ABSTRACT
The nation’s newest school of public health boasts research excellence in aging, obesity, addictions, health care services and policy research, and more. The Brown School of Public Health is home to a variety of master’s and doctoral programs, in addition to one of the oldest undergraduate concentrations in community health. The School plays a key role in the development of public policy at the state and national level and implements programs that benefits Rhode Island physicians and their patients.

KEYWORDS: public health; Brown; school of public health; public policy; Rhode Island; health policy

INTRODUCTION
In early April, the results of the most rigorous study to date of how much it costs to care for Americans with dementia landed on the front page of newspapers and media websites. The findings, published in the *New England Journal of Medicine*, were shocking: the financial burden of Alzheimer’s disease and other forms of dementia is at least as high as that of heart disease or cancer, and is probably higher. The total monetary cost of dementia in 2010 was between $157 billion and $215 billion.

Even more alarming is the fact that both the costs and the number of people with dementia will more than double within 30 years, as the population of the United States ages. Managing this uptick in the number of older citizens and their attendant health problems is just one of the issues that the Brown School of Public Health is addressing. The School’s mission is to improve population health by conducting research to better understand disease risk factors and effective health promotion, educating future generations of health researchers and policy makers, and providing public service by translating research into public policy and improved practice.

The nation’s newest school of public health, to be established July 1, 2013, boasts research and teaching that is collaborative, multidisciplinary, and innovative. The products of this work have real impact on people’s lives. And this school, a recognized leader in public health, is right here in Rhode Island.

THE PUBLIC’S HEALTH
The field of public health has evolved since it began one hundred years ago. The discipline first addressed communicable diseases, sanitation, and food supply safety—the greatest threats to health in this country at the time. Advances in public health added 40 years to life expectancy in the United States over the past century.

During this time, there has since been an explosion of interest in public health, with increased focus on understanding the complex social determinants of disease and improved strategies to encourage healthier behaviors. With improved strategies for preventing and treating infectious diseases, lifestyle choices and behaviors have become the greatest threats to health and longevity. Tobacco use, obesity, and physical inactivity contribute to chronic diseases that limit vitality and require costly interventions. Environmental exposures are also a major concern for the public today. Although successful in delivering cleaner water supplies, we are now concerned about chemicals such as BPA in our plastic water bottles.
The Brown School of Public Health is grounded in research on these 21st-century health risks. Working at the population level, its research centers are devising interventions for substance abuse and tobacco addiction; investigating ways to help people lose weight and keep it off long term; improving the end of life for patients with terminal illness, particularly the costly and dehumanizing Alzheimer’s disease and other dementias; and studying the utilization of health services that will help physicians and policymakers navigate the new frontier of health-care reform.

The substantial growth in the research enterprise and academic infrastructure led to the Brown University Corporation vote to transform the Public Health Program into a School of Public Health effective July 2013. The Brown School of Public Health will have even broader impact on national and international health policy, and will bring innumerable benefits to the state of Rhode Island, its health care system, and its citizens.

**FACTS AND FIGURES**

The Public Health Program was established in 2000, built on the strength of Brown University’s Department of Community Health, which offered one of the first undergraduate concentrations (majors) in the discipline. The School of Public Health grew out of a decade of strategic planning that included the recruitment of new faculty, the creation of new master’s and doctoral degree programs, and the establishment of four new departments that reflect the Program’s specific strengths.

**Figure 1. Academic Programs**

**Departments**
- Behavioral and Social Sciences
- Biostatistics
- Epidemiology, with an Environmental Health Section
- Health Services, Policy and Practice

**Doctoral Programs**
- Biostatistics
- Epidemiology
- Health Services Research
- Planning: Behavioral and Social Health Interventions (in the approval process)

**Masters’ Programs**
- Master of Public Health
- Epidemiology
- Biostatistics
- Behavioral and Social Interventions
- Clinical and Translational Research

**246 Students**
- 90 undergraduate concentrators
- 113 master’s students
- 43 doctoral candidates

**Figure 2. Public Health Research Centers**

<table>
<thead>
<tr>
<th>Research Center</th>
<th>Date Launched</th>
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<tbody>
<tr>
<td>Center for Alcohol and Addiction Studies</td>
<td>1982</td>
</tr>
<tr>
<td>Center for Gerontology and Healthcare Research</td>
<td>1986</td>
</tr>
<tr>
<td>Brown University AIDS Program*</td>
<td>1988</td>
</tr>
<tr>
<td>International Health Institute</td>
<td>1988</td>
</tr>
<tr>
<td>Center for Statistical Sciences</td>
<td>1995</td>
</tr>
<tr>
<td>Center for Primary Care and Prevention*</td>
<td>1997</td>
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<tr>
<td>Centers for Behavioral and Preventive Medicine*</td>
<td>1998</td>
</tr>
<tr>
<td>Center for Population Health and Clinical Epidemiology</td>
<td>1998</td>
</tr>
<tr>
<td>Institute for Community Health Promotion</td>
<td>2002</td>
</tr>
<tr>
<td>Center for Environmental Health and Technology</td>
<td>2007</td>
</tr>
<tr>
<td>Center for Evidence Based Medicine</td>
<td>2012</td>
</tr>
</tbody>
</table>

