and Germany have won the US\$5 million grant awarded by the inaugural edition of the UAE Research Program for Rain Enhancement Science.

This research program was launched by the UAE's Ministry of the Presidential Affairs (MOPA) and is managed by the UAE's National Center for Meteorology and Seismology (NCMS). The program offers an annual grant of US\$5 million to be shared among up to five winning proposals for a period of three years.

**UNIDO** United Nations Industrial Development Organization [to 6 February 2016]

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

Thursday, 04 February 2016

**[On visit to Rwanda, UNIDO Director General meets President Kagame, signs country programme agreement](#)**

**UNWTO** World Tourism Organization [to 6 February 2016]

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

*No new digest content identified.*

**ITU** International Telecommunications Union [to 6 February 2016]

[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.*

**WIPO** World Intellectual Property Organization [to 6 February 2016]

<http://www.wipo.int/pressroom/en/>

*No new digest content identified.*

**CBD** Convention on Biological Diversity [to 6 February 2016]

<http://www.cbd.int/press-releases/>

2016-02-01

**Statement by Mr. Braulio Ferreira de Souza Dias, CBD Executive Secretary, on the occasion of the Expert Group Meeting on Article 10 of the Nagoya Protocol on Access and Benefit-Sharing, Montreal, Canada, 1 - 3 February 2016**

...As you are all aware, the Nagoya Protocol on Access to Genetic Resources and the Fair and Equitable Sharing of Benefits Arising entered into force just over one year ago, on 12 October 2014. The Protocol supports the further implementation of one of the three objectives of the Convention: the fair and equitable sharing of benefits arising from the utilization of genetic resources, including by appropriate access to genetic resources.

In October 2014, when the Protocol entered into force, it had 51 Parties, but the number of ratifications continues to grow, and the Protocol now has 70 Parties, with more ratifications expected in the coming months. Our objective is to reach 100 ratifications by the time of the second meeting of the Parties to the Protocol, which will be held in Cancun, Mexico, in December of this year.

The theme for the meetings in Mexico in December is "Integration of biodiversity for well-being". This is linked to this year's International Day for Biological Diversity on May 22<sup>nd</sup> when we will be celebrating biodiversity and its role in sustaining people and their livelihoods. ABS is an important component of this theme. Maintaining the diversity of our genetic resources and their associated traditional knowledge is critical to both the development of new products and services that can improve all our lives as well as to the people who already depend on genetic diversity and traditional knowledge for their day-to-day well-being. The equity dimension of access to genetic resources and associated traditional knowledge in exchange for the sharing of benefits also holds great potential to contribute to sustainable development...

.....

**US Department of State** [to 6 February 2016]

<http://www.state.gov/r/pa/prs/ps/2016/index.htm>

-02/05/16

**Ambassador Jenkins Promotes Professional Exchange in Support of the Global Health Security Agenda;**

Office of the Spokesperson; Washington, DC

02/04/16

## **New U.S. Assistance to Respond to Syria Crisis;**

Office of the Spokesperson; Washington, DC

-02/04/16

## **Remarks at the Syria Donors Conference;**

Secretary of State John Kerry; London, United Kingdom

**USAID** [to 6 February 2016]

<http://www.usaid.gov/news-information/press-releases>

February 1, 2016

## **USAID Announces Awards to Support Schools and Hospitals Abroad**

The U.S. Agency for International Development's Office of American Schools and Hospitals Abroad (USAID/ASHA) announced \$23 million in funding to U.S. organizations and their overseas partners to support construction projects and to purchase equipment for 15 hospitals and clinics, 6 secondary schools, 16 universities, and 1 library. This year's projects, spanning 25 countries, are funded through a competitive annual award and directly support schools, libraries and medical centers outside the United States that advance innovation and best practices and build bridges between citizens of the United States and other countries.

**DFID** [to 6 February 2016]

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

4 February 2016

## **UK to invest an extra £1.2 billion supporting Syria and the region**

DFID and Number 10 Press release

## **UK partners with Jimmy Carter to eradicate Guinea Worm**

3 February 2016 DFID Press release

**ECHO** [to 6 February 2016]

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

04/02/2016

## **EU pledges over €3 billion for the Syria crisis at London event**

At the Supporting Syria and the Region conference which took place in London today, the EU and its Member States pledged over €3 billion to respond to the Syria crisis. The pledge triples the EU support offered at the last donor conference...

.....

**African Union** [to 6 February 2016]

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

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

February 05, 2016

## **Chad becomes 30th AU Member State to ratify the Protocol on the establishment of the African Court on Human and Peoples' Rights**

February 04, 2016

**5th Intergenerational Dialogue: The responsibilities of youths towards the development of the continent reaffirmed**

**African Integration and Development Review, Vol.8 No.2, July 2015**

**ASEAN** Association of Southeast Asian Nations [to 6 February 2016]

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

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

**ASEAN Leaders Programme Demonstrates True Potential of the ASEAN Community**

JAKARTA, 1 February 2016 – Demonstrating how the potential benefits of the ASEAN Community are more than just economic, a new initiative has been launched to bring together senior leaders from all ten ASEAN countries. The ASEAN Leaders Programme is being launched to bring together 70 senior leaders from across the ASEAN, from all sectors and walks of life, to work on a challenge relevant to the region. The inaugural programme will be held in Singapore in May 2016 and will pose the challenge: "What makes a city smart?"

The programme will act as a catalyst, bringing together leaders from the world of finance, manufacturing, civil service, statutory bodies, academia, the not-for-profit sector and more, to spark a robust exchange of ideas. It aims to help leaders build strong connections, share knowledge and develop the Cultural Intelligence needed to grow ASEAN both in the context of its cities and as a region...

**European Union** [to 6 February 2016]

<http://europa.eu/rapid/search-result.htm?query=18&locale=en&page=1>

*[We generally limit coverage to regional and global level initiatives]*

**Questions and Answers about Female Genital Mutilation/Cutting (FGM/C)**

Date: 05/02/2016

European Commission - Fact Sheet Brussels, 5 February 2016 Female genital mutilation consists of the (partial or complete) removal of the external female genitalia, and the infliction of other injuries to the female genitalia for no medical reasons. The EU contributes to eliminating FGM/C globally.

**EU support in response to the Syrian crisis**

Date: 05/02/2016

European Commission - Fact Sheet Brussels, 5 February 2016 The Syrian crisis has become the world's worst humanitarian disaster. The EU is the leading donor in the international response to the Syrian crisis, with over €5 billion from the EU and Member States collectively in humanitarian, development, economic and stabilisation...

**Statement by European Commissioner for Humanitarian Aid and Crisis Management, Christos Stylianides, on new mass displacements in Aleppo, Syria**

Date: 05/02/2016

European Commission - Statement Brussels, 5 February 2016 Yesterday the international community came together in London to express its solidarity with the people of Syria and

pledged more than \$10 billion in support of the people of Syria suffering from nearly five years of war.

### **Joint Statement on the International Day against Female Genital Mutilation**

Date: 05/02/2016

European Commission - Statement Brussels, 5 February 2016 High Representative/Vice-President Federica Mogherini and Commissioners Věra Jourova and Neven Mimica call for zero tolerance against Female Genital Mutilation. Ahead of the International Day of Zero Tolerance against Female Genital Mutilation (6 February 2016) High Representative of the Union for Foreign Affairs...

### **EU pledges more than €3 billion for Syrians in 2016 at the London conference**

Date: 04/02/2016

European Commission - Press release Brussels, 4 February 2016 The European Union and its Member States pledged today more than €3 billion to assist the Syrian people inside Syria as well as refugees and the communities hosting them in the neighbouring countries for the year 2016.

### **EU-Turkey Cooperation: Commission welcomes Member State agreement on Refugee Facility for Turkey**

Date: 03/02/2016

European Commission - Press release Brussels, 3 February 2016 EU-Turkey Cooperation: Commission welcomes Member State agreement on Refugee Facility for Turkey The European Commission today welcomed the agreement by Member States on the details of the €3 billion Refugee Facility for Turkey, which the Commission proposed on 24 November in...

### **Commission adopts Schengen Evaluation Report on Greece and proposes recommendations to address deficiencies in external border management**

Date: 02/02/2016

European - Press release Commission Strasbourg, 2 February 2016 Commission adopts Schengen Evaluation Report on Greece and proposes recommendations to address deficiencies in external border management Following a positive opinion by the Schengen evaluation committee on Friday, the College of Commissioners has today adopted the Schengen Evaluation Report on Greece...

### **Commission presents Action Plan to strengthen the fight against terrorist financing**

Date: 02/02/2016

European - Press release Commission Strasbourg, 2 February 2016 The European Commission is today presenting an Action Plan to strengthen the fight against the financing of terrorism. The recent terrorist attacks in the European Union and beyond demonstrate the need for a strong coordinated European response to combatting terrorism.

**OECD** [to 6 February 2016]

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

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

4-February-2016

### **Political finance needs tighter regulation and enforcement**

Many economically advanced countries are failing to fully enforce regulations on political party funding and campaign donations or are leaving loopholes that can be exploited by powerful private interest groups, according to a new OECD report.

### **Organization of American States (OAS)** [to 6 February 2016]

[http://www.oas.org/en/media\\_center/press\\_releases.asp](http://www.oas.org/en/media_center/press_releases.asp)

*No new digest content identified.*

### **Organization of Islamic Cooperation (OIC)** [to 6 February 2016]

<http://www.oic-oci.org/oicv2/news/>

03/02/2016

### **Madani stresses the importance of multiculturalism to counter violence and intolerance in Australia**

The Secretary General of the Organization of Islamic Cooperation (OIC), Iyad Ameen Madani stressed in his meetings with officials in Australia on the importance of multiculturalism in countering violence and intolerant discourse...

### **Group of 77** [to 6 February 2016]

<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]*

Statement on behalf of the Group of 77 and China by H.E. Mr. Virachai Plasai, Ambassador and Permanent Representative of the Kingdom of Thailand to the United Nations, at the Fifty-fourth Session of the Commission for Social Development on Agenda Item 3 (a) **Rethinking and strengthening social development in the contemporary world (New York, 3 February 2016)**

### **UNCTAD** [to 6 February 2016]

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

*No new digest content identified.*

### **World Trade Organisation** [to 6 February 2016]

[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]*

*No new digest content identified.*

### **IPU Inter-Parliamentary Union** [to 6 February 2016]

<http://www.ipu.org/english/news.htm>

3 FEBRUARY 2016

### **Halting spread of WMDs in Africa**

IPU and the Parliament of Côte d'Ivoire are organizing a workshop to deliver vital information on how parliaments can stop the spread of weapons of mass destruction (WMDs). The [event](#) will give MPs from across Africa practical training on the risks posed by WMDs, the role of UN Security Council Resolution 1540 in dealing with the threat, and the pivotal role of parliaments in implementing the resolution. It is being organized in partnership with the 1540 Committee, which oversees implementation of the resolution, and the UN Office for Disarmament Affairs. WMDs are most likely to spread in areas of fighting and terrorist activity, making this a key issue for a number of countries across Africa which are dealing with the challenges of conflict and terror groups operating across national borders.

[Resolution 1540](#) (PDF) obliges governments to implement effective laws, rules and regulations to prevent terrorists and other groups from acquiring WMDs. The seminar will include information on practical steps to achieving this, such as closing loopholes in national laws and regulations, and will examine the strengths and weaknesses of existing laws. It aims to strengthen parliaments' ability to assess and lower the risks posed by WMDs, and to trigger informal cross-border networks and contacts between the MPs who attend...

### **International Criminal Court (ICC)** [to 6 February 2016]

[http://www.icc-cpi.int/en\\_menus/icc/Pages/default.aspx](http://www.icc-cpi.int/en_menus/icc/Pages/default.aspx)

*No new digest content identified.*

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### **World Bank** [to 6 February 2016]

<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's Largest Concentrated Solar Plant Opened in Morocco**

Ouarzazate, February 4, 2016 - Today, Morocco launches the first phase of the largest concentrated solar power (CSP) plant in the world. When fully operational, the plant will produce enough energy...

Date: February 4, 2016 Type: Press Release

#### **World Bank President: Support to the Middle East and North Africa Will Amount to US\$20 billion in the Next Five Years**

LONDON, February 4, 2016—World Bank Group President Jim Yong Kim today announced that the World Bank Group will be tripling its commitment to the Middle East and North Africa (MENA) region in the...

Date: February 4, 2016 Type: Press Release

#### **Statement by World Bank Group President Jim Yong Kim at the Syria Conference**

I'd like to thank our host, the UK government, and the co-organizers Kuwait, Germany, Norway, and the United Nations, for bringing us here today. There is no shortage of reminders of the full cost of what...

Date: February 4, 2016 Type: Speeches and Transcripts

#### **Economic Effects of War and Peace in the Middle East and North Africa**

WASHINGTON February 4, 2016— The World Bank's latest Quarterly Economic Brief for MENA has revised estimates of economic growth in MENA, at 2.6 percent in 2015, falling short of expectations from...

Date: February 3, 2016 Type: Press Release

### **Promoting Competition Could Lift South African Growth & Boost Poverty Alleviation**

PRETORIA, February 2, 2016 — In times of weak growth and limited fiscal resources government policies that promote greater domestic competition and improve the regulatory environment could lift growth...

Date: February 2, 2016 Type: Press Release

**IMF** [to 6 February 2016]

<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]*

February 05, 2016

### **Press Release: IMF Executive Board Discusses the 2015 Diversity and Inclusion Annual Report**

February 05, 2016

### **Remarks by IMF Deputy Managing Director, Mr. Mitsuhiro Furusawa — London Conference on Supporting Syria and the Region**

February 05, 2016

### **The Role of Emerging Markets in a New Global Partnership for Growth by IMF Managing Director Christine Lagarde**

By Christine Lagarde, Managing Director, International Monetary Fund  
University of Maryland, February 4, 2016

**African Development Bank Group** [to 6 February 2016]

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

04/02/2016

### **World's largest concentrated solar power plant in Morocco showcases AfDB's New Deal on Energy for Africa**

- On Thursday, February 4, 2016, King Mohammed VI of Morocco inaugurated the first phase of the country's Noor Ouarzazate Concentrated Solar Power (CSP) plant, ushering in a new era for Africa's sustainable energy future.

### **AfDB approves US \$16.5 million for Institutional Support Project for Good Governance in Tanzania**

04/02/2016 - The Board of Directors of the African Development Bank (AfDB) approved on Wednesday, February 3 in Abidjan a loan of US \$16.5 million to finance the Tanzania Institutional Support Project for Good Governance (ISPGG III). The objective of this project is to support the Government of Tanzania in promoting inclusive growth and macroeconomic stability by enhancing economic and financial governance through more effective public financial management and improved business environment.

## **AfDB Group approves US \$91-million investment in water supply and sanitation for Uganda**

04/02/2016 - In the African Development Bank Group's bid to work for a continent free of poverty and water-borne diseases, the Board of Directors approved on Wednesday, February 3 in Abidjan a US \$91-million loan to Uganda, for the provision of clean water and improved sanitation in the country.

### **Asian Development Bank** [to 6 February 2016]

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

02 Feb 2016 | News Release

## **Asian Development Bank Institute Ranked Second Among World's Government-Affiliated Think Tanks**

TOKYO, JAPAN — The Asian Development Bank Institute (ADBI) was ranked second among the world's government-affiliated think tanks, after the World Bank's Development Research Group. The 2015 Global Go To Think Tank Index Report, produced by the University of Pennsylvania's Think Tanks and Civil Societies Program (TTCSP), is the result of a survey of 6,846 think tanks and 4,750 journalists, policy makers, public and private donors, and functional and regional area specialists. ADBI also ranked second in 2014...

### **Asian Infrastructure Investment Bank** [to 6 February 2016]

<http://www.aiib.org/html/NEWS/>

February 5, 2016

## **Asian Infrastructure Investment Bank appoints 5 Vice-Presidents**

BEIJING,— The Asian Infrastructure Investment Bank (AIIB) has today announced the following appointments:

- Sir Danny Alexander to the position of Vice President, Corporate Secretary;
- Dr. Kyttack Hong to the position of Vice President, Chief Risk Officer;
- Dr. D.J. Pandian to the position of Vice President, Chief Investment Officer;
- Dr. Joachim von Amsberg to the position of Vice President, Policy and Strategy; and
- Dr. Luky Eko Wuryanto to the position of Vice President, Chief Administration Officer.

