

SCHOOL of PUBLIC HEALTH

University of North Carolina at Chapel Hill

Newsletter

Volume 1

January, 1973

Number 1

SPH DEANS VIEW PAST AND FUTURE

Looking Back ...

During more than a third of a century, the University of North Carolina School of Public Health has remained steadfast in its basic mission while undergoing a sequence of changes in emphasis, style and learning-teaching procedures. That mission is the preparation of professional public health workers to analyze, plan, carry out and evaluate through appropriate community action the necessary steps in the diagnosis and treatment of the contemporary community health problems and hazards of the times.

Dr. Milton J. Rosenau and the initial faculty provided the beginning of a single-minded Public Health School to prepare practitioners for their daily practice in state and local health departments. In the beginning many of the practitioners were part-time, on-the-job students under Rosenau and his small crew.

This primary concern with the practice of public health continued as the prevailing policy of the School during most of the 16-year deanship of Dr. Edward G. McGavran. This thrust was augmented by such McGavran pace-setting concepts as the "community diagnosis and treatment of the body politic"; his insistence that "public health is a separate and distinct profession"; and emphasis upon teaching-learning of public health practice through the supervised, multi-disciplinary field team assignment approach.

Dean McGavran actively sought and obtained partial State funding for the School's operation. It was under his leadership that the first Federal grants for research and training in the basic public health sciences and disciplines were obtained. Likewise, it was his dream and tireless effort, along with those of a loyal faculty, that finally resulted in a new and modern building into which the rapidly developing and scattered teaching and research fragments of the School could be collected under one roof.

The pace of development and expansion of the School's programs was to continue throughout my nine-year tenure as the School's third dean. Paralleling and conditioning the School's growth and extension of mission, the accelerating societal stresses demanded and produced responsive changes in many of the School's policies, programs and operating procedures. The increasing public awareness of the "population"







Greenberg

... Looking Forward

Revival of the publication of the newsletter is particularly pleasing to me because it creates a fine opportunity to reestablish contact with our School's alumni throughout the world. The letters which arrived in response to the announcement of Dean McGavran's untimely death indicated a great need for such communication. These letters also provided me with the kind of enthusiastic support a new dean needs in attempting to follow the high standards attained by his eminent predeces-

Our School has grown in numbers of faculty and students to become the second largest among the 18 accredited schools of public health in the United States. Moreover, its tradition of high quality education and research has made the School outstanding in the field. You can understand, then, why I undertook this new position with some trepidation and concern for maintaining a future of distinction.

The decade ahead promises to be filled with problems which will affect the health of all people. Although the problems may seem overwhelming, they are particularly challenging to public health professionals because the opportunities for solution lie within our area of special competence—the community.

Consider the most critical problems which must be faced

Continued on page 3



SCHOOL of PUBLIC HEALTH

University of North Carolina at Chapel Hill

Vewsletter

Volume 1

June, 1973

Number 2

A FIRST: SPH ALUMNI DAY 1973

School of Public Health graduates gathered in Chapel Hill on April 16, 1973 for the first annual Alumni Day. Alumni from Florida, New York and points in between greeted old friends and joined in the planned sessions which included visits to the departments, luncheon, group discussions, the Fred T. Foard Memorial Lecture and a social hour.

The highlights of the program were the luncheon address by Dean B.G. Greenberg (see story page 1) and the Foard Lecture by Dr. Nancy Milio (see story page 6).

During the group sessions following Dean Greenberg's address, alumni discussed the following topics in addition to points raised by the speech: the purpose of the Association, organizational structure, number of meetings desired, input alumni would like to make to the School's program and the best mechanism to provide this. Your reaction to these topics is requested.

Participants were enthusiastic about the reactivation of the Association and said that a formal organization would be the necessary mechanism for maximum input of alumni in the School's program. The Alumni Day Planning Committee had suggested the selection of a steering committee by alumni to Continued on page 2



Dean Greenberg addresses alumni at luncheon.

Dean Discusses School's Future

It is a real pleasure to have this opportunity to discuss the future of our School with you at our first alumni reunion. In the time alloted, I would like to bring you up to date on some of the current problems which the School faces, the programs in which we are involved and outline some of our plans for the future.

Recurring problems of the School include the recruitment of qualified students, expecially those from minority groups, and the designing of a curriculum relevant to community health needs. Our current crisis is a financial one growing out of proposed cuts in the Federal Budget, particularly the portion known as the Hill-Rhodes Formula Grant. These cuts will cripple schools of public health across the country. Some of the nation's 18 schools will almost certainly have to close if they do not receive emergency funds.

President Nixon has also recommended that research training grants from the National Institutes of Health and the National Institute of Mental Health be terminated. This would mean the loss of approximately 110 traineeships here at the School and a loss of \$1.5 to \$2 million in training grants.

Steps are already under way to trim the faculty ranks, to reorganize some departments and to eliminate less productive programs. We face the possible loss of about 40 faculty positions of our 150 faculty. Persons without tenure who will be affected are being notified currently about the absence of continued fiscal support.

In the reorganization of the School, certain departments will be clustered together not only for better fiscal management and administrative arrangement but also to blend more harmoniously joint teaching efforts. The Division of Health Measurement and Analysis will include the Departments of Biostatistics and Epidemiology and the Division of Family and Community Health will consist of the Departments of Public Health Nursing, Maternal and Child Health, and Mental Health. As another move to economize, the mental health program will be discontinued as of June 30, 1974.

We are also proposing that a Division of Community Health Services be set up within the School. This Division will be

Continued on page 7



SCHOOL of PUBLIC HEALTH

University of North Carolina at Chapel Hill

Newsletter

Volume 2

August, 1974

Number 2

CONGRESSMAN ROGERS 1974 FOARD LECTURER

Congressman Paul G. Rogers, chairman of the House Subcommittee on Public Health and the Environment, delivered the Fred T. Foard Memorial Lecture on April 26, 1974. Making the introductions were Congressman L. Richardson Preyer, also a member of the House Subcommittee, and Dean Bernard G. Greenberg.

Mr. Rogers' address was the climax and conclusion of the Alumni Conference.

Speaking on "Implications of Current Health Legislation for Improved Health Care and Public Health Practice," Mr. Rogers took issue with the position of the president of the American Medical Association before the House Ways and Means Committee and the administration view that there is no health care crisis in the nation today. "We have been in a health crisis for some years," he said, "but finally people are concerned enough that they are demanding an evaluation of our programs."

There are still 200 counties in the nation that have no doctors at all. In addition, 50% of the doctors licensed to practice in this nation this year will have been trained in foreign countries. Although the latest study from the National Institutes of Health says that there is a shortage of almost 30,000 physicians, some professionals say the problem is one of maldistribution rather than shortage. The important question to be considered is one of outcome. "As we produce doctors are they in effect changing the health of the American people?"

Most manpower training legislation expires this summer and the administration is recommending cut backs in federal aid to medical schools and no money to support schools of public health. Mr. Rogers believes that there is a need for people to be trained in dealing with community health. The Congress has made the decision to include schools of public health in the legislation with all other health manpower training institutions. "Funds will



Paul G. Rogers

DARITY HEADS ALUMNI ASSOCIATION

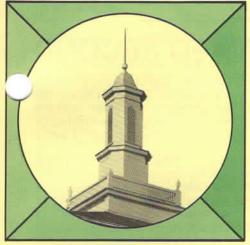
Dr. William A. Darity (HEED), dean of the University of Massachusetts School of Health Sciences, was installed as president of the SPH Alumni Association at the luncheon session of the School's 1974 Alumni Conference.

The election and installation of officers and directors is the culmination of the work of the steering committee established by the alumni at the 1973 conference to determine the organizational pattern for the Association. Darity is the first president of the Association since the body was inactivated in the 1950's.

Dr. Martha Valiant (MHCH), chief of pediatrics at Lincoln Neighborhood Health Center, Durham, N.C., is vice president. Dr. Joan Cornoni (BIOS & EPID), assistant professor of epidemiology at the School of Public Health, was elected secretary. David Corkey (BIOS), management information specialist in the Office of Emergency Medical Services, Division of Facility Services, N.C. Department of Human Resources, Raleigh, N.C., is treasurer.