*Hospital-based centers

**Figure 3. Research Funding**

- $40 million in external funding to campus-based research centers
- $18 million in external funding to affiliated hospital research centers

**A SCHOOL OF PUBLIC HEALTH**

During the past decade, with the support of Brown University’s leadership, the Public Health Program completed strategic steps toward becoming a School of Public Health. Organization as Brown’s third professional school brings with it key benefits that will allow public health research and teaching to flourish.

The first of these benefits is that the School opens doors to funding from the Centers for Disease Control and Prevention extended only to schools of public health. As a school, Brown will be invited into the national research/implementation network, giving its research findings greater reach. Schools of public health are also more attractive to the best students and faculty, so Brown will have greater appeal as a destination for leaders and future leaders in the discipline. Accreditation by the Council for Education in Public Health, a two-year process that the School has begun, is a seal of excellence and reputation—the ultimate validation of the research and teaching in public health at Brown.

**BENEFITS TO THE STATE OF RHODE ISLAND**

Governments play a critical role in the maintenance and improvement of the public’s health. As Rhode Island’s only school of public health, Brown has forged strong relationships with the executive branch of state government, including the Department of Health, and the office of the insurance commissioner, as well as the legislature. These are just some of the key government offices responsible for implementing policies and initiatives that ensure the safety and improve the health of our state.
The Brown School of Public Health’s centers and institutes help develop sound, research-based public policy and improve public health practice. Our faculty are involved in public health at the local, state, national, international levels. The School is a valued community partner in improving population health, and has been involved in recent years in such statewide initiatives as:

- H1N1 flu emergency response and evaluation;
- Coordinated health planning; and
- Implementation of health reform.

In addition, the School of Public Health is training more public health professionals, whose work leads to a healthier population and improved health services. These trainees and the School’s faculty engage in advocacy efforts such as improving meals in schools and community planning to promote physical activity. Their research supports advocacy at the state level to promote evidence-based programs such as Meals on Wheels, which was recently shown to be a simple, yet effective way to help senior citizens stay in their own homes and out of nursing facilities longer. Their efforts in promoting healthier behaviors can have an impact on the well-being of the entire population.

**BENEFITS TO PHYSICIANS IN RHODE ISLAND**

The existence of a school of public health has tangible benefits for physicians in Rhode Island. First and foremost, the School of Public Health will remain closely connected to the Warren Alpert Medical School of Brown University, ensuring rich population health training for medical students. Historically, about 17 percent of these graduates stay on to practice in the state. These ties will become even stronger in 2015 when the first students are enrolled in the Primary Care-Population Health Program, a new dual-degree program for students committed to practicing primary care that will result in MD and master’s degrees. While still in the planning phases, the goal is to include incentives for these students to stay in Rhode Island to practice. The School of Public Health also offers lectures, workshops, and short-term courses to physicians and other health professionals.

The Brown School of Public Health also provides resources for the Department of Health and clinical partners for health promotion and disease prevention, which are made available to physicians. Through the School’s Center for Evidence-Based Medicine, physicians have a resource for better understanding how best to apply scientific findings regarding health screening, medications and other interventions. As the Affordable Care Act is fully implemented and accountable care organizations begin monitoring health care practices, it will be vital for physicians to know which tests and treatments are most effective and cost efficient.

**CONCLUSION**

The Brown School of Public Health is built on a long tradition of community health research and teaching. Its research centers take a “lifelong health” approach to improving people’s lives, one that begins prior to conception through research on environmental exposures that affect fertility and cause birth defects, to the very end of life, by advocating for a patient-centered approach to terminal illness that considers a person’s values and beliefs in addition to the medical research. In between those points, public health at Brown targets the behavioral choices that can threaten [tobacco and substance abuse, obesity, risky sexual behaviors] or heighten [physical activity, nutrition, injury prevention] wellness. This work has an impact on people around the world thanks to partnerships forged locally and globally, from Providence’s South Side to South Africa.

For more information about the Brown School of Public Health, visit http://publichealth.brown.edu.

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