Announcing the appointments, AIIB's President Jin Liqun said "I am delighted to announce the appointment of the AIIB's senior leadership team. This is an exceptionally strong and committed group who bring wide and varied experience and a wealth of expertise that will serve the Bank well as it commences operations. I look forward to working closely with them in the years ahead."

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## **:: INGO/Consortia/Joint 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 announcements, programs events or appeals, and generally not include content which is primarily photo-documentation or video in format.*

**Amref Health Africa** [to 6 February 2016]

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

Published: 01 February 2016

**Huge boost for innovative health care in Kenya**

By Carolyn Khamala

Amref Health Africa and PharmAccess will receive €9,950,000 from the Dream Fund of the Dutch Postcode Lottery. The Dream Fund grants funds trailblazing 'dream' programmes that catalyse structural change; in this case that programme is Amref Health Africa's and PharmAccess's M-Hakika, which makes money and quality healthcare accessible to women in Kenya directly via their mobile phone. M-Hakika cleverly combines healthcare knowledge, quality and financing, all through the mobile telephone.

The Postcode Lottery is the third largest private philanthropist in the world and it will be donating a record-breaking €328 million to charity in 2016. Amref Health Africa and PharmAccess are grateful to the Dutch Postcode Lottery and its 2.7 million loyal participants for the crucial support for this innovative programme...

**Aravind Eye Care System** [to 6 February 2016]

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

*No new digest content identified.*

**BRAC** [to 6 February 2016]

<http://www.brac.net/#news>

*No new digest content identified.*

**CARE International** [to 6 February 2016]

<http://www.care-international.org/>

5th Feb 2016

**'Now turn pledges into action' - civil society verdict on Supporting Syria donors' conference**  
**Syria**

An international coalition of over 30 non-governmental organisations today welcomed the ambition demonstrated at the 'Supporting Syria And the Region' donor conference in London to increase the scale and scope of the humanitarian response to the Syria crisis, but said that overall pledges for 2016 fell more than \$3 billion short of what was urgently needed. The NGOs, including Oxfam, Sawa Aid and Development, and Islamic Relief, applauded the generosity of some donors while encouraging others also to pledge their fair share. They also warned that many Syrians would continue to suffer unless more was done to ensure their protection inside and outside the country, and an end to the violence in Syria...

**Zika emergency highlights 'double-injustice' for world's poor women**

5th Feb 2016 USA

As concerns grow about the spread of the Zika virus worldwide, the humanitarian organization CARE says the medical emergency disproportionately affects poor women who bear the brunt of the disease and have the least resources to fight it.

**Casa Alianza** [to 6 February 2016]

**Covenant House** [to 6 February 2016]

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

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

Friday, February 5, 2016

### **Homeless Young People of New York, Overlooked and Underserved**

As New York City prepares for an annual census of the homeless population, some groups are trying to make sure young people are not missed. This New York Times article looks at ways Covenant House and fellow service providers are offering desperately needed services.

**Clubhouse International** [to 6 February 2016]

<http://www.clubhouse-intl.org/news.html>

[undated]

### **Phoenix Clubhouse in Hong Kong becomes 11th Clubhouse International Training Base!**

Clubhouse International is pleased to announce that we have added Phoenix Clubhouse in Hong Kong, People's Republic of China, as the 11th International Training Base in our worldwide network of Training Bases!

Phoenix Clubhouse is a longstanding Accredited Clubhouse, and for the last decade has served as a designated Orientation Site for new groups seeking to start Clubhouses in Hong Kong and mainland China. Phoenix Clubhouse is a high quality Clubhouse under the direction of Anita Chan. Anita has many years experience working in Clubhouses. The auspice organization, Queen Mary Hospital, has provided excellent leadership from Dr. Michael Wong, Mary Chu, Dr. Eileena Chui, and June Chao. The Friends of Phoenix Clubhouse Advisory Committee and founding Director, Eva Yau (now a Clubhouse International Consultant in China) are very supportive of this new initiative. We are thrilled to now have this new potential to bring Accredited Clubhouses to more Chinese-speaking communities, with Phoenix Clubhouse serving as our newest International Training Base. Visit their website at [www.phoenixclubhouse.org](http://www.phoenixclubhouse.org).

**Danish Refugee Council** [to 6 February 2016]

<https://www.drc.dk/news>

04.02.16

### **Going to Europe: A Syrian Perspective**

The Danish Refugee Council in the Middle East have conducted several informal discussion groups with Syrian refugees in Jordan, Lebanon and Turkey to canvass refugees' perceptions and attitudes about going to Europe. Read about the findings and the full report here - and a link to how DRC think, the international community should address this.

*Key findings from the report:*

:: The preferred durable solution amongst Syrian refugees is safe and dignified return to a Syria that is free of conflict, though many are realizing that this option may not be possible for some time

:: Conditions in Jordan, Lebanon and Turkey are the main driver for Syrians to consider onward movement, compounded by a prevailing sense of the protracted nature of the conflict in Syria. The pursuit of viable livelihoods (accompanied by the legal right to work), education, medical care, and increased aid are all motivations for the journey to Europe.

:: Syrian refugees have varied and sometimes idealized expectations of life in Europe. Information is passed primarily by word-of-mouth through community connections and is not always reliable.

:: The risks and challenges of the journey to Europe are known to Syrian refugees, though for many these risks are considered to be "worth it."

:: For some Syrians, concerns about cultural differences in Europe and the distance from Syria make the trip an undesirable option.

:: Syrian refugees are spending considerable sums of money, including going into debt, to take boat journeys to Europe

The information compiled in this report draws on over 50 focus group discussions and 444 household interviews with men and women in Lebanon, Turkey and Jordan conducted in late 2015. Syrian refugees are the focus of this research.

[To read the full report click here](#)

**ECPAT** [to 6 February 2016]

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

Posted on 02/02/2016, 12:16

**[Interagency Working Group adopts global terminology guidelines for the sexual exploitation and sexual abuse of children](#)**

An Interagency Working Group composed of the UN Special Representative to the Secretary General on Violence against Children, the UN Special Rapporteur on Sale of Children, Child Prostitution and Child Pornography, ECPAT International and 13 other international organisations and agencies active in the field of children's rights, took an important step to strengthen collaboration and address sexual exploitation and sexual abuse of children by adopting new global terminology guidelines.

**Fountain House** [to 6 February 2016]

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

*No new digest content identified.*

**Handicap International** [to 6 February 2016]

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

*No new digest content identified.*

**Heifer International** [to 6 February 2016]

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

Tuesday, Feb. 02, 2016

## **Heifer International Weekly**

**HelpAge International** [to 6 February 2016]

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

Posted: 01 February 2016

### **Long term funding needed for Syria, including older people, says HelpAge International**

Heads of state arriving in London this week for a high-level donor conference on Syria need to commit to long-term humanitarian funding for vulnerable people in Syria, including older people, says HelpAge International.

**IRC International Rescue Committee** [to 6 February 2016]

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

04 Feb 2016

### **"Credit where it's due, now let's turn pledges into action" says David Miliband on conclusion of Syria Conference**

01 Feb 2016

### **A million jobs needed for Syrian refugees to make 'life worth living' in the region, says humanitarian agency**

**ICRC** [to 6 February 2016]

<https://www.icrc.org/en/whats-new>

05-02-2016 | Article

### **Lebanon: ICRC and Rafik Hariri University Hospital in partnership to improve access to health care**

Beirut (ICRC) — The International Committee of the Red Cross (ICRC), the Rafik Hariri University Hospital in Beirut and the Lebanese Ministry of Health today signed a memorandum of understanding that will set up a new hospital ward for reconstructive surgery...

### **Syria: How much longer will the fighting rage?**

Before the war broke out, Syria was a middle-income country. But now, its development has been thrown back perhaps a generation, if not more.

04-02-2016 | Article

### **Syria Pledging Conference: ICRC President's call to the international community**

Speech given by Peter Maurer, President of the International Committee of the Red Cross, at the Syria Donors Conference 2016 in London.

04-02-2016 | Article

### **Syria: Food and medicine reach besieged town of Moadamiyeh**

Joint teams of the International Committee of the Red Cross (ICRC) and the Syrian Arab Red Crescent (SARC) have managed to deliver food and hygiene items for more than twelve thousand people in the besieged town of Moadamiyeh near Damascus.

04-02-2016 | Article

### **The ICRC in Africa - key operations**

Dropping food to hungry people in remote areas of South Sudan. Treating the injured in Mali. Supporting hospitals in Libya. All over Africa, the ICRC is helping people affected by war and other violence.

04-02-2016 | Article

### **Nigeria: ICRC helps families recover as they return from displacement**

Thousands fled fighting in late 2014 between the Nigerian army and the armed opposition in Adamawa State, north-east Nigeria. Many homes were burned to the ground.

03-02-2016 | Video

### **Lebanon: Red Cross rescues snowbound Syrian families in mountains**

During the harsh winter months, the treacherous journey on foot from Syria into Lebanon is fraught with even more danger than usual, as snow and ice leave people stranded with no food or shelter. Alaa Al Nabaa is head of the Lebanese Red Cross

01-02-2016 | Video

### **Myanmar: Helping people affected by floods – six months on**

Monsoon rains, coupled with high winds and heavy rain from Cyclone Komen, caused devastating floods and landslides in several parts of Myanmar in July 2015. Together with the Myanmar Red Cross (MRCS), we focused our relief efforts on helping people

01-02-2016 | Article

### **Syria: Desperate population needs regular unimpeded aid, whatever talks outcome**

Geneva/Damascus (ICRC) - The parties battling each other in Syria's nearly 5-year-old conflict must allow a regular flow of aid to reach all those civilians suffering amid the fighting, whatever the outcome of peace talks getting under way in Geneva,

30-01-2016 | News release

**IRCT** [to 6 February 2016]

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

*No new digest content identified.*

**Islamic Relief** [to 6 February 2016]

<http://www.islamic-relief.org/category/news/>

February 4, 2016

### **World leaders must deliver for Syrian refugees and host countries**

*Pressure has been placed on world leaders to support Syrian refugees and the countries hosting them at a high-level conference held in London.*

A global coalition of more than 90 humanitarian and human rights groups, including Islamic Relief, say world leaders must commit to an ambitious and transformational new multi-billion-dollar deal for both the refugees and host countries...

**MSF/Médecins Sans Frontières** [to 6 February 2016]

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

*Press Releases*

**MSF Study in Niger Shows No Significant Benefit from Routine Use of Antibiotics to Treat Malnutrition**

February 03, 2016

The routine use of antibiotics in the treatment of severe acute malnutrition has minimal impact on the likelihood of recovery, according to a major study of more than 2,000 children by the medical humanitarian organization Doctors Without Borders/Médecins Sans Frontières (MSF) and its research arm Epicentre, published today in The New England Journal of Medicine.

*Press release*

**There's Still Time to Stop the TPP from Cutting Off the Critical Lifeline of Affordable Generic Medicines**

February 03, 2016

New York—As representatives from the United States and 11 other Pacific Rim countries gather in New Zealand Thursday to sign the Trans-Pacific Partnership (TPP) trade agreement, the fight to protect access to medicines in TPP countries is intensifying at the national level, with legislative processes starting that will determine if the deal is finally ratified and implemented.

**Mercy Corps** [to 6 February 2016]

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

*Press releases*

**Syria: Syria's Aleppo City on the Verge of Siege**

February 4, 2016 Portland, Ore.— Intensified fighting and air strikes in and around Aleppo City in Syria have cut off the main – and most direct – humanitarian route into that city, according to the global organization Mercy Corps. Since yesterday (Wednesday), the organization's operations in northern Syria have effectively been sliced in half. "We are cut off from Aleppo City," says David Evans, Mercy Corps' regional program director for the Middle East. "It feels like a siege of Aleppo is about to begin."

*Press releases*

**Mercy Corps Pilots Refugee Cash Assistance Program in Serbia**

February 3, 2016 Presevo, Serbia – The global organization Mercy Corps has launched a new pilot program to distribute MasterCard prepaid debit cards to an estimated 5,600 eligible refugees traveling through Serbia, in partnership with the Serbian Ministry of Labor. Families will receive cards of 210 Euros, and individuals will receive cards of 70 Euros, which can be used to purchase what they need most. It is the first such program in the region to use an international payment mechanism to help the tens of thousands of refugees and migrants seeking haven in Europe.

**Operation Smile** [to 6 February 2016]

<http://www.operationssmile.org/press-room>

**Program Schedule**

*Here's what we're doing worldwide to make a difference in the lives of children who deserve every opportunity for safe surgical care.*

**OXFAM** [to 6 February 2016]

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

5 February 2016

**Civil society verdict on London Conference on Syria: 'Now turn pledges into action'**

Oxfam and more than 30 non-governmental organizations have welcomed the ambition demonstrated at the 'Supporting Syria And the Region' donor conference in London to increase the scale and scope of the humanitarian response to the Syria crisis, but said that overall pledges for 2016 fell more than \$3 billion short of what was urgently needed.

**Norwegian Refugee Council** [to 6 February 2016]

<http://www.nrc.no/>

*London conference*

**What's driving Syrian refugees to despair?**

(01.02.2016)

As world leaders and international donors meet in London this week to pledge money for the Syria crisis, millions of refugees across the Middle East are being driven into further despair. The Norwegian Refugee Council is publishing new data showing the protection failures with regard to Syrian refugees in Lebanon and Jordan.

Among the figures showing the growing desperate situation for refugees we find that:

:: In Lebanon, an estimated 70 per cent of the refugee population, that is more than 700,000 people, has lost its legal stay

:: In Jordan, some 250,000 Syrian refugees in host communities are still estimated to be without an updated government registration

:: 30 per cent of Syrian refugee children in Jordan do not have birth certificates

:: More than 1 million people - or 7 out of 10 refugees from Syria - now live in poverty across Jordan and Lebanon

:: In Jordan, 50 per cent of Syrian refugees surveyed by NRC at the end of 2015 said that they were intending to leave Jordan because they saw no future...

**Pact** [to 6 February 2016]

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

February 4, 2016

**Pact Institute appoints new executive director**

Pact is pleased to announce that it has appointed Natasha Sakolsky to the role of executive director of Pact Institute, a Pact subsidiary that serves poor and marginalized communities across the world.

Sakolsky brings more than two decades of experience in international development and public health, with expertise in strategic planning, organizational design, operations and change management, resource mobilization and partnership development. She has worked extensively abroad, especially in Africa, in areas including HIV/AIDS, reproductive health and youth programming...

Pact Institute was established in 1998 to pursue strategic objectives that benefit Pact and the people it serves, namely through innovation, the exploration of new approaches and

partnerships, and funding diversification. Like Pact, Pact Institute implements development programs around the world that are improving people's lives in meaningful, lasting ways...

**Partners In Health** [to 6 February 2016]

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

Feb 05, 2016

**Faster, Better Care for Breast Cancer in Rwanda**

Butaro Cancer Center of Excellence pilots an early detection program

Feb 04, 2016

**The Path of a Breast Cancer Patient in Haiti**

Women diagnosed with breast cancer feel the news like a heavy blow, yet they can take comfort in knowing they will receive the best cancer care in the country at University Hospital in Mirebalais.

Feb 04, 2016

**How to Stop Epidemics: Spend Billions to Save Trillions**

Without proper investment in health systems, global health experts forecast future pandemics.

**PATH** [to 6 February 2016]

<http://www.path.org/news/index.php>

*No new digest content identified.*

**Plan International** [to 6 February 2016]

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

*Press releases*

**WHO declaration a major step in tackling Zika**

1 February 2016

As the number of cases of the Zika virus continues to rise in Latin America and the Caribbean, Plan International sees the World Health Organisation's declaration of a global emergency as an important step in tackling the outbreak.

**Save The Children** [to 6 February 2016]

[http://www.savethechildren.org/site/c.8rKLIXMGIpI4E/b.9357111/k.C14B/Press Releases 2016 /apps/nl/newsletter2.asp](http://www.savethechildren.org/site/c.8rKLIXMGIpI4E/b.9357111/k.C14B/Press_Releases_2016/apps/nl/newsletter2.asp)

February 4, 2016

**Risk of a Lost Generation in Syria as More Than 3,000 Children Flee Their Homes Every Day**

As a major Syria conference starts today in London, new analysis from Save the Children reveals that since the conflict started in March 2011, an average of 3,245 children have been forced to leave their homes every day...

