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Epidemic Epidemic Illusions Managing the global health response to epidemics The Shapes of Epidemics and Global Disease The Global Tobacco Epidemic and the Law Leveraging Artificial Intelligence in Global Epidemics Unprepared Disease Control Priorities, Third Edition (Volume 9) The Epidemic The Neglected Dimension of Global Security SARS The Global Gun Epidemic The End of Epidemics Global Institutions and the HIV/AIDS Epidemic Global Health Risk Framework The Ebola Epidemic in West Africa Global Health Risk Framework Rx for Survival A Pest in the Land Viral Sovereignty and the Political Economy of Pandemics Integrating Clinical Research into Epidemic Response Current Status and Response to the Global Obesity Pandemic Epidemic Urbanism Confronting AIDS Global Epidemics, Local Implications Barefoot Global Health Diplomacy Betrayal of Trust Learning from SARS Confronting AIDS Rhetoric of a Global Epidemic Pandemic Influenza Preparedness and Response The Flu Epidemic of 1918 Global Pandemic Threats: A Reference Handbook Global Health Risk Framework Global Health and the Future Role of the United States Global Management of Infectious Disease After Ebola COVID-19 Obesity International Health Statecraft The Emerging Global Health Crisis

Since the 2014 Ebola outbreak many public- and private-sector leaders have seen a need for improved management of global public health emergencies. The effects of the Ebola epidemic go well beyond the three hardest-hit countries and beyond the health sector. Education, child protection, commerce, transportation, and human rights have all suffered. The consequences and lethality of Ebola have increased interest in coordinated global response to infectious threats, many of which could disrupt global health and commerce far more than the recent outbreak. In order to explore the potential for improving international management and response to outbreaks the National Academy of Medicine agreed to manage an international, independent, evidence-based, authoritative, multistakeholder expert commission. As part of this effort, the Institute of Medicine convened four workshops in summer of 2015 to inform the commission report. The presentations and discussions from the Workshop on Resilient and Sustainable Health Systems to Respond to Global Infectious Disease Outbreaks are summarized in this report. While much progress has been made on achieving the Millennium Development Goals over the last decade, the number and complexity of global health challenges has persisted. Growing forces for globalization have increased the interconnectedness of the world and our interdependency on other countries, economies, and cultures. Monumental growth in international travel and trade have brought improved access to goods and services for many, but also carry ongoing and ever-present threats of zoonotic spillover and infectious disease outbreaks that threaten all. Global Health and the Future Role of the United States identifies global health priorities in light of current and emerging world threats. This report assesses the current global health landscape and how challenges, actions, and players have evolved over the last decade across a wide range of issues, and provides recommendations on how to increase responsiveness, coordination, and efficiency — both within the U.S. government and across the global health field. The increasing prevalence and burden of obesity transcends borders, straining populations worldwide. Data shows that 50 million girls, 74 million boys, 390 million women, and 281 million men were estimated to have obesity in 2016 (NCD-RisC, 2017). The National Academies of Sciences, Engineering, and Medicine convened a

