

GENERAL NEWS

WHO proposal would raise quality of Internet health information. People seeking health information on the Internet will get a higher standard and faster results under a bold new WHO proposal. The initiative aims to cut a direct path through the Internet maze, making it much easier for users to find the accurate and reliable health information they need.

WHO has proposed the creation of '.health' to join the small group of Internet top-level domains (TLDs) such as '.com' and '.org' that currently help users locate websites in their chosen field of interest.

The Internet Corporation for Assigned Names and Numbers (ICANN) says that more TLDs are needed urgently to cope with the Web's rapid expansion and has recently invited all interested parties to submit new TLD proposals for consideration. ICANN has the authority to prescribe the means by which TLDs are added to the system which allows users to locate computers on the Internet by a name. The ICANN recently met in Los Angeles to review a host of such submissions. Many national and international health groups have expressed support for the WHO proposal, and are hopeful that '.health' will be approved.

'The Internet has become a vital tool for individuals, families, the health profession and the health industry. WHO is the safe pair of hands that Internet users need to help them navigate their way through a mass of often complex and sometimes conflicting health information', says Dr Joan Dzenowagis, the main formulator of the WHO proposal.

'We want—and need—to raise the standard of information about health that gets placed on the Internet, and improve people's trust in it. As the recognized leading international agency in health, and with over 50 years' experience in setting standards, WHO is uniquely qualified to do this. Moreover, we also want to draw on the expertise of the many other groups already active in health', Dr Dzenowagis says.

At present there are more than 10 000 health sites on the Internet. Users have no easy way of

finding their way through them, nor can they be sure about the accuracy or reliability of the information. There has been no way of making information providers adhere to any code of practice. If the proposal is accepted, WHO, as the sponsoring organization, would have the responsibility to set policy on how the '.health' TLD is distributed and used.

WHO's intention is that '.health' will immediately identify the domain-name holder as adhering to agreed quality and ethical standards, thereby instilling confidence and security in the information provided. Such standards would emerge from international consultations WHO would initiate with governments, medical associations, consumer groups, the health industry and others.

The impact of the Internet on health care. The *Journal of Health Affairs* has released a special issue analyzing the impact of the Internet on health care policy, privacy and quality. This special edition, with more than a dozen articles on this issue, is available for free and can be viewed at: <http://www.healthaffairs.org>.

Highlights in the issue include:

- *Health information, the Internet and the digital divide.* The so-called digital divide between those who have and do not have access to the Internet—and to the growing body of health information there—remains significant, with gaps in computer use by income, education and race, according to a telephone survey conducted in late 1999.
- *Virtually exposed: privacy and E-health.* Consumers' concerns about lax security for health information shared and maintained online are justified. What's more, those concerns are affecting consumers' use of online health information.
- *Two old hands and the new thing.* Former Republican House Speaker Newt Gingrich and former Clinton Administration adviser Ira Magazine agree that the Internet could help solve many of the US health care system's most pressing problems.

Major milestone reached in global polio eradication: Western Pacific Region is certified polio-free. Recently an independent panel of international public health experts certified the WHO Western Pacific Region as polio-free. The Region includes 37 countries and areas ranging from tiny islands to the country with the single largest population in the world, the People's Republic of China.

The certification was announced at the 'Meeting on Poliomyelitis Eradication in the Western Pacific' in Kyoto, Japan. The WHO Western Pacific Region is now the second in the world to be certified polio-free, after the WHO Region of the Americas in 1994.

The Regional Certification Commission on Poliomyelitis Eradication confirmed that no new cases of indigenous polio have been detected in the Western Pacific Region in the last 3 years despite excellent surveillance for the virus—the major benchmark for certification. The last indigenous case of polio in the Region occurred in a 15-month-old girl, Mum Chanty, who was paralysed in Cambodia in March 1997.

Dr Gro Harlem Brundtland, Director-General of the WHO, said from Geneva, 'This is a major milestone in the global effort led by WHO, Rotary International, UNICEF and the Centers for Disease Control to certify the world polio-free by 2005. By certifying that this diverse Region is polio-free, we demonstrate that it is possible to eradicate polio throughout the world. I would like to congratulate the countries involved, donor governments, partner agencies, and in particular the hundreds of thousands of volunteers whose time and effort contributed to this remarkable success'.

Since the Global Polio Eradication Initiative was launched in 1988, the number of polio cases globally has dropped by over 95%, from an estimated 350 000 in 1988 to 7094 reported in 1999. There have only been 1481 confirmed cases of polio so far this year. The WHO European Region (made up of 51 countries, including the Commonwealth of Independent States) has not had any new cases of indigenous polio for almost 2 years.