**SOS-Kinderdorf International** [to 6 February 2016]

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

*No new digest content identified.*

**Tostan** [to 6 February 2016]

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

February 3, 2016

**[Press Release by Senegal's National Committee for the Abandonment of Female Genital Cutting: Announcing February 6th Event](#)**

DAKAR — Senegal, like many other countries around the world, will be celebrating the International Day of Zero Tolerance for Female Genital Mutilation on Saturday, February 6. In partnership with the department of the Minister of Women, Family and Children; the National Committee for the Abandonment of Female Genital Cutting (FGC); the joint UNFPA-UNICEF and Tostan program has organized a social mobilization event in Keur Simbara, in the region of Thiès. Participation at the event will include members of Bambara, Mandinka, Pulaar, Soninké, and Diola communities.

The community of Keur Simbara is a pioneer in the movement to abandon FGC in Senegal. Well known for the work of the community's Imam, Demba Diarwa, who traveled to 347 villages to raise awareness about the issue...

February 2, 2016

**[Rose Diop Recounts Her Journey from Unlikely Beginnings to Tostan Senegal's FIRST Female National Coordinator](#)**

Rose Diop, the newly selected National Coordinator of Tostan Senegal, is a walking example of Tostan's most fundamental principles—respect, collectivity, and creating a vision for a better future. She will go down in history as the first woman to serve as Regional Coordinator, and now the first female National Coordinator, as Rose continues to add to her robust legacy at Tostan...

**Women for Women International** [to 6 February 2016]

<http://www.womenforwomen.org/press-releases>

*No new digest content identified.*

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**ChildFund Alliance** [to 6 February 2016]

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

*No new digest content identified.*

**CONCORD** [to 6 February 2016]

<http://www.concordeurope.org/news-room>

*[European NGO confederation for relief and development]*

*No new digest content identified.*

**Disasters Emergency Committee** [to 6 February 2016]

<http://www.dec.org.uk/media-centre>

*[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.*

**The Elders** [to 6 February 2016]

<http://theelders.org/news-media>

*Press release 4 February 2016*

**The Elders urge a renewed commitment to the peace process in Syria**

While The Elders welcome the outcome of the Syria Donor Conference in London, a determined and sustained effort to attain peace is the only way to protect the Syrian people.

**END Fund** [to 6 February 2016]

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

Feb 02, 2015

**Gates Annual Letter's Big 2030 Health Goals: How Do We Get Them Done?**

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

**Gavi** [to 6 February 2016]

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

05 February 2016

**Study shows near elimination of Hib disease in Kilifi region of Kenya after introduction of vaccine**

*Welcome Trust and Gavi funded research also shows Hib booster not needed for long-term protection.*

Geneva - Research funded by the Wellcome Trust and Gavi, the Vaccine Alliance has provided compelling new evidence that three doses of Haemophilus influenzae type b (Hib) vaccine can give children in low-income countries long-lasting protection against life-threatening disease..

Published in the journal Lancet Global Health today, the study was carried out in the Kilifi region of Kenya over a period of 15 years...

**Global Fund** [to 6 February 2016]

<http://www.theglobalfund.org/en/news/>

*News*

**Grant to Fight TB in Southern Africa's Mining Sector**

PRETORIA, February 5, 2016 - The Global Fund to Fight AIDS, Tuberculosis and Malaria and a Regional Coordinating Mechanism (RCM) representing a group of 10 Southern African countries today signed a landmark grant to pioneer innovative models to reduce high rates of TB in the mining sector.

The Grant will support potentially-transformative interventions in Botswana, Lesotho, Malawi, Mozambique, Namibia, South Africa, Swaziland, Tanzania, Zambia and Zimbabwe. The World Bank Group serves as the Secretariat for the RCM while the Wits Health Consortium acts as the Principal Recipient of the Grant.

"Gold miners in southern Africa have some of the highest rates of TB infection in the world, we are committed to investing vigorously to reduce rates as much as possible," said Mark Dybul, Executive Director of the Global Fund. "To end TB as an epidemic, we have to be effective here."...

### **Global Fund Supports Health Investment in Botswana**

03 February 2016

GABORONE, Botswana - Two new grants signed today between the Global Fund and Botswana mark a new phase of partnership, with a focus on preventing, treating and caring for people affected by HIV and tuberculosis.

The financial resources provided through the Global Fund come from many sources and partners, represented today at a signing event by the United States, the United Kingdom, Japan, the European Union, Germany and France. The grants signed today total US\$27 million.

"The overall goals of the grants are to achieve zero local malaria transmission or the elimination of malaria, to prevent new HIV infections, reduce morbidity and mortality as well as to enhance the psychosocial and economic impact associated with TB," said Botswana's Minister Of Health, Dorcas Makgato...

...Botswana faces high rates of HIV and TB. The HIV prevalence rate is 18.5 percent, one of the highest in the world. It also has one of the highest TB prevalence rates globally. The two diseases are highly interlinked - 60 percent of people with TB in Botswana also have HIV...

### **Hilton Prize Coalition** [to 6 February 2016]

<http://prizecoalition.charity.org/>

*An Alliance of Hilton Prize Recipients*

Posted February 5, 2016

### **Hilton Prize Coalition Storytelling Program – Nepal**

On April 25, 2015, a 7.8 magnitude earthquake struck Nepal. The earthquake killed over 8,000 people and injured more than 21,000. The member organizations of the Hilton Prize Coalition, an independent alliance of the 20 winners of the Conrad N. Hilton Humanitarian Prize, were among those who mobilized staff and resources in response to this devastating disaster.

Now, nine months later, six Coalition member organizations have come together through the Hilton Prize Coalition Storytelling Program to share their experiences both during and immediately following the earthquake. Over the course of this month, BRAC, Handicap International, Heifer International, HelpAge, Operation Smile and SOS Children's Villages – through their staff and personnel, the individuals (and animals!) they serve, and most importantly, their communities as a whole – will be sharing their stories...

### **InterAction** [to 6 February 2016]

<http://www.interaction.org/media-center/press-releases>

Feb 01, 2016

### **Civilians Under Fire: Restore Respect for International Humanitarian Law**

WASHINGTON -- A policy brief released today by InterAction – the largest U.S. alliance of international NGOs – calls for a new White House-led initiative to restore global respect for civilians in armed conflict. With a special focus on violence in Syria and Yemen, the brief ("Civilians Under Fire: Restore Respect for International Humanitarian Law") builds on previous reports and studies documenting attacks on civilians and humanitarian workers. The brief was released in advance of the London donor conference on Syria (Feb 3-4) and upcoming UN-sponsored World Humanitarian Summit in Turkey in May...

Specifically, the policy brief outlines several policy initiatives for the Obama Administration to help restore respect for the basic rules which protect people during armed conflict, including:

- 1:: Issue a presidential statement affirming respect for the protections to which civilians and civilian objects are entitled, including humanitarian and medical facilities and personnel;
- 2:: Adopt and implement, including through training, a standing operational policy on civilian protection and harm mitigation applicable to all branches of the armed services;
- 3:: Condition U.S. support for and cooperation with foreign forces (both state and non-state) on compliance with international humanitarian law; and
- 4:: Set clear benchmarks for enhanced measures by all parties to mitigate civilian harm in Syria and Yemen.

Read the full report: <http://bit.ly/Civilians-Under-Fire-Rpt>

### **Locus**

<http://locusworld.org/>

*"Locus is a movement focused on engaging those we serve, practitioners, the private sector, donors and to drive adoption of locally owned, integrated solutions."*  
*No new digest content identified.*

### **Start Network** [to 6 February 2016]

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

*[Consortium of British Humanitarian Agencies]*

*No new digest content identified.*

### **Muslim Charities Forum** [to 6 February 2016]

<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.*

### **Former Cabinet Ministers demand protection for refugees**

Press Release: Sunday 31st January 2016

Clare Short and Andrew Mitchell, Former British Labour and Conservative International Development Cabinet Ministers return from Syria - Turkey border to demand protection for refugees, an end to grotesque abuses of human rights and international law, sanctuary in safe havens, an end to the bombing of civilians and unfettered access for humanitarian relief.

The two former Cabinet Ministers say:

During our visit, organised by the Muslim Charities Forum, we were inspired by the work being undertaken by British Muslim Charities often in very dangerous circumstances . We

witnessed an entirely British funded convoy of 90 trucks organised by the Human Appeal International moving across the border into Syria with flour for 200 bakeries throughout Idlib Province.

But an already hideous catastrophe grows daily worse as 3 million refugees inside Syria in 14 besieged areas face starvation and air bombardment. Half the remaining civilian population has no clean water access and 5,000 schools have been destroyed.

The major powers must ensure progress now takes place in the Geneva Talks. The London pledging conference this week under British, Kuwaiti and Norwegian Leadership must ensure that the refugee camps in Lebanon and Jordan are fully funded and Turkey urgently receives promised EU financial support. The World Food Programme whose funding reductions mean rations in some locations run at 50 per cent of need must receive a full replenishment for the duration of this crisis.

Immediate and unfettered humanitarian access throughout all Syrian Provinces must be guaranteed. All attacks on civilians must cease with a complete end to air attack on civilian targets...

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### **Active Learning Network for Accountability and Performance in Humanitarian Action (ALNAP)** [to 6 February 2016]

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

*No new digest content identified.*

### **CHS Alliance** [to 6 February 2016]

<http://chsalliance.org/news-events/news>

04/02/2016

#### **CHS Alliance Executive Director Judith F. Greenwood appointed gender champion**

The Executive Director of the Alliance, Judith F. Greenwood, has joined an international network committed to gender parity. International Geneva Gender Champions is a leadership network that brings together female and male decision-makers to break down gender barriers...

### **EHLRA/R2HC** [to 6 February 2016]

<http://www.elrha.org/resource-hub/news/>

04.02.2016

#### **Planning for sustainable innovation**

Next month, the HIF will be holding a Business Model Canvas event to help support humanitarian innovators looking to discover hands-on tools to help develop their business model...

### **Global Humanitarian Assistance (GHA)** [to 6 February 2016]

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

*No new digest content identified.*

### **The Sphere Project** [to 6 February 2016]

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

03 February 2016 | *Sphere Project*

### **[New training module on the Core Humanitarian Standard and the Sphere Handbook](#)**

A new training module on the Core Humanitarian Standard and its usage in conjunction with the Sphere Handbook is now available in [Arabic](#), [English](#), [French](#) and [Spanish](#).

The Sphere Project office has developed a new training module to introduce the Core Humanitarian Standard (CHS) on Quality and Accountability and its guidance notes and indicators. The module can be used in a two-hour interactive training session...

### **Professionals in Humanitarian Assistance and Protection (PHAP)** [to 6 February 2016]

<https://phap.org/>

*No new digest content identified.*

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### **Center for Global Development** [to 6 February 2016]

<http://www.cgdev.org/page/press-center>

*Selected Press Releases, Blog Posts, Publications*

2/3/16

### **[Alternatives to HIPC for African Debt-Distressed Countries: Lessons from Myanmar, Nigeria, and Zimbabwe](#)**

Tendai Biti, Ben Leo, Scott Morris, and Todd Moss

Despite the success of the Heavily Indebted Poor Countries (HIPC) in reducing the debt burdens of low-income countries, at least eleven Sub-Saharan African countries are currently in, or face a high risk of, debt distress. A few of those currently at risk include countries that have been excluded from traditional debt relief frameworks. For countries outside the HIPC process, this paper lays out the (formidable) steps for retroactive HIPC inclusion, concluding with lessons for countries seeking exceptional debt relief treatment.

### **ODI** [to 6 February 2016]

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

*Research Reports*

### **[Women and power: what can the numbers tell us about women's voice, leadership and decision-making?](#)**

*Research reports and studies* | February 2016 | Joseph Wales

This briefing provides an overview of existing global indicators for measuring women's voice and leadership.

### **[Costing the impacts of gender-based violence \(GBV\) to business: a practical tool](#)**

*Toolkits* | February 2016 | David Walker, Neta Duvvury

This toolkit outlines a step-by-step guide for ascertaining the cost of gender-based violence (GBV) to business and also has a broader purpose of providing a discrete measure of GBV impacts.

### **[Enhancing aid architecture in the regional response to the Syria crisis](#)**

*Research reports and studies* | February 2016 | Victoria Metcalfe, Marcus Manuel and Alastair McKechnie

This Policy Note outlines a strategic approach to addressing the Syrian refugee crisis by enhancing the aid architecture in the Middle East.

### **How to design a monitoring and evaluation framework for a policy research project**

*Working and discussion papers* | February 2016 | Tiina Pasanen and Louise Shaxson

This guidance note aims to support the first steps in designing and structuring the monitoring and evaluation framework for a policy research project.

### **How do healthy rivers benefit society?**

*Working and discussion papers* | February 2016 | Helen Parker and Naomi Oates

Rivers are essential to human well-being, yet many rivers around the world are at risk. This paper provides a synthesis of the evidence regarding the relationship between river health and benefits for society.

**Urban Institute** [to 6 February 2016]

<http://www.urban.org/about/media>

February 5, 2016

### **Urban Institute Announces New Partnership to Develop Solutions for Social Mobility in America**

WASHINGTON, DC,— Today, the Urban Institute announced a grant from the Bill & Melinda Gates Foundation to establish The US Partnership on Mobility from Poverty, a new collaborative aimed at discovering permanent ladders of mobility for the poor.

*[see Week in Review above for more details]*

**World Economic Forum** [to 6 February 2016]

<https://agenda.weforum.org/news/>

News 5 Feb 2016

### **Cheryl Martin to Join World Economic Forum as Head of Centre for Global Industries**

Geneva, Switzerland - Dr Cheryl Martin, a globally recognized expert in energy technology and innovation, will join the World Economic Forum as Head of the Centre for Global Industries, the foremost global multistakeholder platform shaping global and regional industry agendas. The Centre for Global Industries comprises over 20 industry sectors and employs around 200 strategic specialists in offices in Geneva, New York, Beijing and Tokyo...

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

*We will primarily monitor press/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.*

**Aga Khan Foundation** [to 6 February 2016]

<http://www.akdn.org/pr.asp>

04 February 2016

**[The Aga Khan deplores devastation in Syria, Calls for Islands of Stability](#)**

His Highness the Aga Khan today called for the establishment of 'islands of stability' in war-ravaged Syria that could provide areas of relative safety in the midst of conflict.

**BMGF - Gates Foundation** [to 6 February 2016]

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

*No new digest content identified.*

**Annie E. Casey Foundation** [to 6 February 2016]

<http://www.aecf.org/contact/newsroom/>

*No new digest content identified.*

**Clinton Foundation** [to 6 February 2016]

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

*Press Release*

**[2016 Class of Presidential Leadership Scholars Announced](#)**

February 2, 2016

The [Presidential Leadership Scholars](#) program, a unique leadership development initiative that draws upon the resources of the presidential centers of [Lyndon B. Johnson](#), [George H.W. Bush](#), [William J. Clinton](#), and [George W. Bush](#), today announced the 61 scholars invited to participate in the program's second class.

These diverse leaders were chosen because of their desire and capacity to take their leadership strengths to a higher level in order to help their communities and our country. The 6-month executive-style program begins this week at Monticello, Thomas Jefferson's home...

**Ford Foundation** [to 6 February 2016]

<http://www.fordfoundation.org/?filter=News>

News

February 3, 2016

**[Ford Foundation and Cannes' Marché du Film sign agreement](#)**

Doc Corner, a Marché du Film program, and the Ford Foundation have entered into a two-year partnership that will amplify the social justice storytelling program, JustFilms, in Cannes.

The announcement comes as Ford enters into the second phase of this multi-faceted program to reduce inequality in all its forms through supporting visual story tellers, new media projects, and organizations that work toward these ends.

The Ford Foundation places a special focus on documentary work in the field. Through a series of initiatives of the renowned programs of the Marché du Film, such as the Doc Corner, the Producers Network, NEXT and a Documentary Mixer, it is expected that this new agreement will give wider exposure to documentary cinema in Cannes and provide a vital platform to make the resulting body of work more clearly visible to key players in the global film industry...

**GHIT Fund** [to 6 February 2016]

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

*GHIT was set up in 2012 with the aim of developing new tools to tackle infectious diseases that devastate the world's poorest people. Other funders include six Japanese pharmaceutical companies, the Japanese Government and the Bill & Melinda Gates Foundation.*

*No new digest content identified.*

**William and Flora Hewlett Foundation** [to 6 February 2016]

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

*No new digest content identified.*

**Conrad N. Hilton Foundation** [to 6 February 2016]

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

*Our News*

**"Start Out Right": A celebration of National Catholic Schools Week**

By Sister Rosemarie Nassif, SSND, Ph.D., February 2, 2016

In observance of National Catholic Schools Week, Sister Rosemarie Nassif, Director of the Foundation's Catholic Sisters Initiative, discusses the three "w's" that are essential in delivering the promise of Catholic education and the current defining moment of Catholic Schools...

