



March 2010

Welcome to R4D's monthly e-newsletter
Bringing you information about DFID-funded research

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New RPCs get the go ahead

DFID is seeking Expressions of Interest from suppliers to lead consortia of organisations with multi-disciplinary skills in three different areas:

Tackling the Neglected Crisis of Undernutrition

Closing date for application is 23 April 2010

Tackling the Structural Drivers of the HIV Epidemic

Closing date for application is 23 April 2010

UK-East Kilbride: HRPC10 Improving Mental Health Services in Low Income Countries

Closing date for applications is 23 April 2010

Two other opportunities are still open:

Preventing Maternal Death from Unwanted Pregnancy in SubSaharan Africa and South Asia

DFID is seeking EOIs for a supplier to design and implement a GBP 36-45m project over a 5 year period in the prevention of unwanted pregnancy in Africa and South Asia. Consortia would be welcomed on this occasion. The focus of activity should be provision of safe abortion in the context of comprehensive reproductive health services, to reduce the impact of abortion on maternal mortality. **Closing date for application is: 12 April 2010**

Design and Implementation Information for Action on Maternal Mortality in Africa

DFID is seeking Expressions of Interest (EOI) for a Service Provider (SP) to design and implement a GBP 15-20 million project over 5 years in at least 6 priority African countries to a) develop and operationalise a tailored methodology that provides evidence on maternal and newborn (MN) mortality for context specific planning; b) support the actions of maternal and newborn health advocates at regional, national and sub-national levels in the generation and use of mortality data; c) strengthen accountability mechanisms at all levels for progress on MN health. **The closing date for applications is 5 April 2010**

DFID is hiring:

Social Development Advisers (Deadline 3 April, 2010)

Economic Adviser, DFID India (Deadline 11 April, 2010)

Private Sector Adviser, DFID India (Deadline 11 April, 2010)

New Research Documents

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New Research Documents

Reducing Group-based Inequalities in a Legally Plural World

C. Sheppard, CRISE Working Paper No.75, 2010, 16 pages

We live in a world characterized by multiple, overlapping and plural normative orders embracing formal and informal legal regimes, customs and practices. In assessing how law may be used to reduce group-based inequalities, therefore, it is critical to examine the interaction between different sources of formal human rights protection and diverse, overlapping and coexisting social and cultural orders – or regimes of informal law.

Male Circumcision and HIV

Programme for Research and Capacity Building in Sexual and Reproductive Health and HIV in Developing Countries Research Briefing No.5, February 2010, 2 pages

Male circumcision is one of the oldest and most common surgical procedures worldwide, but it is relatively uncommon in the parts of sub-Saharan Africa with the highest rates of HIV infection. Three randomised controlled trials show that it reduces the risk of HIV acquisition in males by 50–60%. WHO recommends male circumcision as an important additional HIV prevention strategy. Services for safe male circumcision are being expanded in settings with high HIV prevalence, which brings with it a number of challenges.

Age-patterns of Malaria Vary with Severity, Transmission Intensity and Seasonality in Sub-Saharan Africa: A systematic review and pooled analysis

I Carneiro, A. Roca-Feltrer, J.T. Griffin et al., PLoS ONE (2010) 5(2)

There is evidence that the age-pattern of *Plasmodium falciparum* malaria varies with transmission intensity. A better understanding of how this varies with the severity of outcome and across a range of transmission settings could enable locally appropriate targeting of interventions to those most at risk. We have, therefore, undertaken a pooled analysis of existing data from multiple sites to enable a comprehensive overview of the age-patterns of malaria outcomes under different epidemiological conditions in sub-Saharan Africa.

Buffer Zone, Colonial Enclave or Urban Hub? Quetta: between four regions and two wars

Haris Gazdar, Sobia Ahmad Kaker, and Irfan Khan, Working Paper No.69 (series 2), Crisis States Research Centre, 2010, 42 pages

Quetta straddles four significant historical regions and plays a role in two major armed conflicts - the war in Afghanistan, and the Baloch nationalist insurgency in Pakistan. The city itself has remained relatively peaceful, though a closer look reveals the ways in which the two wars have encroached upon urban life. An analysis of Quetta's geography, history and institutional development shows that three aspects of the city's character - border/buffer zone, colonial enclave and urban hub - have remained significant through its evolution since the late 19th century.

