One building Dean Sandro Galea has no interest in erecting on the Boston University School of Public Health (BUSPH) campus, MA, USA, is an ivory tower. “This is a school of believers”, Galea tells The Lancet. “We have faculty and staff who are drawn here because this is a school that does top-tier research but is deeply committed to real-world practice. The people who we attract are students who want to change the world.”

BUSPH celebrates its 40th anniversary this year. As Galea noted in his Dean’s Note blog in April, 2015, highlights from the school’s first four decades include developing the research base for US drunk-driving laws, laying the intellectual foundation for patients’ rights and applied bioethics, bringing attention to physical disability as a public health problem, contributing to the understanding of the health effects of environmental toxins in conditions such as Gulf War syndrome, and stimulating international reconsideration of the value and ethics of placebo-controlled trials.

But Galea, dean since January, 2015, is more focused on the direction in which the school—and public health—is headed. “In some respects, the easy work of public health is done”, says Galea, an emergency medicine physician who previously chaired the epidemiology department at the Columbia University Mailman School of Public Health, NY, USA. “The problems we face now are much more complex. That suggests that public health needs to be much bolder in its innovations.”

For starters, the school will launch a redesigned MPH programme this fall. Students will no longer earn a degree in a particular department. Instead, they will earn interdisciplinary graduate certificates in such areas as global health; mental health and substance abuse; sex, sexuality, and gender; and social justice, human rights, and health equity. A pilot study this semester has found social justice and human rights to be the most popular certificate, Galea says. “Students see public health at the forefront of transforming societies.”

It should be at the forefront, but it doesn’t always get the attention it deserves, Galea says. “The reason I took this job is I think that we are at this really interesting moment in public health, the moment where forces are converging. We are in a place where public health is nowhere near as prominent, nowhere near as part of the broader conversation as it needs to be.”

That’s why schools of public health must go beyond publishing their research in scientific journals, Galea says. “We need to and should be translators of that knowledge. We would like to have public health conversations happening in the social media space.”

Galea has more than 2000 followers on Twitter and has encouraged other faculty members to join him. Bioethicist George Annas, who has been on the Boston University faculty since before there was a school of public health, is one of the newcomers to the Twitterverse. “It’s all because of him”, Annas says, referring to Galea.

Two recent changes in the school’s structure illustrate Galea’s belief in the need for an interdisciplinary approach to public health. Effective from Sept 1, 2015, BUSPH combined two departments—Health Law, Bioethics, and Human Rights with Health Policy and Management—to create the Department of Health Law, Policy & Management.

The new department “will be at the forefront of the global scholarly conversation about the role of laws, policies, and health systems in shaping the health of the public”, Galea said in a statement announcing the change.

In addition, BUSPH created a school-wide Center for Health Law, Ethics, and Human Rights, directed by Annas, who previously chaired the Health Law, Bioethics, and Human Rights Department.

BUSPH, which grew out of a department in the Boston University School of Medicine, was created at the right time and in the right place, says Annas. “We started out primarily as a night school”, he recalls. “There was an incredible demand for a part-time school of public health. There were a lot of people working in public health in the Boston area who could really take advantage of it.”

Although few students these days are part-time, Annas is pleased that they continue to be passionate about social justice and human rights. “Public health is actually how to change the world”, he says. “We use the word ‘pragmatic’ in public health.”

Political scientist David Jones, an assistant professor of health policy and management, says that’s why he wanted to join the faculty of a school of public health instead of a political science department. “I don’t think political scientists would recognise what I do as political science”, says Jones, who hadn’t even been born when BUSPH was established. “Their interest is often theory for the sake of theory.”

That is not the case with Jones. His research has focused on the implementation of the Affordable Care Act in the USA, and this semester his Health Politics and Policy class is working with a Massachusetts state senator on proposals for legislation that would reduce consumption of sugar-sweetened beverages. Apparently, the opportunity was one many students couldn’t pass up, and enrolment in the class is double what it was a year ago, Jones says.

Galea says: “We are training students who are actually the doers in public health.”

Rita Rubin