

Golden Jubilee: Independence of Jamaica, Trinidad and Tobago, and The University of the West Indies as a Degree Granting Institution

EN Barton

This issue of the Journal commemorates 50 years of political independence from Britain of both Jamaica, and Trinidad and Tobago. It is also the Golden Jubilee of The University of the West Indies (UWI) as a full degree granting institution after cutting its umbilical cord from the University of London. The Editorial Board of the Journal congratulates all three entities on their sterling contribution to the people of the Caribbean, foremost, and the world at large.

The founding fathers of independence of these countries would be proud of the sophisticated societies that are emerging out of these far flung islands and the academic excellence of UWI, which commenced its operations in refugee barracks, has vindicated the struggle for a university in the Caribbean.

In this issue of the Journal, there is a wide range of research articles that have favourably impacted on health and quality of life of the people in the Caribbean and worldwide.

In their research on child development, Walker *et al* have investigated the impact of nutrition and early childhood psychosocial stimulation on children. This longitudinal study has given critical evidence that has contributed to the work and policies of the World Bank, World Health Organization and the United Nations Children Fund. The study has also demonstrated that psychosocial stimulation intervention can be effectively integrated into primary care services with benefits to child development and mother-child rearing knowledge and skill (1). Thame in various studies on the Jamaican fetus concluded that maternal nutrition has an important effect on fetal size and birthweight. Fetal size has an effect on blood pressure in childhood and thus the initiating events on the programming of blood pressure may occur in early pregnancy (2).

Trotman reports on the clinical research in neonatology at The University Hospital of the West Indies (UHWI) that has informed local practice through management policies and treatment regimes (3). These policies have contributed to decline in mortality of very low birthweight infants in Jamaica (4). Low birthweight is a major contributor to morbidity and mortality among children. The rheumatic fever and rheumatic heart disease control programme spearheaded by Millard-

Bullock and her colleagues in Jamaica (5) promoted primary prevention of rheumatic fever by treatment of throat infections. Its main focus was on secondary prevention using benzathine penicillin injections monthly. This has been very effective in decreasing the rate of recurrent infections. Scott has detailed the number of children who received cardiac surgery between 1994 and 2011 for congenital heart defects; only three per cent were for rheumatic heart disease (6).

Pottinger reviewed years of research on children's exposure to violence in Jamaica and the psychologically driven interventions and policies that have emerged from the Department of Child and Adolescent Health, UWI, Jamaica. These policies have informed national and regional practice (7).

Serjeant has traced the early research interest in sickle cell disease and outlined the stellar contributions of the UHWI and the Sickle Cell Unit to the better understanding of this disease worldwide and the great improvement of quality of life and the prolonged survival of patients with sickle cell disease (8).

Henry focussed on studies done in the Caribbean to provide information that would guide prevention and management of major food and nutrition problems in the region. He concentrated on food insecurity and obesity as the major nutritional problems in the Caribbean and argued that research in these must be grounded in the context of poverty and inequity for maximal effect on the quality of life of people (9).

Mungrue compared the changing patterns of mortality in adults and infants prior to independence and post independence in Trinidad and Tobago. He noted the decrease in the standardized death rate (from 16.4 to 4.5) and infant mortality from 70/1000 live births to 10.5/1000 live births. While mortality from infectious diseases declined, those from chronic diseases increased (10). James *et al* looked specifically at cardiovascular risk factors in the British Virgin Islands and based on the prevalence of these risk factors have called for a national strategy to control cardiovascular diseases, educate the population and promote healthy lifestyle habits on those islands (11).

Ferguson *et al* have documented the impact of the Jamaica Health and Lifestyle Surveys and the reproductive Health Surveys on knowledge of the burden of disease in Jamaica over 30 years and the influence of these surveys on public health policy in Jamaica (12).

From: Editor-in-Chief, West Indian Medical Journal and Department of Medicine, Faculty of Medical Sciences, The University of the West Indies, Kingston 7, Jamaica.

Correspondence: Professor EN Barton, Department of Medicine, Faculty of Medical Sciences, The University of the West Indies, Kingston 7, Jamaica.

The chronic non-communicable diseases are major causes of morbidity and mortality in the Caribbean. Chronic kidney disease is one of the major public health issues in the region. Miller has detailed the development of paediatric nephrology in Jamaica and the impact this has on reducing morbidity and mortality from renal disease (13). Soyibo *et al* have traced the development of renal care in the Caribbean from dialysis to transplantation and the development of the Caribbean Renal Registry and its effect on policy formulation *re* management of kidney disease in the region. They also emphasized primary and secondary prevention of renal disease and slowing progression to end-stage renal failure (14). Roberts outlined the advances that have been made in Trinidad and Tobago in kidney transplantation with good survival outcomes (15).

Eldemire-Shearer (16) has reported on the vast amount of research on ageing and has deftly shown how such research has guided the elaboration of policies for the elderly nationally, regionally and internationally.

Caribbean researchers have played a key role in guiding the response to the HIV epidemic. Figueroa has detailed some locally conducted research and highlighted the role they played in informing the comprehensive HIV/STI control programme in Jamaica and slowing the HIV epidemic (17). Christie and Pierre summarized collaborative published research in HIV/AIDS that have contributed greatly to the significant reduction of vertical transmission of HIV/AIDS and HIV-attributable morbidity and mortality among pregnant women and HIV-infected children (18). The challenge now is the transition of HIV-infected children through adolescence into adulthood.

Christie and Duncan documented the landmark Rotavirus Vaccine Trial that included Jamaican infants. This Vaccine significantly reduced the emergency room visits of children for gastroenteritis worldwide without serious adverse effects (19).

Gilbert reviewed the contributions of Caribbean researchers and the Department of Medicine, UWI, Mona, in the recognition of HTLV-1 associated myeloneuropathies and the significant role this played spurring research in immunology and understanding of retroviruses (20).

Hickling writes passionately of the decolonization of psychiatric public policy and the community engagement of mental health that has negated involuntary certification and custodialization, and promoted treatment in primary health facilities (21). Hickling and Hutchinson in their research, revealed that hostile, racial and environmental challenges in Britain were the primary cause of psychosis there among Afro-Caribbean immigrants (22). This was a significant contribution to the understanding of the aetiology of psychosis and shifted the pendulum from a genetic to a biopsychosocial position (22).

Williams-Johnson *et al* have traced the health impact of research in the field of Emergency Medicine and gave sug-

gestions for further development in the field (23). Pottinger *et al* document the growth and success of *in vitro* fertilization in Jamaica, paying tribute to Ramsewak and colleagues in Trinidad and Tobago who first introduced IVF technology to the English-speaking Caribbean (24). Dan *et al* gave an outlined of the history of laparoscopic surgery in the Caribbean and the advances made in this region (25). Scarlett *et al* traced the development of postgraduate training in anaesthesia and intensive care in Jamaica and the strides made in the specialty (26).

Maharaj ends the compilation of papers by soberly telling us that political independence must be highlighted with interdependence with global partners for research that supports healthy communities (27).

The authors are to be commended for this splendid issue of the Journal.

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