The Association directors elected initially to serve staggered terms are: Howard Barnhill (HEED) coordinator, Area Health Education Centers, School of Public Health; Becky S. Bowden (HEED), community development specialist, Family Planning Branch, N.C. Division of Health Services, Raleigh; Frances (Scottie) Byerly (HEED & HADM), Lewistown, Montana; Charles Harper (PALP), director, Division of Community Health Service, School of Public Health; Dorothy Hays (PHNU), consultant, North Central Regional Office, N.C. Division of Health Services, Winston-Salem; Richard House (HADM), administrator, Chronic Disease Branch, N.C. Division of Health Services, Raleigh; John T. Hughes (EPID & HADM), director of continuing education, School of Public Health; Donald Lisnerski (HADM), administrator, UNC-CH Student Health Service; Elta Mae Mast (HEED), professor, Department of Health Education, North Carolina Central University at Durham; Elizabeth L. McMahan (HEED), dean of the graduate school, East Tennessee State University, Johnson City; Craig Turnbull (BIOS), assistant professor of biostatistics, School of Public Health; Emily Tyler (HEED), Family Planning Program, Guilford County Health Department, Greensboro, N.C.

Members of the nominating committee are: Harriet H. Barr (HEED), director of public relations, School of Public Health; Lydia Holley (HADM), coordinator of the Off-Campus



SCHOOL of PUBLIC HEALTH

University of North Carolina at Chapel Hill

Newsletter

Volume 3

March, 1975

Number 1

1975 ALUMNI CONFERENCE PLANNED

The third annual School of Public Health Alumni Conference will be held March 20 and 21, 1975 at the School in Chapel Hill.

Under the theme "Issues in Public Health," the conference will feature general and small group discussion sessions, the Fred T. Foard Memorial Lecture and the alumni luncheon. Registration will begin at 8:30 a.m. on March 20, 1975 in the lobby of Rosenau Hall.

The first general session will include addresses by Dr. A. Helen Martikainen and Dr. C. Arden Miller. Dr. Martikainen, former chief of health education, World Health Organization, was also director of health education, State Board of Health in North Carolina. The topic of Dr. Martikainen's presentation will be "From W.H.O.: More Concern for Participation by People." Dr. Miller, president of APHA and professor of maternal and child health, will discuss "The Impact of Public Health on National Health Policy."

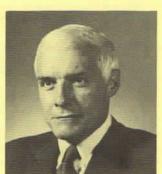
The Fred T. Foard Memorial Lecture will be presented by Dr. Charles C. Edwards, senior vice president for research and development, Becton, Dickinson and Co. and former assistant secretary for health, DHEW. Dr. Edwards will lecture on the topic "The Broadening Scope of Public Health." The public is cordially invited to hear Dr. Edwards at 11:00 a.m., Friday, March 21, 1975, in the School of Public Health auditorium.

The alumni luncheon at noon on Thursday will include a report by the outgoing officers of the SPH Alumni Association, installation of new officers, and a message from the Dean.

The Thursday and Friday afternoon programs will be devoted to mini-sessions on a variety of subjects suggested by alumni. These include child screening, the future of public health, goals for national health policy, Area Health Education Centers, occupational health trends and programs, licensure, unique alumni careers, and women's health.

The Conference Planning Committee is chaired by Martha Valiant, vice president of the SPH Alumni Association. Members of the committee are: Harriet Barr, George Dudney, Loletta Faulkenberry, Priscilla Guild, Charles Harper, Gary Lewis, Donald Lisnerski, Naomi Morris, and Joyce Page. To pre-register or receive additional information contact Harriet Barr, conference director, c/o Dean's Office, School of Public Health.

EDWARDS SELECTED FOARD LECTURER



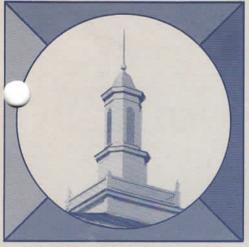
Dr. Charles C. Edwards will present the 1975 Fred T. Foard Memorial Lecture in conjunction with the Annual Alumni Conference. The topic of the address will be "The Broadening Scope of Public Health." The lecture will be held at 11:00 a.m. Friday, March 21, 1975 in the School of Public Health auditorium.

Formerly assistant secretary for health, Department of Health Education and Welfare, Dr. Edwards became senior vice president for research and development, Becton, Dickinson, and Co., February, 1975.

As assistant secretary for health from 1973 to 1975, Dr. Edwards directed the activities of the Public Health Service, provided health policy direction for and coordinated all health and health-related programs in HEW, and gave advice and technical support to international health organizations.

A native Nebraskan, Dr. Edwards received the A.B. and M.D. degrees from the University of Colorado and the M.S. degree in surgery from the University of Minnesota. He was in the private practice of surgery and on the teaching staff of two hospitals before moving to Georgetown University Medical School. Other positions held include those of administrator with the American Medical Association, vice president of a management consulting firm, and commissioner of the Food and Drug Administration.

The Fred T. Foard Memorial Lectures were established in 1968 by Dr. Foard's widow, Mrs. Elsie D. Foard, to honor the distinguished public health practitioner for the many achievements of his career. Dr. Foard was responsible for bringing about major improvements in health services for the American Indians and for the transfer of the Indian Health Program from the Department of the Interior to the Public Health Service. He was also director of the Division of Epidemiology for the North Carolina State Board of Health.



SCHOOL of PUBLIC HEALTH

University of North Carolina at Chapel Hill

Newsletter

Volume 3

November, 1975

Number 3

KUEBLER WINS McGAVRAN AWARD

Dr. Roy R. Kuebler, Jr., professor of biostatistics, is the first recipient of the School of Public Health's Edward G. McGavran Award for excellence in teaching.

The Award was established this year by the School's faculty to pay tribute to the many contributions to public health education made by the late Dr. McGavran who was dean of the UNC School of Public Health from 1947-63.

In making the presentation at the May faculty meeting, Dean Bernard G. Greenberg commented on Dr. Kuebler's major contributions to the School and the Department of Biostatistics in curriculum development in statistics, in teaching courses for biostatistics majors as well as introductory courses to non-statisticians, in counseling of students, and as a stimulus to his colleagues in teaching methods.

His love for teaching and his outstanding ability to make a complex subject fascinating and interesting are recognized and appreciated by both faculty and students.

After receiving the Ph.D. degree from UNC in 1958, Kuebler joined the public health faculty as an assistant professor. He was promoted to professor in 1962. He holds the A.B. degree from Dickinson College in Carlisle, Pa., and the A.M. degree from the University of Pennsylvania.

Kuebler is a member of Phi Beta Kappa, Society of Sigma Xi, Delta Omega, Tau Kappa Alpha and Omicron Delta Kappa honorary societies. The alumni of Dickinson College elected him as a member of the board of trustees of that institution in 1962-1970.



Dr. Greenberg (left) and Mrs. E.G. McGavran present the McGavran Award plaque to Dr. Roy Kuebler.

NEW DIRECTIONS



Dr. Dorothy Talbot

In reviewing the role and direction of our public health nursing program here in the School, it is appropriate to first look at some of the issues and trends facing nursing in general and community health nursing in particular.

One issue which has special relevance to community health nurses lies in the definition of quality nursing care. The criteria and ways of measuring quality care are difficult to establish. The American Nurses Association has published a set of broad standards for community health nursing. However, the criteria for measuring quality care for various health problems are in the process of development.

The legal implications of daily decisions made by doctors and nurses lead us into another issue of primary concern, and that is licensure. There is a movement today to develop a new system to provide safe care to the public by the various health disciplines. This has come about partially because of the proliferation of occupational groups working in the health programs. Among methods being considered are the licensure of health care institutions and the establishment of a single licensure board at the state level. Of course it is true that each profession is best able to judge the proficiency of their own people, so nursing as well as other professions are holding to the privilege of being able to license their own practitioners. Some control is necessary, so licensure becomes the legal weapon to protect the public from unsafe practitioners.

Another important issue is evolving around the expanded role of the nurse. There is a division of thought within nursing and within medicine and between nursing and medicine as to what extent the nursing role should be extended.

