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October 23, 2010

[1 comment](#) <sup>[1]</sup>

## **MSH Task Force in Haiti Provides Emergency Support to Facilities Hard Hit by Cholera Outbreak** <sup>[2]</sup>

[A Durand](#) <sup>[3]</sup>

[Fragile States](#) <sup>[4]</sup>

On Saturday, October 23, a four-member group from the [Santé pour le Développement et la Stabilité \(SDSH\) project](#) <sup>[5]</sup>, led by MSH's Dr. Patrick Dimanche, conducted an initial on-the-ground assessment and provided support for five local NGO partners---Service and Development Agency (SADA) in Mattheux/West Department, Saint-Paul Health Center in Montrouis/West Department, Pierre Payen Health Center in Pierre Payen/Lower Artibonite Department, Hospital Albert Schweitzer/Lower Artibonite Department, and Claire Heureuse Community Hospital/Upper Artibonite Department---that have cared for over a third of the 2,364 cases reported thus far. Ninety-eight of the reported 208 deaths have occurred in four of these five health facilities.

The three USAID-funded projects managed by MSH in Haiti---SDSH, Leadership, Management, and Sustainability (LMS), and the Supply Chain Management System (SCMS) project---are working together to deliver emergency commodities including bed sheets, towels, adult diapers, disposable gloves, oral rehydration salts, IV solution, water treatment tablets, and soap.

[Read more](#) <sup>[2]</sup>

October 22, 2010

[0 comments](#) <sup>[6]</sup>

## **Haitian Network Mobilizes to Respond to Cholera Outbreak** <sup>[7]</sup>

[Management Sciences for Health](#) <sup>[8]</sup>

[Fragile States](#) <sup>[4]</sup>

Yesterday the Direction of Civil Protection and Disaster in Haiti confirmed a cholera outbreak in two departments (districts) of the country resulting in 1,498 cases managed in health facilities and 135 cholera related deaths.

The USAID-funded, MSH-led Santé pour le Développement et la Stabilité d'Haïiti <sup>[5]</sup> (SDSH) project is working closely with Haiti's Ministry of Health and other local and international partners to coordinate a community-level response to the cholera outbreak.

SDSH is mobilizing its established network of over 4,000 community-based health workers to reach Haiti's largely rural population. The project is working with local and international vendors to procure oral rehydration solutions, a critical component of first aid for diarrheal disease.

For more details reported by SDSH on the ground, see our press release from earlier today <sup>[9]</sup>.

Read more <sup>[7]</sup>  
October 18, 2010  
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## Overcoming Malawi's Crisis in Health Worker Shortages <sup>[11]</sup>

HIV & AIDS <sup>[12]</sup>  
Women & Gender <sup>[13]</sup>

*Blog post originally appeared on Global Health Magazine.* <sup>[14]</sup>



<sup>[15]</sup>

Six years ago the Malawi health system was on the verge of collapse due to severe shortages of health workers. Every year the College of Medicine would train 20 doctors and every year, half of them would leave the country. Nurses were overwhelmed by the demand for services.

Read more <sup>[11]</sup>  
October 15, 2010  
2 comments <sup>[16]</sup>

## Spotlight on Global Health Initiative Plus Countries: Ethiopia <sup>[17]</sup>

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[Part one of the blog series: Spotlight on Global Health Initiative Plus Countries](#) [19]

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## **Spotlight on Global Health Initiative Plus Countries** [21]

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In mid-June the United States Government continued to show its commitment to global health by announcing the first [Global Health Initiative](#) [22] (GHI) Plus countries: Bangladesh, Ethiopia, Guatemala, Kenya, Malawi, Mali, Nepal, and Rwanda. The GHI is a six-year, \$63 billion initiative to help partner countries improve measurable health outcomes by strengthening health systems and building upon proven results. The GHI focuses on women, newborns, and children using an integrated approach including programs that address HIV & AIDS, malaria, tuberculosis, maternal and child health, nutrition, family planning and reproductive health, and neglected tropical diseases. These initial countries will receive additional technical and management resources to quickly implement GHI's approach. They will be used as "learning labs" – using best practices and lessons learned when implementing programs in other countries. MSH works in seven of the eight countries, so we asked our country experts: What's working? Please stay tuned for a [continuing series](#) [19].

