

50 Years.
A LEGACY & A VISION

UNIVERSITY OF MINNESOTA
SCHOOL OF PUBLIC HEALTH

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1944

The mission
of the School of Public Health
is to preserve and enhance the health of the public
through education, research, and service programs designed to discover
and transmit new knowledge aimed at the prevention of disease and
disability, the improvement of health, and the planning, analysis, man-
agement, evaluation, and improvement of systems for the delivery of
health services.

1994

The University of Minnesota School of Public Health's golden anniversary is an opportunity to reflect on a proud legacy of responding to and defining the health challenges of the past five decades. Since our formal beginning in 1944, this School has demonstrated a tradition of pioneering leadership through eras from the post-World War polio epidemic to the post-Cold War eruption of AIDS. Our accomplishments during these five decades are a source of pride to us, even as we prepare for the challenges that lie ahead.



Although it is impossible to condense five decades into a few short pages, the highlights of our history illustrate that ours is not a static profession. As health needs have changed, so have we. As new health threats have been identified—whether from the environment or new viruses or human behavior—public health has re-engineered itself to respond. And as new skills are required to carry out the public health mission, we have adapted our curriculum to ensure that our graduates are at the forefront of public health leadership.

The future requires the profession to be even more flexible and more responsive to environmental changes. As health care continues to occupy a dominant place on the national agenda, as our global neighborhood continues to shrink, and as technological changes bring new issues to light with dizzying speed, the prospect for the next 50 years is likely to be even more dynamic and challenging.

It is an honor to be associated with a School that has contributed so much to the public health profession, and we look forward to the next 50 years with eagerness and pride.

A handwritten signature in cursive script that reads "Edith Leyasmeyer".

Edith Leyasmeyer
Interim Dean

A Proud Beginning ^{1944 - 1953}

1944

U of M Archives



In the years immediately following the end of World War II, America was a nation on the move. The euphoria of V-E and V-J Day propelled the country into unprecedented growth. Relieved from the limitations imposed on them by war, people bought automobiles, went back to school, started families, built suburbs. Television turned from novelty into icon.

Communism and fear of communism began to pervade the news. On the health front, polio and other communicable diseases were still formidable foes. And a paunch and a diet of steak and fried potatoes were considered signs of affluence rather than of poor health habits.

The year, 1944. The place, the University of Minnesota. On a warm July day, the Board of Regents passed a motion to accept the offer from the Mayo Properties Associates for funds to transform the Medical School's Department of Preventive Medicine and Public Health into a separate administrative unit, parallel to that of the Medical School and School of Nursing. This action made the School of Public Health a reality.

It was an inauspicious beginning, overshadowed as it was by the dramatic conclusion of World War II. Life at the University, like that in virtually every setting across America, had been turned on end. Student populations were down to a trickle,

Deep Roots. Though the School of Public Health was officially established in 1944, its roots extend much further back into the history of the University. Charles Hewitt, the first head of the state board of health, began teaching public health courses here as early as 1874. In 1886, Hewitt recommended that the University establish a school of public health. Although his recommendation was not taken, Hewitt's pioneering efforts have been immortalized by the School with the establishment of the Charles Hewitt Society as a means of honoring donors who support the School's endowment.

with many having postponed their education to aid in the war effort. Even Gaylord Anderson, the man who was to head the new School, was on leave of absence to serve in the U.S. Army Medical Corps. Nonetheless, the Regents' action that summer day was destined to play a central role in making Minnesota synonymous with a commitment to the cause of good health.

The School, of course, was far from a fledgling entity. Rather, it was a new and stimulating context for a number of public-health-related programs that had been part of the University since as early as 1874. In its new form, it took on responsibility for training health officers, public health engineers, public health nurses, and health educators, as well as instructing medical students, providing instruction in biostatistics, and teaching personal health and hygiene to students throughout the University. As one of only seven schools of public health in the nation, it drew students from around the United States and several foreign countries.

In the years immediately following its designation as a separate administrative entity, the School unfolded like a butterfly emerging from its cocoon. Gaylord Anderson returned from war, taking over leadership from student health service director



Ruth Boynton



K rations got its name from Ancel Keys.

Ruth Boynton, who had served in his absence. Students whose education had been disrupted by World War II returned to school and graduate student enrollment grew more than 300 percent—from 15 to 66 students—in a single year. The Laboratory of Physiological Hygiene, which had

A “U” First. One of the first marks the newly formed School made upon the University of Minnesota at large was to become home to the University’s first permanently endowed professorship, the Mayo Professor of Public Health. Established in 1946, the professorship was called by then-President Morrill “a significant milestone in the development of the University of Minnesota.” Founding director Gaylord W. Anderson, a charismatic leader known around the world as “Mr. Public Health,” was named to the position.



Gaylord W. Anderson

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1944: The Medical School’s Department of Preventive Medicine and Public Health becomes the School of Public Health.

1946: The SPH is one of the first nine schools of public health to be accredited by the American Public Health Association.

1946: The Laboratory of Physiological Hygiene, which was to become an internationally recognized pioneer in research identifying risk factors for cardiovascular disease, joins the School.

1946: Programs are added in hospital administration and veterinary public health.

developed K rations as part of the war effort, moved from its former home in Men's Physical Education to the School. A hospital administra-

Momentum by Mayo.