There are two trends in community nursing which have a great effect upon our program. More and more nurses are moving into administrative positions and becoming clinically responsible for providing health services. Practical nurses and

Continued on page 4

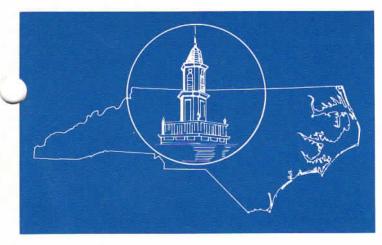
School of Public Health

University of North Carolina at Chapel Hill

Volume 4 Number 1

Summer, 1976





JANUARY, 1977

SCHOOL OF PUBLIC HEALTH — THE UNIVERSITY OF NORTH CAROLINA AT CHAPEL HILL — VOLUME 4, NUMBER 3

FORTY YEARS OF SERVICE

THE SCHOOL OF PUBLIC HEALTH

Bernard G. Greenberg

(On November 12, 1976 Dr. Greenberg addressed the Order of the Tar Heel One Hundred. At the request of alumni a summary of his remarks follows.)

The School of Public Health is forty years old this year. It was founded in 1936 as a non-degree granting unit in the medical school in order to provide in-service education to health workers in local and state health departments in the state as well as the southeastern region of the U.S. The Social Security Act of 1935 authorized the establishment of such units and provided the funds for personnel and space so that initially the School required no state support. North Carolina was the first state to take advantage of that provision in the Act and as the first state school of public health we have kinship with the first state University. I cite this historical function in the creation of our School because service to health workers in the state has remained as one of our primary missions.

In 1939, the unit in the medical school became a full-fledged and separate School and was authorized to grant the master's degree through the Graduate School. The first students graduated in 1940.

Our primary mission is to train all students in the University about public health and at the same time provide specialized education in the field for those who receive the master's degree or the doctoral degree.

We award slightly over 200 master's degrees each year and around 30 doctoral degrees. Our student body is around 500 or just slightly above and includes about 400 master's and 100 doctoral students each year.

Prior to 1972, we had an average of around 25% of our student body from this state. One of my first actions as Dean was to insist that our School never reject for admission a qualified applicant from North Carolina and to monitor the admissions process to see that we were adhering to this policy. This change did not mean a lowering of our standards. In fact, our

entering classes have continuously been higher in their qualifications. We accomplished the goal of doubling our instate students to about 45% through the initiation of recruitment activities in the state.

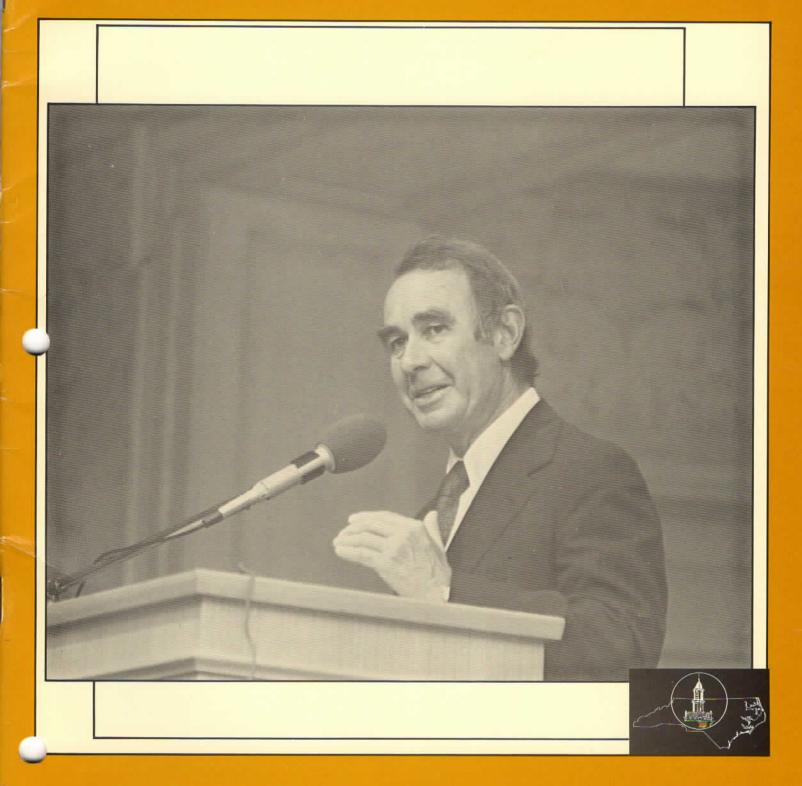
One of the groups benefitting most by this recruitment effort has been minority students. We have attained a proportion of students slightly over 10% from minority groups during the last three or four years. Before 1970 it was practically zero. These minority students are all Black Americans except for a few native Americans each year from the areas around Lumberton. To assist our minority students to identify with the faculty, we have also increased the number of Black faculty members.

I should like to stress the advantages of having Black faculty members and students in our School. First of all, we know that Black public health workers are more effective than whites in working to improve the health conditions of minority groups. They identify more readily with their constituents and the populations willingly accept them and their services. Furthermore, it has been invaluable to our White students to learn about the



Nutrition student counsels mother on adequate diet during student's field experience.

MAY, 1978



SCHOOL OF PUBLIC HEALTH --- THE UNIVERSITY OF NORTH CAROLINA AT CHAPEL HILL --- VOLUME 5, NUMBER 3



October, 1979

The University of North Carolina at Chapel Hill School of Public Health

Volume 7. Number 1

To Serve the State: Division and School Work Together

"To achieve our goal of preparing persons adequately in the public health sciences, it is imperative that faculty know how to practice what they teach," says Dr. B. G. Greenberg, dean of the School of Public Health. "And that many of our research projects address the problems identified by persons in practice."

Historically, the School has had a very close collaborative elationship with state and local departments of health and lental health. In fact, it was through the initiative of Dr. Carl V. Reynolds, a former state health officer, and UNC officials that Dr. Milton J. Rosenau was recruited in 1936 to begin the Division of Public Health in the UNC School of Medicine, according to Dr. Greenberg.

Service to North Carolina and the region was high on the list of priorities for subsequent deans but varied in the degree to which it was implemented. As reaffirmation of an increasing commitment to this state and to facilitate and encourage faculty to provide service to its health agencies, Dr. Greenberg created the Division of Community Health Service in the School shortly after he became dean in 1972. (See *The Body Politic*, Vol. 6, No. 3, "An Outreach Approach to Service"). Through this Division the expertise of the faculty is matched with the needs of communities to the mutual benefit of the School and the community agency.

Dr. Hugh H. Tilson, director of the N.C. Division of Health Services (NCDHS) since January, 1979, points out that the collaborative working relationship between the NCDHS and the School was one of the things that attracted him to North Carolina. It was in his involvement with the UNC-CH Health Services Research Center that Dr. Tilson first became aware of some of the collaborative projects.

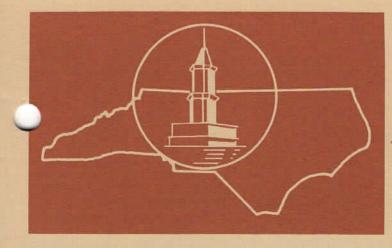
"I feel that it is to the benefit of the citizens of North Carolina for the Division of Health Services and the School to make the most of the many talents in each organization. Our employees, as adjunct faculty, bring their practical exerience to the students. In return, students and faculty rough field training and research projects bring new insights to our service programs. Not a day goes by without formal or informal exchange between the two organizations," he said.

In addition to NCDHS employees holding appointments as adjunct faculty and providing field sites for students, several new patterns of relationships have evolved. Dr. Jonathan B. Kotch (MHCH, 77) completed his first year as assistant professor of maternal and child health on June 30, 1979. In addition to this role, he is medical advisor to the sudden infant death syndrome information system of Maternal and Child Health Branch, NCDHS, and has served in a liaison capacity. Dr. Kotch has research interests in emergency maternity and infant care programs, the MHCH Department's local health department study, WIC, and child abuse.

A few of the NCDHS employees who contribute to the educational program of the School on a routine basis are: Dr. Martin P. Hines, who teaches a course in administrative epidemiology and Ms. Ruth Knott, who serves as co-director of short courses in parasitology. Dr. Tilson is an adjunct professor of health administration and Dr. Jacob Koomen, former health director, is now a clinical professor of health administration.



Women in management short course sponsored by the School for local, regional and state employees of the Division.