**Grameen Foundation** [to 6 February 2016]

<http://www.grameenfoundation.org/news-events/press-room>

*No new digest content identified.*

**IKEA Foundation** [to 6 February 2016]

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

*No new digest content identified.*

**HHMI - Howard Hughes Medical Institute** [to 6 February 2016]

<https://www.hhmi.org/news>

*Institute [ February 3, 2016 ]*

**Erin O'Shea Named New HHMI President**

The Howard Hughes Medical Institute (HHMI) has named Erin O'Shea its sixth president, effective September 1, 2016. O'Shea currently serves as HHMI's chief scientific officer, a position she has held since 2013.

O'Shea will succeed Robert Tjian, HHMI's president since 2009. Tjian announced last year that he would step down and return to the University of California, Berkeley.

Kurt Schmoke, chairman of the HHMI Trustees and head of the committee that conducted the search, commented: "We're delighted to welcome Dr. O'Shea into her new leadership role as the next president of HHMI. She is not only a distinguished scientist but also a leader committed to advancing HHMI's unique role in the research community. Going forward, Dr.

O'Shea will build on her accomplishments at HHMI, as well as the success of outgoing HHMI President Bob Tjian. We look forward to this exciting new chapter."

O'Shea, 50, is a leader in the fields of gene regulation, signal transduction, and systems biology. An HHMI investigator since 2000, she has served on the faculty of Harvard University and the University of California, San Francisco. She is a member of the National Academy of Sciences and the American Academy of Arts and Sciences. O'Shea received her undergraduate degree in biochemistry from Smith College and her PhD degree in chemistry from the Massachusetts Institute of Technology...

*Research* [ February 1, 2016 ]

### **Research Shows that Cortex Commands the Performance of Skilled Movement**

New experiments at HHMI's Janelia Research Campus show that activity in the cortex is critical for enacting a learned skill.

**Kellogg Foundation** [to 6 February 2016]

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

*No new digest content identified.*

**MacArthur Foundation** [to 6 February 2016]

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

*Publication*

### **Study Finds Hope for Amphibians Battling Deadly Fungus**

Published February 2, 2016

A study by the Wildlife Conservation Society finds that climate change may make environmental conditions for the deadly chytrid fungus, which is killing amphibians worldwide, unsuitable in some regions and could stave off spread of the disease in African amphibian populations. The MacArthur-supported research found that the majority of infected frogs did not show the presence of the disease, indicating they may be regionally resistant. The study took place in Africa's wildlife-rich Albertine Rift, extending along parts of Uganda, Rwanda, Democratic Republic of Congo, Burundi, and Tanzania.

**Gordon and Betty Moore Foundation** [to 6 February 2016]

<https://www.moore.org/newsroom/press-releases>

*Press Releases*

### **Peninsula Open Space Trust announces groundbreaking initiative to triple preserved farmland in San Mateo County**

*Peninsula Open Space Trust* February 4, 2016

The Peninsula Open Space Trust (POST) today announced a groundbreaking new initiative to triple the amount of preserved farmland acreage and the number of preserved farms on the San Mateo coast over the next 10 years.

One of the most ambitious farming conservation programs in the history of the Bay ...

### **\$3.6M awarded from the Gordon and Betty Moore Foundation to advance a West Coast Earthquake Early Warning system**

February 2, 2016

At the White House Summit on Earthquake Resilience today, the Gordon and Betty Moore Foundation announced \$3.6 million in grants to advance a West Coast Earthquake Early Warning system. The funding to California Institute of Technology, University of California, Berkeley, University of Washington and the U.S. Geological Survey supports the ...

*Press Releases*

### **Final agreement will permanently safeguard 85 percent of Great Bear Rainforest Rainforest Solutions Project**

February 1, 2016

Vancouver, British Columbia -- Today First Nations governments and the BC government, with the support of ForestEthics Solutions, Greenpeace, Sierra Club BC and five forestry companies, announced the fulfilment of the Great Bear Rainforest Agreements. Eighty-five percent (3.1 million hectares) of the remote wilderness region's coastal temperate rainforests are now permanently ...

*Press Releases*

### **Open Society Foundation** [to 6 February 2016]

<https://www.opensocietyfoundations.org/issues/media-information>

*No new digest content identified.*

### **David and Lucile Packard Foundation** [to 6 February 2016]

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

January 12, 2016

### **Indonesia Peat Prize Announcement**

The David and Lucile Packard Foundation, in partnership with the Government of Indonesia, is pleased to announce a new prize competition...

...The "Indonesian Peat Prize" seeks to engage the world's best scientists and engineers to apply existing and novel technologies to the task of developing more accurate and efficient approaches to mapping peat soils. There is every reason to believe that the application of recent advances in remote sensing technologies and the experience of scientists in related fields such as oil exploration could significantly advance the science of peat mapping. The competition protocol requires that entrants register by May 2016 and develop their approaches by June 2017 using test sites in Indonesia where the extent and depth of peat soils have already been mapped. The approaches will then be demonstrated in August 2017 on a second set of test sites where the entrants don't have access to the ground-truthed data. Prizes totaling \$1 million will be awarded to the winning approaches.

Indonesia's Geospatial Information Agency and the Packard Foundation are co-hosting the Peat Prize. The competition is being administered by World Resources Institute – Indonesia and Context Partners under the guidance of a Science Advisory Board chaired by Dr. Supiandi Sabiham (Faculty of Agriculture, Bogor Agricultural University (IPB), Indonesia, and Dr. David Schimel (NASA Jet Propulsion Laboratory, California Institute of Technology, United States). More information about the prize is available [here](#)...

### **Pew Charitable Trusts** [to 6 February 2016]

<http://www.pewtrusts.org/en/about/news-room/press-releases>

*No new digest content identified.*

**Rockefeller Foundation** [to 6 February 2016]

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

*No new digest content identified.*

**Robert Wood Johnson Foundation** [to 6 February 2016]

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

*No new digest content identified.*

**Wellcome Trust** [to 6 February 2016]

<http://www.wellcome.ac.uk/News/2016/index.htm>

*No new digest content identified.*

\* \* \* \*

**:: 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**

Summer 2015, Volume 10, Number 3

<http://pnpcsw.pnpco.com/cadmus/testvol.asp?year=2015&journal=ajdm>

[Reviewed earlier]

**American Journal of Infection Control**

February 2016 Volume 44, Issue 2, p125-252, e9-e14

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

[New issue; No relevant content identified]

**American Journal of Preventive Medicine**

February 2016 Volume 50, Issue 2, p129-294, e33-e64

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

[New issue; No relevant content identified]

**American Journal of Public Health**

Volume 106, Issue 2 (February 2016)  
<http://ajph.aphapublications.org/toc/ajph/current>

*AJPH PERSPECTIVES*

**Protecting Personally Identifiable Information When Using Online Geographic Tools for Public Health Research**

American Journal of Public Health: February 2016, Vol. 106, No. 2: 206–208.

Michael D. M. Bader, Stephen J. Mooney, Andrew G. Rundle

[No abstract]

**Integrating Systems Science and Community-Based Participatory Research to Achieve Health Equity**

American Journal of Public Health: February 2016, Vol. 106, No. 2: 215–222.

Leah Frerichs, Kristen Hassmiller Lich, Gaurav Dave, Giselle Corbie-Smith

***ABSTRACT***

Unanswered questions about racial and socioeconomic health disparities may be addressed using community-based participatory research and systems science. Community-based participatory research is an orientation to research that prioritizes developing capacity, improving trust, and translating knowledge to action. Systems science provides research methods to study dynamic and interrelated forces that shape health disparities. Community-based participatory research and systems science are complementary, but their integration requires more research. We discuss paradigmatic, socioecological, capacity-building, colearning, and translational synergies that help advance progress toward health equity.

**American Journal of Tropical Medicine and Hygiene**

February 2016; 94 (2)

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

*Perspective Piece*

**Clinical Research and the Training of Host Country Investigators: Essential Health Priorities for Disease-Endemic Regions**

Ousmane A. Koita, Robert L. Murphy, Saharé Fongoro, Boubakar Diallo, Seydou O. Doumbia, Moussa Traoré, and Donald J. Krogstad

Am J Trop Med Hyg 2016 94:253-257; Published online November 23, 2015,

doi:10.4269/ajtmh.15-0366

***Abstract***

The health-care needs and resources of disease-endemic regions such as west Africa have been a major focus during the recent Ebola outbreak. On the basis of that experience, we call attention to two priorities that have unfortunately been ignored thus far: 1) the development of clinical research facilities and 2) the training of host country investigators to ensure that the facilities and expertise necessary to evaluate candidate interventions are available on-site in endemic regions when and where they are needed. In their absence, as illustrated by the recent uncertainty about the use of antivirals and other interventions for Ebola virus disease, the only treatment available may be supportive care, case fatality rates may be unacceptably high and there may be long delays between the time potential interventions become available and it becomes clear whether those interventions are safe or effective. On the basis of our experience in Mali, we urge that the development of clinical research facilities and the training of host country investigators be prioritized in disease-endemic regions such as west Africa.

## **BMC Health Services Research**

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

(Accessed 6 February 2016)

[No new relevant content identified]

## **BMC Infectious Diseases**

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

(Accessed 6 February 2016)

*Research article*

### **[Pattern of animal bites and post exposure prophylaxis in rabies: A five year study in a tertiary care unit in Sri Lanka](#)**

*Rabies is a global problem which occurs in more than 150 countries and territories including Sri Lanka, where human deaths from rabies are in decline whilst resources incurred for prevention of rabies are in sharp incline over the years...*

Senanayake Abeysinghe Mudiyansele Kularatne, Dissanayake Mudiyansele Priyantha Udaya Kumara Ralapanawa, Koasala Weerakoon, Usha Kumari Bokalamulla and Nanada Abagasipitiya

BMC Infectious Diseases 2016 16:62

Published on: 4 February 2016

## **BMC Medical Ethics**

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

(Accessed 6 February 2016)

*Research article*

### **[Exceptions to the rule of informed consent for research with an intervention](#)**

Susanne Rebers, Neil K. Aaronson, Flora E. van Leeuwen and Marjanka K. Schmidt

BMC Medical Ethics 2016 17:9

Published on: 6 February 2016

*Abstract*

**Background**

In specific situations it may be necessary to make an exception to the general rule of informed consent for scientific research with an intervention. Earlier reviews only described subsets of arguments for exceptions to waive consent.

**Methods**

Here, we provide a more extensive literature review of possible exceptions to the rule of informed consent and the accompanying arguments based on literature from 1997 onwards, using both Pubmed and PsycINFO in our search strategy.

**Results**

We identified three main categories of arguments for the acceptability of a consent waiver: data validity and quality, major practical problems, and distress or confusion of participants. Approval by a medical ethical review board always needs to be obtained. Further, we provide examples of specific conditions under which consent waiving might be allowed, such as additional privacy protection measures.

**Conclusions**

The reasons legitimized by the authors of the papers in this overview can be used by researchers to form their own opinion about requesting an exception to the rule of informed

consent for their own study. Importantly, rules and guidelines applicable in their country, institute and research field should be followed. Moreover, researchers should also take the conditions under which they feel an exception is legitimized under consideration. After discussions with relevant stakeholders, a formal request should be sent to an IRB.

## **BMC Medicine**

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

(Accessed 6 February 2016)

*Research article*

### **Post-marketing withdrawal of 462 medicinal products because of adverse drug reactions: a systematic review of the world literature**

There have been no studies of the patterns of post-marketing withdrawals of medicinal products to which adverse reactions have been attributed. We identified medicinal products that were withdrawn because of a...

Igho J. Onakpoya, Carl J. Heneghan and Jeffrey K. Aronson

BMC Medicine 2016 14:10

Published on: 4 February 2016

#### *Abstract*

##### **Background**

There have been no studies of the patterns of post-marketing withdrawals of medicinal products to which adverse reactions have been attributed. We identified medicinal products that were withdrawn because of adverse drug reactions, examined the evidence to support such withdrawals, and explored the pattern of withdrawals across countries.

##### **Methods**

We searched PubMed, Google Scholar, the WHO's database of drugs, the websites of drug regulatory authorities, and textbooks. We included medicinal products withdrawn between 1950 and 2014 and assessed the levels of evidence used in making withdrawal decisions using the criteria of the Oxford Centre for Evidence Based Medicine.

##### **Results**

We identified 462 medicinal products that were withdrawn from the market between 1953 and 2013, the most common reason being hepatotoxicity. The supporting evidence in 72 % of cases consisted of anecdotal reports. Only 43 (9.34 %) drugs were withdrawn worldwide and 179 (39 %) were withdrawn in one country only. Withdrawal was significantly less likely in Africa than in other continents (Europe, the Americas, Asia, and Australasia and Oceania). The median interval between the first reported adverse reaction and the year of first withdrawal was 6 years (IQR, 1–15) and the interval did not consistently shorten over time.

##### **Conclusion**

There are discrepancies in the patterns of withdrawal of medicinal products from the market when adverse reactions are suspected, and withdrawals are inconsistent across countries. Greater co-ordination among drug regulatory authorities and increased transparency in reporting suspected adverse drug reactions would help improve current decision-making processes.

*Research article*

### **A scoping review of competencies for scientific editors of biomedical journals**

*Biomedical journals are the main route for disseminating the results of health-related research. Despite this, their editors operate largely without formal training or certification. To our*

*knowledge, no body of literature systematically identifying core competencies for scientific editors of biomedical journals exists. Therefore, we aimed to conduct a scoping review to determine what is known on the competency requirements for scientific editors of biomedical journals.*

James Galipeau, Virginia Barbour, Patricia Baskin, Sally Bell-Syer, Kelly Cobey, Miranda Cumpston, Jon Deeks, Paul Garner, Harriet MacLehose, Larissa Shamseer, Sharon Straus, Peter Tugwell, Elizabeth Wager, Margaret Winker and David Moher  
BMC Medicine 2016 14:16  
Published on: 2 February 2016

## **BMC Pregnancy and Childbirth**

<http://www.biomedcentral.com/bmcpregnancychildbirth/content>  
(Accessed 6 February 2016)

*Research article*

### **Determinants of early initiation of breastfeeding in Nigeria: a population-based study using the 2013 demographic and health survey data**

Provision of mother's breast milk to infants within one hour of birth is referred to as Early Initiation of Breast Feeding (EIBF) which is an important strategy to reduce perinatal and infant morbidities and m...

Anselm S. Berde and Siddika Songül Yalcin  
BMC Pregnancy and Childbirth 2016 16:32  
Published on: 6 February 2016

## **BMC Public Health**

<http://bmcpublichealth.biomedcentral.com/articles>  
(Accessed 6 February 2016)

*Research article*

### **Mental health outcomes in times of economic recession: a systematic literature review**

Countries in recession experience high unemployment rates and a decline in living conditions, which, it has been suggested, negatively influences their populations' health. The present review examines the rece...

Diana Frاسquilho, Margarida Gaspar Matos, Ferdinand Salonna, Diogo Guerreiro, Cláudia C. Storti, Tânia Gaspar and José M. Caldas-de-Almeida  
BMC Public Health 2016 16:115  
Published on: 3 February 2016

*Abstract*

Background

Countries in recession experience high unemployment rates and a decline in living conditions, which, it has been suggested, negatively influences their populations' health. The present review examines the recent evidence of the possible association between economic recessions and mental health outcomes.

Methods

Literature review of records identified through Medline, PsycINFO, SciELO, and EBSCO Host. Only original research papers, published between 2004 and 2014, peer-reviewed, non-

qualitative research, and reporting on associations between economic factors and proxies of mental health were considered.

#### Results

One-hundred-one papers met the inclusion criteria. The evidence was consistent that economic recessions and mediators such as unemployment, income decline, and unmanageable debts are significantly associated with poor mental wellbeing, increased rates of common mental disorders, substance-related disorders, and suicidal behaviours.

#### Conclusion

On the basis of a thorough analysis of the selected investigations, we conclude that periods of economic recession are possibly associated with a higher prevalence of mental health problems, including common mental disorders, substance disorders, and ultimately suicidal behaviour. Most of the research is based on cross-sectional studies, which seriously limits causality inferences. Conclusions are summarised, taking into account international policy recommendations concerning the cost-effective measures that can possibly reduce the occurrence of negative mental health outcomes in populations during periods of economic recession.