The establishment of public health as a separate School has a direct connection to two of Minnesota's most famous public health advocates, the Mayo brothers. Charles Mayo had been health officer for Rochester, Minnesota, and president of the Minnesota Public Health Association, and had started weekly public health lectures in Rochester; William Mayo was a



Mayo Properties also donated funds to erect the Mayo Memorial Building, which provided much-needed space for the School of Public Health. Breaking ground in 1950 are (from left to right) Mrs. Charles Mayo, Mrs. William Mayo, J.L. Morrill, Mrs. George Chase Christianson and Donald Cowling.

member of the University's Board of Regents for 32 years, and a strong promoter of public health education and public health training for medical students. Because of this support during their lifetimes, the Mayo Properties Associates decided to provide a

lump sum endowment to establish the School.

tion program was created with a grant from the Kellogg Foundation, and a public health veterinary program was added to the milieu. Public health education continued to devel-

op under Ruth Grout, who had begun the program at the University two years before the



Ruth Grout

School itself was established. J. Arthur Myers, a member of the University faculty since 1920, continued his internationally acclaimed efforts to control tuberculosis, earning himself and Minnesota the reputation as global leaders in the field.

In the early 1950s, the number of faculty began to grow to meet increasing demands for its services. The School was nationally recognized for research programs in global epidemiology (under Gaylord Anderson), sanitary biology (Theodore Olson) and cardiovascular health (Ancel Keys). Epidemiology came into its own as an independent discipline within the School with the appointment of Franklin Top as professor of epidemiology. Public health engineering (later to be known as environmental health) was also gaining momentum under Herbert M. Bosch, and biostatistics was thriving from the postwar emphasis on research. The public health nursing program, directed by Marion Murphy, was among the country's largest and strongest. Richard Bond

Toward A Higher Degree of Health for Students.

One of the responsibilities of the School of Public Health in its early years was providing students throughout the University with a basic understanding of personal and community health. Former Loyola Medical School acting dean Stewart C. Thomson cheerfully took on the job in the late 1940s, and over the next 20 years, taught more than 70,000 undergraduates—while at the same time instructing medical and public health graduate students and serving as part of the School's administrative team.



Stewart C. Thomson

developed a pioneering environmental sanitation program for the University that soon became a model for the development of similar efforts in other academic institutions.

Not surprisingly, space quickly became an issue for the School. Programs were scattered among five buildings across campus, and School leaders called for additional facilities for laboratory and field training functions.



In 1938, nurses and doctors from around the country studied the effects of pollution on a stream during a field trip led by Theodore Olson. The individuals shown here were the first health professionals to enroll in continuing education courses in public health at the University.

Nevertheless, the overall mood was one of optimism and a great commitment to public health's mission of ensuring health for all.

1947: The School is one of the few sites in the nation to receive a U.S. Public Health Service training grant for nurses in mental hygiene.

1947: Ancel Keys and colleagues launch the Minnesota Cardiovascular Study, the first longitudinal study of risk factors for heart attacks.

1948: The University of Minnesota, through the School's program in hospital administration, becomes the first in the country to grant a master's degree in hospital administration (M.H.A.).

1950: Epidemiology is formally recognized as a separate discipline within the School.



Opening New

1954 - 1963

1954

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Elvis, Sputnik, Eisenhower, the Cold War, interstate highways ... the span of years from 1954 to the early 1960s was a time to develop new ways of looking at ourselves, our nation, and our world. The exuberance of World War II victory had quickly given way to the dark fears of the Cold War, witnessed by the construction of the Berlin Wall, McCarthyism and the Bay of Pigs invasion. Yet at the same time, there was a newfound awareness that our actions could and ought to make a global difference. Public health and medicine blossomed as vaccines routed polio and open heart surgery arrived on the scene.

In its second decade, the operative word for the School of Public Health was growth. New doors were opened literally in 1954 when the School moved into its first "official" quarters covering two and a half floors in the freshly constructed Mayo Memorial Building. Within the next few years, federal legislation in the form of the 1956 General Purpose Public Health Training Act and the Hill-Rhodes Act of 1957 poured new funds into the School, stimulating further door-opening in

the shape of expanded opportunities and programs. Largely as a result of increased federal funding and student traineeships, graduate enrollment in the School leaped from 98 to 235 between 1954 and 1964.

The faculty at the outset of this period were a small and collaborative group, and more than one recalls the atmosphere as one of a warm and friendly family. At the same time, programs were definitely on the move. The public health nursing program maintained its superb repu-

Doors

tation as one of the largest and best in the nation. Ph.D. programs in epidemiology and hospital administration and additional training programs in accident prevention, radiological health, and public health nursing teaching were all added to the educational offerings.

Stimulated by the increased sophistication of care required by new medical techniques such as cardiac surgery and organ transplantation, the School became the first in the United States to offer a course in hospital engineering. Summer institutes in areas such as hospital administration, rehab nursing, accident prevention, and maternal and child health attracted students from around the globe. The biostatistics program was the largest of its kind in the United States. Public health engineering, the predecessor of today's environmental and occupational health division, developed a model program for managing environmental hazards on campus in cooperation with the University Health Service.

By the early 1960s the School had the largest enrollment of the 12 schools of public health in the United

Providing Safe Water.

