

## Perspectivas de los héroes de la salud pública de la OPS / Perspectives from PAHO public health heroes

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*As part of its 100th-anniversary celebration, the Pan American Health Organization has named 12 persons as “Public Health Heroes of the Americas” in recognition of their noteworthy contributions to public health in the Region of the Americas. Over the course of this year, the Revista Panamericana de Salud Pública/Pan American Journal of Public Health will be carrying pieces written by or about these heroes.*

*Como parte de la celebración de su Centenario, la Organización Panamericana de la Salud (OPS) ha distinguido con el título de Héroes de la Salud Pública a 12 personalidades que se han destacado por su valiosa contribución a la salud en el continente americano. A lo largo de este año, la Revista Panamericana de Salud Pública/Pan American Journal of Public Health publicará una serie de escritos de los mismos galardonados o acerca de ellos.*

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### My journey in public health in the Caribbean

*Kenneth Livingstone Standard*

*“Reverence for life does not allow the scholar to live for his science alone, even if he is very useful to the community in so doing. It does not permit the artist to exist only for his art, even if he gives inspiration to many by its means. It refuses to let the businessman imagine that he fulfils all legitimate demands in the course of his business activities. It demands from all that they should sacrifice a portion of their own lives for others.” — Albert Schweitzer*

Public health in the Caribbean has experienced many significant advances over the past half century. Much of this has been due not only to outstanding contributions from individual practitioners but more importantly to the dedication and hard work of a committed cadre of health professionals working as a team. I became a member of this team in 1959.

My interest in public health issues was sparked long before I entered medicine, when as a high school teacher in Barbados I was involved in the teaching of hygiene and public health principles. An opportunity to expand my horizons was granted me when I became one of the 33 persons accepted to be the first group of medical students at the new University College of the West Indies in Jamaica (affiliated to the University of London, Great Britain).

My interest in public health was further stimulated by the enthusiasm and dedication of the staff working in public health in the English-speaking Caribbean region. Among those who gave me support were the late Dr. H. M. Johnson of Jamaica and Drs. John Waterlow and John Gourlay of London.

In the 1950s the problems of maternal and child health were striking and presented significant challenges. There was a high infant mortality rate—for each 1 000 live births more than 200 children died before their first birthday—as well as a high incidence of malnutrition. To try to address these issues,

a nutrition survey in five low-income areas in Jamaica was implemented under the supervision of Dr. John Waterlow and Prof. Eric Cruickshank and funded by the Epidemiology Research Unit of the United Kingdom. I was fortunate to have been a member of that team and to have benefited considerably from that experience.

My relationship with the Pan American Health Organization (PAHO) and the World Health Organization (WHO) began in 1958, when PAHO awarded me a fellowship to attend the Graduate School of Public Health at the University of Pittsburgh, in the United States of America. This relationship with PAHO and WHO was to grow and flourish over the next few decades.

Having completed my master's degree in public health by mid-1959, I returned to Barbados and worked as a medical officer of health in the "new public health approach." At this time I found myself becoming increasingly interested in research, and, with the aid of a PAHO grant, I did some work that looked at nutrition and child mortality in Barbados.

In 1961 I received a Medical Research Council of the United Kingdom fellowship and visited research and training centers in Great Britain and also attended the London School of Hygiene and Tropical Medicine, University of London.

Work done on child nutrition in two West Indian islands, Jamaica and Barbados, under the supervision of Drs. John Waterlow and W. R. Ackroyd, with Dr. David Morley as advisor, formed the basis for my M.D. thesis. In 1962 I was awarded the M.D. degree from the University of London.

In 1961 I had been appointed as a lecturer in the Department of Social and Preventive Medicine, University of the West Indies, Mona Campus, Jamaica. This association was to last throughout the rest of my career, culminating in my retirement as an emeritus professor in 1995.

Following on the work of Dr. John Waterlow, in 1961 the Medical Research Council of the United Kingdom established a research unit at the University of the West Indies, Mona Campus, Jamaica, under the leadership of Dr. William Miall of London. Between 1961 and 1966, in addition to my duties in the Department of Social and Preventive Medicine, I was assigned responsibility for the Medical Research Council research projects looking at child growth and development and child mortality.

During this period there was a very keen interest in the development of public health in the Caribbean region. The major obstacles were lack of financial resources and the need for more trained personnel. A number of international agencies, including PAHO and WHO, collaborated with local and regional health authorities to overcome these obstacles and to facilitate development. Another agency involved was the Milbank Memorial Fund of New York, and I was fortunate also to have obtained a Milbank Memorial Fund faculty fellowship for teaching and research between 1964 and 1969.

From the very start in the 1960s through to my retirement in 1995 the work in public health was challenging and exciting. The focus in the Caribbean in the late 1960s and into the 1970s was on the development of the so-called "new public health approach." I was fortunate to have been able to make my particular contribution in helping to develop training programs in public health for all levels of staff. In this regard, PAHO was very instrumental in facilitating opportunities that lent considerably to the broadening of the scope of my work. PAHO collaborated with the Department of Social and Preventive Medicine, other departments, and the University of the West Indies as a whole, as well as with ministries of health in the Caribbean region, to help promote public health. Some of these collaborative efforts included: seminars on gastroenteritis and malnutrition for health workers in the islands of the Eastern Caribbean, in 1963; a project to identify health needs in the Eastern Caribbean, in 1964; and regional three-month courses on health statistics and medical records for middle-level

personnel in government health services, from 1965 through 1968. Many other workshops and seminars were held throughout the Caribbean for all levels of health workers over the years.

