

Developing the Connection Between Law and Public Health

Two years ago, Widener University School of Law and Thomas Jefferson University entered into an agreement to establish two joint programs in law and public health: Juris Doctor/Master of Public Health (JD/MPH) and Master of Jurisprudence/Master of Public Health (MJ/MPH). These programs are designed to provide the knowledge and skills required to thrive in health law practice, and public health advocacy and policy. Over the course of four years (for full-time students), candidates for these degrees will learn about the ways in which these two disciplines complement each other to prepare them for careers in health law and public health law and policy.

The Jefferson MPH program, accredited through the Council on Education for Public Health (CEPH), emphasizes competencies including behavioral and social sciences; biostatistics; epidemiology; environmental health; health policy; management and advocacy. The Widener program focuses on core law and health law courses. A capstone project and clerkship offers students the opportunity to apply their knowledge and gain additional health law or health policy experience.

The program is a natural outgrowth of the increasing recognition that the two fields have much to offer each other, and that the successful public health lawyer or policy-maker will gain a substantial advantage from acquiring knowledge in these two related disciplines. Both degree programs support and benefit population health, healthcare and legal professionals, including nurses and policy makers, nursing home administrators, paralegals, government employees, and private-practice lawyers and litigators.

From my vantage point as a law professor specializing in public health law, I'd like to offer a few brief observations about how I see the potential of law to improve public health outcomes, and to suggest a few (by no means exhaustive) career paths that the

dual-trained graduate might pursue. Both law and public health are problem-solving disciplines. The public health practitioner uses population-based data to identify problems, and then relies on public health tools such as education and targeted intervention to solve them. But such solutions often have a vital legal component, and the public health practitioner or advocate with legal training has a substantial advantage in understanding how the legal system – whether through legislation, regulation, or litigation – can create positive public health outcomes.

One example of this union of disciplines is related to vaccination programs and its policies. How should the legal system ensure that the population is protected – the public health goal – while recognizing and respecting that some people have sincerely held moral or religious objections to vaccination? How might this apply to H1N1? The states, to varying degrees, allow people to opt out of immunization. Almost all states permit religious exemptions, while a substantial minority also allow opt-outs based on strong moral convictions. How does this law affect standard public health policy and practice?

Serving in an important policy-making capacity, the legally trained public health practitioner can bring an understanding of the law's requirements (and its limits) on deciding this type of issue. It might be, for example, that a "tweak" to the law that would require hearing-based evidence of a sincere religious or philosophical belief against vaccination would limit the exemption's reach while continuing to respect the personal autonomy so valued by the law.

In addition to becoming well-qualified to assume leadership roles in public sector policy matters, graduates might also be drawn to regulatory or compliance positions within the pharmaceutical industry (perhaps as in-house counsel armed with epidemiological and biostatistical knowledge that

few other attorneys would grasp), to health care institutions (where the insights of public health and law might be usefully combined to address emerging issues such as inefficiencies and how to combat them), to the insurance industry and health care consulting, to positions at not-for-profit institutions that seek to improve public health outcomes.

Students in the joint programs are already beginning to see and work with these synergies. For example, one student has taken her public health training from Jefferson back to Widener, where she will put her knowledge of the two disciplines together in creating a legal needs assessment for a targeted geriatric medical patient population – one of the most poorly understood groups. Taken a step further, this student's multidisciplinary education will be an asset in Widener's newly launched medical-legal partnership clinic where students will help to design legal strategies and remedies for the underserved population of Chester, PA.

The rich background that these joint programs provide can open up diverse career choices for our graduates as the program develops. The Director of the MPH Program at Jefferson, Dr. Rob Simmons and I are excited about the ever-expanding potential of our joint public health law programs. ■

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For more information about joint programs in Law and Public Health visit: www.jefferson.edu/population_health and www.law.widener.edu.