



Richard G. Marlink, MD:

Building the Rutgers Call Lalt IN S T I T U T E

Hold a globe in your hand anywhere on its surface. You have touched a place where people are affected by global health issues.

"Global health issues aren't bounded by borders," says Richard G. Marlink, MD, professor of medicine at Robert Wood Johnson Medical School, inaugural Henry Rutgers Professor of Global Health, and director, Rutgers Global Health Institute. "The challenges in global health are community public health threats that may impact us all." These issues stem from a wide range of causes, often human-related, including climate change, infectious diseases, or an exported Western Hemisphere lifestyle that has increased the incidence of diabetes, cancer, and heart disease.

BY KATE O'NEILL • PORTRAITS BY JOHN EMERSON

2016, Rutgers, The State University of New Jersey, recruited Dr. Marlink to lead the new Rutgers Global Health Institute, a university wide effort, based at Rutgers Biomedical and Health Sciences (RBHS). In addition to holding a Henry Rutgers professorship, Dr. Marlink is faculty at Robert Wood Johnson Medical School and a member of the Rutgers Cancer Institute of New Jersey.

Prior to joining the Rutgers faculty, Dr. Marlink served on the faculty of Harvard University, where he was the Beal Professor of the Practice of Public Health at the Harvard T. H. Chan School of Public Health and executive director of the Harvard AIDS Initiative (HAI).

In 1996, Dr. Marlink helped create the Botswana-HAI Partnership (BHP), where he continues as a senior research director. He has also served as the scientific director, vice president for program implementation, and senior adviser for medical and scientific affairs at the Elizabeth Glaser Pediatric AIDS Foundation. He was principal investigator for the foundation's Project HEART, established in 2004. Seven years later, the project had placed more than one million people living with HIV into care clinics; in addition, more than 565,000 were receiving lifesaving antiretroviral treatment in five African countries.

Deep Roots in HIV/AIDS Care

Dr. Marlink's career began in oncology/hematology. In the early days before AIDS was understood, many oncologists took care of patients with the newly identified syndrome that would eventually be identified as being caused by the human immunodeficiency virus, HIV-1.

He completed his internship, at St. Vincent's Hospital in lower Manhattan from 1980 to 1981, caring for very sick, immunocompromised patients with unusual infections, such as cryptosporidium or miliary disseminated tuberculosis. Although these infections were not unknown, their devastating effect on people with lowered immunity was part of the puzzle, as was their prevalence among men in the gay community and among health care workers in the Greenwich Village area. In 1981, their symptoms were explained and the disease was named acquired immunodeficiency syndrome (AIDS).

Dr. Marlink trained as a fellow in oncology at New England Deaconess Hospital of Harvard Medical School, the only hospital in Boston then actively accepting AIDS patients. He coorganized Boston's first hospital-based AIDS clinic and worked with the research team of Max Essex, DVM, PhD, chair of both the BHP and the Harvard T.H. Chan School of Public Health AIDS Initiative. Dr. Essex originally proposed that AIDS was likely caused by a retrovirus that destroys the immune system by infecting T cells.

In the mid-1980s, Dr. Essex's group began planning a trip to Senegal to study HIV-2, a previously unrecognized, completely different type of HIV, in which people were infected but seemed relatively asymptomatic. At the time, Dr. Marlink had limited expertise in research, but he told the group, "As a physician, I can tell you if a person is sick with HIV."

A week later, he was on a plane to Senegal to help determine if people infected with this new type of AIDS virus were ill or going to become ill. He examined patients and approached public health research problems in Africa, contributing his training in virology and oncology to the many moving parts involved in evaluating HIV-2, from infection, to symptoms, to psychology, to the effects of illness and treatment.

Taking Inventory

Richard Marlink's experienced leadership will be key to the strategic growth of RBHS, broadening the university's ability to support community public health efforts to improve health and wellness," says Brian Strom, MD, chancellor, RBHS. "His goal is to drive Rutgers' continued evolution as one of the leading global health centers in the country, linking together and building upon the significant resources we are committing to improving public health at Rutgers."

Global health uses the full range of health promotion strategies, including those directed at industrial, social, economic, and political determinants of public health. Given this broad scope, Dr. Marlink is excited about working with people throughout Rutgers who represent the university's diversity and breadth of expertise. "In a way, we are like a team of detectives," he says, "connecting the dots to solve mysteries—they just happen to be public health mysteries."

The institute will serve as a communications hub, connecting and supporting the university's programs related to global health. "If people are involved in an effort, we want them to know who else is working on—or considering—a similar effort, whether it's here in New Jersey, in Ghana, or in India," says Dr. Marlink.

In his first year at Rutgers, Dr. Marlink will complete an inventory of the university's resources, learning how each sector might best support the work of the Rutgers Global Health Institute. His findings will be the foundation for a strategic plan for the institute. "Through this process, we'll discover our gems, the strengths that will help us make an impact in global health," he says. "Then we'll be able to add educational resources, develop services to improve research, and recruit faculty."