November, 1980

The University of North Carolina at Chapel Hill School of Public Health

Volume 8, Number 1

Honors Program Initiated:

First Student Graduates

Susan Merkel received the bachelor of science in public health degree in August, 1980. Susan's major was environmental protection and she is the first student in public health to graduate with highest honors. She is also the first undergraduate to be invited to join Sigma Xi, scientific research society.

Attractive, sandy-haired and self motivating, Susan grew p around Rochester, NY. Her family moved to North-Carolina in 1975. She chose Chapel Hill because of UNC-CH's reputation and her interest in the environmental field.

"I didn't want to be a pure chemistry major," Susan said, "so when I was a sophomore I began to try to set up a program for myself through the Interdisciplinary Studies Program." Information about the major in environmental protection came to Susan quite accidently. As Susan tells the story, she was taking Emil Chanlett's introductory course in the environment and studying the text in the library. Another student saw her book and inquired about the course. It was from this chance encounter that Susan



Susan Merkel

New Public Health Building Top Priority

The new Public Health and Environmental Sciences Building for the School of Public Health has received top priority for major capital improvements by the UNC Board of Governors at its meeting on October 10, 1980. The building is a part of the \$1.7 billion budget for the University system. The entire budget must now be considered by the Advisory Budget Commission and the North Carolina General Assembly.

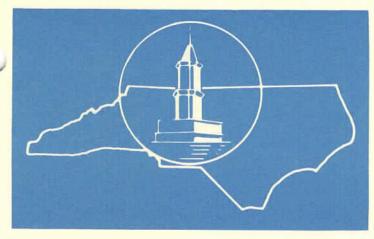
Planning money for the new building was made available early in 1980 and the architectural firm of Ferebee-Walters and Associates secured to design the facility.

The new \$14.6 million building will be located adjacent to Rosenau Hall. The 175,000 square feet of additional space will provide urgently needed classrooms and laboratories and will house the School's computer center, audio visual unit and modern animal quarters.

Alumni who have attended the alumni conference or visited the campus on other occasions realize that the School is bursting at its seams. Faculty offices are tucked into supply closets and halls and are housed in 18 locations around Chapel Hill. In a building constructed to accommodate 315 students there are now 607 graduate students, 108 undergraduates and a faculty of almost 150.

Enrollment has had to be restricted in some programs. The fact that the School has been prevented from expanding into new programs is of even more consequence to society. There is a great need, and desire on the part of the faculty, to expand the occupational health program and to do more work in toxicology and mutagenicity. The new laboratory space will make some of these new programs possible.

If the project stays on time table, the building will be ready for occupancy in 1984. There are still many hurdles, however. We hope for positive approval by the Advisory Budget Commission and the General Assembly.



March, 1984

The University of North Carolina at Chapel Hill, School of Public Health

Volume 11, Number 1

Health Plan for Elderly Endorsed

North Carolina health professionals endorsed a proposal from U. S. Representative Ike Andrews (D-NC) at a hearing held recently to get reactions on a new health plan that would provide health education services to the elderly.

The hearing, conducted by the Education and Labor Subcommittee on Human Resources of the House of Representatives chaired by Andrews, gathered testimony from health professionals, including persons from NC State government, University officials and citizens.

The bill would amend the 1964 Older Americans Act and increase the services provided in more than 3,300 federally supported senior citizen centers by including health care education. The centers already offer nutrition and social and legal services.

Dean Michel A. Ibrahim said that he is optimistic about the plan and that he and the national Association of Schools of Public Health pledge support.

"I think the idea ... to provide health education in older citizens' centers is an excellent one," he said. "It deals with measures that are very important to the elderly population."

The three leading causes of death among the elderly continue to be heart disease, cancer, and stroke, he continued. "These diseases account for three out of every four deaths in this population. In addition, accidents, arthritis, depression, loneliness, dependency, and isolation contribute immensely to the burden of illness in the elderly. Many of the causes of these conditions lie in people's behaviors which when changed can alter the burden of the illness"

Dean Stuart Bondurant, UNC School of Medicine, said that Andrews' bill "offers immense promise of potential benefit to the health of older Americans by virtue of its sound and appropriate emphasis on health promotion and disease prevention through personal education."

NC Secretary of Human Resources Sarah T. Morrow testified that she would volunteer North Carolina as a site for a pilot program. "We want our older citizens to be able to spend their years as productive, independent citizens, involved in their community, active both mentally and physically, enjoying their independence with financial security," she said. "... This means teaching them how to live a healthy life."

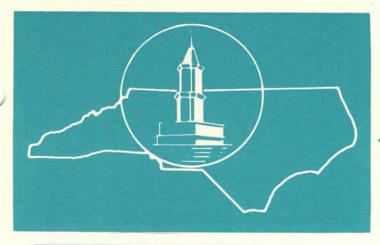
One of the aims of Andrews' bill is to turn the senior citizen centers into teaching laboratories for the nation's 23 graduate schools of public health as well as for hospitals and health professional training centers. For example, faculty members at the UNC School of Public Health could go to other areas of the state along with students receiving course credit. The faculty and students would help determine the health problems of the elderly at the centers and help them to work out solutions. The efforts would include providing information about how they could better use prescription and non-prescription medicine, how to exercise more effectively and how to practice better dietary habits.

"Faculty and students from schools of public health and other academic centers could provide the information, design and prepare materials for the health education services to the centers," Ibrahim said. "One of the greatest contributions of the schools of public health could be in evaluating the effectiveness of the program once it began."

"There has not been a strong national policy on preventive measures I am sorry to say - mostly lip service. Only four percent of the federal health dollars is spent on prevention," Ibrahim concluded.

Harry T. Phillips, retired UNC public health professor, pointed out that among the challenges health educators face are informing the often susceptible elderly about over medication and telling them of the need for general health maintenance through nutrition and exercise. "Older people as a group spend more than the average citizen on both prescribed and over-the-counter drugs," he said. "Moreover, the elderly can ill afford wasteful or unnecessary expenditures on medications."

Andrews' proposal was introduced in the House in November in skeletal form. The hearing in Chapel Hill and other hearings scheduled across the nation will help shape the bill into effective legislation.



August 1984

The University of North Carolina School of Public Health

Volume 11, Number 2

Link Between Cholesterol and Heart Disease Established

School Plays Critical Role

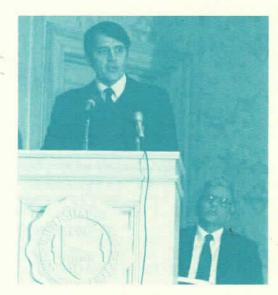
The medical and scientific community now has conclusive evidence that lowering blood cholesterol levels in high risk men reduces the number of heart attacks and deaths due to coronary heart disease. This significant breakthrough in medical research was announced in January 1984 in a national press conference in which the School of Public Health and the clinic centers participated. The research was the result of a ten-year multicenter study conducted in the United States.

O. Dale Williams, Department of Biostatistics, the principal investigator for the project in North Carolina, stated, "We have long known that people with high blood cholesterol levels have a higher risk of heart attacks. What we have not known is whether the risk of a heart attack can be reduced by lowering these blood cholesterol levels or whether the damage has already been done and the risks cannot be reduced." The lack of an answer to this question has been a missing link in the process of finding better ways to combat heart disease.

In 1971 the National Heart, Lung and Blood Institute (NHLBI) funded a large-scale investigation to determine whether the lowering of blood cholesterol level in men without heart disease would reduce the risk of a first heart attack, i.e., a primary prevention trial. By 1971, several clinical trials of cholesterol lowering had been performed using diet or drugs and many had produced encouraging results; however none had been regarded as conclusive. Much of the inconclusiveness related to the many difficulties in conducting such studies.

To circumvent these difficulties, the Coronary Primary Prevention Trial (CPPT) was designed with the following essential features:

- it included men between 35-59 years old with high blood cholesterol levels but with no coronary heart disease at entry,
- it randomly assigned participants into control and treatment groups in a double-blind design,

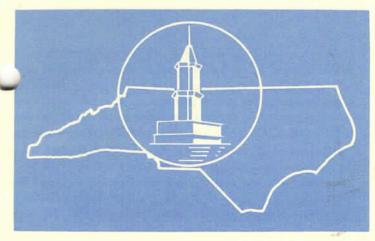


Dr. O. Dale Williams announces the results of the Lipids Research Project. Dean Michel Ibrahim seated.

