



## EUPHA Newsletter June 2006

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#### 1. **EUPHA Conference Montreux – Update**

We received a total of 604 single abstracts 49 workshop proposals from 50 different countries. This is a new record. Our International Scientific Committee consisted of 38 members from 29 European countries. These members each scored at least 150 abstracts, using a rating scale ranging from 1 to 5. During the annual meeting of the International Scientific Committee in Montreux on 9-10 June, 192 abstracts were selected for oral presentation (scoring 3.4 or higher). These abstracts will be presented in 32 parallel session with 6 oral presentations, each of 10 minutes with 5 minutes discussion. 34 of the 49 submitted workshops were accepted for the programme (scoring 3.4 or higher) and 250 abstracts (scoring 3.0 or higher) have been accepted as posters. This selection means that the programme for the Montreux conference will also set a new record with 11 parallel sessions at the same time.

The preliminary programme with all parallel sessions (workshops and single abstracts) will be available on the EUPHA website after July 15. At the end of August, an updated programme will be published.

Please note that next to the scientific programme, a number of extra pre- or side-conference meetings are being organised. The most recent overview of the programme, including extra-conference activities, can be found on our website: [www.eupha.org](http://www.eupha.org) (clicking on the EUPHA banner). You can also find information there on the conference registration. For some extra-conference activities, an extra fee and/or a maximum on the number of participants may apply.

#### 2. **News from the European Journal of Public Health and Oxford University Press**

##### ***EJPH 16-3***

The third issue of the EJPH 2006 is available online now.

This issue includes articles on:

- Transition in Eastern Europe
- Conflict, Disaster, Homicide
- Ethnic Disparities in Health
- Socioeconomic Disparities in Health

- Health-related Behaviours

### **Activating your Online Access**

If you are a registered EUPHA member, you have free online access to the full text of the EJPH. In order to gain access to the journal, please register as outlined below.

To activate your personal online access to EJPH, you will need to register an account.

To do this, you will need the subscriber number sent to you in a letter from Oxford University Press, the journal's publisher. If you do not know your subscriber number, please contact [EJPHqueries@oxfordjournals.org](mailto:EJPHqueries@oxfordjournals.org) in the first instance.

With your subscriber number to hand, please visit <http://www3.oup.co.uk/Register>

- If you are registering for the first time. Help is available for activating your online access at the above web site.
- If you've already registered an account with OUP and you need to register your additional subscriber number for EJPH, log in at the Activation and Maintenance Page and go to 'Subscription Details Edit' to add this subscriber number to your account.
- If you've already registered an account for this subscriber number, then you do not need to register again.

You will need your username and password to gain access to the full text of the journal.

### Optional Print Subscription

In addition to online access to the European Journal of Public Health, as a EUPHA member you also have the option of purchasing a print subscription to the journal at a greatly reduced rate. Please visit <http://www3.oup.co.uk/jnls/list/eurpub/subinfo/> for more information.

### Free E-mail Table-of-Contents Alerting Service

The European Journal of Public Health offers a free table-of-contents e-mail alerting service. Please visit <http://eurpub.oxfordjournals.org/cgi/alerts/etoc> to register for the journal's eTOC service, and we will send you an e-mail every time a new issue is published, listing the contents.

### **The OUP Summer Book Sale is now on!**

OUP has over 900 titles in humanities, social science, reference, law, medicine, and science, with 50%-75% discount on all titles. Start browsing the sale catalogue:

<http://oup.msgfocus.com/c/1kcGKiglgxLRnP6>

Offer ends 4 August 2006!

This sale offer is only available directly through OUP to customers resident in the UK, Europe, and the Middle East. If you would like to be the first to hear about future Oxford sales, subscribe to the Oxford sale e-news service: <http://oup.msgfocus.com/c/1kcLrLPQtyZgg0w>.

### **3. News from the European Commission**

To stay up-to-date on the activities of the Directorate General Health and Consumer Protection of the European Commission, you can register for their email updating service called "What's new on DG Health & Consumer Protection website". Click [HERE](#) to subscribe, unsubscribe or change your options.

Below please find a selection of news items published in this email service from 24 May to 23 June 2006:

#### **General documents:**

- Newsletter: Health & Consumer Voice Newsletter on Food Safety, Health and Consumer Policy from Health and Consumer Protection DG  
[Edition: April 2006](#) available in French and German
- Health Determinants: funded project 2005  
[CABPH - Capacity Building for Public Health and Health Promotion in Central and Eastern European Member States and Candidate Countries of the European Union](#)

- Health Information: funded project 2004  
[DIRERAF - Development of Public Health Indicators for Reporting environmental/occupational Risks related to Agriculture and Fishery](#) Interim report
- Health Information: Funded project 2003  
[REPROSTAT 2 - Assessing the usefulness of a comprehensive set of reproductive health indicators designed for the enlarged European Union, with particular emphasis on the reproductive health of adolescents and young adult \(Phase 2\)](#) Interim report
- [HEM - Closing the Gap - Reducing Premature Mortality. Baseline for Monitoring Health Evolution Following Enlargement](#) Interim report
- Health Information: Working Party on EC Health Indicators  
[Second Meeting of the Working Party Health Indicators, Luxembourg, 10-11th May 2006](#) Minutes
- Newsletter: Health & Consumer Voice Newsletter on Food Safety, Health and Consumer Policy from Health and Consumer Protection DG  
[Edition: March 2006](#) available in French and German

**Rare Diseases: Newsletter**

[OrphaNews Newsletter of the Rare diseases Task Force](#) May edition

**Tobacco:**

- Tobacco: HELP - For a life without tobacco campaign  
[TV Spot "Smoking?.Where do you stand ?"](#)

**Food and nutrition:**

- Food Safety: From the Farm to the Fork - Training Strategy - News  
[Commission holds avian influenza laboratory workshop for south-east Asia](#)
- Food Supplements  
[Commission Directive 2006/37/EC](#)
- Novel Foods - Review of Regulation (EC) 258/97  
[Public Consultation launched on Revision of Novel Food Regulation EC N° 258/97.](#)
- Food Safety: From the Farm to the Fork - Training Strategy - News  
[South-east Asian delegates attend EU avian influenza laboratory workshop](#)
- Standing Committee on the Food Chain and Animal Health (SCFCAH)  
[General Food Law - Agenda of 26 June 2006](#)
- Novel Foods - Notified Foods  
[List of Notifications of novel foods](#) updated
- Food Safety: From the Farm to the Fork - Training Strategy - News  
[European Commission seminar on animal by-products takes place in Milan](#)
- Open Consultations: Food Safety  
[Discussion Paper on the setting of maximum and minimum amounts for vitamins and minerals in foodstuffs](#)
- [Directive 90/496/EEC on Nutrition Labelling for Foodstuffs: Discussion Paper on the Revision of Technical Issues](#)
- [Labelling: competitiveness, consumer information and better regulation for the EU](#)
- Training Strategy - Better Training for Safer Food  
[Second mission to Indonesia for Commission expert](#)

