Public Health Link
JEFFERSON COLLEGE OF GRADUATE STUDIES
MASTER OF PUBLIC HEALTH E-NEWS

MPH Spotlight

“A joint degree from two such reputable schools is going to bring fantastic opportunities for students who choose this path.” —Linda L. Ammons, Esq., Associate Provost and Dean, Widener University School of Law

In response to an ever-competitive marketplace for healthcare leaders with inter-professional education, the Health Law Institute at Widener University School of Law and College of Graduate Studies at Thomas Jefferson University have teamed up to offer two new joint-degree programs in law and public health.

Beginning this fall, students can work toward either a Juris Doctor and Master of Public Health (JD-MPH), or a Master of Jurisprudence in health law and Master of Public Health (MJ-MPH). These two new dual degrees are designed to prepare students who are pursuing a career in fields such as public health administration, health insurance organization leadership, health consulting and the pharmaceutical industry.

Linda L. Ammons, Associate Provost and Dean of Widener University School of Law, said combining the new joint-degree programs will surely make the program’s graduates sought-after in the marketplace. “A joint degree from two such reputable schools is going to bring fantastic opportunities for students who choose this path,” Ammons said. “This joint program further expands the training available in Widener’s nationally recognized Health Law Institute.”

The demand for individuals with joint degrees has increased in recent years and is sought after by hospitals, health departments, health associates, voluntary organizations and other health institutions.

The typical MJ-MPH candidate is a nurse who is seeking a career in health administration and will benefit from expertise in legal topics such as confidentiality, bioethics, risk management and disability law. The profile of the JD-MPH candidate is one who becomes legal counsel to a medical institution and may choose private law practice. Courses such as epidemiology, health behavior, management and policy and environmental health are invaluable to health associations and institutions that employ the JD-MPH graduate.

“Jefferson is delighted to welcome this collaboration and the students from Widener Law to our public health program,” said James Keen, PhD, Dean, College of Graduate Studies at Thomas Jefferson University. “Widener’s strength in healthcare law is a perfect complement to our public health curriculum, and we foresee a strong synergy and benefits to the students and faculty of both institutions going forward.”

The joint degree programs in law and public health are the continuation of a partnership already established between Widener University and Thomas Jefferson University.

Left to Right: John G. Culhane, JD, Linda L. Ammons, Esq., James Keen, PhD, David B. Nash, MD, MBA, Richard Wender, MD

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MPH Spotlight Continued...

“I’m thrilled that we can now offer students in the Delaware Valley with a competitive edge, by providing them with the tools needed to effect change in their chosen areas of public health and law,” said David B. Nash, MD, MBA, Chairman, Department of Health Policy, Master of Public Health Program, Jefferson Medical College of Thomas Jefferson University.

The joint degree programs can be completed in three to seven years, depending on which degree the student chooses and whether enrollment is part- or full-time. For more information on the joint degree programs in law and public health, please contact Professor John G. Culhane, acting director of the Health Law Institute at 302-477-2017 or see www.law.widener.edu; or Jennifer Ravelli, MPH, Thomas Jefferson University, at 215-503-0174 or Jennifer.Ravelli@Jefferson.edu.

Public Health Perspective: Poverty Reduction & Health

Poverty is the most important determinant of health worldwide. Poverty and poor health are mutually reinforcing and generate a vicious cycle of deterioration and suffering.

More than one billion people around the world live on less than one dollar per day despite the overall growth of the world economy. Of the 4.4 billion people in developing countries, nearly 60% lack access to sanitation, a third have no access to clean water, 20% lack access to healthcare of any kind, and 20% do not have sufficient dietary energy or protein. Economic disparities both within and between countries have grown and in nearly 100 countries incomes are lower in real terms than they were a decade ago. The world’s richest 225 people have the combined wealth equivalent of the annual income of the poorest 2.5 billion people in the world (47% of the world’s population).

In 2005, nearly 13% of the total US population (37 million) was living below the poverty line. This percentage is significantly larger for particular population groups, specifically children, minorities, and those living in certain geographic areas such as inner cities. Since 2000, the number of poor Americans has grown by more than 6 million. The number (15.6 million) of Americans living in extreme poverty, with incomes below half the poverty line, is the highest level on record.

Public health and medical professionals should assert a strong voice and focus a proportion of their efforts on:

• Networking with, and supporting, organizations and advocacy groups concerned with poverty reduction.
• Educating health professionals and the public on the health consequences of poverty.
• Participating in, or shaping, efforts to ensure that the domestic and foreign policy debate in the upcoming local, State and national elections addresses efforts to decrease extreme poverty and its consequences.

—James Plumb, MD, MPH

If you are interested in sharing your Public Health Perspective on an important issue in the field, please contact Dr. James Plumb at James.Plumb@Jefferson.edu