Inspired by the work of public health staff in the English-speaking Caribbean, other persons and I within the Department of Social and Preventive Medicine developed an undergraduate training program in public health, to underpin these various development efforts. Later we introduced the innovation of having final-year medical students do an elective in a public health clinic in rural Jamaica. Many persons were involved in developing this program and supervising students in the field.

I wish specifically to mention the health teams in rural Jamaica and the persons who provided board and lodging free of charge for the students during the first year of the program, allowing us to start with minimal resources. Among others who contributed to the program at different times were Nurse Olive Ennever, who came to the Department of Social and Preventive Medicine as a research assistant after her retirement from the School of Nursing; public health nurses, including Nurse Skeffrey; public health inspectors, including Conrad Storey; and medical officers, including Drs. H. M. Johnson, Owen Minnott, and Roy Francis, who were members of the original class of 33, as well as Ronald Lampart and Barry Wint.

The rural elective allows students to get hands-on experience seeing real patients outside the hospital. The students live in the community and are encouraged to become involved in community activities. Working with members of the community, they help to identify health-related problems and possible solutions. This experience helps the students to recognize the importance of working as part of a health team. Additionally, the students use the time to do small research projects. Over the years, many of these projects have helped to improve the health status of a number of communities.

The need to train other members of the health team was also recognized, and the innovation of community health aide training began with an experimental program within the Department of Social and Preventive Medicine in 1967. The aim was to train members of the local community to work as auxiliaries in a health team under the direction and supervision of established health professionals. The idea was accepted by the Conference of Ministers responsible for health in the Commonwealth Caribbean, and several countries began to train and use community health aides as part of their health team.

Within the Department of Social and Preventive Medicine, we also recognized the importance of postgraduate training in the area of public health. In 1972 a postgraduate one-year diploma course in public health was established for physicians, and in 1974 one in community health was set up for nonphysicians. In 1985 a master's in public health degree course was developed to replace the diploma in public health. This was done in collaboration with the John J. Sparkman Center for International Public Health Education and the School of Public Health of the University of Alabama, in the United States.

During the past four decades, I have had the good fortune to have taken part in many consultancies and projects facilitated by PAHO and WHO. These included work throughout the English-speaking Caribbean, in Suriname and Venezuela as well as in Washington, D.C., and Geneva. I have also had the honor of being a part of many advisory committees for PAHO and WHO over the years and to have been the recipient of several awards. These include the WHO Advisory Committee on Medical Research, 1969-1972; the WHO Expert Panel on Public Health Administration, 1969-1989; the WHO Jacques Pariset Fellowship and Medal, 1980-1981; Chairman, WHO Expert Committee on New Approaches to Health Education in Primary Health Care, 1982; and the WHO Health for All Medal, 1988.

The work done in collaboration with public health workers in Jamaica and the English-speaking Caribbean has been presented at a number of conferences, both regionally and internationally, and published in a wide range of peer-reviewed scientific journals. A few of the pieces that capture the thrust of the work done over the years are:

- "Analysis of Student Evaluation of a Five-week Clerkship in Community Medicine in Jamaica, West Indies," co-authored with R. Cruickshank and O. Ennever, in the *Proceedings of the 5th International Scientific Meeting of the International Epidemiological Association*, Primosten, Yugoslavia, August 1968
- "Community Medicine in the Commonwealth Caribbean," co-authored with O. Ennever, in the *West Indian Medical Journal*, 1971
- "Community Health Aides Training Programme in a Developing Country, Jamaica, West Indies," co-authored with O. Ennever, *Commonwealth Medical Association Bulletin*, 1972
- "Approaches to Primary Health Care in the Commonwealth Caribbean," co-authored with Esmond Garrett and A. Kiran Kumar, *Educación Médica y Salud*, 1981
- "The Role of Medical Students in Research on Primary Health Care in the English-speaking Caribbean," presented at the WHO 34th World Health Assembly, May 1981, on receipt of the Jacques Parisot Foundation Medal Award.

It has been my privilege and humble honor to have worked as a member of a team with many giants in the public health field during the 40 years from my graduation in 1955 to my retirement in 1995. Any success I had, any contribution I was able to make, was facilitated by many persons who encouraged and supported me, and by the strength I derived from my spiritual beliefs. Persons who contributed included my family, especially my wife, Evelyn; my friends; my colleagues and other members of the community of the University of the West Indies; members of the health team in the ministries of the Caribbean region and in the field; and the many persons and organizations nationally, regionally, and internationally that touched my life in many ways.

As we stand at the dawn of the 21st century, the public health priorities may have changed, but the need for a strong and dedicated public health team remains unchanged. It is my hope and expectation that the new generation of public health workers will take the baton and carry it to greater heights.

In the words of the English psychologist and author Havelock Ellis:

*"For a brief space it is granted us, if we will, to enlighten the darkness which surrounds our path. We press forward, torch in hand, along the path. Soon comes from behind a runner who will outpace us. All our skill lies in placing in his or her hand the living torch bright and unflickering, while we ourselves disappear into the darkness."*