**Health Services:**

- Overview: High Level Group on Health Services and Medical Care  
[Programme and draft agenda for the eighth meeting of the High Level Group on 22 March 2006](#) New document
- Health Information: funded project 2003  
[Unified Central and Eastern European surveillance/monitoring system for healthcare quality and efficiency indicators CEEQNET \(Central and Eastern Europe Quality Network\)](#) Interim report

**Influenza:**

- Influenza: Influenza fact sheet  
[Current Situation of Avian Influenza and human cases related to the H5N1 virus subtype](#) data as of 23 May 2006
- [Human cases of A/H5N1 by date of onset and country](#) data as of 23 May 2006
- [Documented avian influenza infections in humans \(1997-2006\)](#) data as of 23 May 2006
- [Documented Avian Influenza Infection in Humans](#) data as of 23 May 2006
- Chronology of Events and Commission action in relation to Avian influenza.  
[PART II : From 1 January 2006](#) Updated
- Influenza: Influenza fact sheet  
[Documented avian influenza infections in humans \(1997-2006\)](#) data as of 15 June 2006
- [Human cases of A/H5N1 by date of onset and country](#) data as of 15 June 2006
- [Documented Avian Influenza Infection in Humans](#) data as of 15 June 2006
- [Current Situation of Avian Influenza and human cases related to the H5N1 virus subtype](#) data as of 15 June 2006
- Avian Influenza - Chronology of Events and Commission action in relation to Avian influenza.  
[PART II : From 1 January 2006](#) Updated
- Influenza: Press Release  
[Avian Influenza: H5 virus confirmed in geese in Hungary](#)
- Influenza: Influenza fact sheet  
[Documented avian influenza infections in humans \(1997-2006\)](#) data as of 06 June 2006
- [Human cases of A/H5N1 by date of onset and country](#) data as of 06 June 2006
- [Documented Avian Influenza Infection in Humans](#) data as of 06 June 2006
- [Current Situation of Avian Influenza and human cases related to the H5N1 virus subtype](#) data as of 06 June 2006

#### ***Injury prevention:***

- Injury Prevention Programme  
[The first release of the Injury Database Public Access application is available at the following address: https://webgate.ec.europa.eu/idbpa/. The application will be presented at the Conference on Injury Prevention and Safety Promotion in Vienna at the end of the month.](#)
- Injury Prevention Programme  
[The first release of the IDB Public Access application is undergoing beta testing and is accessible via the IDB Homepage](#)

#### **4. News from WHO/EURO**

The text for this section was provided by the Unit for Vaccine Preventable Diseases and Immunization (VPI), WHO/EURO

##### ***Scaling up global polio eradication***

Global eradication of polio was on the agenda when the world's health experts gathered for the World Health Assembly this June. A resolution was ratified (WHA59.6), emphasising the specific challenges faced by some regions.

In northern Nigeria, large-scale supplementary immunization activities are required. International spread of polio from Nigeria is an escalating risk. The country is the last reservoir of indigenous wild-type poliovirus in Africa, and it appears to be the only significant reservoir of types 1 and 3 poliovirus together.

Supplementary activities are recommended as well for Afghanistan, India and Pakistan. Wild poliovirus transmission in these countries is restricted to a single serotype, either type 1 or 3, in most geographical areas.

Analysis has defined critical aspects in avoiding further international spread of polio. The speed and geographical extent of the initial immunization response is crucial. Also, the proportion of children vaccinated and the number of immunization rounds conducted play a significant role in the speed of controlling outbreaks. The WHA resolution recommends all Member States to consider the lessons learned from this analysis when responding to circulating virus.

Furthermore, it emphasises that to accelerate global eradication of polio, certain activities need to be conducted in all countries. These include destruction or biocontainment of all wildtype polioviruses, enhancing and sustaining surveillance and evaluating longterm immunization options.

Finally, further financial commitments are indispensable to the success of the programme. Just for activities in 2006, US\$ 150 million is immediately required. The planned activities not only regard procurement of polio vaccines and immunization campaigns. They also cover emergency outbreak response, disease surveillance and technical support to Member States.

For more information, please refer to [http://www.who.int/gb/ebwha/pdf\\_files/WHA59/A59\\_6-en.pdf](http://www.who.int/gb/ebwha/pdf_files/WHA59/A59_6-en.pdf).

### ***Integrated Surveillance Training package developed and tested***

To scale up surveillance of vaccine preventable diseases, WHO Regional Office for Europe has developed a surveillance training package. The objective is to strengthen national surveillance of vaccine preventable diseases and adverse events following immunization. The training package was piloted in Copenhagen in April and was put into practice for the first time in Tajikistan 22-26 May.

The objectives of the training package are not only to improve tools and skills in surveillance – including planning, active surveillance, monitoring, case investigation, outbreak investigation, data analysis and definition of staff responsibilities. Another essential component is to develop and strengthen national action plans to strengthen surveillance.

A crucial aspect of the training package is thorough preparation in close cooperation with the Member State. Each training is to be prepared by detailed discussions and a situation analysis developed in collaboration with the Ministry of Health. It is essential to establish a common understanding of the core problems affecting the quality of surveillance in the given country.

Both the pilot and the first actual training have proved that surveillance is definitely an important area in need of strengthening.

The training package will be put into action several times in the next biennium. Surveillance trainings are planned in Albania, Bosnia and Herzegovina, Bulgaria, Kyrgyzstan, Slovakia, The former Yugoslav Republic of Macedonia, Turkey, Turkmenistan, Ukraine and Uzbekistan.

### ***European Immunization Week initiative evaluated – hailed a success***

An evaluation report on the first European Immunization Week initiative has just been finalized, based on broad consultations with participating countries. The European Immunization Week was launched in 2005 by WHO regional Office for Europe and a number of countries in Europe. It is an initiative to raise awareness, improve communication and advocate immunization across the European Region.

The initiative was born out of a concern that immunization is becoming less valued due to a decline in the incidence of, and reduced fear of, infectious diseases. Vaccination coverage is declining or stagnating in many European countries, often resulting in large, sporadic disease outbreaks.

The evaluation demonstrated that the initiative succeeded in generating strong interest from internal and external stakeholders as well as notable impact among target audiences. The initiative furthermore enabled immunization teams to gain support from senior policy makers as well as to advocate for future programme investment.

One of the strengths of the initiative proved to be its potential for commonality across the Region – while still allowing individual countries to tailor their strategies, messages and activity plans according to their specific needs. The evaluation demonstrated the breadth of the initiative in terms of partnerships, target audiences, communication activities and channels.

An essential recommendation of the evaluation was to continue the European Immunization Week as an annual, Region-wide initiative. The evaluation moreover presented a strong recommendation to hold future European Immunization Weeks during springtime. The next initiative will take place in spring 2007. However, planning starts now, and WHO invites all countries across the European region to join!

### ***First ever integrated WHO EURO LabNet meeting - Georgia's First Lady to open***

The first meeting on the WHO coordinated integrated laboratory network (LabNet) for countries of the Commonwealth of Independent States (CIS) was conducted 25-28 April at the *National Centers for Disease Control* in Tbilisi, Georgia.