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## **Smarter Investments are Needed in Capacity Building to Meet the MDGs** [24]

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*Originally appeared in [Global Health Magazine](#).* [26]

Over the last several decades, millions of dollars have been invested in capacity building interventions, and the chorus of capacity building enthusiasts continues to grow. Yet, both in description and practice, capacity building remains somewhat fuzzy. In many developing countries, one of the greatest obstacles to achieving the health MDGs - in particular those relating to child survival, maternal health, and combating major diseases such as HIV & AIDS - is the deep, persistent lack of organizational capacity among those responsible for attaining these goals.

Some of the essential capacity components that are often lacking include human capacity -

adequate numbers of skilled, motivated and well distributed health providers who are supported by strong leadership; financial capacity - money management skills, financial accountability, and costing expertise; systems capacity - information and logistics, monitoring and evaluation, and governance structures and processes.

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## **Are the Millennium Development Goals for Health on a Collision Course?** [28]

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*This article originally appeared on [The Huffington Post](#).* [31]

As world leaders gather next week at the U.N. to review progress on the Millennium Development Goals (MDGs) to eradicate poverty, hunger, and disease by 2015, a new integrated approach to funding and delivering health services in developing countries is critical if the UN's global health targets -- especially for women and children -- are to be met. Currently, the health goals are competing with each other for money, people, and other scarce resources. How can we get back on track?

There is much to celebrate next week: over four million people are currently receiving antiretroviral drugs to treat AIDS; eliminating mother to child transmission of HIV is within reach by 2015; malaria deaths have been reduced by over half in some countries; the global burden of TB is falling; and more than 500 million people are now treated for one or more neglected tropical diseases.

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## **Making Noise and Standing Up Against Poverty** [33]

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On Friday, September 17<sup>th</sup>, Washingtonians representing UN offices, various non-governmental organizations (NGOs), governmental organizations, and general civil society gathered in Farragut Square, Washington, D.C. from 12 to 1:30 PM to "Stand Up Against Poverty." Joining millions of global citizens in Stand Up Against Poverty events in 1,328 registered events in 74 countries, we voiced our commitment to fight poverty and inequality, demanding urgent and concrete action on the Millennium Development Goals from our world

leaders as they attend the 2010 United Nations MDG Summit from Monday, September 20<sup>th</sup> through Wednesday, September 22<sup>nd</sup>.

The event was emceed by Sarah Farnsworth, Senior Advisor for the North America Campaign, and welcomed by Fred Tipson, Director of the UNDP Washington office. Like others around the world, Washingtonians energetically clacked noisemakers, blew whistles, cheered, and recited the Stand Up pledge that was read by Will Davis, Director of the UN Information Center, Washington DC, and Greg Smiley, Senior Policy Officer of UNAIDS, and accompanied by drummers from the Rhythm Workers Union. Personal testimonies were given by individuals from UN offices, Save the Children, Jubilee USA, and InterAction on why they Stand Up Against Poverty.

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## **What is country ownership?** [36]

[Health Systems Strengthening](#) [18]

Earlier this summer, the [Center for Global Development](#) [37] hosted a guest lecture by the Ministry of Health of Ethiopia Dr. Tedros Adhanom Ghebreyesus with a panel of experts from Zambia, Mozambique and Uganda and representatives from United States Government (USG) agencies to discuss one of the most challenging concepts to define right now - Country Ownership.

For the last two years, the USG has tried to find a way to partner with developing country governments while they balance their accountability to Congress. In recent development reform plans like the [Global Health Initiative](#) [38] and [Feed the Future](#) [39], there are numerous references to country ownership, country driven, country-led, and country guided but neither actually come out and define the term ?country ownership.?

So, what is country ownership? How will we know when we achieve it? It is an end in itself or the best way to ensure long-term sustainability?

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## **Turning Visions into Reality at the District Learning Center in Salima, Malawi** [41]

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*[This article was originally posted on K4Health?s Blog.](#)* [43]

Twelve months ago the [K4Health project](#) [44] began its needs assessment to better understand



communications could be improved with regards to Family Planning and Reproductive Health, and HIV & AIDS, in support of the K4Health project.

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