#### *Research article*

#### **[Estimating the magnitude of female genital mutilation/cutting in Norway: an extrapolation model](#)**

Mai M. Ziyada, Marthe Norberg-Schulz and R. Elise B. Johansen

BMC Public Health 2016 16:110

Published on: 2 February 2016

#### *Abstract*

##### Background

With emphasis on policy implications, the main objective of this study was to estimate the numbers of two main groups affected by FGM/C in Norway: 1) those already subjected to FGM/C and therefore potentially in need for health care and 2) those at risk of FGM/C and consequently the target of preventive and protective measures. Special attention has been paid to type III as it is associated with more severe complications.

##### Methods

Register data from Statistics Norway (SSB) was combined with population-based survey data on FGM/C in the women/girls' countries of origin.

##### Results

As of January 1st 2013, there were 44,467 first and second-generation female immigrants residing in Norway whose country of origin is one of the 29 countries where FGM/C is well documented. About 40 pct. of these women and girls are estimated to have already been subjected to FGM/C prior to immigration to Norway. Type III is estimated in around 50 pct. of those already subjected to FGM/C. Further, a total of 15,500 girls are identified as potentially at risk, out of which an approximate number of girls ranging between 3000 and 7900 are estimated to be at risk of FGM/C.

##### Conclusion

Reliable estimates on FGM/C are important for evidence-based policies. The study findings indicate that about 17,300 women and girls in Norway can be in need of health care, in particular the 9100 who are estimated to have type III. Preventive and protective measures are also needed to protect girls at risk (3000 to 7900) from being subjected to FGM/C. Nevertheless, as there are no appropriate tools at the moment that can single these girls out of

all who are potentially at risk, all girls in the potentially at risk group (15,500) should be targeted with preventive measures.

### **BMC Research Notes**

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

(Accessed 6 February 2016)

*Research article*

#### **Research participation after terrorism: an open cohort study of survivors and parents after the 2011 Utøya attack in Norway**

*Reliable estimates of treatment needs after terrorism are essential to develop an effective public health response. More knowledge is required on research participation among survivors of terrorism to interpret the results properly and advance disaster research methodology. This article reports factors associated with participation in an open cohort study of survivors of the Utøya youth camp attack and their parents.*

Lise Eilin Stene and Grete Dyb

BMC Research Notes 2016 9:57

Published on: 1 February 2016

### **BMJ Open**

2016, Volume 6, Issue 2

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

*Research*

#### **Postnuclear disaster evacuation and chronic health in adults in Fukushima, Japan: a long-term retrospective analysis**

Shuhei Nomura, Marta Blangiardo, Masaharu Tsubokura, Akihiko Ozaki, Tomohiro Morita, Susan Hodgson

BMJ Open 2016;6:e010080 doi:10.1136/bmjopen-2015-010080

*Abstract*

**Objective** Japan's 2011 Fukushima Daiichi Nuclear Power Plant incident required the evacuation of over a million people, creating a large displaced population with potentially increased vulnerability in terms of chronic health conditions. We assessed the long-term impact of evacuation on diabetes, hyperlipidaemia and hypertension.

**Participants** We considered participants in annual public health check-ups from 2008 to 2014, administrated by Minamisoma City and Soma City, located about 10–50 km from the Fukushima nuclear plant.

**Methods** Disease risks, measured in terms of pre-incident and post-incident relative risks, were examined and compared between evacuees and non-evacuees/temporary-evacuees. We also constructed logistic regression models to assess the impact of evacuation on the disease risks adjusted for covariates.

**Results** Data from a total of 6406 individuals aged 40–74 years who participated in the check-ups both at baseline (2008–2010) and in one or more post-incident years were analysed.

Regardless of evacuation, significant post-incident increases in risk were observed for diabetes and hyperlipidaemia (relative risk: 1.27–1.60 and 1.12–1.30, respectively, depending on evacuation status and post-incident year). After adjustment for covariates, the increase in hyperlipidaemia was significantly greater among evacuees than among non-evacuees/temporary-evacuees (OR 1.18, 95% CI 1.06 to 1.32,  $p < 0.01$ ).

Conclusions The singularity of this study is that evacuation following the Fukushima disaster was found to be associated with a small increase in long-term hyperlipidaemia risk in adults. Our findings help identify discussion points on disaster planning, including preparedness, response and recovery measures, applicable to future disasters requiring mass evacuation.

#### *Protocol*

#### **Development of a Health Empowerment Programme to improve the health of working poor families: protocol for a prospective cohort study in Hong Kong**

Colman Siu Cheung Fung, Esther Yee Tak Yu, Vivian Yawei Guo, Carlos King Ho Wong, Kenny Kung, Sin Yi Ho, Lai Ying Lam, Patrick Ip, Daniel Yee Tak Fong, David Chi Leung Lam, William Chi Wai Wong, Sandra Kit Man Tsang, Agnes Fung Yee Tiwari, Cindy Lo Kuen Lam

BMJ Open 2016;6:e010015 doi:10.1136/bmjopen-2015-010015

#### *Abstract*

##### Introduction

People from working poor families are at high risk of poor health partly due to limited healthcare access. Health empowerment, a process by which people can gain greater control over the decisions affecting their lives and health through education and motivation, can be an effective way to enhance health, health-related quality of life (HRQOL), health awareness and health-seeking behaviours of these people. A new cohort study will be launched to explore the potential for a Health Empowerment Programme to enable these families by enhancing their health status and modifying their attitudes towards health-related issues. If proven effective, similar empowerment programme models could be tested and further disseminated in collaborations with healthcare providers and policymakers.

##### Method and analysis

A prospective cohort study with 200 intervention families will be launched and followed up for 5 years. The following inclusion criteria will be used at the time of recruitment: (1) Having at least one working family member; (2) Having at least one child studying in grades 1–3; and (3) Having a monthly household income that is less than 75% of the median monthly household income of Hong Kong families. The Health Empowerment Programme that will be offered to intervention families will comprise four components: health assessment, health literacy, self-care enablement and health ambassador. Their health status, HRQOL, lifestyle and health service utilisation will be assessed and compared with 200 control families with matching characteristics but will not receive the health empowerment intervention.

##### Ethics and dissemination

This project was approved by the University of Hong Kong—the Hospital Authority Hong Kong West Cluster IRB, Reference number: UW 12-517. The study findings will be disseminated through a series of peer-reviewed publications and conference presentations, as well as a yearly report to the philanthropic funding body—Kerry Group Kuok Foundation (Hong Kong) Limited.

#### **British Medical Journal**

6 February 2016 (vol 352, issue 8043)

<http://www.bmj.com/content/352/8043>

[New issue; 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 94, Number 2, February 2016, 77-156

<http://www.who.int/bulletin/volumes/94/2/en/>

### *EDITORIALS*

#### **[Building research and development on poverty-related diseases](#)**

John C Reeder & Winnie Mpanju-Shumbusho

doi: 10.2471/BLT.15.167072

[No abstract]

### *RESEARCH*

#### **[Community-based surveillance of maternal deaths in rural Ghana](#)**

Joseph Adomako, Gloria Q Asare, Anthony Ofori, Bradley E Iott, Tiffany Anthony, Andrea S Momoh, Elisa V Warner, Judy P Idrovo, Rachel Ward & Frank WJ Anderson

doi: 10.2471/B

##### **Objective**

To examine the feasibility and effectiveness of community-based maternal mortality surveillance in rural Ghana, where most information on maternal deaths usually comes from retrospective surveys and hospital records.

##### **Methods**

In 2013, community-based surveillance volunteers used a modified reproductive age mortality survey (RAMOS 4+2) to interview family members of women of reproductive age (13–49 years) who died in Bosomtwe district in the previous five years. The survey comprised four yes–no questions and two supplementary questions. Verbal autopsies were done if there was a positive answer to at least one yes–no question. A mortality review committee established the cause of death.

##### **Findings**

Survey results were available for 357 women of reproductive age who died in the district. A positive response to at least one yes–no question was recorded for respondents reporting on the deaths of 132 women. These women had either a maternal death or died within one year of termination of pregnancy. Review of 108 available verbal autopsies found that 64 women had a maternal or late maternal death and 36 died of causes unrelated to childbearing. The most common causes of death were haemorrhage (15) and abortion (14). The resulting maternal mortality ratio was 357 per 100 000 live births, compared with 128 per 100 000 live births derived from hospital records.

##### **Conclusion**

The community-based mortality survey was effective for ascertaining maternal deaths and identified many deaths not included in hospital records. National surveys could provide the information needed to end preventable maternal mortality by 2030.

### *Research*

#### **[Drinking water and sanitation: progress in 73 countries in relation to socioeconomic indicators](#)**

Jeanne Luh & Jamie Bartram

doi: 10.2471/BLT.15.162974

## Objective

To assess progress in the provision of drinking water and sanitation in relation to national socioeconomic indicators.

## Methods

We used household survey data for 73 countries – collected between 2000 and 2012 – to calculate linear rates of change in population access to improved drinking water (n = 67) and/or sanitation (n = 61). To enable comparison of progress between countries with different initial levels of access, the calculated rates of change were normalized to fall between –1 and 1. In regression analyses, we investigated associations between the normalized rates of change in population access and national socioeconomic indicators: gross national income per capita, government effectiveness, official development assistance, freshwater resources, education, poverty, Gini coefficient, child mortality and the human development index.

## Findings

The normalized rates of change indicated that most of the investigated countries were making progress towards achieving universal access to improved drinking water and sanitation. However, only about a third showed a level of progress that was at least half the maximum achievable level. The normalized rates of change did not appear to be correlated with any of the national indicators that we investigated.

## Conclusion

In many countries, the progress being made towards universal access to improved drinking water and sanitation is falling well short of the maximum achievable level. Progress does not appear to be correlated with a country's social and economic characteristics. The between-country variations observed in such progress may be linked to variations in government policies and in the institutional commitment and capacity needed to execute such policies effectively.

## *PERSPECTIVES*

### **The use of mobile phones in polio eradication**

Abdul Momin Kazi & Lubna Ashraf Jafri

doi: 10.2471/BLT.15.163683

[No abstract]

## **Complexity**

January/February 2016 Volume 21, Issue 3 Pages 1–88

<http://onlinelibrary.wiley.com/doi/10.1002/cplx.v21.3/issuetoc>

[Reviewed earlier]

## **Conflict and Health**

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

[Accessed 6 February 2016]

[No new content]

## **Cost Effectiveness and Resource Allocation**

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

(Accessed 6 February 2016)

[No new relevant content identified]

**Current Opinion in Infectious Diseases**

February 2016 - Volume 29 - Issue 1 pp: v-vi, 1-98

<http://journals.lww.com/co-infectiousdiseases/pages/currenttoc.aspx>

[Reviewed earlier]

**Developing World Bioethics**

December 2015 Volume 15, Issue 3 Pages iii-iii, 115-275

<http://onlinelibrary.wiley.com/doi/10.1111/dewb.2015.15.issue-2/issuetoc>

[Reviewed earlier]

**Development in Practice**

Volume 26, Issue 1, 2016

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

[Reviewed earlier]

**Development Policy Review**

January 2016 Volume 34, Issue 1 Pages i-ii, 5-174

<http://onlinelibrary.wiley.com/doi/10.1111/dpr.2016.34.issue-1/issuetoc>

[Reviewed earlier]

**Disability and Rehabilitation: Assistive Technology**

Volume 11, Issue 3, 2016

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

[New issue; No relevant content identified]

**Disaster Medicine and Public Health Preparedness**

Volume 9 - Issue 06 - December 2015

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

[Reviewed earlier]

**Disasters**

January 2016 Volume 40, Issue 1 Pages 1-182

<http://onlinelibrary.wiley.com/doi/10.1111/disa.2016.40.issue-1/issuetoc>

[Reviewed earlier]

**Emergency Medicine Journal**

February 2016, Volume 33, Issue 2

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

[New issue; No relevant content identified]

**Epidemics**

Volume 15, In Progress (June 2016)

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

[No new relevant content]

**End of Life Journal**

2016, Volume 6, Issue 1

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

[No new relevant content]

**Epidemiology and Infection**

Volume 144 - Issue 02 - January 2016

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

[Reviewed earlier]

**The European Journal of Public Health**

Volume 25, Issue 6, 1 December 2015

<http://eurpub.oxfordjournals.org/content/25/6>

[Reviewed earlier]

**Food Policy**

Volume 59, In Progress (February 2016)

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

[No new relevant content identified]

**Food Security**

Volume 7, Issue 6, December 2015

<http://link.springer.com/journal/12571/7/6/page/1>

[Reviewed earlier]

**Forum for Development Studies**

Volume 42, Issue 3, 2015

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

[Reviewed earlier]

**Genocide Studies International**

Volume 9 No. 1, Spring 2015

<http://www.utpjournals.press/toc/gsi/current>

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

[Reviewed earlier]

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

December 2015 | Volume 3 | Issue 4

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

[Reviewed earlier]

### **Global Health Governance**

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

[Accessed 6 February 2016]

[No new content]

### **Global Public Health**

Volume 11, Issue 3, 2016

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

[Reviewed earlier]

### **Globalization and Health**

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

[Accessed 6 February 2016]

[No new content]

### **Health Affairs**

January 2016; Volume 35, Issue 1

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

***High-Cost Populations, Medicaid, Spending & More***

[Reviewed earlier]

### **Health and Human Rights**

Volume 17, Issue 2 December 2015

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

***Special Issue: Evidence of the Impact of Human Rights-Based Approaches to Health***

[Reviewed earlier]

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

Volume 11 - Issue 01 - January 2016

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

[Reviewed earlier]

### **Health Policy and Planning**

Volume 31 Issue 1 February 2016

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

*Original Articles*

**Editor's Choice: The free health care initiative: how has it affected health workers in Sierra Leone?**

Sophie Witter, Haja Wurie, and Maria Paola Bertone

Health Policy Plan. (2016) 31 (1): 1-9 doi:10.1093/heapol/czv006

*Abstract*

There is an acknowledged gap in the literature on the impact of fee exemption policies on health staff, and, conversely, the implications of staffing for fee exemption. This article draws from five research tools used to analyse changing health worker policies and incentives in post-war Sierra Leone to document the effects of the Free Health Care Initiative (FHCI) of 2010 on health workers.

Data were collected through document review (57 documents fully reviewed, published and grey); key informant interviews (23 with government, donors, NGO staff and consultants); analysis of human resource data held by the MoHS; in-depth interviews with health workers (23 doctors, nurses, mid-wives and community health officers); and a health worker survey (312 participants, including all main cadres). The article traces the HR reforms which were triggered by the FHCI and evidence of their effects, which include substantial increases in number and pay (particularly for higher cadres), as well as a reported reduction in absenteeism and attrition, and an increase (at least for some areas, where data is available) in outputs per health worker. The findings highlight how a flagship policy, combined with high profile support and financial and technical resources, can galvanize systemic changes. In this regard, the story of Sierra Leone differs from many countries introducing fee exemptions, where fee exemption has been a stand-alone programme, unconnected to wider health system reforms. The challenge will be sustaining the momentum and the attention to delivering results as the FHCI ceases to be an initiative and becomes just 'business as normal'. The health system in Sierra Leone was fragile and conflict-affected prior to the FHCI and still faces significant challenges, both in human resources for health and more widely, as vividly evidenced by the current Ebola crisis

**Developing a holistic policy and intervention framework for global mental health**

Akwatu Khenti, Stéfanie Fréel, Ruth Trainor, Sirad Mohamoud, Pablo Diaz, Erica Suh, Sireesha J Bobbili, and Jaime C Sapag

Health Policy Plan. (2016) 31 (1): 37-45 doi:10.1093/heapol/czv016

*Abstract*

**Introduction:** There are significant gaps in the accessibility and quality of mental health services around the globe. A wide range of institutions are addressing the challenges, but there is limited reflection and evaluation on the various approaches, how they compare with each other, and conclusions regarding the most effective approach for particular settings. This article presents a framework for global mental health capacity building that could potentially serve as a promising or best practice in the field. The framework is the outcome of a decade of collaborative global health work at the Centre for Addiction and Mental Health (CAMH) (Ontario, Canada). The framework is grounded in scientific evidence, relevant learning and behavioural theories and the underlying principles of health equity and human rights.

**Methods:** Grounded in CAMH's research, programme evaluation and practical experience in developing and implementing mental health capacity building interventions, this article presents the iterative learning process and impetus that formed the basis of the framework. A developmental evaluation (Patton M.2010. Developmental Evaluation: Applying Complexity

Concepts to Enhance Innovation and Use. New York: Guilford Press.) approach was used to build the framework, as global mental health collaboration occurs in complex or uncertain environments and evolving learning systems.