workshop on October 9, 2018 to address the status of the global obesity pandemic and discuss diverse approaches to manage this problem. Speakers examined the collective prevalence, costs, and drivers of obesity around the world using cross-cultural comparisons. Panels and group discussions emphasized the need to reduce disparities in prevention and treatment efforts and to generate new policy and system initiatives related to nutrition and physical activity worldwide. This publication summarizes the presentations and discussions from the workshop. Recent epidemics have prompted large-scale international interventions, aimed at mitigating the spread of disease in a globalized world. During a crisis, however, global health actions – including planning and organizing, communicating about risk, and cost–benefit evaluations – aren’t usually part of a single, integrated global response. Arguing that an uncoordinated approach can be challenged by local conditions and expectations, generating a wide range of resistance and difficulties, this volume provides important insights for future outbreak management and global health governance. Drawing on experiences with A(H1N1) and Ebola virus disease, the book is divided into three parts looking at how responses to global health crises have developed, lessons learned from particular pandemics and the ethical implications of our management of them. Individual chapters focus on, among other issues, financing, cost–benefit analysis, matrix management, risk communication and organizational strategies. Taking a social science perspective, this valuable book outlines the current state of global health emergency responses and explores ways in which they can be improved. It is a useful read for academics and practitioners interested in global health, the sociology of health and illness, health economics and emergency management. The most recent Ebola epidemic that began in late 2013 alerted the entire world to the gaps in infectious disease emergency preparedness and response. The regional outbreak that progressed to a significant public health emergency of international concern (PHEIC) in a matter of months killed 11,310 and infected more than 28,616. While this outbreak bears some unique distinctions to past outbreaks, many characteristics remain the same and contributed to tragic loss of human life and unnecessary expenditure of capital: insufficient knowledge of the disease, its reservoirs, and its transmission; delayed prevention efforts and treatment; poor control of the disease in hospital settings; and inadequate community and international responses. Recognizing the opportunity to learn from the countless lessons of this epidemic, the National Academies of Sciences, Engineering, and Medicine convened a workshop in March 2015 to discuss the challenges to successful outbreak responses at the scientific, clinical, and global health levels. Workshop participants explored the epidemic from multiple perspectives, identified important questions about Ebola that remained unanswered, and sought to apply this understanding to the broad challenges posed by Ebola and other emerging pathogens, to prevent the international community from being taken by surprise once again in the face of these threats. This publication summarizes the presentations and discussions from the workshop. This volume investigates the multifaceted SHAPES (socio-historic, artistic, political, and ecological significance) of global disease. It challenges conventional views of infection and transmission by associating epidemics with ideologies and their accompanying institutions. It argues that the physical threat of epidemics is irrevocably linked to culture, economic resources, social class, and power. Epidemics involve both the infected and non-infected, affect the local and global, and they expose control and neglect. This book provides a radical collaborative approach, drawing contributors from closely related and vastly distant fields in the search for innovative ways to address human suffering, and to find real solutions that may determine whether people live or die. Such an approach is needed within an increasingly interconnected world where both pathological diseases and health behaviors are infectious. Experts from fifteen diverse disciplines in the natural sciences, social sciences, and arts and humanities present case studies from across the world and time, demonstrating the uniqueness of each disease and epidemic in its place, but also the shared experiences that span human life and death. In order to identify, measure and control epidemics, we must understand epidemics more as long biosocial processes than abrupt events in nature or culture. Such methodology examines the meaning we attach to epidemics, as well as their material reality, and provides a more complete understanding of how

epidemics shape and are shaped. This book offers an accessible reference on epidemic and pandemic diseases that provides background information and history, explains why pandemics are a newly emerging threat, identifies the difficulties in coping with them, and provides hope in the form of modern medicine.

- Provides readers an understanding and appreciation of the extent of the devastation of pandemic diseases of the past centuries
- Shows how the pioneers of modern medicine conquered contagious diseases of the past that had been scourges in human history
- Documents and explains the development of newly emerging viral diseases that have the potential of becoming pandemic outbreaks that kill millions
- Employs primary documents ranging from data from reports from the CDC and WHO to firsthand accounts of past pandemics and their deadly impact

Tobacco use represents a critical global health challenge. The World Health Organization estimates that tobacco kills nearly 6 million people a year, with the toll expected to rise to 8 million annually over the next two decades. Written by health and “Jonathan Quick offers a compelling and intensely readable plan to prevent worldwide infectious outbreaks. The End of Epidemics is essential reading for those who might be affected by a future pandemic—that is, just about everyone.”—Sandeep Jauhar, bestselling author of *Heart: A History*

The 2020 outbreak of coronavirus has terrified the world—and revealed how unprepared we are for the next outbreak of an infectious disease. Somewhere in nature, a killer virus is boiling up in the bloodstream of a bird, bat, monkey, or pig, preparing to jump to a human being. This not-yet-detected germ has the potential to wipe out millions of lives over a matter of weeks or months. That risk makes the threat posed by ISIS, a ground war, a massive climate event, or even the dropping of a nuclear bomb on a major city pale in comparison. In *The End of Epidemics*, Duke Global Health Institute faculty member and past Chair of the Global Health Council Dr. Jonathan D. Quick examines the eradication of smallpox and devastating effects of influenza, AIDS, SARS, Ebola, and other viral diseases. Analyzing local and global efforts to contain these diseases and citing firsthand accounts of failure and success, Dr. Quick proposes a new set of actions which he has coined “The Power of Seven,” to end epidemics before they can begin. These actions include:

- Spending prudently to prevent disease before an epidemic strikes, rather than spending too little, too late
- Ensuring prompt, open, and accurate communication between nations and aid agencies, instead of secrecy and territorial disputes
- Fighting disease and preventing panic with innovation and good science

Practical and urgent, *The End of Epidemics* is crucial reading for citizens, health professionals, and policy makers alike. “Dr. Quick’s urgent message makes one hope that this book will reach a huge audience and that its exhortations will be acted on everywhere.”—*The Wall Street Journal*

In *International Health Statecraft*, Ulysses B. Panisset addresses the question of whether international health phenomena, such as the 1991 cholera epidemic in Peru, influence the international relations of the affected country. The speed and volume at which people, commodities and microorganisms are currently crossing borders has increased significantly over the past decades, and as a result has changed the scope of international health. Panisset proposes a novel analytic model to help develop global cooperation and far-reaching policies that anticipate and respond to pandemics, regional environmental toxicology disasters, and other health phenomena. Organized into five cohesive chapters, *International Health Statecraft* will be of interest to foreign policy and public health decision-makers, analysts, students, and scholars. The SARS-CoV-2 virus, and the associated COVID-19 pandemic, is perhaps the greatest threat to life, and lifestyles, the world has known in more than a century. The scholarship included here provides critical insights into the ethics and ideologies, inequalities, and changed social understandings that lie at the heart of this pandemic. This volume maps out the ways in which the pandemic has impacted (most often disproportionately) societies, the successes and failures of means used to combat the virus, and the considerations and future possibilities – both positive and negative – that lie ahead. While the pandemic has brought humanity together in some noteworthy ways, it has also laid bare many of the systemic inequalities that lie at the foundation of our global society. This volume is a significant step toward better understanding these impacts. The work presented here represents a remarkable diversity and quality of impassioned scholarship and is a timely and critical advance in

knowledge related to the pandemic. This volume and its companion, COVID-19: Volume II: Social Consequences and Cultural Adaptations, are the result of the collaboration of more than 50 of the leading social scientists from across five continents. The breadth and depth of the scholarship is matched only by the intellectual and global scope of the contributors themselves. The insights presented here have much to offer not just to an understanding of the ongoing world of COVID-19, but also to helping us (re-) build, and better shape, the world beyond. Since the 2014 Ebola outbreak many public- and private-sector leaders have seen a need for improved management of global public health emergencies. The effects of the Ebola epidemic go well beyond the three hardest-hit countries and beyond the health sector. Education, child protection, commerce, transportation, and human rights have all suffered. The consequences and lethality of Ebola have increased interest in coordinated global response to infectious threats, many of which could disrupt global health and commerce far more than the recent outbreak. In order to explore the potential for improving international management and response to outbreaks the National Academy of Medicine agreed to manage an international, independent, evidence-based, authoritative, multistakeholder expert commission. As part of this effort, the Institute of Medicine convened four workshops in summer of 2015 to inform the commission report. The presentations and discussions from the Pandemic Financing Workshop are summarized in this report. Rates of heart disease, cancer, diabetes, and other noncommunicable diseases (NCDs) in low- and middle-income countries are increasing faster, in younger people, and with worse outcomes than in wealthier countries. In 2013 alone, NCDs killed eight million people before their sixtieth birthdays in developing countries. A new CFR-sponsored Independent Task Force report and accompanying interactive look at the factors behind this epidemic and the ways the United States can best fight it. Since the 2014 Ebola outbreak many public- and private-sector leaders have seen a need for improved management of global public health emergencies. The effects of the Ebola epidemic go well beyond the three hardest-hit countries and beyond the health sector. Education, child protection, commerce, transportation, and human rights have all suffered. The consequences and lethality of Ebola have increased interest in coordinated global response to infectious threats, many of which could disrupt global health and commerce far more than the recent outbreak. In order to explore the potential for improving international management and response to outbreaks the National Academy of Medicine agreed to manage an international, independent, evidence-based, authoritative, multistakeholder expert commission. As part of this effort, the Institute of Medicine convened four workshops in summer of 2015 to inform the commission report. The presentations and discussions from the Workshop on Research and Development of Medical Products are summarized in this report. Includes 36 chapters that deploy interdisciplinary approaches to the analysis of the mutual relationship between pandemics and the built environment. The chapters share the story of a pandemic in a particular city or region from five continents, and are organized in four sections to convey the mechanisms of change that affect vulnerabilities and responses to epidemic illnesses: 'Urban Governance', 'Urban Life', 'Urban Infrastructure' and 'Urban Design and Planning'. Two prominent scholars from the disciplines of public health and medical anthropology provide a prologue and epilogue: Sandro Galea writes on 'Pandemics and urban health', and Richard J. Jackson on 'Urbanism and architecture in the post-COVID era'. The contributors to this new study are historians, public health experts, art and architectural historians, sociologists, anthropologists, doctors and nurses. In researching their contributions, all have spoken to an audience that includes the public, practitioners and academic readers; the resultant case studies reveal a diverse range of urban interventions that are connected to the impact of epidemics on society and urban life, as well as the conceptualization of and response to disease. Epidemic illnesses – not only a product of biology, but also social and cultural phenomena – are as old as cities themselves. The recent pandemic has put into perspective the impact of epidemic illness on urban life and exposed the vulnerabilities of the societies it ravages as much as the bodies it infects. How can epidemics help us understand urban environments? How might insights from the outbreak and responses to previous urban epidemics inform our understanding of the current world?

