

From the Editor-in-Chief

In this issue of *World Health & Population* (WHP), we continue with the series of reports on health issues faced by rural-to-urban migrants in China. These papers are based upon the ongoing research by Xiaoming Li, Bonita Stanton and others affiliated with Johns Hopkins, Wayne State, Beijing Normal and Nanjing universities. The paper by Li et al. addresses social stigma and mental health needs of rural-to-urban migrants, and lays out a framework for future research. We hope to continue offering the output from their ongoing and important research through WHP.

Other papers in this issue represent a somewhat eclectic mix of research from five different countries: Democratic Republic of Congo (DRC), Ethiopia, India, Nigeria and Sudan. From the DRC is a well-written paper by Nkosi and associates reporting focus group results on caregiver burden associated with HIV/AIDS. Although the situation they report is grim and seemingly unaddressable, at least in the short run, their research is nonetheless important for raising our awareness of the problem, and, once again, pointing out the complexity of the HIV/AIDS pandemic. Chandrashekhar et al. present highly focused outcomes research on cataract surgery in rural South India, and strong recommendations with regard to “quality versus quantity” in terms of procedures. The authors are concerned that the incentives for cataract surgery are skewed towards doing the maximum number of cases versus achieving good outcomes in the maximum number of times. Prasartkul and Vapattanawong look at death registration data in Thailand and posit very credibly why there is under-reporting. They also make some interesting and reasonable policy recommendations with regard to reforming the death registration process; however, the most useful take-away for researchers and policy-makers outside of Thailand is that you can credibly use survey data to validate secondary data, even in developing country situations. Doocy and Burnham, from Johns Hopkins University, provide an interesting discussion of assessment of socioeconomic status (SES) in the context of food insecurity in Ethiopia. In particular, they correlate various measures of SES with physical well-being as measured by mid-upper arm circumference (MUAC), and conclude that income, education and housing quality are better indicators of SES than home or land ownership. Uneke et al. describe the public health implications of bacterial infection and growing antibiotic resistance among school children infected with schistosomiasis in Nigeria. Although this paper is more clinically focused than most for WHP, the issues around antibiotic resistance are important to surface. Finally, the paper by Ali et al. is notable by its addressing a relatively untouched area: pharmacist manpower issues in a developing country. Pharmacists provide a much more critical primary care role in many developing countries than they do in North America or Western Europe. Ali and his colleagues designed and conducted a survey that looked at the movement between the public and private sector of pharmacists in Sudan. Although remarkably narrow in its focus, the survey and research efforts and results are nonetheless quite interesting.

We hope the mix of papers in this issue is engaging to our readers, and the contributing authors and editorial staff of WHP are interested in any comments or suggestions you might have. Please feel free to write or e-mail us.

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