The late 1950s brought an increasing awareness of the need for basic public health measures in many developing nations. Under a grant from the U.S. Department of State, the School in 1959 began offering a 10-week groundwater development training program for engineers from around the world. During the next 11 years, the program would train more than 300 people from 60-plus countries as well as help develop similar training sessions in Colombia and Turkey.

States. It also had the smallest physical space. Various programs administratively housed in the School were physically scattered around campus, impeding the collegial interactions that are the lifeblood of academia.

Gaylord Anderson's vision for the School during these boom years focused on the value of interdisciplinary cooperation. "Isolationism in professional training practices should be replaced by a system whereby the various professional groups that are to be welded into a public health team should be trained as a group with an

Out of this World. Among the more unusual programs offered by the School during this period was a microbiology short course developed for NASA contractors. During the late 1960s, School faculty taught aerospace industry workers from around the country techniques for preventing both contamination of outer space with earth germs and introduction to earth of any organisms encountered in our extraterrestrial explorations.



1954: Maternal and child health is established as a full-time unit of the School.



1957: Henry Taylor begins the U.S. Railway Study, the first nationwide study of occupational activity and heart attacks.

1958: The nation's first Ph.D. program in epidemiology begins under the direction of Leonard M. Schuman.

1958: Ancel Keys and colleagues begin the Seven Countries Study, the first population comparison of diet, risk factors, and rates of heart attack and stroke.



understanding of each other's problems, approaches and basic philosophy," he wrote in an article published in the *Canadian Journal of Public Health* in 1948. As a result, much of the School's focus was on teaching students with various backgrounds and career goals to work together. This was in part accomplished by having all public health students, regardless of their backgrounds or career aspirations, together take six core courses in public health practice, sanitation, vital statistics, epidemiology, public health nursing, and health education.

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The lobby of the Mayo Memorial Building in 1955. The SPH dean's office is currently located off to the right.

Silos and Serendipity.

When Leonard M. Schuman



Leonard M. Schuman

watched a friend of his father die from accidental nitric oxide poisoning in the 1930s, he had no idea that that experience would one day help him save the lives of others. But years later, when as a member of the School's epidemiology faculty he was asked to help identify the cause of mysterious deaths among farmers who had been working in freshly filled silos, the memory helped him put two and two together to solve the deadly puzzle.

In collaboration with the Medical School's Thomas Lowry, Schuman observed that the symptoms, which he noted were remarkably similar to those he had seen in his father's friend, were caused by nitrogen dioxide gas emanating from fresh silage. The results of the research, published in *Journal of the American Medical Association* and reported throughout the popular press, alerted farm workers to the hazard, saving countless others from a similar fate.

Faculty Remembered. The lives and work of many of the faculty who have served the School over its 50-year history have been remembered in named endowments that support various programs. Among them:

Gaylord W. Anderson, the School's first dean, is remembered with an annual leadership award and a lectureship.

The *Jacob Bearman* Student Achievement Award honors the former head of biostatistics.

Richard Bond, the former head of environmental health, is remembered with a professorship and a student scholarship.

The *Albert Chesley* Endowment supports a lecture in honor of the former faculty member who also headed the Minnesota Department of Health.

The *James Hamilton* Chair honors the founding head of the program in healthcare administration.

The *J. Arthur Myers* Endowment provides annual stipends for international study and honors the memory of the long-time professor of public health.

The *Leonard Schuman* Excellence in Teaching Award honors the former head of epidemiology.

The *Henry Longstreet Taylor* Graduate Study Fund is named in honor of the long-time professor of epidemiology.

The *Lee D. and Donna Stauffer* Scholarship Endowment provides an annual scholarship in public health administration and is named in honor of the second dean and his wife.

The *Ruth Stief* Fund honors the founding director of the public health nutrition program.

In addition to emphasizing interdisciplinary cooperation, the School of Public Health also fostered a global perspective. The growth and political change occurring throughout the world had direct implications for public health as a discipline, and Minnesota was a model in answering the call to extend education and outreach far beyond its own immediate circle of concern. Faculty were encouraged to serve throughout the world. And with students from 48 states and 48 foreign countries, the School was described in the University's 1964-66 biennial report as "one of the most broadly cosmopolitan groups on the University campus."



1960: The hospital administration program adds a Ph.D. degree to its offerings.

1960: The School of Public Health has the largest enrollment of any such school in the United States.

1961: A program for training public health nursing educators begins.

1962: Richard G. Bond, who had directed an innovative environmental sanitation program within the University's Health Service for 13 years, is appointed to head the Environmental Health Division.



Richard G. Bond

1963: The National Diet-Heart Study begins. This five-year, community-based effort found that blood lipids could be lowered by educating individuals about healthy food choices.

The Rise of ^{1964 - 1973}

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Beginning with the assassination of John F. Kennedy and culminating with the Watergate scandal, the period from 1964 to 1973 was an unsettled time in America. The Vietnam War dominated the news. Minorities struggled to achieve basic civil rights. Young people rebelled against “The Establishment.” Earth Day 1970 drove home to many for the first time the message of the fragility of our planet and our awesome responsibility to care for it. At the same time, humans were making remarkable inroads into new terrain. The world’s first human heart transplant was performed. A woman ran the Boston Marathon for the first time. And astronaut Neil Armstrong recorded on the sands of the moon his “giant leap for mankind.”