With these questions in mind, this book gathers scholarship from a range of disciplines to present case studies from across the globe, each demonstrating how cities in particular are not just the primary place of exposure and quarantine, but also the site and instrument of intervention. This book seeks to explore the profound and complex ways that architecture and landscape design were impacted by historical epidemics around the world, from North America to Africa and Australia, and to convey this information in a way that meaningfully engages a public readership. The chapters analyse the development of urban infrastructure, institutions and spaces in western and eastern societies in response to historical pandemics. They also demonstrate how epidemic illnesses, and their responses, exploit and amplify social inequality in the urban contexts and communities they impact. As the culminating volume in the DCP3 series, volume 9 will provide an overview of DCP3 findings and methods, a summary of messages and substantive lessons to be taken from DCP3, and a further discussion of cross-cutting and synthesizing topics across the first eight volumes. The introductory chapters (1-3) in this volume take as their starting point the elements of the Essential Packages presented in the overview chapters of each volume. First, the chapter on intersectoral policy priorities for health includes fiscal and intersectoral policies and assembles a subset of the population policies and applies strict criteria for a low-income setting in order to propose a "highest-priority" essential package. Second, the chapter on packages of care and delivery platforms for universal health coverage (UHC) includes health sector interventions, primarily clinical and public health services, and uses the same approach to propose a highest priority package of interventions and policies that meet similar criteria, provides cost estimates, and describes a pathway to UHC. From the Castro bathhouses to AZT and the denial of AIDS in South Africa, this sweeping look at AIDS covers the epidemic from all angles and across the world. Engel seamlessly weaves together science, politics, and culture, writing with an even hand—noting the excesses of the more radical edges of the ACT UP movement as well as the conservative religious leaders who thought AIDS victims deserved what they got. The story of AIDS is one of the most compelling human dramas of our time, both in its profound tragedy and in the extraordinary scientific efforts impelled on its behalf. For gay Americans, it has been the story of the past generation, redefining the community and the community's sexuality. For the Third World, AIDS has created endless devastation, toppling economies, social structures, and whole villages and regions. And the worst may yet be to come: AIDS is expanding quickly into India, Russia, China, and elsewhere, while still raging in sub-Saharan Africa. A distinguished medical historian, Engel lets his characters speak for themselves. Whether gay activists, government officials, public health professionals, scientists, or frightened parents of schoolchildren, they responded as best they could to tragic happenstance that emerged seemingly from nowhere. There is much drama here, and human weakness and heroism too. Writing with vivid immediacy, Engel allows us to relive the short but tumultuous history of a modern scourge. Since the 2014 Ebola outbreak many public- and private-sector leaders have seen a need for improved management of global public health emergencies. The effects of the Ebola epidemic go well beyond the three hardest-hit countries and beyond the health sector. Education, child protection, commerce, transportation, and human rights have all suffered. The consequences and lethality of Ebola have increased interest in coordinated global response to infectious threats, many of which could disrupt global health and commerce far more than the recent outbreak. In order to explore the potential for improving international management and response to outbreaks the National Academy of Medicine agreed to manage an international, independent, evidence-based, authoritative, multistakeholder expert commission. As part of this effort, the Institute of Medicine convened four workshops in summer of 2015. This commission report considers the evidence supplied by these workshops and offers conclusions and actionable recommendations to guide policy makers, international funders, civil society organizations, and the private sector. A continuous state of readiness -- The generic biological threat -- Two regimes of global health -- Real-time biopolitics -- A fragile assemblage -- Diagnosing failure -- Epilogue Cukier (justice studies and information technology management, Ryerson U., Toronto) and Sidel (social medicine, Albert Einstein College of