3) it recruited large numbers of participants (3806), provided for at least seven years of follow-up, and devoted considerable attention to the adherence of the participants to the study regimen over a long period of time.

To implement the study, the NHLBI contracted with twelve university medical research centers in North America and six other centers in the United States to provide biostatistical, pharmacologic, laboratory, nutritional, electrocardiographic, and administrative support. The UNC School of Public Health made a critical contribution to this research program by operating the statistical coordinating center, as well as by providing nutritional and epidemiological expertise for the study.

The coordinating center has had a major role in virtually every aspect of this study. Faculty and staff the Departments of Biostatistics, Epidemiology and Nutrition



November 1986

The University of North Carolina at Chapel Hill, School of Public Health

Volume 14, Number 1

Reflection on the Past – Projection for the Future

With the reappointment of Dean Ibrahim to a second term, it is a very appropriate time for the Dean to summarize and share with alumni the major accomplishments brought about under his deanship since 1982 and the challenges facing the School during his second term.

It is exciting to be reappointed for a second term as dean of a school as healthy, vigorous, excellent and forward looking as the UNC School of Public Health. The announcement gives me the opportunity to share some of the accomplishments of the past and expectations for the future.

Of singular importance was the long awaited funding of the new School of Public Health building and the ceremonial ground breaking, both events previously announced in *The Body Politic*. The funding is a culmination of the effort of many people, especially the hard work of former Dean Greenberg, who devoted considerable time and effort in bringing the need of the building to the forefront of the University. The bids for the building came within the budget and this means that we shall be able to construct the building in its entirety. We are all looking forward to the day when the new addition will be dedicated and many of our space problems alleviated.

Since 1982 in response to an increasingly competitive funding situation at the Federal and State levels and the need to rationalize existing programs, we have embarked on a number of efforts to re-examine our programs, expand coherence among disciplines, increase public awareness in North Carolina about public health, and recognize the technological revolution in computing and information systems. Examples of these efforts follow.

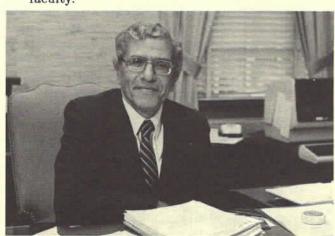
Under the leadership of Professor Sherman James and Associate Dean Donald Lauria, the School's Graduate Programs Committee (GPC) undertook a study of classroom teaching and the role of the student evaluation in instructors' performance. As

a result a joint committee from the GPC and the Appointments and Promotions Committee has been formed to review the criteria of teaching performance and excellence in relation to promotions and appointments.

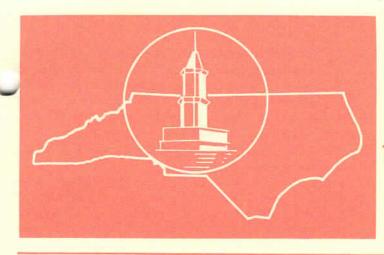
We have tried to break down the barriers between departments while maintaining the strengths of the current structure by establishing specific interdisciplinary programs under the Dean's direction. These are:

The School Health Promotion and Disease Prevention Program is directed by Dr. James R. Sorenson (HEED). It is affiliated with the UNC Center for Health Promotion and Disease Prevention, a coordinated effort of the five Health Science schools directed by Dr. O. Dale Williams, professor of biostatistics. Twenty-one SPH faculty are involved.

The Occupational Health Studies Program under the direction of Dr. Carl Shy has been in existence since 1971 providing excellent opportunities for teaching and research for students and faculty.



Ibrahim



June 1987

The University of North Carolina at Chapel Hill, School of Public Health

Volume 14, Number 2

Anonymous \$50,000 Gift Made To School

An anonymous donor has given \$50,000 to establish a fellowship and a practice award in the Department of Health Education in the School of Public Health. The gift was announced by Dean Michel A. Ibrahim at the School of Public Health Alumni Association awards luncheon.

The Lucy S. Morgan Fellowship will be open to all graduate students enrolled in the master's degree program in the Department. The fellowship will carry a cash award of at least \$2000. Criteria will include scholastic achievement, integrity and leadership in health education.

The Eunice N. Tyler Award for Excellence in Public Health Education Practice will be open to all graduates of the Department and will include an award of at least \$250. Criteria will include excellence in health education practice.

Although unable to attend the luncheon in person, Drs. Morgan and Tyler heard the Dean's announcement by speaker phone and responded. Both were very proud and pleased that the gift will make these two awards possible.

In her response, Dr. Morgan said, "Every year this fellowship for advanced graduate study will enable a very special student to carry on the tradition of the Department in helping to assure that public health and health education will move into the 21st century with distinction."

Dr. Tyler said that she felt that the recognition of the Tyler Practice Award would be especially appreciated because it is an acknowledgement by peers of a contribution of the health educator to the field in the person's particular work setting.

The first Morgan Fellowship will be presented at the School of Public Health commencement ceremony in May 1988 while the first Tyler Award will be presented at the annual awards luncheon of the School of Public Health Alumni Association in April 1988.

The gift honors two pioneer faculty in the first graduate program to train public health educators in the nation, Ibrahim said.

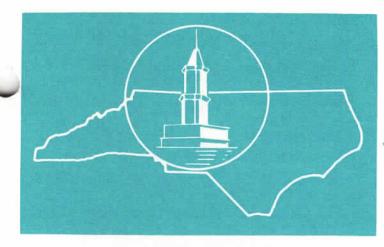
"The Morgan Fellowship is being established at a time when scholarships for graduate students are desperately needed," he said. "In addition, the Tyler Practice Award will encourage a high level of performance in the practice of health education. We plan to actively seek additional contributions from alumni and others to increase the principal. We are very grateful to the anonymous donor for making these awards possible."

Dr. Lucy S. Morgan, who joined the faculty of the School of Public Health in 1942 to establish the Department of Health Education, was the chair of the first graduate program to train public health educators in a school of public health. From the beginning her courses emphasized community organization and anticipated much of the current thinking and practice that underlie successful efforts in community development. She served as consultant, panel member, and committee member for the World Health Organization from 1946 until her retirement from the University in 1966. She lives in Asheville, NC.

Dr. Morgan is a charter member of the North Carolina Association of Health Educators (NCAHE) and charter member and former president of the Society for Public Health Education, Inc. (SOPHE) She received two of the highest national honors in health education, the Elizabeth Severance Prentiss National Award in Health Education and the Society of Public Health Education Citation.

Dr. Eunice N. Tyler, also of Asheville, joined the faculty of the Department of Health Education in 1945 and had a vital role in the development of the Department. She was co-editor of the annual publication Health Educators at Work from 1947 until her

Cont. on page 23



November 1987

The University of North Carolina at Chapel Hill, School of Public Health

Volume 15, Number 1

Moving Into the Future

The Chair Discusses the Curriculum in Public Health Nursing

Talk to Dr. Marla Salmon, chair of public health nursing, and she will tell you about the excitement and challenge of developing the new public health nursing curriculum. "In fact," Salmon says, "the faculty and staff have taken deliberate steps to position the curriculum for a major leadership role in the future of public health and public health nursing."

The UNC School of Public Health has always had an excellent reputation among the schools of public health in the nation. According to Salmon, the primary reason for this reputation has been the strong commitment to "doing the right thing well."

Traditionally, public health nursing has held a leadership role in the practice of public health. In fact, the very roots of public health practice can be traced to the efforts of Florence Nightengale, Lillian Wald and others who began delivering preventive services in the community. Florence Nightengale was probably the first public health practitioner who based her practice on "data." Her assessment of the risks associated with being a soldier in the insanitary conditions of hospitals in the Crimean War was the first documented, systematic assessment of its kind. This assessment was the basis for Nightengale's major campaign to mobilize the British Parliament to take legislative action on behalf of the soldiers at risk.

More recently, the Frontier Nursing Service of Kentucky and its counterparts in many rural counties of North Carolina are examples of public health nurses delivering crucial services to populations at risk.

What is the picture of public health nursing today?

"Public health nursing remains the single largest public health manpower category in official agencies." Salmon says. "In addition, public health nurses are practicing in industry, schools, and private community agencies. The move toward the dehospitalization of patients coupled with the increasing elderly population has attracted even greater numbers of nurses to practice in community settings."