By the mid 1960s, the School of Public Health had made a big impression on the world. It had trained students from every state in the union and from nearly 80 foreign countries. Its research and outreach programs were improving the health status of people around the globe and had brought it international acclaim.

Ironically, this cosmopolitan success not only served as a point of

pride, but also contributed indirectly to increasingly austere times for the School. Because it served a much geographically broader clientele than most University units, the School received the bulk of its funding from the federal government rather than from the state. This meant that it was quite vulnerable to the economic recession and to federal budget cuts. As a result, long-term planning was extremely difficult, and the School’s

Research

achievements were largely defined by what federal training and research grants and contracts could be pulled in by the various faculty.

Because the student population and demand for other services grew faster than the dollars needed to support them during this period, the School found itself in need of new funding sources. Fortunately, the nation at large was in a period of general enthrallment with science, so research funding was an available and logical alternative. The training grants that had for years been the bread and butter of the School were increasingly supplemented by fund-

ing for work to advance knowledge in a variety of public health disciplines. In 1966, the School held 27 training grants with a value of \$1.6 million, and 45 research grants that drew \$1.3 million. By the 1974-75 fiscal year, research grant totals had soared to \$2.8 million.

The scope of the School continued to grow and change during the mid to late 1960s and early 1970s. Programs were added in several areas, including dental public health, public health statistics, mental health administration, and the independent study programs for hospital and healthcare and patient care administrators. A

The Heart of the Matter. By the late 1960s cardiovascular disease had become a widely recognized public health concern, and researchers in the School of Public Health's Laboratory of Physiological Hygiene led the way among those who sought to reduce its impact.

In their famous "Seven Countries" study of 12,000 men, published in 1967, SPH physiologist-epidemiologist Ancel Keys and colleagues showed that the incidence of coronary heart disease varied substantially among countries and cultures, and that this variation was correlated with diet and serum cholesterol levels. Henry Blackburn and colleagues developed World Health Organization criteria for heart disease surveys, and the Minnesota Code for electrocardiograms in population studies. And in 1972, the Laboratory participated (along with the School's biostatistics faculty) in the six-year nationwide study known as the Multiple Risk Factor Intervention Trial, or MRFIT, which sought to determine whether deaths due to heart attack could be reduced by getting high-risk men to change their eating and smoking habits and control their blood pressure.



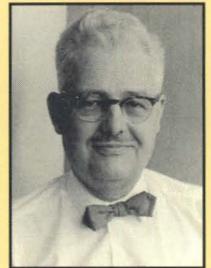
Henry Blackburn (left) with Ancel Keys.

1964: Public health nursing drops its undergraduate program to focus on the rapidly growing demand for graduate education.

1964: The School establishes the nation's first hospital engineering program.

1965: Public health nutrition program begins under the direction of Ruth Stief. Emphasis is on preparing students for leadership positions in the field.

1965: Interdepartmental program in environmental biology begins at Duluth under the direction of Theodore Olson.



Theodore Olson

public health nutrition graduate program developed under the guidance of Ruth Stief, who had come to the School in 1963 to serve as a nutrition consultant to faculty and to teach nutrition to undergraduates. The biostatistics program, led by Jacob Bearman, expanded greatly to

become one of the most prominent in the country by the mid-1960s.

This era also was a time of creative diversification within public health nursing, with expansion to include programs in ambulatory child health care and adult/geriatric care, as well as an adult nurse practitioner certificate program. Curricula were developed in response to increased attention to health and safety needs of workers and of nursing home and hospital populations.

These specific changes brought with them other, broader trends. The intimacy of collaboration among the faculty in the earlier years gave way to an increased need to focus within individual disciplines, and some of the former closeness and camaraderie was lost in the growth and change. Stimulated by the increasing complexity of the subject matter, the time commitment for an M.P.H. was gradually extended until by 1973 students were required to attend seven quarters in order to earn the degree in some disciplines. And space grew even tighter as programs were called on to serve more people for more time.

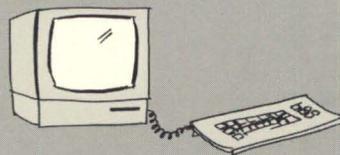
The School during these years maintained its commitment to offer programs beyond the narrow scope of educating public health students for public health practice. A substantial part of its work still included general education in personal and community health for the University's student body. It also sponsored a weekly radio broadcast that spread the message of good health to more

Biostatistics Meets the Computer Age. Before modern-day computers were incorporated into teaching, research, and consulting programs of the Division of Biostatistics, computation was a very time-intensive activity. Students in elementary biostatistics courses attended laboratory sessions in a room full of electronic desk calculators (some of the early models were hand-crank driven), grinding their way through operations that today require just the touch of a keyboard. Obtaining the square root of a number, for example, was not just a matter of pressing a calculator button as it is today. Rather, it relied on a mechanical adaptation of the hand calculation method once taught in elementary school.

The computer revolution of the 1960s and 1970s changed all that. In the early 1960s, the College of Medical Sciences established a Bio-computing Center, administratively located in the office of the college dean but run by biostatistics faculty. The Division began to offer courses in computer programming as well as research and service computing.