'Today, we celebrate the hard work of everyone

involved in the effort to stop the suffering caused by polio in the Western Pacific', said Dr Shigeru Omi, Director of the WHO Regional Office for the Western Pacific. 'Tomorrow, our work doesn't stop. We must maintain our polio-free status through vigilant monitoring and surveillance. We must apply our victory and our lessons learned towards the goal of a world certified as polio-free by 2005.'

In polio-free regions, challenges ahead include maintaining certification-standard surveillance and achieving safe containment of laboratory stocks of the wild poliovirus to prevent inadvertent release. The Western Pacific Region is breaking new ground for the eradication initiative in piloting the Global Action Plan for Laboratory Containment of Wild Poliovirus. The Region will also focus on strengthening routine immunization programmes by systematically building on the lessons learned in polio eradication.

Polio transmission is likely to occur in up to 20 countries after 2000, primarily in West and Central Africa and in the Horn of Africa, as well as in parts of Asia. In these areas, national immunization days and intensive house-to-house mop-up campaigns are being conducted to interrupt the remaining chains of poliovirus transmission within the next 12–24 months.

Three key challenges must be overcome to achieve global eradication of polio:

- Securing access to all children, including those in conflict-affected countries and areas.
- Closing a US\$450 million funding gap.
- Maintaining political commitment in both endemic and polio-free countries.

The Global Polio Eradication Initiative is spearheaded by WHO, Rotary International, the US Centers for Disease Control and Prevention (CDC) and the United Nations Children's Fund (UNICEF).

The polio eradication coalition also includes national governments, private foundations (e.g. United Nations Foundation, Bill & Melinda Gates Foundation), development banks (e.g. World Bank), donor governments (e.g. Australia, Belgium, Canada, Denmark, Finland, Germany,

Italy, Japan, the Netherlands, Portugal, UK and USA), non-governmental humanitarian organizations (e.g. the International Red Cross and Red Crescent movement) and corporate partners (e.g. Aventis Pasteur, De Beers). Volunteers in developing countries play a central role; 10 million have participated in mass immunization campaigns.

First International Global Studies Association (GSA) Conference: Networks and Transformations, 2–4 July 2001, Manchester Metropolitan University, Manchester, UK. Globalization means that once secure national, cultural and social boundaries are being breached by ever more criss-crossing flows of people, information, images, goods and capital. Communities, formally tied to fixed locations, are becoming de-localized—flung into cyberspace and/or linked by far-reaching networks stretching across continents. Thus, for increasing numbers of individuals and groups globalization is also an increasingly important part of their lived experience as they learn to cope with fragmentation, to constantly re-construct their selves while juggling multiple personal identities and to navigate their involvement in transnational networks. Consequently, a sphere we may call the global is being rapidly constituted through the workings of various overlapping and thickening networks. At times these networks are associated with an assortment of economic interests and activities—from huge corporations to micro-entrepreneurial endeavors rooted in ethnic/kin associations spanning many nations—in finance, trade, production and services. At others they are formed out of the increasingly transnational and sometimes inchoate political objectives pursued by inter-locking webs of green, women's, human rights or other INGOs, by professional/occupational group or by cultural communities built around lifestyle identities where the migration of meanings and practices from one place to another has created webs of people with shared aesthetic, moral, religious or stylistic identities.

The conference organizers hope that scholars from many disciplines will offer papers on the multidimensional nature and variety of transna-

tional networks as well as the theoretical and policy issues to which they are giving rise: geography, communications theory, business and management studies, political economy, politics, social policy, as well as sociology, anthropology, cultural studies and other fields. Contributors might like to offer papers on such themes as:

- (1) What transformations have helped to trigger or reinforce the emergence, effectiveness and solidarity of different kinds of transnational networks?
- (2) In what ways and with what consequences are the interests and identities that were formally constituted and played out primarily at the local level by classes, nations and other collectivities being altered or threatened by a proliferation of globe-spanning agencies tied to networks?
- (3) How do different kinds of networks (economic, political, cultural, ethnic, etc.) intersect with each other and with information technology and corporate capital, and to whose benefit?
- (4) What are the consequences for individuals caught up in various kinds of transnational networks in terms of their sense of belonging, home, security, personal identity, etc.?
- (5) How might we anticipate that transnational networks will shape the course of the 21st century (whether at local or global levels) and what implications might such transformations have for future policy making?