Medicine) consider gun violence and control using a public health model, and compare statistics from the US with other countries. They analyze firearm ownership, why more guns correspond to an increase in deaths, the global trade, gun running and culture, regulation and various national approaches, and movements towards gun control internationally. Includes information on Africa, Asia, Australia, Brazil, Canada, Central America, China, Columbia, Columbine High School (Colorado) shootings, deaths from firearms, domestic violence, firearm marketing and promotion, Europe, France, Germany, Great Britain, gun industry and trade, Hungerford mass shooting (Great Britain), India, Japan, National Rifle Association (NRA), New Zealand, Port Arthur (Australia) massacre, Russian Federation, school shootings, South America, suicides, Switzerland, United States, women, etc. Written by a leading expert in the field, this book provides a clear and incisive analysis of the different perspectives of the global response to HIV/AIDS, and the role of the different global institutions involved. The text highlights HIV/AIDS as an exceptional global epidemic in terms of the severity of its impact as a humanitarian tragedy of unprecedented proportion, its multi-dimensional characteristics, and its continuous evolution over more than two decades. The careful analysis in this volume critically reviews key issues in the global response, including: HIV/AIDS as a development challenge North-South power relationships and tensions international and regional partnerships between donor governments and recipient countries governance of global institutions and impact on the capacity of developing countries to respond effectively to the epidemic prevention versus treatment as options in HIV/AIDS services how to make the money work in support of effective AIDS financing. Providing a comprehensive but easy to read and compact overview of history, trends and impacts of HIV/AIDS and the global efforts to respond effectively this book is essential reading for all students of international relations, health studies and international organizations. The 2014-2015 Ebola epidemic in western Africa was the longest and most deadly Ebola epidemic in history, resulting in 28,616 cases and 11,310 deaths in Guinea, Liberia, and Sierra Leone. The Ebola virus has been known since 1976, when two separate outbreaks were identified in the Democratic Republic of Congo (then Zaire) and South Sudan (then Sudan). However, because all Ebola outbreaks prior to that in West Africa in 2014-2015 were relatively isolated and of short duration, little was known about how to best manage patients to improve survival, and there were no approved therapeutics or vaccines. When the World Health Organization declared the 2014-2015 epidemic a public health emergency of international concern in August 2014, several teams began conducting formal clinical trials in the Ebola affected countries during the outbreak. Integrating Clinical Research into Epidemic Response: The Ebola Experience assesses the value of the clinical trials held during the 2014-2015 epidemic and makes recommendations about how the conduct of trials could be improved in the context of a future international emerging or re-emerging infectious disease events. A physician-anthropologist explores how public health practices--from epidemiological modeling to outbreak containment--help perpetuate global inequities. In Epidemic Illusions, Eugene Richardson, a physician and an anthropologist, contends that public health practices--from epidemiological modeling and outbreak containment to Big Data and causal inference--play an essential role in perpetuating a range of global inequities. Drawing on postcolonial theory, medical anthropology, and critical science studies, Richardson demonstrates the ways in which the flagship discipline of epidemiology has been shaped by the colonial, racist, and patriarchal system that had its inception in 1492. Deploying a range of rhetorical tools and drawing on his clinical work in a variety of epidemics, including Ebola in West Africa and the Democratic Republic of Congo, leishmania in the Sudan, HIV/TB in southern Africa, diphtheria in Bangladesh, and SARS-CoV-2 in the United States, Richardson concludes that the biggest epidemic we currently face is an epidemic of illusions—one that is propagated by the coloniality of knowledge production. In this "meticulously researched" account (New York Times Book Review), a Pulitzer Prize-winning author examines the dangers of a failing public health system unequipped to handle large-scale global risks like a coronavirus pandemic. The New York Times bestselling author of The Coming Plague, Laurie Garrett takes on perhaps the most crucial global issue of our time in this eye-

opening book. She asks: is our collective health in a state of decline? If so, how dire is this crisis and has the public health system itself contributed to it? Using riveting detail and finely-honed storytelling, exploring outbreaks around the world, Garrett exposes the underbelly of the world's globalization to find out if it can still be assumed that government can and will protect the people's health, or if that trust has been irrevocably broken. "A frightening vision of the future and a deeply unsettling one . . . a sober, scary book that not only limns the dangers posed by emerging diseases but also raises serious questions about two centuries' worth of Enlightenment beliefs in science and technology and progress." -- Michiko Kakutani, *The New York Times*

