

Columbia University

The Earth Institute and Mailman School of Public Health

Center for Global Health and Economic Development

Stephen R. Leeder BSc(Med) MB PhD FRACP FFPHM FAFPHM

Visiting Senior Research Scientist – Earth Institute
215 West 125th Street, Suite 3F
New York, NY 10027

646-284-9665
Fax: 646-284-9684
Cell: 917-608-6226
sl2249@columbia.edu

Professor of Public Health and Community Medicine
Director, Australian Institute for Health Policy
The University of Sydney

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Dr Jocalyn Clark
Assistant Editor, BMJ, and
Project Manager of the Campaign to Promote Academic Medicine

Dr Richard Smith
Editor, BMJ

Dear Drs Clark and Smith

Thank you for inviting me to respond to your recent email indicating that I had been nominated for leader of your worthy campaign to reinvigorate clinical medicine.

I concluded six years as dean of the Faculty of Medicine at the University of Sydney at the end of 2002. I have attached my CV for you, and a valedictory statement that followed that term.

I took that position to achieve three goals – to secure the establishment of a graduate entry medical education program; to put research on a strategic footing; and to strengthen the precincts in a decentralizing medical school. I can fairly claim that each goal was achieved and in addition a new financial management system was put in place and a hefty response was mounted to the Commonwealth government's commitment to increasing rural education for medical students. The latter led to the formation of a comprehensive rural clinical school in three locations throughout NSW.

In relation to **education**, I was closely associated for nine years with the formation of the innovative medical school in Newcastle NSW, serving as professor of community medicine, chair of the student assessment committee and then the undergraduate education committee. I then moved to the University of Sydney where I played an important role in the planning, political groundwork, introduction and consolidation of a graduate entry program which used modern educational practice and IT for its support, transferring much of the experience gained in Newcastle to an established and traditional medical school in Sydney. I also chaired the committee that oversaw the content and administration of the selection test (GAMSAT) for admission to all Australian graduate education programs and which stimulated the formation of a similar test for undergraduate entry programs. The former has had some use in the UK (St George's). Recently I gave a keynote address at the annual international conference of the group known previously as the Network for Community Oriented Medical Schools (now known as TUFH: The Network) on equity issues in medical education and I attach that for you.

In relation to **research**, in Sydney I established a Research Strategic Planning Group headed by John Chalmers which I funded (several millions dollars) to plan for the future of research in the Faculty given the challenge of the genome, commercialization, integration and more. Details of the plan are available on the University of Sydney Faculty of Medicine website. I also ensured that our performance in the standard funding competition improved.

At the same time I chaired the Health Advisory Committee of the National Health and Medical Research Council, a group charged with translating medical and public health science into sound advice for practice and for public information. The latter led to my chairing another group, *HealthInsite*, which oversaw the Australian government's public health information website.

My personal research, as you can see from the grants that I have held and the papers that I have published, has often been a mixture of public health, clinical and (occasionally) basic science. The research has often had to do with ways of preventing respiratory and cardiovascular disease. I have had an extensive involvement in public policy debate and formulation in Australia as you can see from my CV.

In relation to **decentralization**, which I considered a critical element in the necessary democratization of academic medicine (those closest to the action could make the best decisions), we made great gains, granting each clinical school a high degree of autonomy, appointing associate deans for each school, while maintaining departments as academic rather than financial management units. I could write at length about the intellectual refreshment this controversial move created.

Many of the things we did both at Newcastle and Sydney I believe to be important to secure the future of academic medicine more generally – bringing medical education up to date, developing a strategic and forward-thinking response to the changing challenge of research, and democratizing the way in which academic medicine is managed. Our

response to the challenge of rural medicine also contains many lessons that have wide applicability. These are attributes that I would bring to the position that you have in mind to create.

I took on the deanship not because I have strong academic management ambitions. I do not. I took the deanship because of what I wanted to assist our faculty to achieve in relation to medical education, research and government.

I have had a life-long passion to see things integrated – clinical medicine, public health, medical education, research and service – the better to achieve comprehensive social goals and to stimulate the formation of new and exciting ways of thinking and doing. My leadership commitment to INCLEN, the international clinical epidemiology network, is a further example of that commitment. At Sydney, the School of Public Health is a School, along with Biomedical Sciences and the Clinical Schools, in the Faculty of Medicine.

I agree that in future new health science configurations may well form. The Faculty of Medicine at the University of Sydney is one faculty alongside Nursing, the Allied Health Sciences, Dentistry, and Pharmacy in the College of Health Sciences and the nascent Australian Health Policy Institute (AHPI) that I will direct is a cross-faculty construct which serves all faculties. My commitment to AHPI reflects, among other things, my interest in ensuring these new configurations arise deliberately as a result of conversations among the faculties.

During 2003 I worked at the Earth Institute at Columbia University on study leave from the University of Sydney. The Earth Institute is directed by Jeffrey Sachs and my task has been to explore the meaning of a macroeconomic approach to the great non-communicable diseases (which I prefer to call serious and continuing illnesses or SCIs) given their importance for low- and middle income countries, thus extending the work of the Commission on Macroeconomics and Health beyond HIV, malaria and TB. The Earth Institute is an exhilarating place to work because of the cross-fertilization of ideas among disciplines. If academic medicine is in trouble, perhaps it needs to expand its gene pool in working through its future to include people who may share its deepest values but who work outside its somewhat weary and dilapidated institutions!

I also attach for your interest a submission that Columbia University made recently in relation to an expression of interest from the Gates Foundation in supporting efforts to build a network of global health scientists. I was very much involved with Alan Rosenfield in formulating that proposal and it reflects a lot of my philosophy.

I plan to remain at the EI until the end of June, converting our report (attached) on cardiovascular disease into publications and marketing it to potential funding agencies for a concerted \$10 million three to five year program of tested interventions in several countries, beginning with macroeconomic analyses and the recruitment of high level government officials to the cause of health investment.

In July I will return to the University of Sydney where I will direct the AHPI. Its three themes will be – equity in health; health futures; and SCIs. I would have available to me at least one day a week (a condition of my university appointment) to do other things and the prospect of working with you and others to enhance academic medicine globally is exciting. I have good relationship with some the people (I make no claim to know them all!) in WHO, the World Bank, the Nuffield Trust (John Wyn Owen) and, from years ago, the Rockefeller Foundation. I participated recently in John Bell’s Oxford Vision 2020 conference.

Please let me know if you would like more information in writing or by phone. I am currently in Australia (mobile: 61-419 209 569) and plan to be back in NY by February.

Sincerely