Georgia's First Lady, Ms Sandra Roelofs-Saakashvili, the Dutch wife of President Michael Saakashvili, opened the meeting. She is a strong supporter of the Georgian immunization program and accepted with great enthusiasm the invitation to partake in the meeting. In the past, the First Lady has been a UNICEF volunteer and has worked with the international Red Cross. At current, she is actively involved in the SOCO charitable foundation, founded by herself in 1998.

The LabNet discussed at the meeting is a network of national reference laboratories. All of them coordinated and accredited by WHO Regional Office for Europe. The network was originally conceived for the Polio Eradication Program. It was created to ensure that virological investigations are performed according to set standards.

Now, a measles/rubella LabNet has been developed, using the experience and resources built up by the polio LabNet. The fact that five national *polio* reference laboratories have been nominated *measles and rubella* reference laboratory emphasizes the integrated approach (Armenia, Belarus, Kazakhstan, Kyrgyzstan and Ukraine).

The integrated approach is becoming a continuously stronger pillar of WHO immunization activities in Europe. It not only ensures sharing of experience and expertise. It also assures the best utilization of investments in terms of staff training and laboratory equipment. This is furthermore strengthened by the fact that the LabNet in future will expand to other vaccine preventable diseases such as influenza and rotavirus.

Apart from the First Lady, the meeting was participated by heads of national measles/rubella and polio laboratories from CIS as well as representatives of the Georgian Ministry of Health.

## **5. Job vacancies**

### ***United Nations Relief Center Job Openings***

#### **Our Mission**

United Nations Relief Center (UNRC) International's mission is to support united nations to serve individuals and families in the poorest communities in the world. Drawing strength from our global diversity, resources and experiences, we promote innovative solutions and are Advocates for global responsibility. We facilitate lasting change by: strengthening capacity for self help; providing economic opportunity; delivering relief in emergencies; influencing policy decisions at all levels; and addressing discrimination in all its forms. Guided by the aspirations

of local communities, we pursue our mission with both excellence and compassion because the people UNRCm we serve deserve nothing less.

**GENERAL REQUIREMENTS/SELECTION:**

Applicants are selected on the basis of academic credentials experience and other relevant factors. Successful Applicants are invited to come to Washington, for an interview/ Training Candidates are interviewed on their related knowledge, skills and abilities. Application is open to all interested applicants from any nationality.

**HOW TO APPLY:**

Please send your resume/CV to: [employment@unrc.ht.st](mailto:employment@unrc.ht.st)

A.Position:Pharmacist  
Location:France/Romania  
Salary:\$175,000.00 usd  
Contract:Permanent

The incumbent performs the full range of pharmacy duties requiring full knowledge of physical properties, compatibilities, use, dosage, cautions, contraindications, labeling and storage. He/She works as generalist in all areas of the Pharmacy including unit dose and intravenous admixtures; supervises the technical work of Pharmacy Technicians and rotate as Pharmacist-in-Charge. Incumbent provides drug information to physicians and other members of the medical center staff; performs teaching duties in various outpatient clinics; instructs patients concerning their drugs; instructs students from affiliated schools of Pharmacy. Performs other duties as assigned.

B. Position:HEALTH SCIENCE SPECIALIST  
Salary:\$178,000.00 usd  
Location:France/Romania  
Contract:Permanent

This position is in support of Center For Health Quality, Outcomes, & Economic Research (CHQOER) and serves as researcher working with the Chief, Health Economics Section, under the direction of the Director of the Center with responsibility for the conducting of research in all aspects of health economics, including decision analysis, cost-effectiveness analyses, demand models, productivity measurement, and the development of cost functions. Duties include writing proposals for new research initiatives, participating as a co-investigator on existing health services research projects involving cost analyses, writing professional reports, taking lead on writing peer-reviewed papers, presenting research results at professional meetings, and assisting, in serving as a consultant to other CHQOER research on economic analyses. Other duties include serving as Study Director for HSR&D-funded studies, which will require calculations of population-based and other non-survey, based HEDIS measures using current Veterans Health Administration (VHA) databases. The health science is expected to use sophisticated software packages, Markov models, and decision tree analysis.

C. Position:Auditor  
Salary:\$181,000.00 usd  
Location:U.S.A  
Contract:Permanent

Treasury OIG is looking for people capable of taking initiative and exercising independent judgment, with a strong desire to improve the effectiveness and efficiency of government programs and the intellectual capacity and drive to make that happen. OIG is responsible for overseeing the operations of all Treasury Department Offices and Bureaus (with the exception of the IRS,) and for conducting audits, investigations, and evaluations.

D.Position: Environmental Officer  
Location:Belgium  
Salary: \$170,600.00 USD.

Contract: Permanent

They are responsible for development oversight, management, and evaluation of programs in the following areas: bio-diversity, conservation, forestry, wildlife management, water and coastal resources management, environmental education, environmental policy, environmentally sustainable agriculture, community based natural resources management, urban and industrial pollution reduction, urban planning and management (including such areas as housing, water and sanitation), urban and housing finance, energy efficiency and conservation, renewable energy applications, clean energy technologies, energy sector planning and global climate change. Environment Officers apply both a technical knowledge of their program area and a variety of management and program evaluation knowledge in order to ensure that projects meet the needs of UNRC-usa 's partners and customers in a cost-effective manner.

**D. Financial Management Officer**

Location: Netherland

Salary:\$165,000.00 USD

Duration: Permanent

They direct the accounting and payment operations worldwide. In addition, they provide significant ,levels of advisory services to all levels of the mission and host country governments. This includes administrative, operational and program matters concerning financial, budgetary and resource management and implementation issues.

**E.Position: Senior Program Officer for Nutrition**

Location: South-Africa/U.S.A

Contract: Full time

Salary:\$180,678.00 USD

Overall Responsibilities

The Senior Program Officer for Nutrition works closely with Senior Child Survival/ImmUNRCization. Program Managers to plan, coordinate, implement, monitor, and evaluate child survival activities, with special attention to strengthening nutrition program activities. Work with the Senior Child Survival/Immunization Advisor and the State Child Survival/Malaria Program Managers in coordinate, implement, monitor, and evaluate the country child survival activity plan. In particular, design, plan, implement, and evaluate nutrition actions as an integral part of COMPASS activities. Coordinate, plan, implement, monitor, and evaluate nutrition activities related to Vitamin A, breastfeeding promotion, complementary feeding, nutrition activities related to immUNRCization and National Immunization Days (NIDs), Quality Protein Maize (QPM) related issues, communications/behavior change, and community mobilization. Evaluate the costs and effectiveness of Positive Deviance (PD)/Hearth approaches to improving childhood health and nutrition. Identify and coordinate with partners from The World Health Organization Children's Fund (UNICEF), World Bank, World Health Organization(UNRC), Canadian International Development Agency/Micronutrient Initiative (CIDA/MI), Department for International Development(DFID)International Institute of Tropical Agriculture (IITA), Helen Keller International (HKI),community-Directed Treatment and Ivermectin (CDTI) Program, other academic institutions, Private Voluntary Organizations (PVOs), and Non-governmental Organizations (NGOs) for the development of activities at scale to reach high geographical coverage.

