Independence and Interdependence: Opportunities for Growth, Research and Societal Change

The Editor,

Sir,

As we celebrate this golden anniversary and in this issue document our West Indian medical research achievements, it is also useful to reflect on the significant opportunities that have come from external collaborations. These opportunities, sometimes under the banner of global health, have provided external funding, high-end technical expertise and supportive human resources which our relatively small regional medical research communities have embraced to produce amazing results. Examples of these include the Barbados Eye Study, where the Chronic Disease Research Centre at Cave Hill worked in collaboration with the Stony Brook University School of Medicine, New York, and the University of Pittsburgh’s work in Tobago. The former “aimed to gain better understanding of the impact of the perceived visual-related quality of life among high-risk groups of Blacks” (1); in the latter, The Tobago Family Health Study was designed to better understand the role of inheritance, lifestyle and body weight and composition in the aetiology of several common chronic diseases, including prostate cancer, in a population of African ancestry (2). These examples demonstrate how leveraging collaboration can expand research efforts to improve the health of populations locally, regionally and globally.

We want to take this opportunity to report on two new collaborations in which this merging of the local medical research community and external human resources and funding are working to improve health in our communities. The first is the four island Eastern Caribbean Health Outcomes Research Network (ECHORN) which is an NIH-funded Yale University coordinated five-year prospective cohort study designed to study health in the US Virgin Islands (USVI), Puerto Rico, Barbados and Trinidad and Tobago.

This study will look at networks of health information exchange, chronic disease, mental health and quality of life, all very much under-examined in our communities. The second is an opportunity between the Unit of Public Health and Primary Care at St Augustine, Trinidad and Tobago to work with colleagues from Harvard Medical School under the Fulbright Nexus programme (with the Pan American Health Organization and the Caribbean Public Health Association, Trinidad) to attempt to change alcohol laws and regulations in Trinidad via multistakeholder collaboration for collective impact. While the Caribbean had traditionally benefited from funding from the European Union (EU) and North American agencies, the fall of communism and opening up of Eastern Europe had for many years diverted funding. There are now new opportunities for collaboration which highlight that in our current global geopolitical context, our independence must also be highlighted with our interdependence with our global partners for research that supports healthy communities. We should consider the adage: “If you can do it by yourself, it’s probably not worth doing”.

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