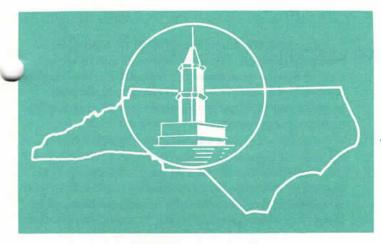
"Public health nurses are needed to play a key role in the delivery of health services in the community and to teach in academic programs to prepare nurses for these roles," she said. "The public health nursing perspective is also an important component of public health research."

The curriculum structure was developed intentionally to enhance the development of public health nursing. "One of the key factors in this decision," she continued, "was the recognition that public health nursing is a truly interdisciplinary practice. Indeed, the hallmark of public health nursing has been the ability to work with and through other disciplines in public health."

Continued on pg. 16



Salmon



May 1988

The University of North Carolina at Chapel Hill, School of Public Health

Volume 15, Number 2

Dental Public Health Celebrates 70th Anniversary

Seventy years of preventive dentistry in North Carolina have brought remarkable improvement in the dental health of the citizen's of the state.

"The program has been an outstanding example of collaboration at its best between dentists, citizens, legislators, public health professionals and the schools and universities of the State," Dr. George G. Dudney, director of the Dental Health Section, Division of Health Services, said. "We look forward to a year of celebration as we say 'Thanks for the smiles' to all who have helped make our success possible."

In mid January, 400 persons gathered in Raleigh for the program to recall the history of the preventive dental health program and to begin the year-long celebration honoring the persons who have contributed to the success of the program.

The beginning goes back to the 1918 meeting of the North Carolina Dental Society (NCDS) and a rousing speech by Dr. George Cooper, Director of the NC Bureau of Medical Inspection. As a result the NCDS agreed to seek funds from the Legislature for a school dental health program and the Public Health Program's Oral Hygiene Services were born. The first school dentist began work in July 1918.

The January luncheon and portrait presentation honored Dr. Ernest A. Branch, a dentist and public health leader, who became supervisor of Oral Hygiene in 1929. The Division of Oral Hygiene was created by the State Board of Health in 1931 and the first state dental public health program in the Nation was born. Dr. Branch believed that education was the key to improved dental health. He initiated appeals to counties to raise funds to support local dentists to work in the schools and challenged teacher-training institutions to include dental health education in their curriculum.

"Education is putting into practice today what we learned yesterday with the hope that it will become a habit tomorrow."

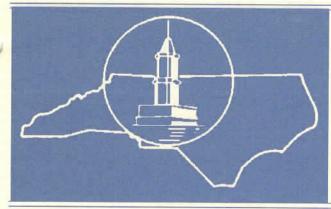
Ernest A. Branch

The results of an early (1934) survey of dental needs of school children conducted by the NC Dental Society showed that 55% of children surveyed had never visited a dentist and that 84% of the children needed dental care.

Of all the programs targeted toward school children the Little Jack Puppet Show was the most popular. The Little Jack shows, which educated children about dental health and helped them to conquer their fears of the dentist, were presented across North Carolina to 250,000 children per year for 35 years. The production was changed every



Children in a North Carolina elementary school watch the Little Jack Puppet Show in the 1940's and 1950's.



Fall 1988

The University of North Carolina, School of Public Health

Volume 16, Number 1

Trustees Approve Name for New Public Health Building

The new public health and environmental sciences building now under construction has been named the McGavran-Greenberg Hall. The name was approved recently by the UNC-CH Board of Trustees.

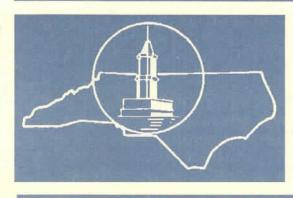
The name honors two former deans of the School of Public Health, Drs. Edward G. McGavran and Bernard G. Greenberg.

McGavran, second dean of the School, served from 1947 until 1963. He received his medical and public health training from Harvard University and was a student of the first dean of the School, Dr. Milton J. Rosenau. McGavran served as a practicing physician, local health director, director of field training for the Kellogg Foundation and director of the West Virginia public health training center before coming to UNC. His publications espoused his philosophy of the community as the patient of public health and defined public health practice as the scientific diagnosis and treatment of the body politic practiced by a team of public health professionals. After retiring as dean and serving for six years with the Ford Foundation in India, Dr. McGavran returned to the School of Public Health where he was consultant to the Continuing Education and Field Services Unit and traveled across North Carolina providing continuing education for public health practitioners. He died in 1972 while on vacation in Canada.

Greenberg, the fourth dean of the School, was recruited by McGavran in 1949 to organize and head the program in biostatistics. Greenberg received his undergraduate degree in mathematics from the City College of New York and the Ph.D. degree from North Carolina State University ar Raleigh in experimental statistics with a minor in public health. From 1949 until he became dean in 1972, Greenberg was chair of the Department of Biostatistics, the largest and one of the best programs of its kind in the country. Greenberg served as dean of the School of Public Health from 1972 until 1982. During his deanship he insisted that the faculty members "practice what they teach" and put



McGavran - Greenberg Hall progresses toward completion in the Spring of 1989. This photo taken from the North shows the connection to Rosenau Hall on the second floor.



Summer 1989



Legislature Honors School

The House and Senate of the General Assembly of North Carolina approved a resolution on April 19, 1989 honoring the 50th anniversary of the School of Public Health and the former deans. Sponsors included Senators Wanda Hunt and Russell Walker, in addition to the Representatives who sponsored the bill listed in the resolution.

Dr. Michel A. Ibrahim, dean of the School, attended the legislative sessions where the resolution was considered. In addition Dr. Richard House, Ms. Linda Parker, Ms. Harriet Barr and members of the families of the former deans were present.



SPONSORS: Representatives Howard Barnhill, Mecklenburg County; Joe Hackney and Anne Barnes, Orange County; Bea Holt and J. Fred Bowman, Alamance County; John R. Church, Vance County; and Harry E. Payne, New Hanover County.

*Referred to: Rules, April 14, 1989

A JOINT RESOLUTION HONORING THE MEMORIES OF MILTON J. ROSENAU, EDWARD G. MCGAVRAN, W. FRED MAYES, AND BERNARD G. GREENBERG, FORMER DEANS OF THE SCHOOL OF PUBLIC HEALTH AT THE UNIVERSITY OF NORTH CAROLINA AT CHAPEL HILL ON THE SCHOOL'S FIFTIETH ANNIVERSARY.

Whereas, The University of North Carolina at Chapel Hill's School of Public Health was first authorized to award academic degrees in 1939 and is now celebrating 50 years of service to the State, the nation and the world: and

Whereas, Milton J. Rosenau, Edward G. McGavran, W. Fred Mayes, and Bernard G. Greenberg served as deans during the School's 50-year history and should be recognized for their service and contributions to the School; and

Whereas, the School of Public Health was the first State-supported School of Public Health in the United States, and is the only School of Public Health in North Carolina; and

Whereas, today the School is one of the top ranking schools of the 24 accredited schools of public health in the nation; and

Whereas, the mission of the School is to advance and apply scientific knowledge to the understanding and promotion of the public's health; and

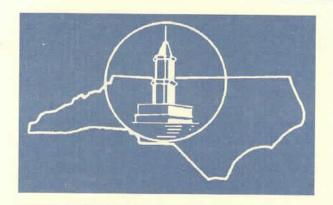
Whereas, the School grants degrees to more than 350 students each year to work as health professionals in the fields of biostatistics, environmental health, epidemiology, health behavior











Winter 1990

Move Into New Building Nears

If a poll was taken of the most often asked question in the School of Public Health during the last month, faculty and staff might guess the results. All are asking, "When will the move into the new McGavran - Greenberg Hall and the H. G. Baity Environmental Engineering Laboratory occur?"

According to Dr. Hilton Goulson, the School's special assistant to the dean for facilities planning, the final touches and review of the "punch list" are underway. "Once the list has been reviewed and any corrections made, the buildings will be ready for acceptance by the University. The buildings cannot be occupied until this process is completed."

Goulson is optimistic, however, that the move will take place early in the spring semester. "There is such a shortage of classroom space and faculty and students are so anxious to occupy the new laboratories that we are doing everything possible to facilitate the move," Goulson said.