The 2014-2015 Ebola outbreak in West Africa shocked the world with its devastation and its rapid migration to multiple continents. As the systems meant to respond to this sort of epidemic failed, the disease exposed not just weaknesses in international infectious disease surveillance and management, but the failures of governments, humanitarian organizations, and international institutions to handle the legal, ethical, and economic questions that arose with an event of this scale. *GLOBAL MANAGEMENT OF INFECTIOUS DISEASE AFTER EBOLA* unites the insights of Ebola's first responders with those the world's foremost experts in law, economics, vaccine development, and global migration to identify missed opportunities from the Ebola crisis -- and to apply these lessons to emerging infectious disease threats. Framed with critical discussions of both the global health financing infrastructures that precipitated the response and the ethical and human rights dilemmas that resulted from it, this volume is much more than postmortem to an outbreak: it is a vital, sometimes damning examination of where we've been and where we're going in the face of emerging infectious diseases. In 1918, a devastating world-wide influenza epidemic hit the United States. Killing over 600,000 Americans and causing the national death rate to jump 30% in a single year, the outbreak obstructed the country's participation in World War I and imposed terrible challenges on communities across the United States. This epidemic provides an ideal lens for understanding the history of infectious disease in the United States. *The Flu Epidemic of 1918* examines the impact of the outbreak on health, medicine, government, and individual people's lives, and also explores the puzzle of Americans' decades-long silence about the experience once it was over. In a concise narrative bolstered by primary sources including newspaper articles, eye-witness accounts, and government reports, Sandra Opdycke provides undergraduates with an unforgettable introduction to the 1918 epidemic and its after-effects. *Critical Moments in American History* is a series of short texts designed to familiarize students with events or issues critical to the American experience. Through the use of narrative and primary documents, these books help instructors deconstruct an important moment in American history with the help of timelines, glossaries, textboxes, and a robust companion website. A global health catastrophe narrowly averted. A world unprepared for another outbreak. In December 2013, a young boy in a tiny West African village contracted the deadly Ebola virus. The virus spread to his relatives, then to neighboring communities, then across international borders. The world's first urban Ebola outbreak quickly overwhelmed the global health system and threatened to kill millions. As we are currently seeing, in an increasingly interconnected world in which everyone is one or two flights away from New York or London or Beijing, a localized epidemic has become a pandemic. Ebola's spread through West Africa to Nigeria, the United Kingdom and the United States sounded global alarms that the next killer outbreak is right around the corner—and that the world is woefully unprepared to combat a new deadly disease. From the poorest villages of rural West Africa to the Oval Office itself, this book tells the story of a deadly virus that spun wildly out of control—and reveals the truth about how close the world came to a catastrophic global pandemic. It is a story that serves as a cautionary tale for the COVID-19 epidemic currently spreading throughout the world. This report on the global AIDS epidemic outlines the strategic role that governments must play in slowing the spread of HIV and mitigating the impact of AIDS in morbidity and mortality. The report draws on the accumulated knowledge of the last 15 years to highlight effective management policies. *Barefoot Global Health Diplomacy: Field Experiences in International Relations, Security, and Public Health Epidemics* fills real-world gaps in training for those destined to