Results: A multilevel framework consists of five central components: (1) holistic health, (2) cultural and socioeconomic relevance, (3) partnerships, (4) collaborative action-based education and learning and (5) sustainability. The framework's practical application is illustrated through the presentation of three international case studies and four policy implications. Lessons learned, limitations and future opportunities are also discussed.

Conclusion: The holistic policy and intervention framework for global mental health reflects an iterative learning process that can be applied and scaled up across different settings through appropriate modifications.

### **Two decades of maternity care fee exemption policies in Ghana: have they benefited the poor?**

Fiifi Amoako Johnson, Faustina Frempong-Ainguah, and Sabu S Padmadas  
Health Policy Plan. (2016) 31 (1): 46-55 doi:10.1093/heapol/czv017

### **Health Research Policy and Systems**

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

[Accessed 6 February 2016]

[No relevant content]

### **Human Rights Quarterly**

Volume 37, Number 4, November 2015

[http://muse.jhu.edu/journals/human\\_rights\\_quarterly/toc/hrq.37.4.html](http://muse.jhu.edu/journals/human_rights_quarterly/toc/hrq.37.4.html)

[Reviewed earlier]

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

Volume 40, Issue 1, 2016

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

*Guest Editorial*

### **Implementing Challenging Policy and Systems Change: Identifying Leadership Competencies**

Marvin Southard

pages 1-5

[No abstract]

### *Articles*

### **Change Communication Strategies in Public Child Welfare Organizations: Engaging the Front Line**

Yiwen Cao, Alicia C. Bunker, Jill Hoffman & Hillary A. Robertson

pages 37-50

DOI:10.1080/23303131.2015.1093570

*Abstract*

In public child-welfare agencies, successful organizational change depends on effective internal communication and engagement with frontline workers. This qualitative study examines approaches for communicating planned organizational change among frontline child-welfare workers. Five, 90-minute focus groups were conducted with 50 frontline workers in an urban, public child-welfare agency. Consistent with prior research on change communication in business organizations, two broad categories of communication strategies were described: programmatic (top-down) and participatory approaches. Results suggest that participatory communicative strategies emphasizing employee engagement might be most effective in combination with programmatic approaches that communicate targeted messages about the change.

### **Humanitarian Exchange Magazine**

Number 65 November 2015

[http://odihpn.org/wp-content/uploads/2015/10/HE\\_65\\_web.pdf](http://odihpn.org/wp-content/uploads/2015/10/HE_65_web.pdf)

***Special Feature: The Crisis in Iraq***

[Reviewed earlier]

### **IDRiM Journal**

Vol 5, No 2 (2015)

<http://idrimjournal.com/index.php/idrim/issue/view/14>

[Reviewed earlier]

### **Infectious Diseases of Poverty**

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

[Accessed 6 February 2016]

[No new relevant content]

### **International Health**

Volume 8 Issue 1 January 2016

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

[Reviewed earlier]

### **International Human Rights Law Review**

Volume 4, Issue 2, 2015

<http://booksandjournals.brillonline.com/content/journals/22131035/4/2>

[Reviewed earlier]

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

Volume 15, In Progress (March 2016)

<http://www.sciencedirect.com/science/journal/22124209/15>

*Review Article*

**[Government-sponsored natural disaster insurance pools: A view from down-under](#)**

Pages 1-9

John McAneney, Delphine McAneney, Rade Musulin, George Walker, Ryan Crompton

### *Abstract*

In the light of the rising cost of natural disasters we review the provision of catastrophe insurance by the public sector in the US, France, New Zealand, Spain, the United Kingdom, and its absence in the Netherlands, where flood risk is viewed as a national security concern. We do this in the context of the Australian home insurance market where insurers increasingly employ risk-reflective, multi-peril premiums as new technology allows them to better understand their exposure to risk. Motivations behind government pools vary by country, as do hazard profiles. In the US, for example, pools have usually arisen in the face of market failure of private sector insurance following a significant natural disaster; the initial concern has been the provision of affordable insurance rather than disaster risk reduction. Government pools have certain advantages over the private sector including their ability to raise funds post-event, but face financial unsustainability given political intervention to maintain affordability of cover in high-risk areas. In Australia, it is too early to judge whether risk-based premiums are leading to better land-use planning and increased mitigation spending, but in the case of northern Australia, a region that faces flooding and tropical cyclone risks, rising premiums are causing concern in Government. Nonetheless, the corollary seems self-evident, i.e. in the absence of transparency about the cost of risk, there is no incentive on the part of homeowners, local councils or land developers to improve the 'risky' landscape; insurers are the only actors with immediate financial incentives to acknowledge these risks.

## **A comparison of the governance landscape of earthquake risk reduction in Nepal and the Indian State of Bihar**

Original Research Article

Pages 29-42

Samantha Jones, Katie J. Oven, Ben Wisner

### *Abstract*

On 25 April 2015, a Mw 7.8 earthquake struck central Nepal, killing more than 8700 people. An earthquake of this magnitude has long been anticipated in Nepal and the neighbouring northern Indian state of Bihar, which straddle the active Himalayan frontal fault system. Drawing on field research undertaken before the earthquake, this paper traces the progress made in earthquake risk reduction efforts at the national scale in Nepal and at the sub-national scale in Bihar. With their contrasting 'governance landscapes', we examine the political and institutional context and power relations among different stakeholder groups, as well as the interests and political will motivating earthquake risk reduction. Nepal is a post-conflict country, with a weak legislative and institutional setting for earthquake risk reduction, and a multitude of different stakeholders (government, multi and bi-lateral donors, UN organisations, and national and international NGOs) engaged in the disaster risk reduction process. Bihar, by comparison, has a strong, hierarchical, sub-national government system with minimal influence of non-government stakeholders in earthquake risk reduction. While Nepal appears to have progressed further in strengthening earthquake resilience, the institutional structures in Bihar are stronger and could potentially support more sustainable resilience building in the long-term. The role of individual 'champions' in both instances (in Nepal among a national NGO, donors and multilateral agencies, and in Bihar within the government) has been instrumental in shaping the earthquake risk reduction agenda and initiatives.

## **International Journal of Infectious Diseases**

January 2016 Volume 42, p1-74

<http://www.ijidonline.com/issue/S1201-9712%2815%29X0012-9>

[Reviewed earlier]

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

Volume 23, Issue 2, 2016

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

[Reviewed earlier]

## **International Migration Review**

Winter 2015 Volume 49, Issue 4 Pages 843–1070, e33–e48

<http://onlinelibrary.wiley.com/doi/10.1111/imre.2015.49.issue-4/issuetoc>

[Reviewed earlier]

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

November 2015 - Volume 13 - Issue 3 pp: 200-296

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

[Reviewed earlier]

## **JAMA**

February 2, 2016, Vol 315, No. 5

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

*Editorial*

### **Sharing Clinical Trial Data: A Proposal From the International Committee of Medical Journal Editors**

FREE

Darren B. Taichman, MD, PhD; Joyce Backus, MSLS; Christopher Baethge, MD; Howard Bauchner, MD; Peter W. de Leeuw, MD; Jeffrey M. Drazen, MD; John Fletcher, MB, BChir, MPH; Frank A. Frizelle, MBChB, FRACS; Trish Groves, MBBS, MRCPsych; Abraham Haileamlak, MD; Astrid James, MBBS; Christine Laine, MD, MPH; Larry Peiperl, MD; Anja Pinborg, MD; Peush Sahni, MBBS, MS, PhD; Sinan Wu, MD

## **JAMA Pediatrics**

February 2016, Vol 170, No. 2

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

*Viewpoint*

### **Sepsis and the Global Burden of Disease in Children**

Niranjan Kissoon, MD, FRCPC; Timothy M. Uyeki, MD, MPH, MPP

*Initial text*

This Viewpoint discusses the impact of sepsis on childhood mortality worldwide. In 2010, an estimated 25% of disability-adjusted life-years—a metric that incorporates premature death by years of life lost and years lived with disability—and 13% of all deaths

worldwide were in children younger than 5 years.<sup>1,2</sup> While reductions in mortality in children younger than 5 years have occurred in many countries since 1990, mortality increased in young children in some parts of sub-Saharan Africa, with severe infections leading to sepsis being a major contributor.<sup>1</sup> For instance, in the neonatal period, diarrhea, lower respiratory tract infections, and meningitis were important contributors to mortality in 2010, while in the postneonatal period, nearly 1 million estimated deaths (half of all deaths) were due to lower respiratory tract infections (respiratory syncytial virus, Haemophilus influenzae type B, Streptococcus pneumoniae), diarrheal diseases (rotavirus, Cryptosporidium), and malaria.<sup>2</sup> Other infectious causes of death in children younger than 5 years were measles, pertussis, and human immunodeficiency virus/AIDS. We suggest that sepsis-related pediatric deaths are substantially underestimated and that efforts are needed to better assess the impact of sepsis on childhood mortality worldwide...

### **Children Exposed to Abuse in Youth-Serving Organizations: Results From National Sample Surveys**

FREE ONLINE ONLY

Anne Shattuck, PhD; David Finkelhor, PhD; Heather Turner, PhD; Sherry Hamby, PhD

#### *Abstract*

#### Importance

Protecting children in youth-serving organizations is a national concern.

#### Objective

To provide clinicians, policymakers, and parents with estimates of children's exposure to abuse in youth-serving organizations.

#### Design, Setting, and Participants

Telephone survey data from the 3 National Surveys of Children's Exposure to Violence (2008, 2011, and 2014) were combined to create a sample of 13 052 children and youths aged 0 to 17 years. The survey participants included youths aged 10 to 17 years and caregivers of children aged 0 to 9 years.

#### Main Outcomes and Measures

Items from the Juvenile Victimization Questionnaire.

**Results** In the combined sample of 13 052 children and youths aged 0 to 17 years, the rate of abuse by persons in youth-serving organizations was 0.4% (95% CI, 0.2-0.7) for the past year and 0.8% (95% CI, 0.5-1.1) over the lifetime. Most of the maltreatment (63.2%) was verbal abuse and only 6.4% was any form of sexual violence or assault.

#### Conclusions and Relevance

Abuse in youth-serving organizations was a relatively rare form of abuse, dwarfed by abuse by family members and other adults.

### **Journal of Asian Development**

Vol 1, No 1 (2015)

[Reviewed earlier]

### **Journal of Community Health**

February 2016, Issue 1, Pages 1-205

<http://link.springer.com/journal/10900/41/1/page/1>

[Reviewed earlier]

**Journal of Development Economics**

Volume 118, Pages 1-298 (January 2016)

<http://www.sciencedirect.com/science/journal/03043878/118>

[Reviewed earlier]

**Journal of Human Trafficking**

Volume 1, Issue 4, 2015

<http://www.tandfonline.com/toc/uhmt20/current>

[Reviewed earlier]

**Journal of Epidemiology & Community Health**

January 2016, Volume 70, Issue 1

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

[Reviewed earlier]

**Journal of Global Ethics**

Volume 11, Issue 3, 2015

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

***Forum: The Sustainable Development Goals***

[Reviewed earlier]

**Journal of Global Infectious Diseases (JGID)**

October-December 2015 Volume 7 | Issue 4 Page Nos. 125-174

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

[Reviewed earlier]

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

Volume 27, Number 1, February 2016

[https://muse.jhu.edu/journals/journal\\_of\\_health\\_care\\_for\\_the\\_poor\\_and\\_underserved/toc/hpu.27.1.html](https://muse.jhu.edu/journals/journal_of_health_care_for_the_poor_and_underserved/toc/hpu.27.1.html)

[Reviewed earlier]

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

Volume 5 Issue 3 2015

<http://www.emeraldinsight.com/toc/jhlscm/5/3>

[Reviewed earlier]

**Journal of Immigrant and Minority Health**

Volume 18, Issue 1, February 2016

<http://link.springer.com/journal/10903/18/1/page/1>  
[Reviewed earlier]

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

Volume 13, Issue 4, 2015

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

[Reviewed earlier]

### **Journal of Infectious Diseases**

Volume 213 Issue 3 February 1, 2016

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

[Reviewed earlier]

### **Journal of International Development**

January 2016 Volume 28, Issue 1 Pages 1–158

<http://onlinelibrary.wiley.com/doi/10.1002/jid.v28.1/issuetoc>

[Reviewed earlier]

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

Winter 2015 Volume 43, Issue 4 Pages 673–913

<http://onlinelibrary.wiley.com/doi/10.1111/jlme.2015.43.issue-4/issuetoc>

***Special Issue: SYMPOSIUM: Harmonizing Privacy Laws to Enable International Biobank Research: Part I***

[14 articles]

### **Journal of Medical Ethics**

February 2016, Volume 42, Issue 2

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

*Research ethics*

**[Paper: Obtaining informed consent for genomics research in Africa: analysis of H3Africa consent documents](#)**

Nchangwi Syntia Munung, Patricia Marshall, Megan Campbell, Katherine Littler, Francis Masiye, Odile Ouwe-Missi-Oukem-Boyer, Janet Seeley, D J Stein, Paulina Tindana, Jantina de Vries

J Med Ethics 2016;42:132-137 Published Online First: 7 December 2015 doi:10.1136/medethics-2015-102796

*Abstract*

Background

The rise in genomic and biobanking research worldwide has led to the development of different informed consent models for use in such research. This study analyses consent documents used by investigators in the H3Africa (Human Heredity and Health in Africa) Consortium.

Methods

A qualitative method for text analysis was used to analyse consent documents used in the collection of samples and data in H3Africa projects. Thematic domains included type of consent model, explanations of genetics/genomics, data sharing and feedback of test results.

#### Results

Informed consent documents for 13 of the 19 H3Africa projects were analysed. Seven projects used broad consent, five projects used tiered consent and one used specific consent. Genetics was mostly explained in terms of inherited characteristics, heredity and health, genes and disease causation, or disease susceptibility. Only one project made provisions for the feedback of individual genetic results.

#### Conclusion

H3Africa research makes use of three consent models—specific, tiered and broad consent. We outlined different strategies used by H3Africa investigators to explain concepts in genomics to potential research participants. To further ensure that the decision to participate in genomic research is informed and meaningful, we recommend that innovative approaches to the informed consent process be developed, preferably in consultation with research participants, research ethics committees and researchers in Africa.

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

Volume 4 Issue 4 December 2015

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

[Reviewed earlier]

### **Journal of Public Health Policy**

Volume 37, Issue 1 (February 2016)

<http://www.palgrave-journals.com/jphp/journal/v37/n1/index.html>

[Reviewed earlier]

### **Journal of the Royal Society – Interface**

01 January 2016; volume 13, issue 114

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

[Reviewed earlier]

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

Vol 11, No 2 (2015)

<http://journal.km4dev.org/journal/index.php/km4dj/index>

[Reviewed earlier]

### **The Lancet**

Feb 06, 2016 Volume 387 Number 10018 p505-618 e13-e19

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

#### ***Series***

*Ending preventable stillbirths*

**[Stillbirths: progress and unfinished business](#)**

J Frederik Frøen, Ingrid K Friberg, Joy E Lawn, Zulfiqar A Bhutta, Robert C Pattinson, Emma R Allanson, Vicki Flenady, Elizabeth M McClure, Lynne Franco, Robert L Goldenberg, Mary V Kinney, Susannah Hopkins Leisher, Catherine Pitt, Monir Islam, Ajay Khera, Lakhbir Dhaliwal, Neelam Aggarwal, Neena Raina, Marleen Temmerman, The Lancet Ending Preventable Stillbirths Series study group

#### *Summary*

This first paper of the Lancet Series on ending preventable stillbirths reviews progress in essential areas, identified in the 2011 call to action for stillbirth prevention, to inform the integrated post-2015 agenda for maternal and newborn health. Worldwide attention to babies who die in stillbirth is rapidly increasing, from integration within the new Global Strategy for Women's, Children's and Adolescents' Health, to country policies inspired by the Every Newborn Action Plan. Supportive new guidance and metrics including stillbirth as a core health indicator and measure of quality of care are emerging. Prenatal health is a crucial biological foundation to life-long health. A key priority is to integrate action for prenatal health within the continuum of care for maternal and newborn health. Still, specific actions for stillbirths are needed for advocacy, policy formulation, monitoring, and research, including improvement in the dearth of data for effective coverage of proven interventions for prenatal survival. Strong leadership is needed worldwide and in countries. Institutions with a mandate to lead global efforts for mothers and their babies must assert their leadership to reduce stillbirths by promoting healthy and safe pregnancies.