The approximately 183 offices will be occupied by the Departments of Biostatistics, Environmental Sciences and Engineering, Epidemiology, Nutrition, Health Policy and

Dean Michel A. Ibrahim stands at the north entrance of McGavran -Greenberg Hall. This entrance faces the campus toward the School of Pharmacy.

Administration and a segment of the Dean's Office. In addition to the offices, there are 53 laboratories and 13 classrooms in the buildings. The microcomputer center currently in Rosenau Hall will be expanded and moved to McGavran-Greenberg Hall. Although most of the Dean's Office personnel will remain in Rosenau, the

Dean's Office H. G. Baity Environmental Engineering
Laboratory from Pittsboro Street.

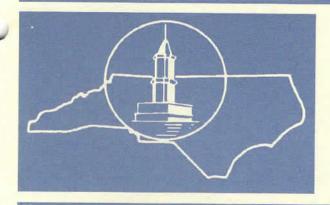
offices of alumni affairs and development will share a suite on the fourth floor.

"The move itself is a gigantic undertaking," Goulson said. "Imagine the work involved in placing 14 semi-trailers of furniture in the proper places. Add the transfer of approximately 90 faculty and 70 staff with all their files and office equipment, and you can see what a job we have before us."

The process will involve 361 separate moves. The listing of material to be moved is 115 pages long.

Metric, Inc. of Cary, NC, is general contractor for the buildings. Other contractors include Bolton Electric Company from Durham for electricity, Community Plumbing and Heating Company of Greensboro for plumbing, and Beta Construction Company of Charlotte for mechanical. The architects are FWA Group, formerly Ferebee, Walters and Associates of Charlotte.





Summer 1990



Dedication Day, May 4, 1990



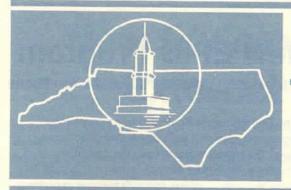
Left, Dr. Hilton Goulson holds his certificate of appreciation high. Goulson was special assistant to Dean Ibrahim to oversee the details of the construction of the new buildings. Right, Chancellor Hardin addresses alumni and guests at the dedication ceremony. Photographs by Cliff Haac



Happy Occasion!

Dean Michel Ibrahim receives congratulations from Chancellor Paul Hardin following the ribbon cutting to open the two new buildings of the School of Public Health, McGavran - Greenberg Hall and H. G. Baity Environmental Engineering Laboratory. Hardin said that these facilities would give the faculty and staff the state-of-the-art working environment needed to continue the School's basic mission of promoting health and preventing disease -- "protecting the health of our peeople." Photograph by Will Owens





Winter 1992



Doctoral Program Established

The School of Public Health has established the Public Health Leadership Doctoral Program, developed specifically to provide advanced leadership skills for public health practitioners.

The program is designed for mid-career public health professionals, providing the practical and scientific knowledge they will need to function successfully in senior-level public health positions. The first students will be admitted in July of 1992.

"The Institute of Medicine report on *The Future of Public Health* identified education for public health practitioners as a priority for schools of public health," said Dean Michel A. Ibrahim, "Our School has always had a strong involvement in public health practice; however, this is one of several new efforts to strengthen our links with practice."

Dean Ibrahim serves as director of the program and Dr. Mary Peoples-Sheps, associate dean for academic programs and associate professor of public health nursing, is the program coordinator.

"As a former health officer, I strongly value the education of prospective leaders in public health practice," said Ibrahim. "I am committed to making training in public health practice a respected academic pursuit at Carolina."

Dr. Peoples-Sheps points out that the program offers several benefits for career professionals who wish to obtain a practice-oriented doctoral degree.

"Students can complete all their coursework in an intensive 12-month residency program," she said. "For working professionals, this would only require a one-year leave of absence from their jobs.

"During this period, a biweekly integrative seminar will emphasize the development of leadership and administrative skills and will help students integrate theoretical principles with field practice.

"After the end of the year, students may return to their agencies to complete their dissertations," Peoples-Sheps added. "This should be a scholarly examination of a public health practice topic, and it may be a problem or challenge within their own agency." On completion of the coursework, dissertation and a comprehensive exam, students will earn the DrPH degree. Most students will be able to complete all requirements in three years.

The Public Health Leadership Doctoral Program is unique in its interdisciplinary practice approach. Program faculty are drawn from several disciplines in the School to provide the appropriate mix of experiences for program Fellows. Three new leadership-oriented courses have been developed which will enhance work done in the student's major area of concentration: Community Assessment and Methodology, Public Health Program Assurance and Public Health Policy Development.

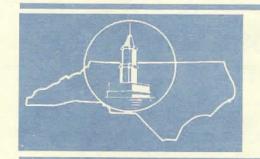
In addition, selected public health leaders will participate as visiting faculty throughout the program. Students also will be able to take advantage of the School's many collaborative relationships with local, state and national public health agencies.

Program designed for public health practitioners begins in 1992

"These opportunities to work with public health leaders from throughout the nation will help our Fellows develop a network of colleagues and mentors that will be valuable throughout their careers," says Peoples-Sheps.

Criteria for admission to the program will usually include a master's degree in public health or a related field or a doctoral degree, a grade point average of at least 3.0, and a minimum combined score of 1,000 on the verbal and quantitative sections of the GRE. In addition, most students will have at least five years significant public health experience and demonstrated leadership potential. Particular efforts will be made to recruit minorities and physicians.

Persons interested in finding out more about the program can call Dr. Peoples-Sheps at (919) 966-3524, or write to the UNC School of Public Health, CB# 7400, Rosenau Hall, Chapel Hill, NC, 27599-7400.



Fall 1992



Ibrahim Reappointed for Third Term

Dr. Michel A. Ibrahim has been reappointed dean of the University of North Carolina School of Public Health. The reappointment, effective September 15, 1992, was announced by Chancellor Paul Hardin, following the March meeting of the UNC Board of Governors.

"The School of Public Health has solidified its national and international stature under Ibrahim's leadership," said Dr. H. Garland Hershey, vice chancellor for health affairs. "The support he enjoys from the faculty and the administration and his own commitment to excellence signal even greater achievements for our distinguished School in the future."

This year the School enrolled 1300 students in all degree programs. In addition to serving the nation and world, it gives special consideration to educating North Carolina public health professionals and providing them with technical help and continuing education. An off-campus degree program trains professionals in North Carolina public health agencies.

Under Ibrahim's leadership, the Division of External Affairs and Community Health Service was created to better serve the School's external constituencies and renewed emphasis was placed on doctoral training in public health practice.

"There are several areas that I believe are important priorities for the School in the next five years," Ibrahim said.

"The doctoral program in public health practice leadership enrolled the first fellows in July 1992. I plan to give the further development of this program a top priority. It has great potential for improving public health practice."

In addition, there is great need for the School to increase the research in the causes of the disparities in the health status of minorities, he added. "We must provide the sound research base and leadership in eliminating the disparities." "To this end we're in the process of establishing a minority health research center in the School, which would serve as a focal point for the University and State."

Ibrahim, professor of epidemiology, joined the UNC-CH faculty in 1971 after holding positions as deputy health commissioner of Erie County, NY, and associate professor at the State University of New York at Buffalo School of Medicine. He was named chair of the School's Department of Epidemiology in 1976 and has served as dean of the School since 1982.

Ibrahim, president-elect of the Association of Schools of Public Health, is a fellow of the American Public

Health Association, the American Heart Association's Epidemiology Council and the American College of Epidemiology. He is a member of the NC Environmental Management Commission and chairs the Chancellor's Task Force on AIDS.

He has been president of the Council on Education for Public Health, the American College of Epidemiology and the NC affiliate of the American Health Association, as well as a member of the Council on Aging, National Institute on Aging. He has been appointed by Secretary Louis Sullivan to the National Advisory Council on Health Professions for a four year term beginning January 1, 1993.

A consultant to Israel, Germany, Guatemala and Kuwait, Ibrahim has published and presented more than 100 papers on cardiovascular disease, evaluation of health interventions, assessment of clinical skills, study designs and the relationship between science and policy. He has written two books, one on case-control studies and another on epidemiology and health policy.

A native of Egypt, he received his medical degree in 1957 from the University of Cairo School of Medicine and the M.P.H. in biostatistics in 1961 and the Ph.D. in epidemiology in 1964 from UNC-CH.





