

experiences collected from 102 countries representing all WHO regions.

The guidelines are available from: <http://www.who.int/medicines/library/trm/Consumer.pdf> ■

Cambodia leads the way in the protection of children against worms

Cambodia has become the first country to protect three out of four school-aged children against intestinal worms since the global anthelmintic control target was established at the World Health Assembly in 2001. The recent completion of Cambodia's latest treatment campaign, involving more than 6500 schools, saw the country become the first of 105 endemic countries to reach the global target — six years ahead of schedule.

Only five years ago, more than 70% of Cambodian children were infected with intestinal worms. Now the situation is reversed with 75% of Cambodia's nearly three million school-aged children protected.

"This is a huge step forward not only for Cambodia, but for all countries working to control intestinal parasitic diseases," said Dr Lorenzo Savioli, WHO's Coordinator of Parasitic Diseases Control. "Cambodia's experience provides hard evidence that it is completely within the realm of possibility to protect the vast majority of children against parasites. Cambodia has done it, and so can other countries."

Weighing as much as 2 kg less than healthy children, those who are infected have a much higher chance of becoming anaemic. Anti-parasite treatment has led to a dramatic increase in short- and long-term memory among affected children, as well as an improvement in their reading capacity and comprehension. The intervention, therefore, represents a powerful tool for combating school absenteeism which can drop by as much as 25% as a result of a treatment campaign.

Schistosomiasis and intestinal worm infections affect at least two billion people worldwide and are a significant public health threat in regions where sanitation and hygiene levels are inadequate. Infection occurs when skin comes into contact with contaminated water

or soil through ingestion. Heavy infection can result in retarded growth and intellectual and physical development. If left untreated, progressively severe organ damage occurs which becomes irreversible. Despite the potentially serious consequences of carrying intestinal worms, treatment is cheap — costing only US\$ 0.02 per tablet — and simple to administer.

Cambodia's success follows the progressive expansion of intestinal parasite control to the national level involving a twice-yearly anti-parasite campaign. Drugs are administered across all 24 provinces by thousands of teachers, who distribute the pills to students in classrooms. The campaigns were conducted by the Cambodian Ministry of Health, Education and Sport, with the support of WHO, UNICEF, the Japanese Embassy in Cambodia and the Sasakawa Memorial Health Foundation.

"This clearly wouldn't have been possible without the strong commitment of Cambodia's Ministry of Health," said Dr Kevin Palmer, Regional Adviser in Parasitic Diseases for the Western Pacific Regional Office of WHO. "Reaching the target this early wasn't accidental. It demonstrates what can be achieved when the political will is there together with financial support from donors and partners." ■

WHO announces "River of Life" winners

The winners of the WHO "River of Life" international photo competition were announced on 17 May to coincide with the presentation of WHO's first global strategy on reproductive health during the 57th World Health Assembly.

The competition title originated from the idea that the best way to show how reproductive and sexual health impacts all people was to invite photographers from around the world to capture the four key stages in the course of an individual's lifetime or "River of Life": Love, Life, Illness and Death.

There were seventeen winners overall comprising three winners per category and a Special Award for Outstanding Contribution to each category. A Special Award from the Assistant Director-General of WHO's department of Family and Community Health was given to a photograph entitled "Happiness Family" by A.K. Moe from Yangon, Myanmar (see overleaf).

The photographers were asked to use their cameras to bring to life success stories in sexual and reproductive health and also to focus on the health inequities that exist in many countries. The competition is part of a broader effort on behalf of WHO to raise public awareness of the importance of sexual and reproductive health and the challenges faced by the international community in this area.

According to WHO, over half a million women die during pregnancy and childbirth every year. Unsafe abortions alone leave a further 70 000 women dead every year. In 2003, five million new cases of HIV infection occurred, 600 000 of which were infants infected due to mother-to-child transmission.

A panel of four expert photographers from England, South Africa, the United States and Switzerland, judged nearly 800 submissions from both amateurs and professionals. The seventeen winning shots (four of which are printed overleaf) by photographers from ten countries can be viewed at the following URL: http://www.who.int/reproductive-health/results_photo_competition.html. ■

Call for papers on Human Resources and Health Workforce Constraints

The *Bulletin* of the World Health Organization is seeking original research papers dealing with human resources for health care, to accompany commissioned Policy and Practice papers in a theme issue on this subject in the first quarter of 2005. Papers should cover aspects of current shortfalls in specific health service delivery, particularly in developing countries, with evidence of the implications to the relevant burden of disease. We would like to encourage authors to submit original research, done to find ways of improving equitable access and referral systems, through better use of existing human resources, or sustainable increases in the local workforce. We will also consider related submissions to the other sections of the *Bulletin*: Perspectives, Round Tables, and Public Health Reviews. Manuscripts should be submitted to <http://submit.bwho.org> by 1 October 2004, following the usual Guidelines for Contributors, with a cover letter mentioning this call for papers.