#### *Ending preventable stillbirths*

#### **Stillbirths: rates, risk factors, and acceleration towards 2030**

Joy E Lawn, Hannah Blencowe, Peter Waiswa, Agbessi Amouzou, Colin Mathers, Dan Hogan, Vicki Flenady, J Frederik Frøen, Zeshan U Qureshi, Claire Calderwood, Suhail Shiekh, Fiorella Bianchi Jassir, Danzhen You, Elizabeth M McClure, Matthews Mathai, Simon Cousens, Lancet Ending Preventable Stillbirths Series study group, The Lancet Stillbirth Epidemiology investigator group

#### *Summary*

An estimated 2·6 million third trimester stillbirths occurred in 2015 (uncertainty range 2·4–3·0 million). The number of stillbirths has reduced more slowly than has maternal mortality or mortality in children younger than 5 years, which were explicitly targeted in the Millennium Development Goals. The Every Newborn Action Plan has the target of 12 or fewer stillbirths per 1000 births in every country by 2030. 94 mainly high-income countries and upper middle-income countries have already met this target, although with noticeable disparities. At least 56 countries, particularly in Africa and in areas affected by conflict, will have to more than double present progress to reach this target. Most (98%) stillbirths are in low-income and middle-income countries. Improved care at birth is essential to prevent 1·3 million (uncertainty range 1·2–1·6 million) intrapartum stillbirths, end preventable maternal and neonatal deaths, and improve child development. Estimates for stillbirth causation are impeded by various classification systems, but for 18 countries with reliable data, congenital abnormalities account for a median of only 7·4% of stillbirths. Many disorders associated with stillbirths are potentially modifiable and often coexist, such as maternal infections (population attributable fraction: malaria 8·0% and syphilis 7·7%), non-communicable diseases, nutrition and lifestyle factors (each about 10%), and maternal age older than 35 years (6·7%). Prolonged pregnancies contribute to 14·0% of stillbirths. Causal pathways for stillbirth frequently involve impaired placental function, either with fetal growth restriction or preterm labour, or both. Two-thirds of newborns have their births registered. However, less than 5% of neonatal deaths and even

fewer stillbirths have death registration. Records and registrations of all births, stillbirths, neonatal, and maternal deaths in a health facility would substantially increase data availability. Improved data alone will not save lives but provide a way to target interventions to reach more than 7000 women every day worldwide who experience the reality of stillbirth.

#### *Ending preventable stillbirths*

#### **Stillbirths: economic and psychosocial consequences**

Alexander E P Heazell, Dimitrios Siassakos, Hannah Blencowe, Christy Burden, Zulfiqar A Bhutta, Joanne Cacciatore, Nghia Dang, Jai Das, Vicki Flenady, Katherine J Gold, Olivia K Mensah, Joseph Millum, Daniel Nuzum, Keelin O'Donoghue, Maggie Redshaw, Arjumand Rizvi, Tracy Roberts, H E Toyin Saraki, Claire Storey, Aleena M Wojcieszek, Soo Downe, The Lancet Ending Preventable Stillbirths Series study group, The Lancet Ending Preventable Stillbirths investigator group

#### *Summary*

Despite the frequency of stillbirths, the subsequent implications are overlooked and underappreciated. We present findings from comprehensive, systematic literature reviews, and new analyses of published and unpublished data, to establish the effect of stillbirth on parents, families, health-care providers, and societies worldwide. Data for direct costs of this event are sparse but suggest that a stillbirth needs more resources than a livebirth, both in the perinatal period and in additional surveillance during subsequent pregnancies. Indirect and intangible costs of stillbirth are extensive and are usually met by families alone. This issue is particularly onerous for those with few resources. Negative effects, particularly on parental mental health, might be moderated by empathic attitudes of care providers and tailored interventions. The value of the baby, as well as the associated costs for parents, families, care providers, communities, and society, should be considered to prevent stillbirths and reduce associated morbidity.

### **The Lancet Infectious Diseases**

Feb 2016 Volume 16 Number 2 p131-264 e10-e21

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

#### *Editorial*

#### **Guinea worm disease nears eradication**

The Lancet Infectious Diseases

DOI: [http://dx.doi.org/10.1016/S1473-3099\(16\)00020-7](http://dx.doi.org/10.1016/S1473-3099(16)00020-7)

#### *Summary*

Only two infectious diseases have ever been eradicated: smallpox, of which the last naturally transmitted case occurred in 1977, and rinderpest, a disease of cattle and related ungulates, officially declared eradicated in 2011. This year might see a remarkable doubling in the list of eradicated diseases, with both polio (about which we wrote in the August, 2015, issue) and guinea worm no longer being naturally transmitted.

#### *Comment*

#### **Long-term protectiveness of BCG**

Giovanni Sotgiu, Giovanni Battista Migliori

Published Online: 18 November 2015

DOI: [http://dx.doi.org/10.1016/S1473-3099\(15\)00414-4](http://dx.doi.org/10.1016/S1473-3099(15)00414-4)

#### *Summary*

WHO has launched the End TB Strategy, which contains several elements supporting tuberculosis elimination.<sup>1–3</sup> Pillar 1 consists of two tuberculosis prevention interventions: first, diagnosis and treatment of latent tuberculosis infection and, second, vaccination. A new, more effective vaccine is expected by 2025,<sup>2</sup> but in the meantime, we still rely on BCG, which is more than a century old.<sup>4</sup> Epidemiological studies of the BCG vaccine carried out in the past were not designed to provide high-quality evidence in the way that we define it today (ie, multicentre, randomised, double-blind, placebo-controlled clinical trials).

### *Articles*

#### **[Duration of BCG protection against tuberculosis and change in effectiveness with time since vaccination in Norway: a retrospective population-based cohort study](#)**

Patrick Nguipdop-Djomo, Einar Heldal, Laura Cunha Rodrigues, Ibrahim Abubakar, Punam Mangtani

#### *Summary*

##### Background

Little is known about how long the BCG vaccine protects against tuberculosis. We assessed the long-term vaccine effectiveness (VE) in Norwegian-born individuals.

##### Methods

In this retrospective population-based cohort study, we studied Norwegian-born individuals aged 12–50 years who were tuberculin skin test (TST) negative and eligible for BCG vaccination as part of the last round of Norway's mandatory mass tuberculosis screening and BCG vaccination programme between 1962 and 1975. We excluded individuals who had tuberculosis before or in the year of screening and those with unknown TST and BCG status. We obtained TST and BCG information and linked it to the National Tuberculosis Register, population and housing censuses, and the population register for emigrations and deaths. We followed individuals up to their first tuberculosis episode, emigration, death, or Dec 31, 2011. We used Cox regressions to estimate VE against all tuberculosis and just pulmonary tuberculosis by time since vaccination, adjusted for age, time, county-level tuberculosis rates, and demographic and socioeconomic indicators.

##### Findings

Median follow-up was 41 years (IQR 32–49) for 83 421 BCG-unvaccinated and 44 years (41–46) for 297 905 vaccinated individuals, with 260 tuberculosis episodes. Tuberculosis rates were 3·3 per 100 000 person-years in unvaccinated and 1·3 per 100 000 person-years in vaccinated individuals. The adjusted average VE during 40 year follow-up was 49% (95% CI 26–65), although after 20 years, the VE was not significant (up to 9 years VE [excluding tuberculosis episodes in the first 2 years] 61% [95% CI 24–80]; 10–19 years 58% [27–76]; 20–29 years 38% [–32 to 71]; 30–40 years 42% [–24 to 73]). VE against pulmonary tuberculosis up to 9 years (excluding tuberculosis episodes in the first 2 years) was 67% (95% CI 27–85), 10–19 years was 63% (32–80), 20–29 years was 50% (–19 to 79), and 30–40 years was 40% (–46 to 76).

##### Interpretation

Findings are consistent with long-lasting BCG protection, but waning of VE with time. The vaccine could be more cost effective than has been previously estimated

##### Funding

Norwegian Institute of Public Health and London School of Hygiene & Tropical Medicine.

### *Personal View*

#### **[Interventions to reduce zoonotic and pandemic risks from avian influenza in Asia](#)**

J S Malik Peiris, Benjamin J Cowling, Joseph T Wu, Luzhao Feng, Yi Guan, Hongjie Yu, Gabriel M Leung

### **Ebola: lessons learned and future challenges for Europe**

GianLuca Quaglio, Charles Goerens, Giovanni Putoto, Paul Rübig, Pierre Lafaye, Theodoros Karapiperis, Claudio Dario, Paul Delaunois, Rony Zachariah  
259

## **Maternal and Child Health Journal**

Volume 20, Issue 2, February 2016

<http://link.springer.com/journal/10995/20/2/page/1>

*Original Paper*

### **Assessing the Continuum of Care Pathway for Maternal Health in South Asia and Sub-Saharan Africa**

Kavita Singh, William T. Story, Allisyn C. Moran

*Abstract*

Objective

We assess how countries in regions of the world where maternal mortality is highest—South Asia and Sub-Saharan Africa—are performing with regards to providing women with vital elements of the continuum of care.

Methods

Using recent Demographic and Health Survey data from nine countries including 18,036 women, descriptive and multilevel regression analyses were conducted on four key elements of the continuum of care—at least one antenatal care visit, four or more antenatal care visits, delivery with a skilled birth attendant and postnatal checks for the mother within the first 24 h since birth. Family planning counseling within a year of birth was also included in the descriptive analyses.

Results

Results indicated that a major drop-out (>50 %) occurs early on in the continuum of care between the first antenatal care visit and four or more antenatal care visits. Few women (<5 %) who do not receive any antenatal care go on to have a skilled delivery or receive postnatal care. Women who receive some or all the elements of the continuum of care have greater autonomy and are richer and more educated than women who receive none of the elements.

Conclusion

Understanding where drop-out occurs and who drops out can enable countries to better target interventions. Four or more ANC visits plays a pivotal role within the continuum of care and warrants more programmatic attention. Strategies to ensure that vital services are available to all women are essential in efforts to improve maternal health.

*Original Paper*

### **Differences in Human Papillomavirus Vaccination Among Adolescent Girls in Metropolitan Versus Non-metropolitan Areas: Considering the Moderating Roles of Maternal Socioeconomic Status and Health Care Access**

Shannon M. Monnat, Danielle C. Rhubarb...

*Abstract*

**Objectives** This study is among the first to examine metropolitan status differences in human papillomavirus (HPV) vaccine initiation and completion among United States adolescent girls and is unique in its focus on how maternal socioeconomic status and health care access moderate metropolitan status differences in HPV vaccination. **Methods** Using cross-sectional data from 3573 girls aged 12–17 in the U.S. from the 2008–2010 Behavioral Risk Factor Surveillance System, we estimate main and interaction effects from binary logistic regression models to identify subgroups of girls for which there are metropolitan versus non-metropolitan differences in HPV vaccination. **Results** Overall 34 % of girls initiated vaccination, and 19 % completed all three shots. On average, there were no metropolitan status differences in vaccination odds. However, there were important subgroup differences. Among low-income girls and girls whose mothers did not complete high school, those in non-metropolitan areas had significantly higher probability of vaccine initiation than those in metropolitan areas. Among high-income girls and girls whose mothers completed college, those in metropolitan areas had significantly higher odds of vaccine initiation than those in non-metropolitan areas. Moreover, among girls whose mothers experienced a medical cost barrier, non-metropolitan girls were less likely to initiate vaccination compared to metropolitan girls. **Conclusions** Mothers remain essential targets for public health efforts to increase HPV vaccination and combat cervical cancer. Public health experts who study barriers to HPV vaccination and physicians who come into contact with mothers should be aware of group-specific barriers to vaccination and employ more tailored efforts to increase vaccination.

### **Medical Decision Making (MDM)**

February 2016; 36 (2)

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

[New issue; No relevant content identified]

### **The Milbank Quarterly**

A Multidisciplinary Journal of Population Health and Health Policy

December 2015 Volume 93, Issue 4 Pages 651–883

<http://onlinelibrary.wiley.com/doi/10.1111/1468-0009.2015.93.issue-4/issuetoc>

[New issue; No relevant content identified]

### **Nature**

Volume 530 Number 7588 pp6-124 4 February 2016

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

*Editorials*

#### **[The next steps on Zika](#)**

With birth defects blamed on the virus now deemed a matter of international concern, researchers must work fast to assess the extent of the threat.

### **Nature Medicine**

January 2016, Volume 22 No 1 pp1-113

<http://www.nature.com/nm/journal/v22/n1/index.html>

[Reviewed earlier]

## **New England Journal of Medicine**

February 4, 2016 Vol. 374 No. 5

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

[New issue; No relevant content identified]

## **Nonprofit and Voluntary Sector Quarterly**

February 2016; 45 (1)

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

### *Articles*

#### **Episodic Volunteering and Retention - An Integrated Theoretical Approach**

Melissa K. Hyde<sup>1,2</sup>; Jeff Dunn<sup>1,2,3</sup>; Caitlin Bax<sup>4</sup>; Suzanne K. Chambers<sup>1,2,3,5,6</sup>

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2Cancer Council Queensland, Spring Hill, Australia

3School of Social Science, University of Queensland, St. Lucia, Australia

4School of Applied Psychology, Griffith University, Mt. Gravatt, Queensland, Australia

5Prostate Cancer Foundation of Australia, St. Leonards, New South Wales, Australia

6Health and Wellness Institute Edith Cowan University, Perth, Western Australia, Australia

Melissa K. Hyde, Griffith Health Institute, Griffith University, Gold Coast Campus, Queensland 4222, Australia. Email: [melissa.hyde@griffith.edu.au](mailto:melissa.hyde@griffith.edu.au)

### *Abstract*

Episodic volunteers (EVs) are vital for non-profit organization activities. However, theory-based research on episodic volunteering is scant and the determinants of episodic volunteering are not well understood. This study integrates the volunteer process model and three-stage model of volunteers' duration of service to explore determinants of EV retention. A cross-sectional survey of 340 EVs assessed volunteering antecedents, experiences, and retention. Social/enjoyment ( $\beta = .17$ ) and benefit ( $\beta = -.15$ ) motives, social norm ( $\beta = .20$ ), and satisfaction ( $\beta = .56$ ) predicted Novice EV (first experience) retention; satisfaction ( $\beta = .47$ ) and commitment ( $\beta = .38$ ) predicted Transition EV (2-4 years intermittently) retention; and supporting the organization financially ( $\beta = .31$ ), social norm ( $\beta = .18$ ), satisfaction ( $\beta = .41$ ), and commitment ( $\beta = .19$ ) predicted Sustained EV (5-6 years consecutively) retention. Integrated theoretical approaches appear efficacious for understanding EV retention. An Episodic Volunteer Engagement and Retention model is proposed for further testing in prospective work.

### *Systematic Review*

#### **Nonprofit Organizations Becoming Business-Like**

Florentine Maier<sup>1</sup>; Michael Meyer<sup>1</sup>; Martin Steinbereithner<sup>1</sup>

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### *Abstract*

By now, the becoming business-like of nonprofit organizations (NPOs) is a well-established global phenomenon that has received ever-growing attention from management and organization studies. However, the field remains hard to grasp in its entirety, as researchers use a multitude of similar, yet distinct, key concepts. The considerable range and complexity of these overlapping notions create major challenges: Scholars struggle to position their work in a

larger context; it is not easy to build on previous findings and methodological developments; and research gaps are difficult to identify. The present article presents the first systematic literature review to confront those challenges by reviewing 599 relevant sources. In a first step, various key concepts are clarified. Second, the field is mapped according to three research foci: causes of NPOs becoming business-like, organizational structures and processes of becoming business-like, and effects of becoming business-like. From this, we draw conclusions and make suggestions for further research.

