

## APPENDIX 2

INTERDISCIPLINARY HEALTH STUDIES  
IN THE COLLEGE

In recent reports, the Institute of Medicine of the National Academy of Sciences has embraced the theme of “healthy people in healthy communities” as a way of articulating the importance of educating students in public health for the 21<sup>st</sup> century. Issues as diverse as the AIDS epidemic, bioterrorism, and successful aging can be addressed from perspectives rooted in the biological sciences, social sciences, or policy analysis. The IOM notes the importance of educating students interested in health and illness such that they gain an understanding of the connections and relationships among the forces that influence health, including but not limited to genomics, physiology, individual behavior, societal and economic structures and systems, culture, policy and law, and ethics (see *Who Will Keep the Public Healthy*, Report of the IOM, 2002). The necessity of encouraging a deep understanding of and expertise in these matters is put into greater relief when one considers that about 13% of our Gross Domestic Product (\$1.3 trillion in a recent year) is allocated for health-related expenditures, more than any other industrialized nation.

In response to these needs, the Committee envisioned a new program of study that might be called, provisionally, Health and Health Policy. The Committee agrees that the reality of a rich curriculum must be in place in this field before it makes sense to think about creating a major; the exact institutional structure this study might eventually take on remains an issue for the future. Nevertheless, when Yale has sufficiently filled in its teaching offerings, a program of study in this field could be attractive to students in both the biological and the social sciences. It might appeal to students contemplating majors in History, History of Science and Medicine, and International Studies as well. We offer the following thoughts as guidance for future efforts.

First, though it can draw on a number of existing offerings, to develop its own center of gravity, this area will need faculty with a special com-

mitment to the venture. Relevant faculty might come from both the FAS and the professional schools, but FAS leadership will be crucial to keeping the undergraduate focus in sight.

Second, while the offerings developed in this area should emphasize multidisciplinary approaches to problems in health and illness, they should ensure that students are grounded in strong disciplinary training on both the scientific and the non-scientific side. If a major or secondary concentration is created in this area, it would make sense to require a multidisciplinary set of prerequisites—for instance, introductory courses in at least three of the fields represented by the program (e.g., biology, psychology, economics). To ensure that students develop a specific disciplinary expertise as well as a multidisciplinary perspective, they should be able to focus their studies by emphasizing human biology, health behavior, or health economics, policy and ethics, for example. Ideally, each of these general domains would include a “flagship” course taught annually to a broad audience.

The senior thesis could emphasize a relevant laboratory or field research experience closely mentored by a faculty member. In light of the ambitions of this report for international education, the School of Nursing’s proposal to pair undergraduates with faculty working abroad in the summer might represent the kind of novel opportunity that should be especially encouraged. This program, which lasts one month, begins with an intensive class at the Nursing School focused on community health. The remainder of the month is spent at various sites—this year they include Trinidad and Tobago, Ireland, Nicaragua, Mexico, Thailand and China—where students work on a community health project with the supervision of an instructor. Participation in similar programs run through EPH would be appropriate as well. Historical analyses would also be possible, such as a project relating newly emerging diseases to historical epidemics.