

Editorial

Deciding what to write in an editorial

In a civilised society we accept some restraint on our individual freedom for a common good. In fact what defines society may be that we accept a wider social responsibility to look after each other and to behave well towards each other. Do unto others as you would be done to. But what happens when we see that this is not happening? What happens when we see, or feel, that the poor are being blamed for things they have no control over, or we see vested interests manipulating a situation to their own ends? Must we speak out and tell people what is happening? Even if this upsets some people? Where does our role as a scientist stop and as a citizen start? When is it right and wrong to use a platform to express an opinion? Can an opinion be objective; how to disentangle informed opinion from prejudice and bias? Upsetting vested interest alone is no basis for silence, but how to criticise responsibly?

So far nobody has told me not to write on a certain topic, but should there be some check on what I say? I believe it is the responsibility of the editor to exercise editorial freedom within a construct that takes account of a sense of responsibility to tell the truth, of being accountable to The Nutrition Society (who owns the journal and exercises professional responsibility to its members), and trying to maintain academic and professional credibility, within an acceptable moral and ethical framework. This is easier when writing an editorial about a paper that has reported the results of a scientific study. It is more difficult when an opinion is being expressed. Is it sufficient to rely on the editor's judgement and experience? Should the funder have a say on what is covered? At present we do not have any formal mechanism for answering these questions. Should we have? Is it time for an oversight committee? If so, how would it work? Tell me what you think.

Over the last year we have broadened our scope to include explicitly to

'debate and propose new models and approaches to improving food and nutrition related public health, particularly in those populations most at risk and vulnerable'.

Debate and propose imply moving beyond the presentation of evidence, into thinking about what is required to improve health. Is there a better way to formulate and present opinion or judgement? Evidence-based nutrition is now accepted as a model for gathering and describing the evidence, and although not completely resolved, best practice is becoming clearer, and more widely accepted.

We have to accept that the evidence will never be sufficient to remove the need for judgement. Policy should be guided by evidence, but it will also be influenced by many other factors. The process whereby evidence is used to inform policy needs to be made explicit and transparent, and not subject to manipulation by vested interests. With clear guidance and openness it will be more difficult for vested interests to misuse evidence. I would like *Public Health Nutrition* to engage in this process; if readers have any experience or comments please let me know.

In the current issue

In this issue I would like to highlight the paper by Fenn and colleagues¹, which investigates the use of childhood nutritional indicators to target interventions to those at greatest need. The broad context for this work is the drive to achieve the Millennium Development Goal of halving the number of undernourished children by 2025. To date, geographic targeting has been widely used to identify those at potentially greatest risk and to direct nutrition interventions. This approach assumes homogeneity of risk within a target area. The aim of this research was to test this assumption. The authors also raise the interesting question that if there is local heterogeneity within a country or region, then what factors are important in determining risk, and that require changing? The study was based on a meta-analysis of published data from the Demographic Health Surveys from 46 countries. They used weight-for-height and height-for-age Z-scores from pre-school children. The analysis showed little area-level clustering of childhood undernutrition, either at the national level, or for urban or rural areas separately. This suggested that the main sources of within-country variation were more likely to be determined at the household or even individual child level, rather than because of where the child lived and the environment they shared. This study calls into question the value of geographic targeting alone for achieving effective health improvement. If household-level targeting might be more effective, the challenge is how to efficiently identify the highest risk households and individuals within those households? This does not mean that we should forget about improving the wider environment in which children have to grow up, but it does raise important questions that need addressing about our current strategies and priorities.

18th IUNS Congress 'Nutrition Safari for Innovative Solutions', Durban, South Africa, 19–23 September 2005

I am sure most readers will be aware of this congress, but time is going fast and the organisers want to encourage as many people as possible to come along, present their work, and enjoy South Africa. For more details please go the following web page: <http://www.puk.ac.za/fakulteite/voeding/iuns/index.html>. All participants are encouraged to submit an abstract. Abstracts may be submitted for oral presentation, scientific poster or an information poster.

In order to be considered for acceptance, all abstracts must comply with the guidelines posted on the website.

Barrie Margetts
Editor-in-Chief

Reference

- 1 Fenn B, Morris SS, Frost C. Do childhood growth indicators in developing countries cluster? Implications for intervention strategies. *Public Health Nutrition* 2004; **7**(7): 829–34.