In the 1970s the center was renamed the Health Sciences Computing Center and became part of the School of Medicine. Biostatistics faculty continued to use that system as well as the University's central computing system to meet the ever-growing demand for biostatistical research, teaching, and consultation across the country.

The evolution of biostatistics took a further leap forward in 1972, when the Division developed its own computing capabilities after being selected as the coordinating center for the NIH's Multiple Risk Factor Intervention Trial (MRFIT), one of the largest randomized, multicenter clinical trials ever conducted. The expertise developed as a result of MRFIT has since earned the Division the responsibility of serving as coordinating center for a number of other large clinical studies, including the recently completed Lung Health Study and the ongoing Community Programs for Clinical Research on AIDS.



Giving Tobacco a Bad Name. From its beginning, the School has sought not only to teach and do research, but also to help people understand and avoid risks to their health. A classic example is the participation of then-professor of epidemiology Leonard M. Schuman in the development of the U.S. Surgeon General's 1964 landmark report on smoking and health.

Though it may be hard to believe today, cigarettes were not always clearly linked with health problems. Then, in the early 1960s, U.S. Surgeon General Luther Terry convened an expert panel, including Schuman, from around the country to evaluate the more than 6,000 pieces of research that had accumulated on the topic. After months of study, the committee conclusively fingered smoking as the culprit in a variety of health ills, providing the first round of ammunition in the full-scale war on tobacco that continues even today.



than 100,000 children in schools throughout Minnesota.

By the mid-1960s, the rapid growth in student enrollment had leveled off. This occurred for several reasons. In addition to population restrictions imposed by limited money and space, the increased number of schools of public health in the United States meant fewer students for Minnesota. Third, an increasing proportion of students were enrolling in the Graduate School rather than pursuing M.P.H. degrees.

In the early 1970s the University's health sciences underwent restructuring. As a consequence of this change, the structuring of health care delivery began to take a more prominent position on the School of Public Health's increasingly diverse agenda, overshadowing the historical focus on prevention. One example of this trend was an increased clinical focus within public health nursing, including the development of nurse practitioner programs. A second was the strengthening of the health care administration program. Yet another was development of a pioneering program for training chemical dependency counselors.

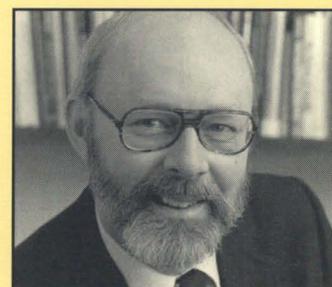
Thus, as its third decade drew to a close, the School found itself on relatively steady ground. It was rich in programs, yet not complacent. With an eye to the future, it stood ready to respond to the emerging challenges that waited in the wings.



1967: Three-week graduate summer session in epidemiology begins under the direction of Leonard Schuman. Originally intended to upgrade epidemiological teaching in medical schools, the program enrolled more than 3,700 students from every state and 84 foreign countries during its 20-year life in Minnesota.

1968: Dental public health program is established under the direction of Lawrence Meskin.

1970: Gaylord Anderson retires; Lee D. Stauffer becomes dean.



Lee D. Stauffer

1972: Adult nurse practitioner program begins in public health nursing.

Tighter Times 1974 - 1983

1974
1983

U of M Archives



Beginning with the patriotic fervor of preparations for our nation's bicentennial, this ten-year stretch brought with it the rise of the Me Generation, tough economic times, the energy crisis. People around the globe were both enthralled and horrified by the fruits of modern technology, evidenced in such landmarks as the birth of the first test tube baby and the infamous accidents at the Three Mile Island and Chernobyl nuclear power plants. In the world of health, Americans jogged and sweated their way to fitness, and watched their diets like never before. On a grimmer note, AIDS made its debut as a global public health problem.

The period from 1974 to 1983 began on a high note for the School of Public Health. In his biennial report to the Minnesota legislature, Dean Lee Stauffer noted that the School had been ranked among the top seven schools of public health in the nation. Demand for public health professionals was strong, so there was little problem recruiting students or placing graduates. The School gained



Students organized a promotion/prevention party in the early 1980s.

A Heartening Impact.

Among the School's claims to fame has been its successful integration of social/behavioral epidemiology with traditional biological epidemiology and with health promotion and public health policy through the Minnesota Heart Health Program (MHHP).



Begun in 1980, the program drew from the expertise of social scientists, physiologists, biostatisticians, and a myriad of others to create and test strategies for encouraging community-wide adoption of a "heart-healthy" lifestyle in three Minnesota communities. The programs have since been adapted throughout the country to address a variety of public health issues.

much-needed space in the Mayo Building and Moos Tower.

Throughout the late 1970s, the School continued to pursue its mission with enthusiasm. Maternal and child health program efforts grew and diversified, with increasing emphasis on child abuse as a public health issue. The Center for Health Services Research, the Midwest Center for Occupational Health and Safety, and the Center for the Study of Human Animal Relationships (CENSHARE) were all established during this period. The University's program in health care psychology moved to the School. Public health nursing began an extended degree program

1975: Interdisciplinary Studies Program is created as an umbrella for a variety of functions including occupational therapy, physical therapy, social work, and chemical dependency counseling.

1977: Public health nursing receives funding to develop a master's program in occupational health nursing.