What you Count is What you Target: The implications of maternal death classification for tracking progress towards reducing maternal mortality in developing countries

S. Cross, J.S. Bell and W.J. Graham, *Bulletin of the World Health Organization* (2010) 88, 8 pages

The primary aim of this paper is to highlight the usefulness of differentiating between direct and indirect maternal deaths in ensuring the effective and reliable monitoring and evaluation of interventions for reducing mortality. Our hypothesis is that the failure to differentiate between direct and indirect maternal deaths may lead to inaccurate evaluations of interventions and underestimates of their effects because causes of death that are not targeted by a particular intervention may be included when measuring its effect.

Mary's Story: Village life in Malawi – An ILRI film

ILRI

The film department at ILRI (the International Livestock Research Institute) aims to widen understanding of important topics that face pro-poor agricultural research in livestock issues, so removing one stumbling-block to the quick up-take of new technologies among those who could benefit most. The ILRI videos are available on YouTube and bliptv.

Is Azithromycin Better Than Current First Line Treatments for Typhoid and Paratyphoid Fever? Effective Health Care Research Programme Consortium, 'Evidence Update', *Other Infectious Diseases Series*, January 2010, 2 pages

Typhoid and paratyphoid fevers can kill people. In the past, chloramphenicol, ampicillin, and cotrimoxazole were effective, but multiple-drug resistant (MDR) strains of the bacteria have emerged. Thus newer antibiotics may be better, particularly azithromycin, fluoroquinolones, and cephalosporins. This summary of a full Cochrane Review asked 'Is azithromycin better than current first-line treatments for typhoid and paratyphoid fever?'. The Review concludes that 'Azithromycin is at least as good as fluoroquinolones, but more expensive'.

Conceptualizing Education Quality: Towards an EdQual Framework

A.M. Barrett and L. Tikly, CLIO Seminar, 24 February, 2010, 41 pages

This seminar powerpoint presentation introduces EdQual and the EdQual approach, and discusses educational quality with reference to social justice.

Social Transfers: Stimulating household-level growth

K. Bach, CPRC Policy Brief 14, 2010, 2 pages

This policy brief emphasises that (1) evidence shows that large-scale, well-designed social-transfer programmes can support micro-level growth processes; (2) social transfers enable investment in human capital and productive assets, laying the foundations for future growth; (3) social transfers can improve the efficiency of household resource allocation by alleviating vulnerability and by targeting individual household members; and (4) the growth effect of social transfer programmes is largely determined by programme design.

Do Consumers' Preferences for Improved Provision of Malaria Treatment Services Differ by their Socio-economic Status and Geographic Location? A study in southeast Nigeria

N.P. Uguru, O.E. Onwujekwe, N.G. Tasie, B.S. Uzochukwu, U.E. Ezeoke, *BMC Public Health* (2010) 10:7

The Improved use of malaria treatment services will depend on the provision of treatment services that different population groups of consumers prefer and would want to use. Treatment of malaria in Nigeria is still problematic and this contributes to worsening burden of the disease in the country. Therefore this study explores the socio-economic and geographic differences in consumers' preferences for improved treatment of malaria in Southeast Nigeria and how the results can be used to improve the deployment of malaria treatment services.

Lack of Effective Communication Between Communities and Hospitals in Uganda: A qualitative exploration of missing links

E. Rutebemberwa, E. Ekirapa-Kiracho, O. Okui, D. Walker, A. Mutebi, and G. Pariyo, *BMC Health Services Research* (2009), 9:146

Community members are stakeholders in hospitals and have a right to participate in the improvement of quality of services rendered to them. Their views are important because they reflect the perspectives of the general public. This study explored how communities that live around hospitals pass on their views to and receive feedback from the hospitals' management and administration.