**F.Postion:Program/Project Development Officer**

Location:United Kingdom/U.S.A

Salary:\$184 ,000.00 USD

Duration: Permanent

They are responsible for strategy development, policy formulation, performance reporting, project management, and public outreach. They are looked upon to ensure that the Mission's operational procedures are designed to elicit teamwork, emphasize shared values, make known programming priorities, and reward innovation. Program/Project development officers



must be able to apply leadership and management skills in order to ensure that program activities are designed and implemented to achieve stated objectives, within resource constraints and in a timely manner

#### G.Executive Officers

Location;France

Salary;\$170,000.00 USD

Duration: Permanent

They oversee a wide range of administrative and logistical support functions including personnel management, contracting, procurement, property management, motor pool management, travel management, employee/family housing and maintenance management. In addition to having direct responsibility for providing the daily support of the agency's field mission, duties include planning for future personnel and procurement requirements at the assigned duty station.

#### H.Lawyers

Location;France

Salary;\$180,000.00 USD

Duration: Permanent

They provide legal counsel to planners and administrators of UNRC's overseas programs, laws and regulations, Agency directives and delegations of authority, bilateral agreements, loan and grant agreements, contracts and other agreements pertaining to country or regional programs. They advise on reconciliation of problems resulting from differences between DRI . and cooperating country laws. They advise regional personnel on the drafting and promotion of legislation and regulations to be proposed for enactment or adoption by the cooperating country government Ministry of Justice

#### I. Education Development Officers

Location;France/Netherland/U.S.A

Salary;\$180,000.00 USD

Duration: Permanent

They analyze, advise, and assist with the development of host country education human resources and manpower planning systems. Strategies are designed to improve existing education programs as well as to promote organizational competencies and skills acquisition related to both individual and institutional development. Duties Include participation in Agency policy formulation, sector analysis, program and project design, program monitoring, and evaluation of activities in education and human resources.

## **6. Call for projects/tenders/collaboration**

### **Health metrics network – call for proposals: Round 2, June 2006**

Website: [www.healthmetricsnetwork.org](http://www.healthmetricsnetwork.org)

The Health Metrics Network (HMN) is a global partnership whose mission is to champion and facilitate better health information at country, regional, and global levels. Partners include developing countries, multilateral and bilateral agencies, foundations, global health funds, and technical experts. Most importantly, HMN seeks to bring together health and statistical constituencies in order to build capacity and expertise and enhance the availability, quality, dissemination, and use of data for decision-making. HMN offers limited catalytic funding to countries to enable enhanced generation, analysis and use of health information for evidence-based decision making.

The aim of this next round of funding is to enable interested countries to formulate a sound health information system development plan that is aligned with HMN standards, around which governments, development partners, donors, and funds can coordinate their investments. Round 2 grants are thus focused on assisting eligible countries to; identify and

convene country stakeholders from health, statistics and development agencies; undertake an assessment of the current system using the HMN Toolkit; and compose a comprehensive, prioritized and financed development plan (guidelines for such plans will be available from HMN by September 2006). The funding ceiling for Round 2 proposals is limited to a maximum of USD 50,000 for 1 year.

In order to streamline the grant application process, a simple online application has been developed with explicit directions on the information required for consideration, including additional documentation. Online applications will be accepted beginning mid-July 2006. In the interim interested parties are encouraged to download the PDF and begin developing their proposals. The grant application form is designed to reduce further grant negotiation, once the awards have been announced. The deadline for receipt of submissions is 31st August 2006. It is anticipated that formal agreements for HMN support will be in place by November 2006.

Who can apply?

Eligible countries for Round 2 are those low and middle income countries not in receipt of HMN support in Round 1. Only one proposal per one country is accepted, and HMN strongly favours proposals submitted by a group of relevant stakeholders working together. Please consult the

Guidelines for Country Applications: Round 2

(<http://www.who.int/healthmetrics/guidelines2.doc>)

For further information or clarification, please contact the Health Metrics Network Secretariat -World Health Organization  
email: [healthmetrics@who.int](mailto:healthmetrics@who.int)

**EPOS Health Consultants**, a German consulting company and member of EHMA, is looking for organisations specialised in licensing/re-licensing of medical staff, nursing and paramedical staff for cooperation in future projects in the area of international development cooperation which focus on staff licensing. EPOS has implemented over 200 projects in the health sector in more than 70 countries during the last 20 years and has a comprehensive track record in licensing and accreditation of health facilities and services in different countries. With this inquiry we would like to establish first contact with organisations specialising in staff licensing and would be happy to discuss further cooperation possibilities upon interest and specific project opportunities coming up.

Thank you very much in advance for your attention to our inquiry. More information on our company and our activities is available on our website  
<<http://www.epos.de>> [www.epos.de](http://www.epos.de).

In case of interest, please contact Sabine Bankwitz, Project Manager, at  
<<mailto:sabine.bankwitz@epos.de>> [sabine.bankwitz@epos.de](mailto:sabine.bankwitz@epos.de)

### ***A Dictionary of Epidemiology -- Fifth Edition -- Call for submissions***

The International Epidemiological Association (IEA) and Oxford University Press (OUP) are pleased to announce that work is now beginning on the Fifth Edition of A Dictionary of Epidemiology, whose first four editions were edited by John Last (Ottawa) and published by OUP. This new, Fifth Edition will be edited under the leadership of Miquel Porta (Barcelona), who was selected for such task by the IEA Council in 2000. The tentative publication date is September of 2008, to coincide with the IEA World Congress of Epidemiology in Porto Alegre, Brazil.

Members of IEA and all other epidemiologists worldwide are cordially invited to contribute to the work by submitting to the editor amendments, corrections of existing definitions, and new material. There is already a small file of suggested amendments and possible additions to the new edition, which John Last received and kindly guarded since publication of the Fourth Edition in 2001. Further contributions, corrections and comments are warmly welcomed at our exciting new collaborative web environment. Rather than communicating via email, we have

established a wiki, a collaborative website where all interested parties can participate in the creation of this new edition. Please note that the wiki is the only way to make your contribution.

If you could contribute to the 5th edition I would personally feel very honoured and pleased. I am of course aware of your multiple commitments.

For more information, please visit <http://tinyurl.com/h44w3> We look forward to your criticisms, comments, and suggestions.

Contact person : Prof. Miquel Porta : [mporta@imim.es](mailto:mporta@imim.es)

## 7. Upcoming conferences

### ***"The next 40-years of unity and diversity in the education of Public Health".***

XXVIII ASPHER Annual Conference, 15-17 September 2006 , Maastricht, Netherlands.

We are happy to announce that the preparations for the upcoming ASPHER Conference, September 15-17, 2006, in Maastricht, the Netherlands, are in full swing. In light of the pending summer vacations and the usual hectic academic year-end obligations, we would like to draw your attention to the conference website: [www.unimaas.nl/aspher2006](http://www.unimaas.nl/aspher2006), so that you may take advantage of the reduced early registration conference fees.

