



J.D./M.P.H.  
**SURVEY**

## Findings from the Network for Public Health Law J.D./M.P.H. Survey

### Background

The field of public health has grown rapidly in the last several decades in response to the changing landscape and population needs in the United States, including, but not limited to, pervasive rates of chronic disease, environmental threats and access to health care. Affecting the change necessary to mitigate pervasive health risks and facilitate environments and systems which promote health has required various tools in the struggle to prevent disease and promote health. One such tool is public health law. While not a new tool, public health law has been increasingly utilized by attorneys, policymakers and public health practitioners in an effort to achieve key public health objectives.

The growth of the public health field is reflected in an increased number of institutions established to train tomorrow's public health leaders. Data from the Association of Schools of Public Health (ASPH) demonstrate a significant rise in the last two decades, from 24 accredited schools of public health in 1989 to 46 in 2010. Student interest has risen as well; the number of applications submitted to accredited schools has more than doubled in the past ten years, from 19,953 in 2000 to 49,227 in 2010.

Educational opportunities have also expanded to meet the needs of those specifically interested in public health law. Public health law was examined as a field of practice in 1969 by William Curran, who found 32 individuals possessing both a law and public health degree.<sup>1</sup> Since then students have continued to explore ways to expand their knowledge and experience, through options such as a joint degree program where students can pursue a J.D. and M.P.H. through concurrent studies. The demand for such programs has resulted in increasing numbers of both schools of public health and law coordinating within or outside a university system to offer a joint degree program. While such programs were virtually non-existent 20 years ago, over 25 programs now exist at schools across the country. Additionally, of students who graduate with a dual degree, the percentage who chose to pursue a J.D./M.P.H. more than tripled in just seven years, from 2.4 percent in 2003 to 7.8 percent in 2010. Interest is likely greater than these statistics are able to capture, however, because while these figures represent students who graduate with a dual degree pursued through a joint degree program, many people obtain their degrees years apart.

### Objectives

The growing interest in the intersection between the fields of public health and law has prompted questions among many students about what they can expect if they choose to pursue a career in public health law. The Network for Public Health Law conducted a survey as part of its effort to build the field of public health law as well as to provide supportive resources and opportunities for further engagement to students. Individuals with a dual degree in law and public health were surveyed with the objective of identifying trends that will offer prospective and current students a better understanding of the educational and professional opportunities available to them, as well as a clearer picture of what the field entails for those who practice it on a day-to-day basis. The findings of this survey are presented in the hopes of guiding the development of educational and professional resources.

## Data Collection and Analysis

The Network used a number of methods to distribute the survey to as wide an audience as possible. The Network reached out to various public health and law schools where faculty and staff helped to distribute the survey to alumni. The Network also drew upon the relationships and faculty affiliations of Network staff to distribute the survey, all the while promoting the survey through various channels, including the Network Report and Network website, partner organizations (such as APHA and ABA) and social media platforms such as Facebook and Twitter.

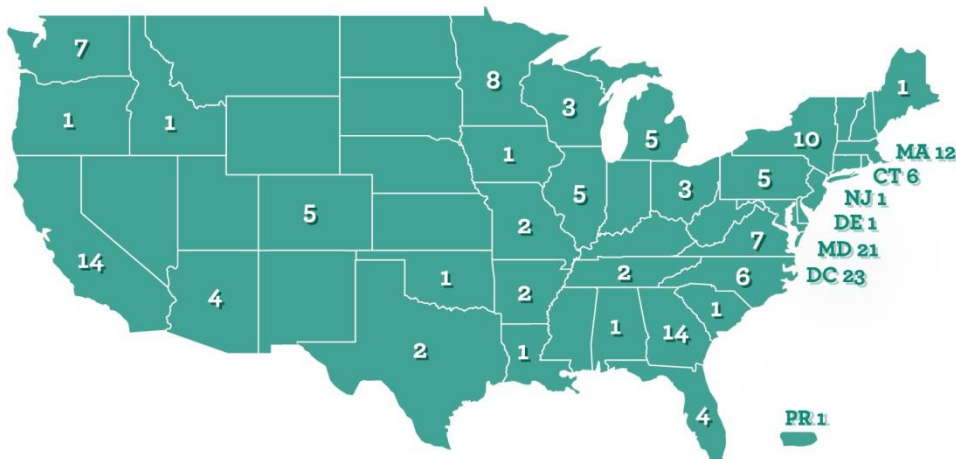
There were 284 survey responses, of which 211 were included for data analysis based on the respondents' indication that they had completed a J.D. and M.P.H. For the purpose of the survey and analysis, an M.P.H. was defined as any graduate degree that was obtained within a school of public health (i.e. Master of Health Administration, Master of Science. in Biostatistics, etc.).