Although we are especially interested in the themes already outlined, contributors are welcome to offer papers on related topics for consideration. Researchers working in all areas of the social sciences are encouraged to participate. From those offering papers we require: (1) a provisional title as soon as possible, (2) a brief abstract of no more than 300 words to reach us by 13 April at the latest, and (3) clear and accurate details concerning their postal address and other means of communication

The abstracts will be assembled into a conference booklet and will be made available to all delegates. Those giving papers will be asked to bring 50 copies to the conference for distribution. At a later

date, the GSA will endeavor to assemble a selection of the papers into a bound volume of conference proceedings with an ISBN number. This will be made available at cost.

The GSA intends to approach one or more major publisher with a view to establishing a permanent relationship involving a series of future publications partly derived from conference papers.

The conference will run from lunchtime Monday 2 July to lunch on Wednesday 4 July. The basic conference cost to all delegates is £120. However, all paid-up GSA members will be entitled to a 15% discount on this conference fee (£102). This cost includes the conference fees, three lunches, teas/coffees throughout the 2 days, the conference dinner on Monday evening in the state room at Manchester's Town Hall, a copy of the conference abstracts and a conducted coach tour to visit a site of local interest on Tuesday evening. Details of accommodation are available from GSA.

The GSA is a group of scholars from across the world who decided to establish a new academic association in order to promote and disseminate multidisciplinary knowledge concerning all aspects of transnational and global affairs. Accordingly, the GSA was formally established in July 2000 and now has a highly active committee engaged in rapidly expanding our overseas links. Among the benefits enjoyed by members are discounts on GSA conference attendance and receipt of the new exciting journal published by Blackwell, *Global Networks: A Journal of Transnational Affairs* (four copies annually).

For more information concerning the GSA, contact: Paul Kennedy, The Institute for Global Studies, Department of Sociology, Manchester Metropolitan University, Geoffrey Manton Building, Rosamund Street, West, off Oxford Road, Manchester M15 6LL, UK. Tel: (+44) 161 247 3006; Fax: (+44) 161 247 6321; E-mail: p.kennedy@mmu.ac.uk; Website: <http://www.mmu.ac.uk/gsa>

European Institute of Women's Health have relocated to: 18 St Andrew's Street, Dublin 2,

Ireland. Tel: (+353) 1 6766717; Fax: (+353) 1 6766740.

Community-Campus Partnerships for Health (CCPH)'s Third Annual Conference was designed to enhance participants' leadership skills to build more effective community-campus partnerships. Over 450 health professions faculty, students, and staff of community-based organizations and government agencies gathered in Seattle, WA on 26-30 March 1999 to participate.

Proceedings provide an overview of the conference, keynote plenary presentations and notes from selected workshops. Also included in this edition is a Leadership Self-Assessment Tool. A copy of the 1999 proceedings was sent to each conference participant. To obtain additional copies, you may download the conference proceedings for free at the Website: <http://futurehealth.ucsf.edu/ccph/guide.html#ConfPro99>. You may also obtain copies of the conference proceedings by completing a publication order form. The order form is available online at <http://futurehealth.ucsf.edu/ccph/guide.html> or by calling the toll-free Fax-on-Demand service at (888) 267-9183 and requesting item #101. The conference proceedings are free to CCPH members or \$5.00 for non-members (price includes shipping and handling; please add \$5.00 for international orders).

The next CCPH conference is 5-8 May 2001, San Antonio, TX. Our Fifth Anniversary Conference seeks to demonstrate the contribution that community-campus partnerships can make to promoting health, reducing health disparities and improving quality of life. Nine themes focusing on promoting health for all will be presented. Registration materials will be available in early 2001.

For details, contact: Community-Campus Partnerships for Health, UCSF Center for the Health Professions, 3333 California Street, Suite 410, San Francisco, CA 94118, USA. Tel: (+1) 415 476-7081; Fax: (+1) 415 476-4113; E-mail: ccph@itsa.ucsf.edu; Website: <http://futurehealth.ucsf.edu/ccph.html>

The Housing Studies Association Spring Conference 2001: Housing, Environment and Sustainability, 18 and 19 April 2001, University of York, UK. This conference will focus on themes and issues that connect housing, the environment and sustainability. Key themes to be covered in the plenary sessions are:

- Housing, politics and sustainability: global and national perspectives.
- Reconciling social and environmental concerns.
- Sustainable housing production and consumption: design and architectural issues.
- Planning for sustainable housing.

There will be a series of parallel workshops and offers of papers are invited on:

- Housing and global environmental change.
- Damaged environments and the geography of housing.
- Housing, density and transportation planning.
- Fuel poverty, affordable heat and health.
- Density and transportation planning.
- Physical and social regeneration in urban and rural contexts.
- Can social sector landlords build affordable and environmentally friendly housing?
- What are the implications for housing policy of overcrowding becoming over consumption?
- The 'environmental justice' movement.
- NIMBYs, second homes and rural social exclusion.
- Water, waste and wind.