Pet Project. A notable point of progress for the School of Public Health in the early 1980s was the creation of the Center for the Study of Human and Animal Relationships (CENSHARE). The first of its kind in the nation, the center was created out of an existing study group in 1981 to provide a formal interdisciplinary structure for research, teaching, and outreach related to the link between animals and the health, quality of life, and well-being of people.

Over the years CENSHARE faculty have taught classes on the human-animal relationship to students from around the University and have carried out numerous research projects defining and refining the role people and animals play in each other's lives. The center also has influenced public policy in a number of areas, from creating a model city ordinance for horse-and-buggy concessions to providing a forum for animal rights advocates and other interests seeking common ground in defining the appropriate role of animals in agriculture, research, recreation, and other aspects of human life.



1977: Midwest Center for Occupational Health and Safety is established in cooperation with other institutions serving Minnesota, Iowa, Kansas, Missouri, and Nebraska.

to make graduate education more accessible throughout Minnesota, and developed a program in occupational health nursing. The Adolescent Health Training Program began in cooperation with the Medical School's Department of Pediatrics.

The Division of Epidemiology, expanded by merger with the Laboratory of Physiological Hygiene, continued Minnesota's tradition as an internationally recognized center for research related to the epidemiology of cardiovascular disease. It also developed a broad new program of research and training in health behavior, nutrition, cancer, infectious disease, and genetic epidemiology.

From Apples to Zucchini.

If you've increased the amount of fiber or calcium you eat, cut down on saturated fats, or gotten big on broccoli to lessen your odds of getting cancer, you might want to send a mental "thank you" to the School's Nutrition Coordinating Center.



The only one of its kind in the nation, the center develops and manages computer programs for collecting and using information on the nutrient content of thousands of food items. It was originally established in the mid-1970s to help track nutrient intake for two national research projects looking at the link between fat intake and heart disease. Since then, it has contributed to literally hundreds of efforts evaluating the relationship between health and a wide range of dietary factors, including calcium, fiber, sodium, fat and cholesterol.

Alumni Remembered. A number of funds supporting the School have been established by alumni or in honor of alumni. Several endowments have been established through bequests in wills.

50th Anniversary Scholarship Endowment. This new endowment is being funded by gifts from alumni and friends in honor of the School's 50th anniversary.

Alumni Scholarship Endowment. Established by gifts from alumni, this endowment provides funds for an annual scholarship award.

Breslow Scholars Endowment. This endowment honors alumnus Lester Breslow, former dean of the UCLA School of Public Health.

Patricia Green Memorial Endowment. This honors the memory of a public health nursing graduate. It was created by family and friends.

Betty Hallstrom Memorial Endowment. A bequest in the will of alumna Betty Hallstrom funds an endowment that provides an annual award to a student in public health administration.

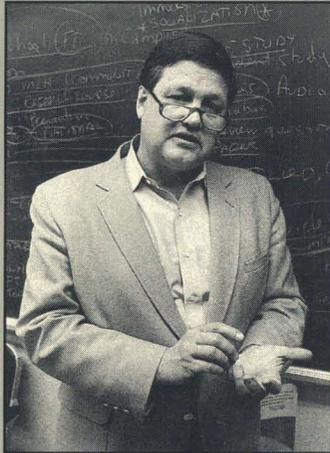
Ruth Houlton Memorial Scholarship Endowment. Alumna Ruth Houlton established an endowment in her will to provide an annual scholarship.

Howard Johnson Endowment. Howard Johnson was an alumnus of the program in health care administration. His estate established several major endowments.

Mary Johnson Memorial Scholarship Endowment. Each year one to three students enrolled in the public health and nursing dual degree program receive scholarships from the endowment established in the will of alumna Mary Johnson.

William Wallace Memorial Professorship. This honors the memory of an alumnus of the health care administration program. The endowment was established by the Northwest Area Foundation.

Combating Child Abuse. One of the most popular courses in the School of Public Health in the 1970s was “The Rights of Children and Youth: Abuse and Neglect,” offered to more than



Robert ten Bensele

300 students a year by maternal and child health director Robert ten Bensele, who came to the University to head the maternal and child health program in 1974. A national authority on child abuse and neglect, ten Bensele continues today to educate public health and medical students on the subject, and travels around the country providing workshops and inservice classes to judges, lawyers, policy makers, teachers, and others dealing with the problem.

Toward the end of this period the School encountered increasingly tight times economically. So reliant on federal funds, it was among the first at the University to feel the blow of what Dean Stauffer at the time termed the “feeding frenzy” of federal budget cutters attacking social programs. One result was a need to restrict student enrollment.

A second challenge the School increasingly faced during the early 1980s was a result of its physical circumstances. By 1982 School programs were scattered through at least 10 sites on and off campus. With neither voice mail nor e-mail to bridge the gap, interdisciplinary work and collegial relationships continued to be more logistically challenging than many might have wished.



1977: The School’s 13 programs are reorganized into six divisions plus the Center for Health Services Research.

1981: SPH Alumni Society is formed with more than 300 members.

1982: Lee Stauffer returns to faculty duties; Edith D. Leyasmeyer is appointed acting dean.



Edith D. Leyasmeyer

1983: Leonard M. Schuman is named Mayo Professor of Public Health.