Survey data are reported in aggregate form. Data analysis primarily used descriptive statistics, including frequencies, averages, medians and cross-tabulations, as well as qualitative analysis for themes. There were no statistical analyses conducted to test for significance of the data.

## Findings

### Who has a J.D./M.P.H.?

The majority of survey respondents were female (75.4 percent vs. 24.6 percent). Over half of respondents indicated that they were between the ages of 21 and 39. Thirty-four states/U.S. territories were represented by survey respondents, with Washington D.C. and Maryland being the most common places of residence. This geographical trend could be indicative of the large number of public health law jobs located near larger government agencies and major national nonprofit organizations.



In response to a question regarding additional education, 36 survey respondents indicated that they have another professional/graduate degree in addition to the J.D./M.P.H. Of those who reported having an additional degree, the most commonly reported was an M.D. or a Ph.D..

### What are the academic experiences of individuals with a J.D./M.P.H.?

#### Joint Degree Programs and Possible Motivations

The majority of survey respondents did not complete their J.D./M.P.H. through a joint degree program (69 percent vs. 31 percent). The 65 individuals who completed a joint J.D./M.P.H. program did so because it provided a streamlined approach to coursework, allowing them to finish in a shorter period of time and save money. Of those who did not complete a joint J.D./M.P.H. program, many indicated that they returned to school to obtain the second degree (either J.D. or M.P.H.) because of personal interest. Another factor cited by

survey respondents was enhanced career opportunities. The finding that the majority of respondents did not complete a joint J.D./M.P.H. program could reflect the fact that joint/ degree programs are relatively new and increasingly common within the last 10-20 years, which means that many respondents may have not had access to such programs when they were initially deciding on their course of graduate education.

### Schools

Survey respondents attended various schools across the United States. Of those who completed a joint J.D./M.P.H. program, the two most commonly reported were: 1) Georgetown University Law Center and Johns Hopkins Bloomberg School of Public Health and 2) Harvard University.

For graduate education in public health, Emory University, Harvard University, Johns Hopkins University and the University of North Carolina were commonly reported.

Georgetown University and the University of Maryland were the most commonly reported law schools attended by survey respondents.

See [Appendix A](#) for a complete list of public health and law schools reported by respondents.

### The Benefits of a Joint Degree Program

For individuals who are weighing the pros and cons of entering a joint degree program, a likely concern is what potential benefits the completion of a joint degree program may offer in the future. The data obtained from this survey was used to explore two facets of joint degree programs: satisfaction and salary.

**Satisfaction.** The survey explored three facets of satisfaction-personal, professional and financial-in order to better understand the experiences of individuals who completed a joint J.D./M.P.H program compared to those who did not. The data revealed that the reported levels of personal, professional and financial satisfaction reported by respondents were independent of whether or not a respondent had completed a joint degree program. Survey respondents who completed a joint degree program were not more likely to report personal, professional, or financial satisfaction than respondents who did not complete a joint degree program. Current joint degree programs may be interested in exploring opportunities to enhance students' experiences and therefore, satisfaction.

