

From the Editor-in-Chief

This volume of *World Health & Population* presents papers which have been published online by *WHP* and are selected here as representative of recent contributions accepted for publication by the journal. The papers in this issue include a research paper on the impact of nurse migration and the worldwide shortage of nurses, and four papers from African settings, three regarding the ongoing HIV/AIDS crisis, and one looking at breastfeeding behaviors.

In the first paper in this issue, Chapman, Kipp, and Rubaale use robust qualitative methods in the form of 68 interviews and eight focus groups to gain understanding of the public's perception around the declining HIV prevalence and the so-called "Ugandan success story." Certainly Uganda has been subjected to a great deal of external study and press coverage regarding the country's progress combating the HIV/AIDS epidemic. Data collected in Fort Portal, Kabarole, western Uganda present an internal view of the country's progress from the perspective of the people most directly involved. The authors advocate consulting local people (those most impacted) in the interpretation of research results, and not just accept the interpretation of external scientific or policy experts.

Epidemiologist Lawrence Kazembe of the University of Malawi uses spatial modeling in our second paper to explicate the breastfeeding behavior in terms of (1) initiation and (2) duration. Working with data from the 2000 Malawi Demographic and Health Survey, Kazembe's study simultaneously modeled the effects of individual factors and geographic location on these two breastfeeding behaviors. The results are useful both for helping target interventions as well as directing further epidemiologic and geographic studies of behaviors. A subsequent paper is proposed by Kazembe to examine the spatial attributes of two other important breastfeeding behaviors: exclusivity and intensity. It will be interesting to see if these characteristics also exhibit geographic sensitivity, and in the same direction as initiation and duration behaviors.

For the third paper John Owiti's research, supported through an IDRC (Canada) grant, presents results from his doctoral thesis on knowledge of the link between tuberculosis and HIV/AIDS in rural Kenya. Tuberculosis and HIV/AIDS co-infection has long been recognized as an extremely serious health problem, particularly in resource-constrained and low income countries. The biomedical link between the two diseases is well established. Owiti's paper examines factors linking HIV/AIDS and TB from the "ecosystem" perspective. The ecosystem is defined as "the relationship between human populations and the physical, biological, and socio-cultural environments." Data were collected through interviews and focus groups with the rural Turkana people living in Lodwar Township, northwestern Kenya. Owiti identifies socio-cultural factors that affect both beliefs and behavior, some which are supportive of the biomedical model, e.g. in a focus group quote: "TB and HIV/AIDS are like brothers." Owiti proposes that prevention and management of both diseases should be integrated, and take into account the full range of ecosystem interactions.

The fourth paper in this issue, by Ndiaye and colleagues, examines gender-related factors and the critical issue of HIV serostatus disclosure. Informing one's partner regarding serostatus remains one of the critical means for initiating action to prevent new HIV infections. It also may initiate testing interest on the part of the partner, facilitate earlier access to needed medical care and therapies, and reduce stigmatization/increase awareness more broadly. As access to important and effective therapies (i.e. "HAART") continues to expand, and the prevalence of HIV-positive individuals therefore continues to rise, the need to reinforce behavioral interventions to prevent new infections is critically important. Ndiaye et al. describe the different priorities and motivations for men and women that would facilitate disclosure of one's serostatus.

Finally, this issue concludes with a “white paper” on issues around global migration of trained nurses prepared by *WHP* Associate Editor Amir Khaliq, along with colleagues from the University of Oklahoma Health Sciences Center. Khaliq et al. give a comprehensive, informative and sobering country-by-country analysis of demand for nurses by the more economically developed nations, and the supply being pulled from developing nation training programs in the Philippines, the Caribbean region, Africa, India, and China. The impacts on the developing countries in terms of economic flows (both positive and negative), and the negative impact on local healthcare delivery, are described. Given the levels of training of nurses in these countries, shortages could certainly be avoided, but are not. The resulting nursing shortages in developing countries threaten achievement of critical Millennium Development Goals (MDGs). The authors conclude with recommendations for multilateral agreements between the source and the destination countries.

In summary, we hope that you find these articles and the white paper of interest and value, and that you will additionally consult other papers recently released online at www.worldhealthand-population.com. *WHP* remains committed to its mission to provide a forum for researchers and policy makers worldwide to publish and disseminate health- and population-related research, and to encourage applied research and policy analysis from diverse international settings. Note also that *WHP* is indexed on MEDLINE and accessible through PubMed. We look forward to continued enthusiastic submission of manuscripts for consideration, peer-review, and publishing. Finally, the editors and publishers of *WHP* are always interested in any comments or suggestions you might have on the articles or journal. Please feel free to write or e-mail us.

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