Database of Interventions to Improve Maternal and Newborn Survival

Every year, nearly 500,000 women and 4 million newborns die as a result of complications during pregnancy and childbirth. There is an evidence-base of interventions, which, when delivered as part of a package of care and through appropriate mechanisms, have been proven to be effective in improving maternal and newborn survival. Towards 4+5 has created a database of more than 90 interventions that can improve maternal and newborn survival, searchable by target population, service delivery mechanism, maternal outcome addressed and neonatal outcome addressed.

Unplanned ART Treatment Interruption in South Africa: What can we do to minimise the long-term risks?

N. Veenstra, A. Whiteside, D. Laloo, and A. Gibbs, HEARD Report, 2010, 43 pages

Southern Africa is plagued by numerous crises that can lead to unplanned treatment interruptions for people on ART. Understanding the effect of different types of crises and how they were handled might help us to develop strategies to keep patients on treatment under difficult circumstances. HEARD's recently released report examines the impact of three crises: the 2007 public sector strike in South Africa, the ongoing political and economic crisis in Zimbabwe and the Mozambican floods in 2008.

India's Poor Rely Mainly on Private Health Care

Erlend Berg, Rajasekhar Durgam and Manjula Ramachandra, iiG Briefing Paper 08, 2010, 2 pages

In South India, even poor people use private health care more often than public health care. In addition, nearly 70% of poor people's health care expenditure is on private health care. The research may be used to inform the Indian government on how to revise its poverty line. The poverty line is the amount of income below which a household is considered poor. The government wants to change the poverty line by taking account of rising health care costs.

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Recent News Stories

DFID-funded RPC contributes to new WHO Malaria Guidelines

The huge strides made since the widespread adoption of artemisinin combination treatments are reflected in the second edition of the World Health Organization's Guidelines for the Treatment of Malaria, with recommendations for using 'on the spot tests' - and finessing the recommendations around various artemisinin-based combination therapies (ACT's). Members of the DFID-funded Effective Health Care RPC are part of WHO's Malaria Treatment Guidelines Panel and contributed towards this new edition.

Federal Institutions: Provoking or Mitigating Conflict?

A policy briefing by the DFID-funded Centre of Research on Inequality, Human Security and Ethnicity (CRISE) looks critically at how sub-national institutions can both provoke and mitigate conflict. Against the backdrop of constitution-making in Iraq it outlines how institutional design can affect the likelihood of ethnic conflict in multiethnic societies. The research is framed around two alternative views of federalism.

Climate and Development Knowledge Network

PricewaterhouseCoopers LLP will lead the £50 million Climate and Development Knowledge Network, funded over five years by DFID, which will link 60 developing countries with leading climate and development experts, allowing them to commission and share knowledge on how best to tackle the effects of climate change. The alliance managing the network includes the Overseas Development Institute, Fundacion Futuro Latinoamericano, LEAD International, South South North, Intrac and Infosys.

In conversation with Carlos Pérez del Castillo, CGIAR Consortium Board Chair

In December 2009, Carlos Pérez del Castillo was appointed as the Board Chair for the new Consortium of international agricultural research centers supported by the Consultative Group on International Agricultural Research (CGIAR). Bongwiwe Nomandi Njobe and Carl Hausmann were appointed as the co-Vice Chairs. (Read the press release). This new Consortium Board has been established to provide leadership, strategic direction, fundraising support and to be the ultimate authority for a newly formed Consortium of CGIAR Centers. In this video interview Perez del Castillo introduces himself and shares some of the ambitions of the Consortium.

Examining links between water and food security in Ethiopia

The DFID-funded Research Inspired Policy and Practice Learning in Ethiopia and the Nile Region (RiPPLE) programme has published new research exploring the inter-linkages between water and food security. The study provides information and analytical tools for policymakers, water resource managers and institutions in order to protect livelihoods along a transect line from lowlands to highlands in Eastern Ethiopia.