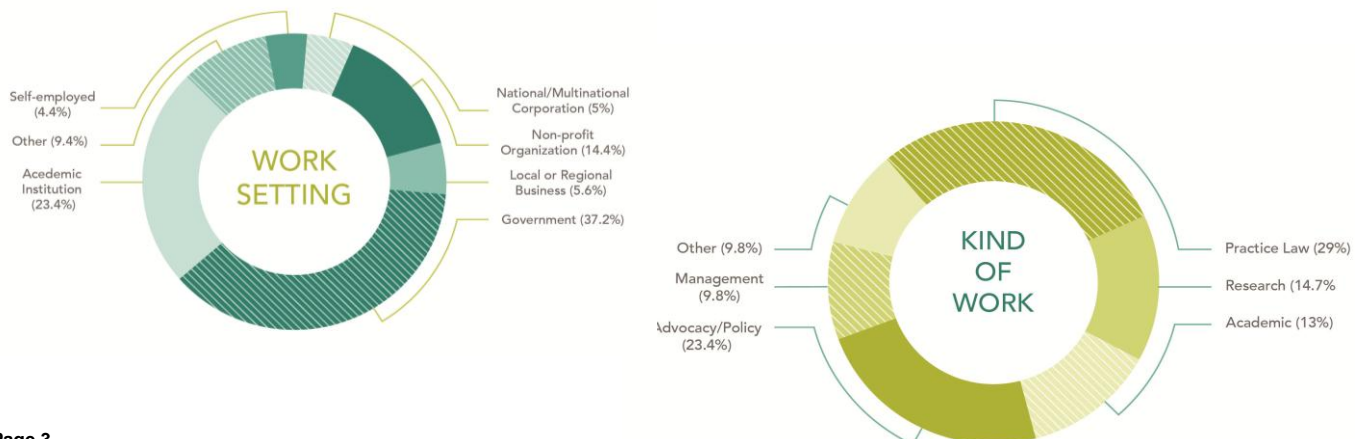
**Salary.** The 96 individuals who did not complete a joint J.D./M.P.H. program reported a higher median salary. In contrast, a greater percentage of individuals who completed a joint J.D./M.P.H. program make \$120,000+ annually compared to those who did not complete a joint degree program (29.6 percent vs. 26 percent).

While completing a joint degree program inevitably has benefits, such as streamlining and integrating coursework and interests, additional research to understand the personal, professional and financial benefits being realized by graduates of joint degree programs, as well as benefits desired, but not frequently experienced, could aid a more complex analysis of the strengths and opportunities for improvement in existing and future joint degree programs.

## What are the professional experiences of individuals with a J.D./M.P.H.?

### Career Demographics: Stage, Setting and Type of Work

The majority of survey respondents were in the early career stage, defined as 25 or more years before planned retirement. Respondents largely worked in the government setting (37.2 percent) followed by the academic setting (23.9 percent). The primary kind of work performed by respondents included practicing law (29.3 percent), advocacy/policy work (23.4 percent, and research (14.7 percent).



## Salary

Given the resources that are invested in professional/graduate school, many prospective students want to know what kind of salary they can expect upon graduation. Out of 135 respondents who indicated that they work 40 or more hours per week, the majority made between \$50,000 and \$100,000.

### SALARY RANGE OF FULL-TIME WORKERS



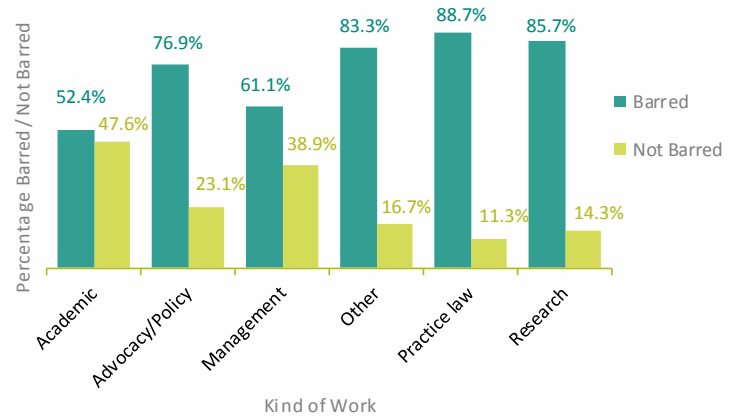
## The Bar

Professionals with a J.D./M.P.H. can occupy a variety of positions, many which require the professional to be licensed (“barred”) and others which do not. The requirement for being barred also varies from state to state. The majority of survey respondents reported that they are barred (76.1 percent vs. 23.9 percent). Participants who indicated that their bar status was “inactive” were counted as not barred for the sake of analysis.