work on health and health systems in challenging, resource-deprived environments. Key topics include global health programs and individual adaptability for developing country settings, the interface between different actors in the global health diplomacy realm (e.g. ambassadors, embassies and the military), the ethical and economic implications of global health diplomacy at the service delivery level, the definition and illustration of the 'smart global health' paradigm, and the essential elements for individuals and organizations to design and deliver advances in international relations and altruism. This book provides an accessible, practical resource on advanced aspects of global health program design and delivery for global health practitioners and other international staff working on public health initiatives and programs in developing countries. Offers an innovative, accessible field guide for global health workers in diplomatic aspects of their work Provides helpful insight on how to resolve ethical dilemmas in global health (e.g. resource allocation decisions) Maintains a high level of focus on advanced aspects of global health program design and delivery This guidance is an update of WHO global influenza preparedness plan: the role of WHO and recommendations for national measures before and during pandemics, published March 2005 (WHO/CDS/CSR/GIP/2005.5). The emergence of severe acute respiratory syndrome (SARS) in late 2002 and 2003 challenged the global public health community to confront a novel epidemic that spread rapidly from its origins in southern China until it had reached more than 25 other countries within a matter of months. In addition to the number of patients infected with the SARS virus, the disease had profound economic and political repercussions in many of the affected regions. Recent reports of isolated new SARS cases and a fear that the disease could reemerge and spread have put public health officials on high alert for any indications of possible new outbreaks. This report examines the response to SARS by public health systems in individual countries, the biology of the SARS coronavirus and related coronaviruses in animals, the economic and political fallout of the SARS epidemic, quarantine law and other public health measures that apply to combating infectious diseases, and the role of international organizations and scientific cooperation in halting the spread of SARS. The report provides an illuminating survey of findings from the epidemic, along with an assessment of what might be needed in order to contain any future outbreaks of SARS or other emerging infections. This report issues a call for urgent action to combat the growing epidemic of obesity, which now affects developing and industrialized countries alike. Adopting a public health approach, the report responds to both the enormity of health problems associated with obesity and the notorious difficulty of treating this complex, multifactorial disease. With these problems in mind, the report aims to help policy-makers introduce strategies for prevention and management that have the greatest chance of success. The importance of prevention as the most sensible strategy in developing countries, where obesity coexists with undernutrition, is repeatedly emphasized. Recommended lines of action, which reflect the consensus reached by 25 leading authorities, are based on a critical review of current scientific knowledge about the causes of obesity in both individuals and populations. While all causes are considered, major attention is given to behavioural and societal changes that have increased the energy density of diets, overwhelmed sophisticated regulatory systems that control appetite and maintain energy balance, and reduced physical activity. Specific topics discussed range from the importance of fat content in the food supply as a cause of population-wide obesity, through misconceptions about obesity held by both the medical profession and the public, to strategies for dealing with the alarming prevalence of obesity in children. "... the volume is clearly written, and carries a wealth of summary information that is likely to be invaluable for anyone interested in the public health aspects of obesity and fatness, be they students, practitioner or researcher." - Journal of Biosocial Science The severe acute respiratory syndrome virus (SARS) first emerged in southern China in November 2002 and in the following months spread to 12 other countries in the Western Pacific region (where 95 per cent of the global cases took place) with devastating force. By July 2004, when the epidemic was finally declared over, it had killed nearly 800 people including many healthcare workers. Although by some standards, this first emerging and readily transmissible disease of the 21st century was not a big killer, it caused more fear

and social disruption than any other outbreak of our time. Written largely by the public health experts and scientists involved in efforts to control the epidemic, this publication examines the emergence and spread of SARS, the public health measures taken to deal with it, the epidemiology of the SARS coronavirus (SAR-CoV) and vaccine development, and its impact on people and economies in individual countries, in the region and around the world. In the past ten years, we have seen great changes in the ways government organizations and media respond to and report on emerging global epidemics. The first outbreak to garner such attention was SARS (severe acute respiratory syndrome). In *Rhetoric of a Global Epidemic*, Huiling Ding uses SARS to explore how various cultures and communities made sense of the epidemic and communicated about it. She also investigates the way knowledge production and legitimation operate in global epidemics, the roles that professionals and professional communicators, as well as individual citizens, play in the communication process, points of contention within these processes, and possible entry points for ethical and civic intervention. Focusing on the rhetorical interactions among the World Health Organization, the United States, China, and Canada, *Rhetoric of a Global Epidemic* investigates official communication and community grassroots risk tactics employed during the SARS outbreak. It consists of four historical cases, which examine the transcultural risk communication about SARS in different geopolitical regions at different stages. The first two cases deal with risk communication practices at the early stage of the SARS epidemic when it originated in southern China. The last two cases move to transcultural rhetorical networks surrounding SARS. With such threats as SARS, avian flu, and swine flu capturing the public imagination and prompting transnational public health preparedness efforts, the need for a rhetoric of global epidemics has never been greater. Government leaders, public health officials, health care professionals, journalists, and activists can learn how to more effectively craft and manage transcultural risk communication from Ding's examination of the complex and varied modes of communication around SARS. In addition to offering a detailed case study, *Rhetoric of a Global Epidemic* provides a critical methodology that professional communicators can use in their investigations of epidemics and details approaches to facilitating more open, participatory risk communication at all levels.