We would like to point out that the early registration deadline for this year's 28th ASPHER Annual Conference is July 21, 2006. Just follow the simple registration procedure made available to you via the 'hyperlink' and your registration will be calculated.

### ***Public Health in a Globalized World: breaking down social, economical, and political barriers***

11th World Congress on Public Health / 8th Brazilian Congress on Collective Health  
Congress website: <http://www.saudecoletiva2006.com.br/ingles/presentation.php> .

A preliminary schedule has been posted with details of all the forums and workshops, etc. Also, a preliminary schedule for the oral presentations has been posted as well. It is recommended that everyone review the information so you can organize your daily agenda. If there are any questions, please contact Charlene Royal at [charlene.royal@apha.org](mailto:charlene.royal@apha.org) or 11th World Congress of Public Health

### ***ACTION FOR EQUITY CONFERENCE: Working for a Fairer Distribution of Health***

17th - 18th October 2006 Carlingford, Co. Louth, Ireland

A two-day conference organised by The Institute of Public Health in Ireland

Flyer for this conference at website: <http://www.publichealth.ie/index.asp?locID=456>

The aim of this event is to: stimulate debate and secure action on equity in health. This will be achieved by:

- \* Defining equity in health
- \* Identifying effective action
- \* Deciding on policies and approaches to improve equity
- \* Committing to action and accountability

### ***Partnership for Human Security and Health - 38th APACPH conference***

3-6 December 2006, Mahidol University, Bangkok, Thailand

Website: [www.apacph2006.org](http://www.apacph2006.org)

Scholarships are available for students and young staff. Please download the Application Form for Scholarship (under 'Download forms') and submit by post or fax (+662 354-8554) to the conference organisers before 31st August 2006. Those who have their abstracts accepted will be notified regarding scholarships by 30 September.

### ***6th International Conference on Disability, Virtual Reality and Associated Technologies ICDVRAT 2006***

<http://www.icdvrat.rdg.ac.uk>

supported by ArtAbilitation International Conference for those using art in rehabilitation -  
ArtAbilitation 2006  
18-20 September, 2006, Esbjerg, Denmark  
Organiser: Aalborg University Esbjerg, Denmark

***Are Global Initiatives Serving YOUR Health System Strengthening Needs?  
Toronto on August 18-19, 2006***

Health Systems Action Network (HSAN)

Website: <http://www.hsanet.org/torontomeeting.html>

PHRplus, USAID, Dfid and The Bill and Melinda Gates Foundation are organizing a consultative meeting regarding the future of the Health Systems Action Network. Below you will find a request for participants for the meeting. Strengthening health systems to improve public health results is finally on the agenda of many global and bilateral players. We would like feedback from developing country stakeholders from all sectors and regions of the world about whether your needs are being addressed by these initiatives and what are the gaps. Your input will help shape the future of the Health Systems Action Network (HSAN). The 30 people submitting the most relevant and constructive ideas will be invited to participate in a 2-day meeting in Toronto, August 18-19 (all expenses paid).

To be considered, prepare a short statement (50-100 words) that addresses the following questions. Please focus your comments on issues that a global network of country level stakeholders could contribute to solving.

- \* What suggestions do you have to improve the way global initiatives that focus on health system strengthening work with country-level stakeholders? How can they improve the way they seek and respond to input from country-level stakeholders?
- \* What are the priorities to support health systems strengthening on the ground that are not yet being addressed by global initiatives?
- \* What do you believe a Health Systems Action Network could contribute?

Include the following information in your response.

Name:

Position:

Place of employment (name, address, type of organization or government entity):

Contact information (email addresses, phone numbers, fax numbers):

Are you attending the XVI International AIDS Conference? Yes/No

Please send your responses to [webmaster@hsanet.org](mailto:webmaster@hsanet.org) by July 10, 2006. Meeting participant selection will be made the week of July 17, 2006 based on the quality of ideas submitted and an effort to ensure regional and sectoral representation. The consultative meeting in Toronto is sponsored by the Bill and Melinda Gates Foundation, DFID, and USAID.

## **8. Interesting publications**

Materials summarised below are provided "as is". Unless specifically states, the findings and interpretations included are those of the authors and do not necessarily reflect the views of EUPHA or its members.

Please note that most of the publications below have been provided by PAHO/WHO Website: <http://www.paho.org>: EQUITY List – Archives. To join this list: <http://listserv.paho.org/Archives/equidad.html>

### ***International Comparisons in Policy Making Toolkit***

UK Government's Centre for Management and Policy Studies (CMPS), 2006

Available online at: [http://www.policyhub.gov.uk/better\\_policy\\_making/icpm\\_toolkit/index.asp](http://www.policyhub.gov.uk/better_policy_making/icpm_toolkit/index.asp)

The toolkit pack is intended to provide help and guidance in the use of international comparisons in policy making. The use of international comparisons is an essential element of modern, professional policy making. International examples can provide invaluable evidence of what works in practice, and help us avoid either re-inventing the wheel or repeating others' mistakes. We can also learn from the way in which other

governments undertake the process of policy making itself.

In searching for international comparisons we should not look solely at what national governments do. Administrations at sub-national, state, regional or local government level, and businesses and not for profit organisations working with governments, may be equally valuable sources of ideas and knowledge..."

***Patient mobility in the European Union. Learning from experience***

European Observatory on Health Systems and Policies, WHO - 2006

Edited by: Magdalene Rosenmöller, Lecturer, and Scientific Coordinator, Europe for Patients project, IESE Business School, Barcelona, Spain; Martin McKee, Professor of European Public Health, London School of Hygiene & Tropical Medicine, and Research Director, European Observatory on Health Systems and Policies, London, United Kingdom  
Rita Baeten, Researcher, Observatoire Social Européen, Brussels, Belgium

Available online as PDF file at: [http://www.euro.who.int/Document/Obs/Patient\\_Mobility.pdf](http://www.euro.who.int/Document/Obs/Patient_Mobility.pdf)

People travel across Europe with greater ease than ever before. This has implications for health systems. The freedom of movement granted to Europe's citizens by European treaties can only become reality if people know that they will receive high-quality, appropriate care if they fall ill when abroad. Those responsible for delivering health care may see advantages in the opportunities created by the European Union, by sharing capacity in sparsely populated border areas or ensuring access to highly-specialized care for people living on small islands.

***Globalisation – Equity – Health***

University of Bielefeld (in German), May 2006

[Globalisierung – Gerechtigkeit – Gesundheit. Oliver Razum, Hajo Zeeb, Ulrich Laaser (Eds.), 2006, 351 pages, Hans Huber Verlag, 39,95€]

Public health experts from the University of Bielefeld have published this book, which is the first of its kind in German language. It provides an introduction into International Public Health in the times of globalisation. It comprises articles of 38 internationally experienced authors who underscore the interplay of seemingly unrelated issues such as terrorism and health, and the necessity of a global view of public health in the 21st century. The importance of this perspective is what makes this book not only interesting for public health/medical students and professionals but also for non-experts who wish to learn more about the interdependence of globalisation, equity and health.