Data were analyzed further to determine whether or not there were certain kinds of work where professionals were more likely to be barred and the median salary of barred professionals. The following chart demonstrates that some kinds of work had a lower prevalence of barred professionals compared to others. For example, in the academic field the number of survey respondents who indicated that they are barred is lower compared to those who practice law, or are in research or advocacy/policy fields.

With regards to median salary, survey respondents who are barred have a higher median annual salary (\$90,000-\$99,000 vs. \$80,000-\$89,000).<sup>2</sup> Additionally, the data revealed that a higher percentage of survey respondents who are barred make \$100,000 or more compared to those who are not barred (44.8 percent vs. 36.4 percent).

### BAR STATUS BY KIND OF WORK



## General satisfaction

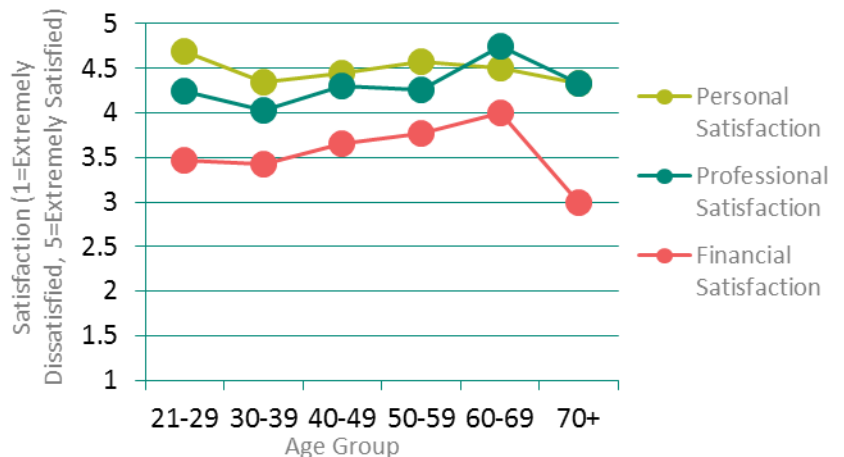
Satisfaction was measured across three domains (personal, professional and financial) on a five-point scale (1= extremely dissatisfied, 5=extremely satisfied). The findings revealed moderately high levels of satisfaction across two of the three domains: personal and professional satisfaction, for which the average score was 4.47 and 4.17 respectively. In contrast, financial satisfaction was reported as lower among respondents, with an average score of 3.55.

### Satisfaction in Relation to Age Group and Kinds of Work

The findings revealed that each dimension of satisfaction varied relative to age group and that there was no linear relationship. In general, personal satisfaction was highest among survey respondents between the ages of 21 and 29; professional satisfaction was greatest among 60-69 year old survey respondents; and financial satisfaction was highest among 60-69 year old survey respondents.

In terms of kinds of work, satisfaction was reportedly highest among those working in the academic field. The lowest satisfaction scores were reported by those who indicated that their work type was classified as “other.” This could be for a variety of reasons including loosely defined roles and/or responsibilities.

### SATISFACTION BY AGE GROUP





## Building on Survey Findings to Grow the Field of Public Health Law

A major goal in implementing this survey was to provide an opportunity to understand what kinds of services and resources professionals in the field feel are currently not provided that could better prepare future professionals as well as generally improve their satisfaction, skill set and knowledge base. The following findings may help to inform efforts to work with prospective and new students, recent graduates and seasoned professionals to build the field of public health law by fostering a greater sense of connectivity between individuals involved in the field. Furthermore, offering resources that stoke a passion for action through prevention and community based initiatives that cumulatively improve societal health in lasting and meaningful ways will assist in strengthening the field of public health law.