### **Oxford Monitor of Forced Migration**

OxMo – Vol. 5, No. 2

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

[Reviewed earlier]

### **Pediatrics**

January 2016, VOLUME 137 / ISSUE 1

<http://pediatrics.aappublications.org/content/137/1?current-issue=y>

[Reviewed earlier]

### **PharmacoEconomics**

Volume 34, Issue 1, January 2016

<http://link.springer.com/journal/40273/33/12/page/1>

*Editorial*

**[Health Technology Assessment as a Priority-Setting Tool for Universal Health Coverage: The Call for Global Action at the Prince Mahidol Award Conference 2016](#)**

Yot Teerawattananon, Alia Luz

[No abstract]

### **PLOS Currents: Disasters**

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

[Accessed 6 February 2016]

[No new relevant content]

### **PLoS Currents: Outbreaks**

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

(Accessed 6 February 2016)

**[Residency Training at the Front of the West African Ebola Outbreak: Adapting for a Rare Opportunity](#)**

February 2, 2016 · Discussion

Medical trainees face multiple barriers to participation in major outbreak responses such as that required for Ebola Virus Disease through 2014-2015 in West Africa. Hurdles include fear of contracting and importing the disease, residency requirements, scheduling conflicts, family obligations and lack of experience and maturity. We describe the successful four-week deployment to Liberia of a first year infectious diseases trainee through the mechanism of the

Global Outbreak Alert and Response Network of the World Health Organization. The posting received prospective approval from the residency supervisory committees and employing hospital management and was designed with components fulfilling the Accreditation Council for Graduate Medical Education (ACGME) core competencies. It mirrored conventional training with regards to learning objectives, supervisory framework and assessment methods. Together with Centers for Disease Control and Prevention and many other partners, the team joined the infection prevention and control efforts in Monrovia. Contributions were made to a 'ring fencing' infection control approach that was being introduced, including enhancement of triage, training and providing supplies in high priority health-care facilities in the capital and border zones. In addition the fellow produced an electronic database that enabled monitoring infection control standards in health facilities. This successful elective posting illustrates that quality training can be achieved, even in the most challenging environments, with support from the pedagogic and sponsoring institutions. Such experiential learning opportunities benefit both the outbreak response and the trainee, and if scaled up would contribute towards building a global health emergency workforce. More should be done from residency accreditation bodies in facilitating postings in outbreak settings.

### **Epidemiology of Chikungunya Virus in Bahia, Brazil, 2014-2015**

February 1, 2016 · Discussion

Chikungunya is an emerging arbovirus that is characterized into four lineages. One of these, the Asian genotype, has spread rapidly in the Americas after its introduction in the Saint Martin island in October 2013. Unexpectedly, a new lineage, the East-Central-South African genotype, was introduced from Angola in the end of May 2014 in Feira de Santana (FSA), the second largest city in Bahia state, Brazil, where over 5,500 cases have now been reported. Number weekly cases of clinically confirmed CHIKV in FSA were analysed alongside with urban district of residence of CHIKV cases reported between June 2014 and October collected from the municipality's surveillance network. The number of cases per week from June 2014 until September 2015 reveals two distinct transmission waves. The first wave ignited in June and transmission ceased by December 2014. However, a second transmission wave started in January and peaked in May 2015, 8 months after the first wave peak, and this time in phase with Dengue virus and Zika virus transmission, which ceased when minimum temperature dropped to approximately 15°C. We find that shorter travelling times from the district where the outbreak first emerged to other urban districts of FSA were strongly associated with incidence in each district in 2014 (R<sup>2</sup>).

### **PLoS Medicine**

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

(Accessed 6 February 2016)

[No new relevant content]

### **PLoS Neglected Tropical Diseases**

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

(Accessed 6 February 2016)

[No new relevant content]

## PLoS One

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

[Accessed 6 February 2016]

[No new relevant content]

## PLoS Pathogens

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

(Accessed 6 February 2016)

[No new relevant content identified]

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

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

(Accessed 6 February 2016)

*Social Sciences - Sustainability Science - Biological Sciences - Sustainability Science:*

### **Policy impacts of ecosystem services knowledge**

Stephen M. Posner<sup>a,b,1</sup>, Emily McKenzie<sup>c,d,e</sup>, and Taylor H. Ricketts<sup>a,b</sup>

#### **Author Affiliations**

#### ***Significance***

Our study introduces a conceptual framework and empirical approach to explore how knowledge impacts decision-making. We illustrate this approach with knowledge about ecosystem services (ES), but the approach itself can be applied broadly. Our results indicate that the legitimacy of knowledge (i.e., perceived as unbiased and representative of multiple points of view) is of paramount importance for impact. More surprisingly, we found that credibility of knowledge is not a significant predictor of impact. To enhance legitimacy, ES researchers must engage meaningfully with decision-makers and stakeholders in processes of knowledge coproduction that incorporate diverse perspectives transparently. Our results indicate how research can be designed and carried out to maximize the potential impact on real-world decisions.

#### ***Abstract***

Research about ecosystem services (ES) often aims to generate knowledge that influences policies and institutions for conservation and human development. However, we have limited understanding of how decision-makers use ES knowledge or what factors facilitate use. Here we address this gap and report on, to our knowledge, the first quantitative analysis of the factors and conditions that explain the policy impact of ES knowledge. We analyze a global sample of cases where similar ES knowledge was generated and applied to decision-making. We first test whether attributes of ES knowledge themselves predict different measures of impact on decisions. We find that legitimacy of knowledge is more often associated with impact than either the credibility or salience of the knowledge. We also examine whether predictor variables related to the science-to-policy process and the contextual conditions of a case are significant in predicting impact. Our findings indicate that, although many factors are important, attributes of the knowledge and aspects of the science-to-policy process that enhance legitimacy best explain the impact of ES science on decision-making. Our results are consistent with both theory and previous qualitative assessments in suggesting that the attributes and perceptions of scientific knowledge and process within which knowledge is coproduced are important determinants of whether that knowledge leads to action.

## **Prehospital & Disaster Medicine**

Volume 31 - Issue 01 - February 2016

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

### *Original Research*

#### **Developing a Performance Assessment Framework and Indicators for Communicable Disease Management in Natural Disasters**

Javad Babaie, Ali Ardalan, Hasan Vatandoost, Mohammad Mehdi Goya and Ali Akbarisari

Prehospital and Disaster Medicine / Volume 31 / Issue 01 / February 2016, pp 27 - 35

#### *Abstract*

##### **Introduction**

Communicable disease management (CDM) is an important component of disaster public health response operations. However, there is a lack of any performance assessment (PA) framework and related indicators for the PA. This study aimed to develop a PA framework and indicators in CDM in disasters.

##### **Methods**

In this study, a series of methods were used. First, a systematic literature review (SLR) was performed in order to extract the existing PA frameworks and indicators. Then, using a qualitative approach, some interviews with purposively selected experts were conducted and used in developing the PA framework and indicators. Finally, the analytical hierarchy process (AHP) was used for weighting of the developed indicators.

##### **Results**

The input, process, products, and outcomes (IPPO) framework was found to be an appropriate framework for CDM PA. Seven main functions were revealed to CDM during disasters. Forty PA indicators were developed for the four categories.

##### **Conclusion**

There is a lack of any existing PA framework in CDM in disasters. Thus, in this study, a PA framework (IPPO framework) was developed for the PA of CDM in disasters through a series of methods. It can be an appropriate framework and its indicators could measure the performance of CDM in disasters.

### *Special Reports*

#### **Protecting the Health and Well-being of Populations from Disasters: Health and Health Care in The Sendai Framework for Disaster Risk Reduction 2015-2030**

Amina Aitsi-Selmi and Virginia Murray

Prehospital and Disaster Medicine / Volume 31 / Issue 01 / February 2016, pp 74 - 78

DOI: <http://dx.doi.org/10.1017/S1049023X15005531> Published online: 17 December 2015

#### *Abstract*

The Sendai Framework for Disaster Risk Reduction (DRR) 2015-2030 is the first of three United Nations (UN) landmark agreements this year (the other two being the Sustainable Development Goals due in September 2015 and the climate change agreements due in December 2015). It represents a step in the direction of global policy coherence with explicit reference to health, economic development, and climate change. The multiple efforts of the health community in the policy development process, including campaigning for safe schools and hospitals, helped to put people's mental and physical health, resilience, and well-being higher up the DRR agenda compared with its predecessor, the 2005 Hyogo Framework for Action. This report reflects on these policy developments and their implications and reviews the range of health impacts from

disasters; summarizes the widened remit of DRR in the post-2015 world; and finally, presents the science and health calls of the Sendai Framework to be implemented over the next 15 years to reduce disaster losses in lives and livelihoods.

### **Preventive Medicine**

Volume 83, Pages 1-76 (February 2016)

<http://www.sciencedirect.com/science/journal/00917435/83>

[New issue; No relevant content identified]

### **Public Health Ethics**

Volume 8 Issue 3 November 2015

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

***Special Symposium: Antimicrobial Resistance***

[Reviewed earlier]

### **Qualitative Health Research**

February 2016; 26 (3)

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

***Special Issue: Qualitative Meta-Analysis***

[New issue; No relevant content identified]

### **Refugee Survey Quarterly**

Volume 34 Issue 4 December 2015

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

[Reviewed earlier]

### **Reproductive Health**

<http://www.reproductive-health-journal.com/content>

[Accessed 6 February 2016]

[No new content]

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

September 2015 Vol. 38, No. 3

<http://www.paho.org/journal/>

[Reviewed earlier]

### **Risk Analysis**

January 2016 Volume 36, Issue 1 Pages 1–181

<http://onlinelibrary.wiley.com/doi/10.1111/risa.2016.36.issue-1/issuetoc>

[New issue; No relevant content identified]

## Science

05 February 2016 Vol 351, Issue 6273

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

*In Depth*

*Infectious Disease*

### **The race for a Zika vaccine is on**

Jon Cohen

Science 05 Feb 2016:

Vol. 351, Issue 6273, pp. 543-544

DOI: 10.1126/science.351.6273.543

#### *Summary*

Scientists first isolated Zika virus in 1947, but the disease it caused in humans was considered mild: It did nothing to 80% of the people it infected, and the ones who had symptoms only had temporary fevers and rashes. But last year, a high number of cases of brain-damaging microcephaly in newborns began to surface in Brazil in lockstep with the arrival of the Zika virus, which is spread by mosquitoes. The World Health Organization on 1 February declared these clusters of disease a "public health emergency of international concern," and a rush of vaccinemakers has jumped into the race to develop a preventive. Vaccines exist against several other flaviviruses, the family Zika belongs to, and experts predict that this won't be a major scientific challenge. They also say it may be possible to piggyback on the other flavivirus vaccines, like ones made for dengue and yellow fever. Then again, vaccine R&D takes time, and because this effort is starting from scratch, researchers say it will take at least a few years before a vaccine can prove itself safe and effective in large human efficacy studies.

## Social Science & Medicine

Volume 150, Pages 1-290 (February 2016)

<http://www.sciencedirect.com/science/journal/02779536/150>

*Review article*

### **Understanding the role of Indigenous community participation in Indigenous prenatal and infant-toddler health promotion programs in Canada: A realist review**

Pages 128-143

Janet Smylie, Maritt Kirst, Kelly McShane, Michelle Firestone, Sara Wolfe, Patricia O'Campo

#### *Abstract*

##### *Purpose*

Striking disparities in Indigenous maternal-child health outcomes persist in relatively affluent nations such as Canada, despite significant health promotion investments. The aims of this review were two-fold: 1. To identify Indigenous prenatal and infant-toddler health promotion programs in Canada that demonstrate positive impacts on prenatal or child health outcomes. 2. To understand how, why, for which outcomes, and in what contexts Indigenous prenatal and infant-toddler health promotion programs in Canada positively impact Indigenous health and wellbeing.

##### *Methods*

We systematically searched computerized databases and identified non-indexed reports using key informants. Included literature evaluated a prenatal or child health promoting program intervention in an Indigenous population in Canada. We used realist methods to investigate

how, for whom, and in what circumstances programs worked. We developed and appraised the evidence for a middle range theory of Indigenous community investment-ownership-activation as an explanation for program success.

#### Findings

Seventeen articles and six reports describing twenty programs met final inclusion criteria. Program evidence of local Indigenous community investment, community perception of the program as intrinsic (mechanism of community ownership) and high levels of sustained community participation and leadership (community activation) was linked to positive program change across a diverse range of outcomes including: birth outcomes; access to pre- and postnatal care; prenatal street drug use; breast-feeding; dental health; infant nutrition; child development; and child exposure to Indigenous languages and culture.

#### Conclusions

These findings demonstrate Indigenous community investment-ownership-activation as an important pathway for success in Indigenous prenatal and infant-toddler health programs.

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

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

[accessed 6 February 2016]

[No new relevant content]

### **Stanford Social Innovation Review**

Winter 2016 Volume 14, Number 1

<http://ssir.org/>

[Reviewed earlier]

### **Sustainability**

Volume 8, Issue 1 (January 2016), Articles 1-

<http://www.mdpi.com/2071-1050/8/1>

[Reviewed earlier]

### **TORTURE Journal**

Volume 25, Nr. 2, 2015

<http://www.irct.org/Default.aspx?ID=5768>

[Reviewed earlier]

### **Tropical Medicine and Health**

Vol. 43(2015) No. 4

[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**

February 2016 Volume 21, Issue 2 Pages 157–291

<http://onlinelibrary.wiley.com/doi/10.1111/tmi.2016.21.issue-2/issuetoc>

## *Reviews*

### **[Prevalence and causes of hearing impairment in Africa \(pages 158–165\)](#)**

W. Mulwafu, H. Kuper and R. J. H. Ensink

Article first published online: 14 DEC 2015 | DOI: 10.1111/tmi.12640

#### *Abstract*

##### *Objective*

To systematically assess the data on the prevalence and causes of hearing impairment in Africa.

##### *Methods*

Systematic review on the prevalence and causes of hearing loss in Africa. We undertook a literature search of seven electronic databases (EMBASE, PubMed, Medline, Global Health, Web of Knowledge, Academic Search Complete and Africa Wide Information) and manually searched bibliographies of included articles. The search was restricted to population-based studies on hearing impairment in Africa. Data were extracted using a standard protocol.

##### *Results*

We identified 232 articles and included 28 articles in the final analysis. The most common cut-offs used for hearing impairment were 25 and 30 dB HL, but this ranged between 15 and 40 dB HL. For a cut-off of 25 dB, the median was 7.7% for the children- or school-based studies and 17% for population-based studies. For a cut-off of 30 dB HL, the median was 6.6% for the children or school-based studies and 31% for population-based studies. In schools for the deaf, the most common cause of hearing impairment was cryptogenic deafness (50%) followed by infectious causes (43%). In mainstream schools and general population, the most common cause of hearing impairment was middle ear disease (36%), followed by undetermined causes (35%) and cerumen impaction (24%).

##### *Conclusion*

There are very few population-based studies available to estimate the prevalence of hearing impairment in Africa. Those studies that are available use different cut-offs, making comparison difficult. However, the evidence suggests that the prevalence of hearing impairment is high and that much of it is avoidable or treatable.

## *Original Research Papers*

### **[Health status and disease burden of unaccompanied asylum-seeking adolescents in Bielefeld, Germany: cross-sectional pilot study \(pages 210–218\)](#)**

L. Marquardt, A. Krämer, F. Fischer and L. Prüfer-Krämer

Article first published online: 22 DEC 2015 | DOI: 10.1111/tmi.12649

#### *Abstract*

##### *Objective*

This exploratory pilot study aimed to investigate the physical and mental disease burden of unaccompanied asylum-seeking adolescents arriving in Bielefeld, a medium-size city in Germany.

##### *Methods*

A cross-sectional survey with purposive sampling of 102 unaccompanied asylum-seeking adolescents aged 12–18 years was performed. Information on general health status, selected infectious and non-communicable diseases, iron deficiency anaemia and mental illness was collected during routine check-up medical examinations upon arrival in Bielefeld, Germany. The data were analysed using descriptive statistics.

##### *Results*

The analysis revealed a complex disease burden with a high prevalence of infections (58.8%), mental illness (13.7%) and iron deficiency anaemia (17.6%) and a very low prevalence of non-communicable diseases (<2.0%). One in five of the refugees were infected with parasites. Whilst sub-Saharan Africans showed the highest prevalence of infections (86.7%), including highest prevalences of parasites (46.7%), West Asians had the highest prevalence of mental disorders (20.0%). Overall, the disease burden in females was higher.

#### Conclusion

A thorough medical and psychological screening after arrival is highly recommended to reduce the individual disease burden and the risk of infection for others. This promotes good physical and mental health, which is needed for successful integration into the receiving society. Barriers to health service access for unaccompanied asylum-seeking adolescents need to be lowered to allow need-specific health care and prevention.

### UN Chronicle

Vol. LII No. 3 2015 December 2015

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

#### ***Sustainable Energy***

This issue focuses on sustainable energy, and explores topics such as universal energy access, increasing the use of renewable energy, improved energy efficiency and the nexus between energy and development.

### Vulnerable Children and Youth Studies

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

Volume 10, Issue 4, 2015

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

[Reviewed earlier]

### World Heritage Review

n°77 - October 2015

<http://whc.unesco.org/en/review/77>

[Reviewed earlier]

# # # #

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