***World Health Statistics 2006***

Public Health Mapping and GIS, Communicable Diseases, World Health Organization. 2006

Website: <http://www.who.int/whosis/whostat2006/en/index.html>

Download the document: <http://www.who.int/entity/whosis/whostat2006.pdf>

This report presents the most recent statistics since 1997 of 50 health indicators for WHO's 192 Member States. This second edition of World Health Statistics includes an expanded set of statistics, with a particular focus on equity between and within countries. It also introduces a section with 10 highlights in global health statistics for the past year. In addition to national statistics, this publication presents statistics on the distribution of selected health outcomes and interventions within countries, disaggregated by gender, age, urban/rural setting, wealth/assets, and educational level. Such statistics are primarily derived from the analysis of household surveys and are only available for a limited number of countries. We envisage that the number of countries reporting disaggregated data will increase during the next few years.

***The Prevention of Overweight and Obesity in Children and Adolescents: A Review of Interventions and Programmes***

<http://europe.ilsa.org/publications/Articles/preventoverweightinkids2006.htm>

***Global public health surveillance under new international health regulations.***

Michael G. Baker, Wellington School of Medicine and Health Sciences,

Wellington, New Zealand; and David P. Fidler, Indiana University School of Law,  
Bloomington, Indiana, USA  
Emerging Infectious Diseases Journal, US Centers for Disease Control and  
Prevention, Volume 12, Number 7 -July 2006  
Available from <http://www.cdc.gov/ncidod/EID/vol12no07/05-1497.htm>

***Poverty and deprivation - key causes of mental health problems in children***

Press Release from the British Medical Association: Tuesday, 20 Jun 2006  
Available online at: <http://www.bma.org.uk/ap.nsf/Content/Childadolescentmentalhealth>

***Preventing disease through healthy environments: Towards an estimate of the environmental burden of disease***

World Health Organization 2006

Download the full document Preventing disease through healthy environments [pdf 8.82Mb]  
<[http://www.who.int/entity/quantifying\\_ehimpacts/publications/preventingdisease.pdf](http://www.who.int/entity/quantifying_ehimpacts/publications/preventingdisease.pdf)>  
Download the executive summary in English Executive summary [pdf 859kb]  
<[http://www.who.int/entity/quantifying\\_ehimpacts/publications/previsexecsume.pdf](http://www.who.int/entity/quantifying_ehimpacts/publications/previsexecsume.pdf)>  
Download the executive summary in Spanish Resumen de orientación [pdf 2.62Mb]  
<[http://www.who.int/entity/quantifying\\_ehimpacts/publications/previsexecsumsp.pdf](http://www.who.int/entity/quantifying_ehimpacts/publications/previsexecsumsp.pdf)>

The available scientific evidence was summarized and more than 100 experts were consulted for their estimates of how much environmental risk factors contribute to the disease burden of 85 diseases. This report summarizes the results globally, by 14 regions worldwide, and separately for children. The evidence shows that environmental risk factors play a role in more than 80% of the diseases regularly reported by the World Health Organization. Globally, nearly one quarter of all deaths and of the total disease burden can be attributed to the environment. In children, however, environmental risk factors can account for slightly more than one-third of the disease burden. These findings have important policy implications, because the environmental risk factors that were studied largely can be modified by established, cost-effective interventions. The interventions promote equity by benefiting everyone in the society, while addressing the needs of those most at risk....."

***Make roads safe: a new priority for sustainable development***

Commission for Global Road Safety, June 2006  
Available online as PDF file [80p.] at:  
[http://www.makeroadssafe.org/documents/make\\_roads\\_safe\\_low\\_res.pdf](http://www.makeroadssafe.org/documents/make_roads_safe_low_res.pdf)

This report aims to focus political and public attention on a global road traffic injury epidemic that claims the lives of more than 1.2 million people and injures around 50 million annually.

***The hidden epidemic of road-traffic injuries***

The Lancet, Volume 367, Number 9527, 17 June 2006  
Editorial:  
<http://www.thelancet.com/journals/lancet/article/PIIS0140673606688557/fulltext>

***Food Marketing and Childhood Obesity - A Matter of Policy***

M. Nestle  
The New England Journal of Medicine - Volume 354:2527-2529 June 15,  
2006 Number 24  
Extract <<http://content.nejm.org/cgi/content/extract/354/24/2527>> -  
FREE Full Text <<http://content.nejm.org/cgi/content/full/354/24/2527>> -  
PDF <<http://content.nejm.org/cgi/reprint/354/24/2527.pdf>>

The result is a new Institute of Medicine (IOM) study, Food Marketing to Children and Youth: Threat or Opportunity,<sup>1</sup> that provides a chilling account of how this practice affects children's health. Food marketing, the IOM says, intentionally targets children who are too young to distinguish advertising from truth and induces them to eat high-calorie, low-nutrient (but highly



profitable) "junk" foods; companies succeed so well in this effort that business-as-usual cannot be allowed to continue"

***Obesity - The New Frontier of Public Health Law***

M. M. Mello, D. M. Studdert, and T. A. Brennan

The New England Journal of Medicine - Volume 354:2527-2529 June 15, 2006 Number 24

Extract <<http://content.nejm.org/cgi/content/extract/354/24/2601>> -

FREE Full Text <<http://content.nejm.org/cgi/content/full/354/24/2601>>

PDF <<http://content.nejm.org/cgi/reprint/354/24/2601.pdf>>

***Food Marketing to Children and Youth: Threat or Opportunity?***

Committee on Food Marketing and the Diets of Children and Youth, J.

Michael McGinnis, Jennifer Appleton Gootman, Vivica I. Kraak, Editors

Food and Nutrition Board Board on Children, Youth, and Families

Institute of Medicine of the National Academies. The National Academies Press –

Washington, D.C. 2006

Available online at: <http://www.nap.edu/catalog/11514.html>

***How environmental health risks change with development: The Epidemiologic and Environmental Risk Transitions Revisited***

Kirk R. Smith, School of Public Health, University of California,

Berkeley, California; Majid Ezzati, School of Public Health, Harvard University, Boston,

Massachusetts ; Annu. Rev. Environ. Resour. 2005. 30:291-333 - doi:

10.1146/annurev.energy.30.050504.144424

Available online as PDF file [53p.] at:

<http://www.globalhealth.harvard.edu/Files/Smith%20and%20Ezzati%20-%20Ris>

We provide the first full empirical test of the environmental risk transition framework, which describes the shift in environmental risks during development from household, community, and global risk factors. We find that the simplistic conclusions commonly drawn about the epidemiologic transition, in particular the increase in chronic diseases with development, are not supported by current data; in contrast, the conceptual framework of the environmental risk transition is broadly supported in a cross-sectional analysis. We also describe important kinds of environmental health risks and diseases that are not well estimated using current methods.

