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How Much Does it Cost to Treat Malaria? [2]

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My recent field visit has given me a great perspective on one of MSH's major activities - the costing of health services. MSH has extensive costing experience in East Asia & Pacific, Latin America & the Caribbean, Southern Africa, and West Africa.

MSH developed and has helped manage multiple applications of the [CORE Plus \(Cost and Revenue Analysis Tool Plus\)](#) [5]. CORE Plus is a tool that helps managers and planners estimate the costs of individual services and packages of services in primary health care facilities as well as total costs for the facilities. The cost estimates are based on norms and can be used to determine the funding needs for services and can be compared with actual costs to measure efficiency.

Costing of health care services is a powerful exercise whose data and results can be used for a number of things. When the cost of a package of services is determined, the analysis can be used for practical purposes, such as planning and prioritization or allocation of funds based on known cost figures. Results from a costing study can also be used to set appropriate user fees or other prices linked to provision of services. Finally, results of a costing study can be used as an advocacy tool to ensure that appropriate funds are allocated for the package of services.

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Making Universal Access to Reproductive Health a Reality

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Last week, the [United Nations Commission on Population and Development \(CPD\)](#) met in their 44th session to negotiate next steps on a resolution for fertility, reproductive health, and development [10]. The Commission helps inform the United Nations (UN) on their global efforts and provides crucial recommendations to form UN Resolutions.

MSH, with over 80 partners and advocacy organizations [11], sent an open letter to the delegates of the 44th session. Together, we called on the Commission on Population and Development to:

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Providing Services Deep in Malawi?s Hard to Reach Areas [13]

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Malawi has some of the worst health statistics in the world, ranking 166 out of 177 countries. This is the result of HIV & AIDS, food insecurity, weak governance, and many human resources challenges. Health care vacancies range anywhere from 30-80%, and Malawi only has 252 doctors in the entire country. The health system is regularly plagued with stock outs of key medicines and supplies, as a result of poor procurement and distribution practices. Malawi has one of the highest HIV prevalence rates in the world; the average prevalence for sub-Saharan Africa is 7.5%, Malawi has 12% prevalence in the adult population.

More than 50% of Malawi?s population lives further than 5 km from a health center. Health care workers in the community, who are capable of providing essential health care services to those living in ?hard to reach areas,? are essential. Meet the HSAs ? Health Surveillance Assistants.

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MSH Calls on UN Member States to Commit to Strengthening Health Systems to Address NCDs [20]

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*In March 2011, the CSIS Global Health Policy Center asked bloggers around the world: **What should the key priority of the upcoming UN High Level Meeting on Non-Communicable Diseases be and why?** We had a number of great submissions. Dr. Jonathan D. Quick was one of our four finalists. Read his entry below and look out in the days and weeks ahead for other finalist's blogs and another blog contest on NCDs.*

This was originally posted on [smartglobalhealth.org](#) [23].

The most common NCDs are diabetes, heart disease, cancers, and chronic lung diseases. According to the [World Health Organization](#) [24], about 36 million people die each year due to NCDs, and a quarter of NCD deaths are of people aged under 60; 9 in 10 of these people are from developing countries. Breast cancer kills over 270,000 women in the developing world each year.

Political and social momentum has been building, as the [United Nations High Level Meeting on NCDs](#) [25] approaches, for a change from emergency, disease specific responses to an integrated systems-strengthening response.

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April 13, 2011

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Family Planning: A Growing Trend in Uganda, But Sustainability Is a Challenge [27]

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Over the course of the past ten days, I have been fortunate to visit the Central, Eastern, and Western Regions of Uganda. As part of these visits, I have traveled through and spent time in many of the districts in these regions. It is during these drives through the countryside that I have noticed the campaigns for family planning services over and over again. Though it is possible my eye is fine tuned to notice these signs, as I am here supporting STRIDES for Family Health (a MSH-led, USAID funded family planning, reproductive health, and child and

maternal health project), it would be hard for anyone to miss the cheerful rainbows that are posted on signs outside many of the health centers and hospitals indicating that family planning services are provided in that facility.



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MSH Honors People-Centered Health Systems on World Health Day ^[29]

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Management Sciences for Health celebrates World Health Day, April 7, 2011

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World Health Day 2011: Combating Drug Resistance with Strong Health Systems ^[32]

Mohan P. Joshi, MBBS, MSc, MD [33]

Health Systems Strengthening [4]



As we celebrate World Health Day on April 7, 2011 [34], the global health community is focusing on an increasingly dangerous health challenge---drug resistance. Antimicrobial resistance (AMR) [35]---defined by the World Health Organization [36] (WHO) as the resistance of a microorganism to an antimicrobial medicine to which it was previously sensitive---is a global public health threat that is rapidly wiping out the effectiveness of many first-line treatments. It undermines major public health achievements in treating infectious diseases such as HIV & AIDS, tuberculosis, malaria, and sexually transmitted infections. Not only is AMR a complex, cross-cutting problem affecting a wide variety of sectors, but it has crossed all national, geographical, and ethnic boundaries and is spreading globally.

Read more [32]

March 29, 2011

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Strong Leadership, Management, and Governance Practices Improve Health Impact [38]

Jonathan D. Quick, MD, MPH [21]

Health Systems Strengthening [4]

Strong leadership, governance, and management are the cornerstones of successful global, national, and local efforts to save lives and achieve the maximum impact from health investments. Yet effective leadership, management, and governance skills and practices too often are the vital missing elements in public, civil society and even private health organizations. Fortunately, these skills can be developed. They are best developed working in teams, in one's own setting, over time, while facing real challenges.

With our partners, MSH works to build capacity at all levels within public and private organizations to improve leadership and management practices. Improved capacity ensures sound governance policies, creates a work climate that supports staff motivation, increases flexibility, and realigns staff to focus on common, achievable objectives.

Read more [38]

March 24, 2011

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Repackaging Capacity Building to Achieve the MDGs [40]

[Ummuro Adano](#) [41]

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(This blog post was originally posted on Global Health Council's [Global Health Magazine blog](#) [42].)

How do we set a gold standard for monitoring and evaluating capacity building?

Last week I attended the inaugural HIV Capacity Building Partners Summit in Nairobi from March 16-18, 2011. The Summit provided a timely opportunity to reflect on capacity building achievements in the region thus far, and use the lessons learned to rethink, gather momentum and repackage HIV capacity building in ways that ensure achievement of universal access and the targets set in the Millennium Development Goals 4, 5 and 6.

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