

From the Editor-in-Chief

This issue of *World Health & Population* presents papers that have been published online by *WHP* and are selected here as representative of recent interesting contributions to the journal. Three of the five articles originate from Nigeria, and two of these focus on malaria. The other two articles report on healthcare in South Asian settings – slums in Calcutta (Kolkata) and health facilities planning in the city of Khulna in Bangladesh.

The initial paper in this volume, “The Potential for Transmission of Hospital-Acquired Infections by Non-critical Medical Devices: The Role of Thermometers and Blood Pressure Cuffs,” builds on the case for looking at the basics for avoiding hospital-acquired (nosocomial) infections.

Uneke and colleagues have published previously in *World Health & Population* (cf. Vols. 10-4 and 11-3) on infections from stethoscopes and hospital uniforms (“white coats”). Given the relatively low cost and straightforward implementation for improvements in these areas, emphasis on them should seem obvious across the world, and is particularly appropriate for resource-constrained settings such as Nigeria. Unfortunately, they continue to be overlooked and underemphasized (see, for example, Bailey and Rees 2005).

The first of the two articles in this issue on malaria in Nigeria reports a cross-sectional knowledge and practice survey of women attending antenatal clinics in Ekiti State. This study by Akinleye and Ajayi reveals an encouragingly high awareness of the consequences of malaria during pregnancy, but distressingly low knowledge regarding causes of the disease, and parallel low use of preventive measures, including insecticide-treated mosquito nets (ITNs) and intermittent preventive treatment with antimalarial drugs. Achievement of “Roll Back Malaria” goals (Global Malaria Partnership 2010) will not be realized without improved knowledge of the disease and receptiveness to proven intervention at the village level.

In “Measuring Physical Accessibility to Health Facilities – A Case Study on Khulna City” Islam and Akter use spatial techniques and geographic information system (GIS) analysis to assess population access to urban primary healthcare clinics and hospitals in Khulna City, Bangladesh. The analysis takes into account both physical (distance) location and the availability of public transport as factors influencing access. Although use of GIS has become a relatively common technique in epidemiology (Oregon State University 2011), its application to healthcare planning and facility location is not yet fully realized in Bangladesh or in other countries. GIS is yet another tool, along with manpower planning and logistics, with potential for improving access to healthcare.

The fourth paper in this issue is “Balancing the Present and the Future: A Study of Contraceptive Use in Calcutta’s Slums.” Using data from the Demographic and Health Surveys (DHS), Data and Husain examine the impact of traditional factors of contraceptive acceptance (son preference, religion, age, education, wealth, etc.) on the choice of contraceptive method through a series of econometric models. Although contraceptive prevalence rates are generally high, adoption in different slum communities remains variable, and son preference a continuing important and troubling factor.

The final paper, “Assessing the Progress of Malaria Control in Nigeria,” by Jimson Amzat, complements the earlier paper by Akinleye and Ajayi through providing a larger picture of prevention and control initiatives in the country. Amzat’s analysis is not optimistic regarding achievability

of the Millennium Development Goals (Mugs) related to malaria. Among the interesting observations is that the continuing promotion and use of chloroquine, despite its ineffectiveness in the area, may be contributing to the lack of credibility and acceptance of known and effective malaria control methods, such as ITNs.

In conclusion, we hope that you find the papers in this issue interesting and worthwhile, and that you will also consult others recently released online at www.worldhealthandpopulation.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 global and resource-constrained settings. *WHP* is indexed on MEDLINE and is accessible through PubMed.

We look forward to continued enthusiastic submission of manuscripts for consideration, peer review and publication. Finally, the editors and publishers of *WHP* are always interested in any comments or suggestions you might have on the papers or about the journal and our mission. Please feel free to write or e-mail us.

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