Details from: Andrew Dixon, School of Housing, UCE Birmingham, Perry Barr, Birmingham B42 2S, UK. Tel: (+44) 121 331 5116.
E-mail: andrew.dixon@uce.ac.uk

Center for International Development at Harvard University WHO Commission on Macroeconomics and Health is pleased to announce an essay contest in the broad subject of The Health of Developing Countries: its causes or effects in relation to economics or law. The following prizes will be awarded: First Prize, US\$4000;

Second Prize, US\$1000; Third Prize, US\$500; Special Prize: Best entry from a developing country: US\$4000. In addition, winners will be invited to present their research at Harvard University in Cambridge, MA. Harvard and the contest organizers retain a right of first refusal on publication of all winning manuscripts. Graduate, professional and advanced undergraduate students who are currently enrolled in a degree program are invited to enter. Authors may work singly or in teams. Essays must be original research (but not necessarily using novel data) and must not be published or submitted for publication elsewhere. The topic may emphasize either basic research or applied policy. There is no length limit, but all entries must include an abstract of not over 1 page. Entries will be judged by an interdisciplinary panel at Harvard University comprising economists, biomedical scientists and lawyers. Preliminary judging will be on the basis of the abstract only. Include both a printed copy and the file on a PC-compatible diskette or CD. All submissions must be received by 31 March 2001. Please send entries to: Elizabeth Gummerson, CMH Essay Contest, Center for International Development, 79 JFK Street, Cambridge, MA 02138, USA.

Consumer Health Information: The Canadian Experience, 13 June 2001, Hospital for Sick Children Toronto, Ontario, Canada. The Consumer Health Information Providers Interest Group is pleased to announce the first ever national conference on the provision of consumer health information. The purpose of the conference is to review current efforts by agencies, organizations, hospitals, governments and others to provide consumer health information in Canada, and to highlight research and innovative delivery methods in consumer health information.

The conference will feature a keynote speech and two selected presentations on key issues in the provision of consumer health information. The first session will focus on a recently published survey of Canadian Consumer Health Information Providers and the second session will be a panel discussion reviewing current research, from around

the world, that discusses the evidence for the effectiveness of providing consumer health information.

In keeping with these themes, we invite presentations from interested persons or organizations on the following topics:

- Providing consumer health information to clients with low literacy levels.
- Providing consumer health information from a multicultural perspective. Providing consumer health information on alternative and complementary medicine.
- Providing consumer health information for special populations, such as the elderly, women or children and teens.
- Providing consumer health information to aboriginal communities.
- Innovative approaches to providing consumer health information.

For details on submitting proposals, visit the Website: <http://www.hhsc.ca/chiconf/>

UK water fluoridation report. Website: <http://www.york.ac.uk/inst/crd/fluores.htm>

Active Ageing: European Best Practice Conference, 14 and 15 December 2000, International Convention Centre, Birmingham, UK. With support from The British Society of Gerontology, The NHS Executive, Birmingham City Council, Anchor Trust and Birmingham Health Authority, a 2-day meeting is being organized to showcase examples of best practice and enable an exchange of ideas to take place.

The conference, which has the support of over 40 European cities, will provide an opportunity for key policy makers, professionals, academics and older people themselves to come together and learn about strategies, programmes and actions that are being pursued throughout the European community to improve the quality of life of older people.

Speakers include Gabrielle Clotuche (DG Employment and Social Affairs), Lord Hunt (UK Government Minister), Marja Pijl (President, Euro-link Age), Professor Sir John Grimley Evans (Oxford University), Professor Chris Philipson (University of Keele), Professor Anne-Marie Guillemard (CEMS-EHESS, Sorbonne) and Frances Hunt (Age Concern England).

For more information, contact: Irene J. Jones (irene_j_jones@birmingham.gov.uk) or Ceri Evans (ceri_evans@birmingham.gov.uk); Website: <http://www.activeoldage.co.uk>

If you have any relevant items of news concerning announcements of conferences and meetings, details of new publications, short review articles, short research abstracts and any other item of interest to readers, please communicate them to: John K. Davies, Associate Editor, Health Education Research, Faculty of Health, University of Brighton, Falmer, Brighton BN1 9PH, UK. Tel: (+44) 1273 643476; Fax: (+44) 1273 643473; E-mail: j.k.davies@bton.ac.uk

Please send any American News to: Ms Renee Johnson, Department of Health Behavior and Health Education, School of Public Health, Rosenau Hall, CB#7400, University of North Carolina, Chapel Hill, NC 27599-7400, USA