2016 CCCC Best Book Award in Technical and Scientific Communication

Leveraging Artificial Intelligence in Global Epidemics provides readers with a detailed technical description of the role Artificial Intelligence plays in various stages of a disease outbreak, using COVID-19 as a case study. In the fight against epidemics, medical staff are on the front line; but behind the lines the battle is fought by researchers, and data scientists. Artificial Intelligence has been helping researchers with computer modeling and simulation for predictions about disease progression, the overall economic situation, tax incomes and population development. In the same manner, AI can prepare researchers for any emergency situation by backing the medical science. Artificial Intelligence plays a key and cutting-edge role in the preparedness for and dealing with the outbreak of global epidemics. It can help researchers analyze global data about known viruses to predict the patterns of the next pandemic and the impacts it will have. Not only prediction, AI plays an increasingly important role in assessing readiness, early detection, identification of patients, generating recommendations, situation awareness and more. It is up to the right input and the innovative ways by humans to leverage what AI can do. As COVID-19 has grabbed the world and its economy today, an analysis of the COVID-19 outbreak and the global responses and analytics will pay a long way in preparing humanity for such future situations. Provides readers with understanding of how Artificial Intelligence can be applied to the prediction, forecasting, detection, and testing of global epidemics, using COVID-19 and other recent epidemics such as Ebola, Corona viruses, Zika, influenza, Dengue, Chikungaya, and malaria as case studies Includes background material regarding readiness for coping with epidemics, including Machine Learning models for prediction of epidemic outbreaks based on existing data Includes technical coverage of key topics such as generating recommendations to combat outbreaks, genome sequencing, AI-assisted testing, AI-assisted contact tracing, situation awareness and combating disinformation, and the role of Artificial Intelligence and Machine Learning in drug discovery,

vaccine development, and drug re-purposing Over the past few decades a number of emerging infectious diseases (EIDs) have disrupted societies throughout the world, including HIV, Ebola, H5N1 (or “avian flu”) and SARS, and of course the coronavirus disease (COVID-19) which spread worldwide to become a global pandemic. As well as EIDs, countries and regions also contend with endemic diseases, such as malaria. There are many factors that have contributed to the rise in, and spread of, EIDs and other diseases, including overpopulation, rapid urbanization, environmental degradation, and antibiotic resistance. Political and cultural responses to disease can greatly affect their spread. The global community needs to defend itself against disease threats: one weak link is enough to start a chain reaction that results in a global pandemic such as COVID-19. Some states take a nationalistic approach towards combating disease; however, international cooperation and meaningful “viral sovereignty”—empowering countries to create effective health institutions and surveillance systems in order to contain disease—must be considered. This volume, with a focus on Southeast Asia, Africa and North America, considers the intersection between disease, politics, science, and culture in the global battle against pandemics, making use of case studies and interviews to examine the ways in which governments and regions handle outbreaks and pandemics. In conjunction with PBS, Philip J. Hilts, longtime New York Times science and health reporter, has travelled the world to visit the sites of both the greatest disease peril - where the threat of runaway outbreaks is most severe - and places in which remarkably powerful new approaches are leading to astonishing success in combating the disease menace. Reporting on in-depth research and interviews with the dominant players, Hilts brings to life the crucial choice facing the world community. The leading nations and global organizations now have the means to win the fight against 'the coming plague' if they will only join together and devote the resources to doing so. By telling the moving stories of a host of individuals who have been plagued by the disease threat as well as the inspiring stories of the pioneers who are fighting the good fight Hilts brings the story of this crucial moment in world history to vivid life in a book that will be essential reading for all those concerned about this vital global challenge. Ultimately, this book shows how these responses underscore the importance of immigrant resources for developing public health interventions. In this timely study of all the reasons for extreme declines in native populations in the New World after colonization by Europeans, the author questions prevalent theories that exposure to Old World diseases was the sole cause of the devastation.

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