### Themes identified in feedback from respondents

- **Job boards dedicated to public health law.** Many survey respondents, particularly those in their early career (25 years+ before planned retirement) and mid-career (10-24 years before planned retirement), indicated that they would like a job board specific to public health law.
- **Professional development.** Survey respondents expressed interest in increased professional development opportunities, including free and low-cost continuing education credits, distance education, pro bono work, internships and hands-on-learning.
- **Networking opportunities.** Survey respondents suggested increased networking opportunities as a valuable strategy to build support in and for the field, while also enhancing communication.
- **Financial assistance.** Survey respondents expressed the need for financial assistance, such as funding for educational programs and loan repayment programs.

## Moving Forward

With law increasingly being recognized as a tool to address public health priorities, now is an opportune time to assess the field of public health law and encourage continued growth in the field by implementing new measures that make it a more viable, rewarding and accessible career path for current and future professionals. These survey findings, although not analyzed for statistical significance, provide a glimpse into the academic and professional experiences of some of today's public health law professionals. Moving forward with this information, what can we do?

1. Promote the field to prospective public health and/or law students, and heighten awareness among others.
2. Offer networking opportunities to professionals and students, including a mentoring program to help transition students to the field.
3. Provide free or low-cost professional development opportunities that are targeted to public health law professionals.
4. Create a job board specifically for public health law professionals.
5. Implement and grow more resources that coordinate between various fields and sub-fields to encourage increased collaboration and greater efficacy of public health law efforts.
6. Develop resources to connect academic programs with practitioners in public health agencies and support community initiatives that allow joint degree students to gain practical, hands-on experience.
7. Target undergraduate students and continue to develop undergraduate options for public health law studies and activities.

## Acknowledgements

The Network for Public Health Law would like to thank the following for their help distributing the survey:

Arizona State University Sandra Day O'Connor College of Law  
Boston University School of Public Health and School of Law  
Centers for Disease Control and Prevention  
Columbia Law School  
Cumberland School of Law at Samford University  
Emory University School of Law  
John Bloom, Partnership for Public Health Law  
Johns Hopkins Bloomberg School of Public Health  
National Network of Public Health Institutes  
Ohio State University Michael E. Moritz College of Law and College of Public Health  
Public Health Law Association

Public Health Services and Systems Research  
Safe States  
State University of New York at Buffalo  
Tulane School of Public Health & Tropical Medicine and Tulane University Law School  
University of Minnesota Law School and School of Public Health  
University of Arizona James E. Rogers College of Law  
University of Arkansas for Medical Sciences Fay Boozman College of Public Health  
University of California, Los Angeles School of Law  
University of Florida Levin College of Law  
University of Houston Law School  
University of Maryland School of Law  
University of Michigan School of Public Health  
University of New Mexico School of Law  
University of North Carolina Gillings School of Global Public Health  
William Mitchell College of Law

#### **SUPPORTERS**

The Network for Public Health Law is a national initiative of the Robert Wood Johnson Foundation with direction and technical assistance by the Public Health Law Center at William Mitchell College of Law.

This document was developed by Brooke Nunn, M.P.H./M.S.W., Public Health Program Coordinator, Network for Public Health Law, and Mary Uran, M.P.H., Public Health Program Coordinator, Network for Public Health Law, with assistance from Caty Schmitter, Project Specialist, Network for Public Health Law. The Network for Public Health Law provides information and technical assistance on issues related to public health. The legal information and assistance provided in this document does not constitute legal advice or legal representation. For legal advice, please consult specific legal counsel.



Robert Wood Johnson Foundation

<sup>1</sup> Curran W.J. (1969). Public Health and the Law: Public Health Lawyers. American Journal of Public Health, 59(5): 854-5.

<sup>2</sup> Data only analyzed from survey respondents who indicated that they were employed full-time at the time of the survey