***Health Research Profile to assess the capacity of low and middle income countries for equity-oriented research***

Peter Tugwell, Chitr Sitthi-Amorn, Jan Hatcher-Roberts, Vic Neufeld,

Peter Makara, Fernando Munoz, Peter Czerny, Vivian Robinson, Yvo Nuyens

David Okello

BMC Public Health 2006, 6:151 doi:10.1186/1471-2458-6-151 - 12 June 2006

Article URL <http://www.biomedcentral.com/1471-2458/6/151>

PDF file : <http://www.biomedcentral.com/content/pdf/1471-2458-6-151.pdf>

This paper describes the results of an international survey, funded by the Council on Health Research for Development (COHRED), conducted in 12 low and middle income countries to develop a framework to assess the strength of national health research systems to improve population health and health equity.

***Child health – armed conflict: Children in conflict zones: seen but not heard***

Anthony B Zwi, Natalie J Grove, Paul Kelly, Michelle Gayer, Pilar Ramos-Jimenez, Johannes Sommerfeld

The Lancet - Volume 367, Number 9526, 10 June 2006

The paper is freely available as a link to the Lancet site.

<http://www.thelancet.com/journals/lancet/article/PIIS0140673606688235/fulltext>

The paper highlights the impact of conflict on child health and draws particular attention to the ways in which children and young people respond and adapt to conflict-affected environments. While conflict often increases vulnerability, many children exhibit resilience and agency, and take on new and important roles which are relevant to their own and other people's health. The issue is currently relevant in many countries including Uganda, East Timor, Sri Lanka and Nepal.

### ***Health Impact Assessment Guidance***

Institute of Public Health in Ireland on behalf of the Ministerial Group on Public Health, April 2006

Available online at: <http://www.publichealth.ie/index.asp?locID=489&docID=581>

This document describes Health Impact Assessment (HIA) and the steps involved in HIA. It gives advice based on the experience of HIA practitioners and provides tools to help carry out these steps and to adapt HIA to local circumstances.

### ***Shaping livable cities - Stories of progress around the world***

The International Development Research Centre, Canada, June 2006

Available online at: [http://www.idrc.ca/uploads/user-S/11502208271CRA\\_WUF\\_ENG\\_FINAL.pdf](http://www.idrc.ca/uploads/user-S/11502208271CRA_WUF_ENG_FINAL.pdf)

Our cities are now home to half the people living on the planet. They are engines of economic growth and cultural prosperity, but they are also centres of pollution and poverty. In June 2006, decision-makers from around the world gather in Vancouver, Canada during the Third World Urban Forum (WUF3) to debate the potential and perils of urbanization and to propose actions for building healthier cities. Shaping Livable Cities documents the efforts of both Southern and Northern residents to deal with these issues. Like WUF3, Shaping Livable Cities is about transforming problems into solutions. The limitations of 'evidence-based' public health

### **World cup attacked for failing to ban smoking**

<http://bmj.bmjournals.com/cgi/content/short/332/7554/1351-a?etoc>

### **Not enough there, too many here: Understanding geographical imbalances in the distribution of the health workforce**

Gilles Dussault, Human Development Department, World Bank Institute, Washington, DC, USA; Maria Cristina Franceschini, Consultant, Pan American Health Organization, Washington, DC, USA

Human Resources for Health 2006, 4:12 doi:10.1186/1478-4491-4-12 (27 May 2006)

Available online as PDF file [28p.] at:

<http://www.human-resources-health.com/content/pdf/1478-4491-4-12.pdf>

This paper focuses on the geographical dimension of access and on one of its critical determinants: the availability of qualified personnel. The objective of this paper is to offer a better understanding of the determinants of geographical imbalances in the distribution of health personnel, and to identify and assess the strategies developed to correct them. It reviews the recent literature on determinants, barriers and the effects of strategies that attempted to correct geographical imbalances, with a focus on empirical studies from developing and developed countries. An analysis of determinants of success and failures of strategies implemented, and a summary of lessons learnt, is included.

### **Redefining Health Care: Creating Value-Based Competition on Results.**

May 2006, Michael E. Porter and Elizabeth Olmsted Teisberg take a systemic



approach to healthcare reform.

Website: <http://hbswk.hbs.edu/item.jhtml?id=5369&t=strategy>

Today's system is dysfunctional, they argue, rewarding participants who redirect costs and restrict services rather than those who create value for the consumer. The system needs to be redesigned so that each participant is motivated to increase value, measured by health outcomes per dollar expended. This excerpt discusses how healthcare providers can shift to a value-based model.

### **When Will We Ever Learn? Improving Lives Through Impact Evaluation**

Final report of the Evaluation Gap Working Group

Center for Global Development -Washington, D.C. - May 31, 2006

Available online as PDF file [95p.] at:

[http://www.cgdev.org/files/7973\\_file\\_WillWeEverLearn.pdf](http://www.cgdev.org/files/7973_file_WillWeEverLearn.pdf)

Each year billions of dollars are spent on thousands of programs to improve health, education and other social sector outcomes in the developing world. But very few programs benefit from studies that could determine whether or not they actually made a difference. This absence of evidence is an urgent problem: it not only wastes money but denies poor people crucial support to improve their lives. This report by the Evaluation Gap Working Group provides a strategic solution to this problem addressing this gap, and systematically building evidence about what works in social development, proving it is possible to improve the effectiveness of domestic spending and development assistance by bringing vital knowledge into the service of policymaking and program design.

### **Historical Review: 2,500-year Evolution of the Term Epidemic**

Paul M.V. Martin. Institut Pasteur de Nouvelle Calédonie, Nouméa, New Caledonia

Estelle Martin-Granel, Collège Enseignement Secondaire Le Bosquet, Bagnols-sur-Cèze, France

Emerging Infectious Diseases Journal - Vol. 12, No. 6 June 2006

US Centers for Disease Control and Prevention

Available from <http://www.cdc.gov/ncidod/EID/vol12no06/05-1263.htm>

At the start of the 21st century, epidemics of infectious diseases continue to be a threat to humanity. Severe acute respiratory syndrome, avian influenza, and HIV/AIDS have, in recent years, supported the reality of this threat. Civil wars and natural catastrophes are sometimes followed by epidemics. Climate change, tourism, the concentration of populations in refugee camps, the emergence of new human pathogens, and ecologic changes, which often accompany economic development, contribute to the emergence of infectious diseases and epidemics. Epidemics, however, have occurred throughout human history and have influenced that history. The term epidemic is about 2,500 years old, but where does it come from?

### **Research Governance Framework for Health and Social Care**

UK, National Institute for Health Research, Second edition, 2005

Available online as PDF file [54p.] at:

<http://www.dh.gov.uk/assetRoot/04/12/24/27/04122427.pdf>

Proper governance of research is essential to ensure that the public can have confidence in, and benefit from, quality research in health and social care. The public has a right to expect high scientific, ethical and financial standards, transparent decision making processes, clear allocation of responsibilities and robust monitoring arrangements. The framework aims to forestall poor performance, adverse incidents, research misconduct and fraud, and to ensure that lessons are learned and shared when poor practice is identified. Learning from adverse events will promote good practice, enhance the ethical and scientific quality of research, and safeguard the public.