Positioning for ^{1984 - 1994}



Yuppies, baby boomers, Generation X...laptops, cellular phones and the information superhighway...compact discs, bungee jumping, MTV...over the past ten years Americans have seen a rapid shift in how we work, play, even categorize ourselves. On the global front, dissolution of the Soviet Union has both mended old rifts and created new ones, while political unrest and famine have brought continued struggle to hot spots around the globe. Closer to home, America has been bombarded with epidemics of violence and AIDS and has experienced increasing disillusionment with the way in which health care is allocated, paid for, and delivered. And public health as a discipline found itself in the spotlight in 1988 when the Institute of Medicine issued an urgent wakeup call to America, urging it to reshape and strengthen its public health resources.

During the most recent decade of the School's history, new and compelling concerns have joined timeless ones at the leading edge of public health education, research, and practice. The early 1980s brought AIDS, and with it a public health crisis that Dean Robert L. Kane compared to that faced by John Snow in dealing with London's infamous cholera epidemic. Long-term care and other

issues related to aging have earned a central place in the national agenda as the postwar baby boom has worked its way toward retirement and medical advances have made it increasingly easier to live to a ripe old age. Growing international environmental awareness have brought new enthusiasm and legitimacy to the ranks of environmental health. And increasing technological sophistication has pro-

the Future

duced new public health problems as well as new tools for solving them.

The School has anticipated and responded to these trends in a variety of ways. The increased importance of aging issues has been reflected in the creation of the Minnesota Area Geriatric Education Center (MAGEC) and the Long-Term Care DECISIONS resource center, in the funding of the nation's first endowed chair in long-term care and aging, and in an overall increased emphasis in related research, teaching, and outreach programs. The Minnesota Technical Assistance Program was established in 1984 to help head off environmental problems caused by improper waste management by small and medium-sized businesses. And in 1994, the School responded to a growing need to

Alumni Around the Globe.

A great source of pride within the School of Public Health today is the tremendous combined impact of its more than 7,000 alumni. Graduates of the School hold public health positions on every continent except Antarctica. Whether they head international organizations with global impact or spend their days in one-on-one contact improving the health of residents of a small town or rural community, each of their successes is a signpost of progress toward preserving and enhancing the health of the public in Minnesota and throughout the world.

Down on the Farm.

When it comes to dangerous occupations, few can top farming. In Minnesota alone, some 40 people are killed each year working on farms. To combat this tragedy, the State Legislature created the Minnesota Center for Research in Agricultural Safety and Health (MN-CRASH) in 1992, providing a centralized resource for research and education related to farm safety. In just the few years of its existence, the Center has received federal and state support to promote educational programs, conduct research, and provide outreach to farming groups.

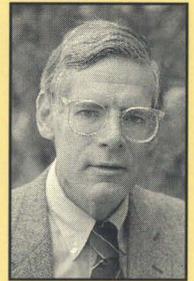
address policy issues related to environmental health by establishing a Center for Environment and Health Policy and the Richard Bond Professorship.

Growing popular awareness of the flaws of the nation's health care infrastructure stimulated development of a Health Care Finance Administration research center in the School to study new ways of financing and delivering health care, and a master of science degree in health services research and policy was initiated in response to increased demand for master's-level researchers. Health educators adapted traditional approaches to meet the logistical challenges of the AIDS epidemic, and biostatistics staff became involved in a massive national research effort to identify new treatments for the disease.

As emphasis on interdisciplinary, issues-oriented work increased throughout the University, cooperative

1984: Mayo Chair in Public Health established by the Mayo Foundation endowment fund and the Mayo Foundation.

1985: Robert L. Kane is named dean.



Robert L. Kane

1985: John Kralewski is named to the William Wallace Chair in Health Services Research and Administration.

1989: Robert Kane is named to the endowed Chair in Long-Term Care and Aging.

1989: Henry Blackburn is named to the Mayo Chair in Public Health.

1990: The School's Division of Biostatistics begins its work as statistical center for the Community Programs for Clinical Research on AIDS (CPCRA), a national clinic-based effort to evaluate various means of combating AIDS.

centers were established to address agricultural safety and health, environment and health policy, and other issues that transcend conventional academic boundaries. And the pursuit of new

knowledge continued to be a dominant theme: by the late 1980s, the School ranked third among the nation's 25 schools of public health in the size of its externally funded research budget and had the largest ratio of research dollars generated to number of faculty of any school in the University.

A University-wide call for increased excellence in education, research and service through the development of new private sector partnerships also brought changes for the School in the late 1980s. Stimulated by the University's offer to provide matching funds, the School was able to garner support for the creation of two new endowed chairs, the James Hamilton Chair and the Minnesota Chair in Long-Term Care and Aging.

This decade also saw logistical shifts. In 1986, the School was reorganized to provide more time for faculty scholarship and to encourage interdisciplinary collaboration. A year later, a University-wide task force recommended discontinuation of the Public Health Nursing program. Alumni rallied to support the program, which was subsequently moved to the School of Nursing instead. Additional restructuring took place in the School in 1992 to further encourage interdisciplinary cooperation and to reflect increased emphasis on preparing students for public health practice, particularly as public sector managers.