Solutions to global health problems depend on bringing to bear overlapping sciences including statistics, demography, and epidemiology. "The diversity of schools at Rutgers promises



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diverse and effective solutions to global health problems," says Dr. Marlink, citing some examples. The Rutgers School of Business could be involved in solving supply chain problems to expedite medication and materials to remote places, he says. And the School of Engineering could develop further biomedical engineering solutions for poor populations.

The Environmental and Occupational Health Sciences Institute and the School of Environmental and Biological Sciences are outstanding resources for addressing health problems caused by climate change. Locally, an excellent model for community health is provided by the Eric B. Chandler Health Center, with leadership shared by the medical school and a community board.

"We also have tremendous resources at the Rutgers Cancer Institute of New Jersey," adds Dr. Marlink. "People in developing countries usually do not have access to pain medications, and they're dying from preventable and treatable cancers. We could focus on these urgent problems, matching our expertise with the global need for cancer prevention and care."

In several areas of the university, global health is already a focus: the Office of Global Health at Robert Wood Johnson Medical School, an office for global health at New Jersey Medical School, the Center for Global Public Health at the School of Public Health, and the Center for Global Health at the Rutgers School of Nursing.

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"Beyond Rutgers, the office has affiliations with other universities," adds Dr. Escobar. "They include collaboration agreements with more than 25 institutions in 15 countries in Asia, Africa, Europe, and Latin America. We have innovative new programs in Colombia, to train our own trauma surgeons. We also have an emerging clinical program in the Dominican Republic in collaboration with Columbia University and a collaboration with RWJBarnabas Health, which has a strong global humanitarian outreach program."

Robert Wood Johnson Medical School offers qualified students the opportunity to graduate with distinction in global health, following successful completion of a rigorous, four-year process. Requirements include a self-designed and implemented initiative, participation in global health projects—including at least one domestically—plus international rotations twice during the four years of medical school, and submission and presentation of a scholarly research paper.

Emphasizing international exchanges and learning opportunities, Dr. Escobar's program placed more than 50 medical students in sites worldwide last year, most often as participants in ongoing collaborations that have led to successful National Institutes of Health (NIH) research grant applications in which Dr. Escobar is principal or collaborating investigator in the area of global mental health research.

The Importance of Partnerships

Students have caught the [global health] bug and want to be more involved," says Dr. Marlink. "This is part of our vision for the curriculum—to 'amp up' student opportunities through our existing programs and improve them through solid partnerships." He adds, "Students benefit most when they go into communities where we are known and have established working relationships."

Dr. Marlink hopes the Rutgers Global Health Institute will establish new partnerships in specific locations. "By committing to enduring partnerships, we'll be doing more to benefit the citizens of that particular country or of that particular New Jersey community," he says.

Francis Barchi, PhD, assistant professor in the Edward J. Bloustein School of Planning and Public Policy and a core member of the Institute for Health, Health Care Policy and Aging Research at Rutgers University, was a member of the search committee for the director of the Rutgers Global

Health Institute. Dr. Barchi, a bioethicist, teaches a combined undergraduate and graduate course in medical ethics and an undergraduate course in global health at the Bloustein School. Not only does she have expertise in global health, but, as an educator and researcher in Botswana, she had the opportunity to appreciate Dr. Marlink's work firsthand.

"Ric has the wisdom and personality to see through the complexities. And he's a great listener," says Dr. Barchi. "In Botswana, listening is a style—a strategy. You have to let everyone have their say, and it can take many hours. But everyone has the right to speak and is expected to contribute."

Attracting and securing funding will be key to the success of the Rutgers Global Health Institute. Dr. Marlink's experience will be essential in this area as well. Initially, BHP depended on small contributions, grants, and crucial help from Bristol-Myers Squibb, along with major help from the government of Botswana. Harvard and BHP invested more than \$25 million in laboratory and clinical research training for people from Botswana. In addition, with help from the Bill & Melinda Gates Foundation and the Merck Foundation, Dr. Marlink and BHP organized a national training program for thousands of physicians, nurses, pharmacists, and laboratory technicians.

In 2003, President George W. Bush announced the initiation of PEPFAR (President's Emergency Plan for AIDS Relief) grants to combat HIV worldwide. "Suddenly, we had a lot of money to do what we wanted to do in scaling up AIDS treatment and prevention in Africa," says Dr. Marlink. Harvard received one of the first four large grants, as did the Elizabeth Glaser Pediatric AIDS Foundation, where Dr. Marlink was scientific director and then vice president for program implementation. Additional funds came later from the NIH.

In addition to the tremendous strengths Rutgers will contribute to the Rutgers Global Health Institute, its central New Jersey location promises to benefit from the proximity of some of the world's largest pharmaceutical companies. Dr. Marlink's experience with the Bristol-Myers Squibb "Secure the Future" program and with the Merck Foundation's early \$50 million commitment to Botswana, equaled by the Gates Foundation, further encourages him about the future impact and long-term success of global health partnerships.

Dr. Marlink has deep experience in building an organization from the ground up, and he clearly enjoys this complex process. This background and approach, along with his experience in research and patient care and his well-honed listening skills, will serve him and Rutgers well as the institute takes shape and begins its work.