University of North Carolina at Chapel Hill, School of Public Health

Volume 19, Number 1, Summer 1993

Communities Under Siege

Foard Lecture 1993

In a thoughtful and challenging Foard Lecture, Associate Justice Willis P. Whichard discussed some of the problems that leave our Communities Under Siege.

Whichard described examples in the current world situation that, in the words of explorer and missionary David Livingston, are the "open sore of the world."

"The faces of the poor, overcrowded and inadequate prisons, ill bodies and disturbed minds, ghetto housing, a polluted – sometimes toxic – environment, racial and religious bigotry, abused and neglected children – all display the abiding 'open sore of the world,'"
Whichard said. "Perhaps its primary contemporary manifestation is in the enhanced use of violence as a perceived solution to problems, both societal and personal."

Our increased tolerance for violence as a solution to personal and societal problems is almost certainly a factor in a 560 percent increase in violent crime in this country since the Kennedy assassination, he continued.

"From where I sit, it seems beyond cavil that the epidemic of the manufacture, sale, and use of illicit drugs is a principal cause of the enhanced resort to violence – of the hiatus between what is and what ought to be in American society."

Whichard reviewed the efforts of North Carolina governors to combat drug abuse. "Despite the efforts of five administrations, we are still grappling with the problem," he said.

"Twenty-four years after Governor Scott's initial foray into this area, we find ourselves in a society in which children are not only getting 'hooked' on drugs, but in which a substantial percentage of children are born carrying significant quantities of 'angel dust,' cocaine and other illicit, addictive drugs in their bloodstream. These babies strain the resources of health care providers and social service agencies, while addiction and drug-related violence simultaneously place greater burdens on hospital emergency rooms and criminal justice systems."

Whichard asked the audience to imagine a generation of adults who, because they began improper drug use as children, never learned to deal constructively with anger, or frustration, or disappointment, or depression or even with their positive feelings. And he questioned the kind of leaders, teachers, lawyers, doctors, law enforcement officers and, more importantly perhaps, the kind of parents they would be.

"A family struggling with addiction and its related problems needs our support, not easy condemnation,"



The Honorable Willis P. Whichard

Whichard said and recommended that we need to be supportive of law enforcement and to restore faith in our criminal justice system.

"But we also need more education, more treatment, more rehabilitation. We need to recognize that addicts are people, just like us....We need to recognize that the problem is multi-faceted and that the solution does not lie in law enforcement alone, or treatment and rehabilitation alone, but in programs for education, health, mental health, and economic opportunity as well. Finally, we need to acknowledge that the problem has a spiritual dimension."

Whichard pointed out that "guilty governments" (a phrase of Charles Dickens) of our time have been neglectful, in some respects even abusive, of children. When a child is moved from one home situation to another in foster care and develops no roots, no sense of belonging, no emotional ties, no spiritual values and feels that no one cares for him or her, this child is more likely to engage in unsanctioned conduct, he said. Governments must also bear some guilt for the incarceration of parents that leads to foster care and consider alternative punishments that would serve the State's purpose, yet leave families intact.

Whichard said that we long ago resolved that there should be no elite of the mind in America. And he quoted the great Southerner and American, Walter Hines Page, who said that "it is a shining day in any educated man's growth when he comes to see and to know and freely admit that it is just as important to the

Public health in health care reform

The role of public health

Michel A. Ibrahim, Dean

The public and professionals are discussing the Clinton administration's health care reform proposals, at times with enthusiasm and at other times with skepticism and concern. Both groups, however, understand that the reform will mean the provision of medical services to the sick as well as clinical preventive services to the individual in a clinic setting, with reasonable costs and equal access for all. This is, of course, commendable, and it's about time that the entire population has access to good quality care at affordable prices. We in the public health community have been advocating a population perspective to the health care reform movement. Unless the tools of epidemiology and biostatistics are applied to communities to identify the health problems, to collect appropriate data for their surveillance of health status, and to evaluate the impact of medical interventions, the aim of the reform movement will not be fully realized. Trying to inform and educate the public at large, and the politicians in particular, about the role of public health has not been easy. We continue to this day to explain what public health is all about and what its vital role should be.

Philip Lee, M.D., Assistant Secretary of Health, has said on more than one occasion that there are windows of opportunity that permit appropriate changes to be made. He believes that these windows of opportunity come once every 30 years. For example, a window opened in the '30s when the Social

Security Act was established, and another one opened in the '60s when the Great Society and Medicare and Medicaid programs were introduced. A window is now opening in the '90s that may allow us to reform the health care system. In Dr. Lee's opinion, if this opportunity is missed, we will probably have to wait another 30 years for another chance to effect a change.

Our school, in conjunction with several health care organizations, developed a consensus statement on the role of public health, which was published in July of 1993. Drawing on the expertise of several individuals in the public health community, the statement defined the role of public health in terms of its unique functions and responsibilities, its role in the delivery of high-quality clinical services, the financing of population-based services, and the preparation of

"The consensus statement noted the unique functions of public health

- monitoring community health status
- assuring appropriate services to all segments of the population
- assessing health status and environmental risks"

local health departments to take on the new mandate resulting from the reform movement. The consensus statement noted that the unique functions of public health include the monitoring of community health status, assuring that the appropriate services (including preventive services) are provided to all segments of the population, and assessing health status and environmental risks. There was some difference of opinion about the delivery of clinical services by public health agencies, but it was agreed that, at least for now, the public health system would have to provide direct medical services for special populations until these services can be absorbed by other health care providers. It was pointed out that population-based services must be fully funded from public sources. It was further suggested that local health departments must gear up for the changes and advocate strongly for a population-perspective approach to health including emphasis on prevention and on health outcomes of services.

William Foege, M.D., director of the Carter Center and former director for the Centers for Disease Control, has proposed that health care be viewed as a continuum from prevention on one end to rehabilitative services on the other, and include both medical and public health services. This unified concept might be expressed in a single health index portraying the burden of disease on society. Dr. Foege's proposal of a single vision for health, which with its population perspective

Continued on page 2



The Newsletter of the University of North Carolina at Chapel Hill School of Public Health

Winter 1997 Volume 4, Number 1

News

A Message from the Dean



Dear faculty, students, staff, and alumni:

In this Winter issue of SPH News, I would like to say a few words about the expanding managed care organizations in North Carolina and the role of public health. Over the years, we have urged our colleagues in the medical care sector to adopt our concepts and values. We wanted them to be cognizant of the prevalence of disease in the population, of community health needs, and of population-based prevention. Now that they are responding, it is incumbent upon us to seize this unusual opportunity and become an active partner in this endeavor.

While we should never abandon our efforts to strengthen the governmental public health system, we should provide the necessary training, tools, and skills to enable those in managed care organizations to satisfy their pronounced desire to practice population-based medicine. The public health system must continue to collect vital statistics, enforce regulations, administer preventive measures, and function as the care provider of last resort. Meanwhile, we should have a "place at the table" with others to make sure that public health interests are not overlooked.

Working on both fronts (the governmental as well as the private sector) will ensure that our values are preserved and continue to flourish. We can function over the entire spectrum, from promoting health to treating disease, thereby contributing to the health of the public in a substantial and comprehensive way.

Michel A. Ibrahim

Fall Faculty Meeting

The search for a new dean, use of new technology, faculty compensation plans and the new core curriculum were key agenda items at the fall faculty meeting of the School of Public Health last October.

Dr. John Stamm, dean of the School of Dentistry and chair of the search committee for a new dean of the School of Public Health, reported that the committee is on schedule and making satisfactory progress. He told faculty that candidates will visit the campus in late 1996 and emphasized the importance of attracting the most qualified candidates.

Dean Michel Ibrahim presented his office's response to a faculty report on new technology. The report was prepared by the Learn 21 Committee, a faculty committee established in October 1995, charged with providing advice regarding an appropriate organizational structure and use of telecommunication and other informational technologies. Dr. Francis A. DiGiano, professor of environmental sciences and engineering, chaired the committee.

Over several months, the committee examined a number of factors affecting learning environments in higher education. The committee reviewed the current status of information technology at the School by surveying students and departments about their use of new technology and readiness to take part in pilot programs and projects.

The committee recommended that the School

continued on page 8