Throughout this most recent decade of the School's history, many of its dominant historical themes have continued: finding the elusive "right" balance among teaching, research, and outreach functions; learning to allow differences among disciplines to enrich

My, How We've Changed! Wonder how today's School of Public Health compares with what we were 50 years ago? Here are a few facts and figures:

	1944	1994
Degree Programs	<ul style="list-style-type: none"> •Master of Public Health •Master of Science •Bachelor of Science •Certificate in Public Health Nursing •Doctor of Philosophy 	<ul style="list-style-type: none"> •Master of Public Health •Master of Science •Master of Healthcare Administration •Doctor of Philosophy <i>(and joint degrees with nursing, social work, medicine, and business admin.)</i>
Quarterly Tuition		
full schedule (resident)	\$25.00	\$1,252.00
full schedule (nonres)	56.00	2,696.00
per credit (resident)	2.25	107.00
per credit (nonres)	4.75	230.40
Number of Faculty	15 faculty 30 affiliated faculty	95 faculty 75 affiliated faculty
Degrees Awarded*	3 M.P.H. 1 M.S.	91 M.P.H. 47 M.H.A. 31 M.S. 11 Ph.D.
Administrative Units and Academic Majors	<ul style="list-style-type: none"> •Biostatistics •Personal Health and Health Education •Public Health Administration (Health Officers) and Epidemiology •Public Health Engineering and Sanitation •Public Health Nursing 	<ul style="list-style-type: none"> •Biostatistics -Biostatistics •Environ. & Occupational Health -Environmental Health •Epidemiology -Community Health Ed. -Epidemiology -Public Health Nutrition •Health Management and Policy -Health Services Administration -Healthcare Administration -Maternal and Child Health -Public Health Administration •Health Services Research -Health Services Research & Policy -Health Services Research, Policy & Administration

*Twenty-two certificates, 25 M.P.H. degrees and 29 M.S. degrees were awarded by the University prior to the School's 1944-45 statistics.

MinnesotaCare and More. In the early 1990s, health care reform became the talk of the nation. Policy analysts and policy makers examined our entire health care system, asking hard questions and searching for ways to cut costs while maintaining quality. One frequently consulted resource throughout this process has been the School of Public Health's Institute for Health Services Research (IHSR).

Far from being bandwagon-jumpers, the nationally recognized multidisciplinary researchers who comprise the IHSR faculty have been examining the complex field of health for more than 20 years. The recent focus on health care reform has presented them with a powerful opportunity to translate this wealth of knowledge and perspective into practice through technical assistance at the state and national levels.

At the state level, Minnesota legislators knew right where to turn for advice in the early 1990s when they began to formulate Minnesota's groundbreaking MinnesotaCare bill. Institute faculty not only advised lawmakers on an individual basis, they also were asked to offer a series of informational meetings to help lawmakers grapple with the complex issues they faced. Today IHSR faculty members continue to provide input on issues such as health insurance, managed care, rural health, long-term care, health care outcomes, and mental health services to the committees that are now working out the details of MinnesotaCare.

As Minnesota became a model for national health care reform, the Institute also became a national resource. Faculty members have served as advisors to individual senators and congressional representatives, the Congressional Budget Office, the Office of Technology Assessment, and countless other players in the national healthcare debate.

Today, IHSR faculty are providing input at all levels in the healthcare reform debate. And Institute alumni are also becoming increasingly established as key participants in the process, expanding Minnesota's influence even further in our national pursuit of a rational and just healthcare system.

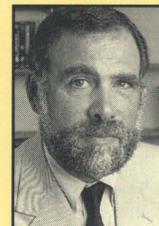


rather than divide; appropriating logistically satisfactory space for growing functions. In its recent strategic plan, the School set specific goals for meeting these and other concerns by increasing diversity among faculty, students, and staff; improving the accessibility of the curriculum while maintaining quality and relevance; strengthening research efforts; enhancing linkages with the community and increasing visibility; and improving its physical environment.

Though it recognizes the need to plan for the future, the School also acknowledges that many of the challenges and opportunities on the horizon today may be as unforeseen as those we face now were 50 years ago. For this reason, it is committed not just to respond to current societal needs, but to be an innovator as well, alert to emerging trends and flexible enough to position itself to meet them. Whatever the next half century brings, it is clear that the School's historic dedication to the quest for better health will continue to make it a leader in public health education, research, and service far into the 21st century.

1991: The School's Program in Hospital and Healthcare Administration named top in the country, according to a survey of 60 program directors.

1991: Stephen C. Joseph is named dean.



Stephen C. Joseph

1992: SPH Career Center opens.

1994: Dean Joseph resigns to head the U.S. Department of Defense health program.

1993: The School of Public Health is the first of 26 schools to be reaccredited for an unprecedented seven-year period to the year 2000.

1994: Richard Bond Professorship is established in the Division of Environmental and Occupational Health.

1994: Blue Cross Professorship is established in the Institute for Health Services Research.

1994: The School of Public Health begins a year-long celebration commemorating the 50th anniversary of its establishment as a separate School within the University.

University of Minnesota School of Public Health

1994-95

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Writer: Mary Hoff
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Designer: Emily Aldrich
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Printing: University of Minnesota Printing
Services
Produced with the assistance of Academic
Health Center Public Relations

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Cover printed on recycled paper containing 80% post-consumer fiber. Inside paper is recyclable.