New DFID Nutrition Strategy

Undernutrition is an on-going crisis. First and foremost it is about death, but also about the loss of opportunities and the socio-economic costs that undermine virtually every aspect of development and condemn one generation after another to poverty. The scale of the devastation is staggering: undernutrition is implicated in the death of more than 3 million children under five every year. The number of children who died of nutrition-related illnesses in 2008 was equivalent to the total number of children under five in England in the same year.

DFID currently has a call out for expressions of interest to lead a **Research Programme Consortium on Tackling the Neglected Crisis of Undernutrition**. The closing date for applications is **23 April 2010**.

Call for Submissions for Systematic Reviews - New Review Question Added

DFID is piloting an exciting systematic review project that aims to strengthen evidence-informed decision-making. DFID recently put out a call for proposals from interested reviewers to conduct a systematic review on a number of questions based on policy and practice priorities. An additional review question has now been added to the list. Question 50 is: **What is the evidence on the effectiveness and efficiency of different social transfer targeting methodologies?** The deadline for submission of proposals is **Tuesday 6th of April, 2010**

Reducing crop losses will help to improve food security

With demand for food likely to rise by an estimated 50% by 2030, the need to improve food security worldwide is paramount. In an opinion piece for SciDev.Net, 'Support Farmers to Cut Crop Losses', Dennis Rangi, Executive Director for International Development of CABI, stresses the need to improve the productivity of small farms, not only by increasing crop yields, but also by cutting post-harvest losses. Pests such as the maize weevil, common in most African countries, can destroy up to 40% of a stored crop. The larger grain borer may destroy up to 70% of dried stored crops. Diseases such as wheat rust have cut yields by as much as 80% in Kenya and Uganda.

DFID research: helping eliminate gender inequality

Poverty can only be eliminated by addressing the disproportionate burden of poverty borne by women. Eliminating gender inequality and empowering women are essential to achieving all the Millennium Development Goals, and so gender issues are increasingly integrated into projects across DFID's research portfolio. This includes research on removing barriers to women's participation in economic activities, improving maternal health, and giving women a stronger voice. DFID's Research Strategy (2008–2013) summarises how gender fits into our overall research plans and illustrates the strategy with case studies.

Global HIV/AIDS Initiatives Network Shows Value of Coordination in Zambia

The Global HIV/AIDS Initiatives Network (GHIN) has published a series of policy briefs combining the network's research findings in Zambia. In Zambia approximately 14% of adults 15–49 are estimated to be HIV positive and more than 800,000 children have been orphaned by AIDS. Collaboration between the Zambian government and Global Health Initiatives has attempted to meet the challenges posed in Zambia by up-scaling HIV/AIDS services which 'aim to control the spread of the disease and provide treatment, care and support for people living with HIV/AIDS'.

When Research means Business

The Africa Enterprise Challenge Fund (AECF) is launching a new funding window for 'Research into Business', aiming to catalyse the private sector's ability to bridge the gap between agricultural research and the smallholder farmer. This is an exciting new initiative funded by DFID's Research and Evidence Division, using challenge funds to leverage private sector funding. This contributes to DFID's White Paper commitment to doubling its investment in AECF.

Research on women's access to healthcare considers geography

Research carried out by the Institute of Health Management Research, Rajasthan, India, entitled 'Revisiting the Role of Geographical Access to Healthcare' looks at the differences of healthcare availability for women in the Sunderbans delta region, India. The research is based on the premise that geographical accessibility should always be studied together with the health needs of the population. According to the research, distance and other geographical factors are often viewed as major obstacles for access to medical care.

Cochrane Systematic Review helps to halt sale of ineffective electronic mosquito repellents

Electronic mosquito repellents have been withdrawn from sale by a major airline, KLM, following a successful partnership between the advocacy website *MalariaWorld* and the DFID-funded Effective Health Care RPC. A Cochrane Systematic Review produced by the Cochrane Infectious Diseases Group was used as evidence to clearly demonstrate that electronic mosquito repellents do not work and therefore do not provide protection from mosquito bites and in turn malaria.

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