### **The World Mortality Report 2005**

The Population Division of the Department of Economic and Social Affairs of the United Nations, 2006

Available online as PDF file [441p.] at:

<http://www.un.org/esa/population/publications/worldmortality/WMR2005.pdf>

The main objective of this report is to compile and summarize available information about levels and trends of mortality and life expectancy for national populations. Aside from a comparison of mortality data from different sources, the report permits an assessment of gaps in information. This exercise can provide crucial insights, especially given the ongoing efforts to combat child mortality and HIV/AIDS necessary to reach the United Nations Millennium Development Goals and the need for data to validate progress made in these areas. The World Mortality Report 2005 provides a broad overview of mortality changes in all countries of the world during the latter half of the 20th century.

### **Health Financing Revisited: A Practitioner's Guide**

World Bank, May 25, 2006

Available online at: <http://tinyurl.com/rcnqu> <<http://tinyurl.com/rcnqu>>

A new World Bank report is warning many countries are facing a serious health financing crisis, with an enormous gap between meeting people's health needs and current health spending. The report, says issues such as the potential impact of avian flu and the HIV/AIDS epidemic make global health policy both a national security issue and a foreign policy issue. The report addresses the major changes in global health and financing policy that have occurred over the past 10 years. As a result of the global focus on poverty reduction, new global health threats from HIV/AIDS, SARS, and avian influenza, and the international community's adoption of the Millennium Development Goals (MDG), global health policy has now become a development, national security, and humanitarian issue for all countries

### **UK Health Research Analysis**

UK Clinical Research Collaboration, London, United Kingdom, May 2006

Available online as PDF file [60p.] at:

[http://www.ukcrc.org/PDF/UKCRC\\_Health\\_Research\\_Analysis\\_Report.pdf](http://www.ukcrc.org/PDF/UKCRC_Health_Research_Analysis_Report.pdf)

This report presents the results of this mapping exercise - an analysis of the directly funded UK research portfolios of the 11 largest government and charity funders of health related research. Collectively the portfolios of the participating organisations represent the overwhelming majority of non-commercial health research in the UK. It is the first time a national analysis of the distribution of research funding across all types of research activity and all areas of health and disease has been carried out on this scale anywhere in the world.

### **WHO called to return to Alma-Ata Declaration**

World Health Organization - May 2006

Website:

[http://www.who.int/social\\_determinants/links/events/wha2006/en/index.html](http://www.who.int/social_determinants/links/events/wha2006/en/index.html)

### **Socioeconomic status and health in childhood: A comment on Chen, Martin and Matthews (2006)**

Anne Case Christina Paxson Tom Vogl

Center for Health and Wellbeing Princeton University May 2006

Available online as PDF file [12p.] at:

[https://www.wws.princeton.edu/rpds/downloads/Case\\_Socioecon\\_status\\_health\\_childhood\\_ac\\_cp\\_tv.pdf](https://www.wws.princeton.edu/rpds/downloads/Case_Socioecon_status_health_childhood_ac_cp_tv.pdf)

The relationship between socioeconomic status (SES) and health in childhood is an active and important area of research, one that may improve our understanding of the origins of socioeconomic gradients in adult health, and mechanisms through which the intergenerational transmission of poverty takes place. For these reasons, we read with interest the recent article "Socioeconomic status and health: Do gradients differ within childhood and adolescence?" (Chen, Martin and Matthews, 2006).

### **Addressing obesity in Canada**

#### **A Think Tank on Selected Policy Research Priorities**

Stephen Samis, Director of Health Policy at the Heart and Stroke Foundation of Canada and chair of the Think Tank Planning Committee Funding partners: Heart and Stroke Foundation of Canada, three of the Canadian Institutes of Health Research (Nutrition, Metabolism and Diabetes; Population and Public Health; Institute of Gender and Health), the Canadian Institute for Health Information (through its Canadian Population Health Initiative), and the Public Health Agency of Canada.

Report from Obesity Policy Research Think Tank, October 6th & 7th, 2005

Toronto, Ontario

Available online at:

[http://www.health-in-action.org/library/pdf/News/Nutrition/H&S\\_Obesity\\_think\\_tank\\_Oct\\_2005.pdf](http://www.health-in-action.org/library/pdf/News/Nutrition/H&S_Obesity_think_tank_Oct_2005.pdf)

Obesity is a health issue of epidemic proportion in Canada. Six organizations that support research invited approximately one hundred individuals from widely varying backgrounds to participate in a two-day Think Tank to help identify and explore key policy questions and concerns that could be informed through a targeted research agenda.

A Center for Global Health Is Announced: The Johns Hopkins Center for Global Health

The newspaper of The Johns Hopkins University May 15, 2006 - Vol. 35 No. 34

Website: <http://www.hopkinsglobalhealth.org/>

The Johns Hopkins Center for Global Health bridges the international work of the University's Bloomberg School of Public Health, School of Medicine and School of Nursing in a coordinated worldwide effort to combat HIV/AIDS, malaria, tuberculosis, malnutrition, hepatitis and other threats to health-especially in developing countries. The Center promotes collaboration across the three schools, seeks out and secures funding for new initiatives, recruits faculty to address emerging global health issues and trains graduate students to be the next generation of leaders in global health.

### **Scaling-Up Health Service Delivery: From Pilot Innovations to Policies and Programmes**

Edited by Ruth Simmons, Peter Fajans and Laura Ghiron

DRAFT - WHO, 2006

Meeting at the Rockefeller Foundation's Bellagio Study and Conference Center. Supported by the Bill and Melinda Gates Foundation, the MacArthur Foundation, the World Health Organization and the University of Michigan

Available online at ExpandNet Website: <http://www.expandnet.net/volume.htm>

Scaling-up is defined here as efforts to increase the impact of innovations successfully tested in pilot or experimental projects so as to benefit more people and to foster policy and programme development on a lasting basis. We are referring to innovations that have been tested within the country context in which they will be scaled up.

Contact:

Laura Ghiron, ExpandNet Secretariat, University of Michigan, School of Public Health, E-mail: [expandnet@expandnet.net](mailto:expandnet@expandnet.net)

### **Review of Health Research in Ireland**

Consultation Paper May 2006

Available online as PDF file [22p.] at:

[http://www.forfas.ie/events/consultation/sciencecouncil0605\\_health\\_research\\_consultation/sciencecouncil\\_health\\_research\\_consultation\\_paper\\_060511\\_webopt.pdf](http://www.forfas.ie/events/consultation/sciencecouncil0605_health_research_consultation/sciencecouncil_health_research_consultation_paper_060511_webopt.pdf)

As part of its work programme for 2006, the Council for Science, Technology and Innovation established a Task Force to examine the current performance and future potential of health research in Ireland. The Council's review aims to develop a vision and strategy to drive a

step change in the level and quality of health-related research and innovation in Ireland - both to enhance the health of the population and to capture in Ireland the benefits of effective commercialisation of the intellectual property created through research and innovation.