A Push for Public Health

Facing a slew of retirements at a time of burgeoning crises and challenges, the field of public health is ailing. Colleges and universities may have part of the cure, creating new schools and programs designed to meet the need for workers.

On Friday, the Board of Regents of the University System of Maryland is expected to vote to vastly expand the university’s position in the public health arena. The goal is to create two schools of public health, eventually to be merged, that will be based at the system’s Baltimore and College Park campuses. The Department of Public and Community Health at the College Park campus currently offers a master’s of public health degree.

“The primary rationale for the UMB School of Public Health is that the field of public health has become of such importance,” David J. Ramsay, president of the University of Maryland at Baltimore, wrote in a recent letter to the chancellor of the system, William E. Kirwan. “[E]nhancing health in human populations through health promotion and disease and injury prevention at the local, state, national and international levels requires the focus and momentum provided by a school of public health.”

The expansion in Maryland is just one example of a renewed emphasis on the academic discipline of public health in recent years — a field that experts say is in dire straits when it comes to the number of trained professionals needed to address impending health issues in an aging, somewhat obese population with significant levels of poverty. The field encompasses a range of health and social systems and services that are intended to protect and improve health, increase access to health services, combat health disparities and disease, and otherwise improve the overall quality of life for citizens. Public health workers staff federal agencies like the Centers for Disease Control and Prevention, state agencies, and a slew of nonprofit groups.

Many colleges and universities are trying to ratchet up their efforts and attract government and private dollars to improve the nation’s health and promote healthy behaviors. Policy makers, too, have introduced legislation to make the field more attractive to future students.

According to the Council on Education for Public Health, an independent accrediting agency recognized by the U.S. Department of Education, there are now 37 accredited schools of public health and 64 accredited programs in this field nationwide. In the 1980s, there were 27 schools of public health and 13 programs. One more school of public health and two new programs are pending approval at the council’s upcoming meeting next week. Several more institutions have requested information on what it takes to become accredited, according to Laura Rasar King, the council’s executive director.

Rasar King said that the most dramatic spending and growth within the public health field has been in the areas of epidemiology and health services administration, with health education not far behind.

The new University of Maryland effort is intended to ultimately combine components of public health programs that already exist on the College Park campus with the medical programs offered at the Baltimore campus, which houses the university’s professional schools. System officials say that schools of public health have significant advantages in competing for research dollars and top faculty members.

The school of public health at the Baltimore campus “will get the ball rolling in the initial years,” said Ed Fishel, a spokesman for that campus. “In succeeding years, we will work together with College Park to enroll more students and become a leader in this field.” Officials at College Park and at Baltimore hope to achieve separate accreditation for two schools of public health, and combine into one entity in the future, allowing students to attend classes on both campuses. Projections on the number of students expected to be enrolled by 2009 were not readily available.
Health officials say that events occurring in the past several years, including bioterror concerns triggered by the 9/11 attacks, Hurricanes Katrina and Rita, the possibility of a pandemic influenza caused by avian strains and the obesity epidemic highlight the need for such schools and programs.

Research also portends an impending shortage of workers in this field. Officials with the American Public Health Association say that 50 percent of the federal public health work force and 25 percent of the state public health work force will retire in the next five years. The average age of those in the public health work force is 47, seven years older than the average age of the nation’s work force as a whole.

“This attrition will create a critical shortage of workers that cannot be remedied through existing programs,” said Georges C. Benjamin, executive director of the public health association. “The numbers are shocking — any efforts to improve the situation should be applauded.”

Concerns have also been raised about the quality and skill of the public health field in general. A 2003 report from the National Academy of Sciences indicated that there are about 450,000 people employed in salaried public health positions in the U.S., with an additional 2.9 million who volunteer their services. Eighty percent of such officials lack specific public health training, while only 22 percent of chief executives of local health departments have graduate degrees in public health, a number that alarms many in the academic field.

Benjamin said that the federal government has been keen in recent years on increasing funding for health and disaster preparedness programs, which now require more skilled bodies to perform public health jobs. He’s also noticed an increase in the amount of funding from private philanthropists to specific programs and schools in recent years. The Johns Hopkins Bloomberg School of Public Health, for instance, has received upwards of $200 million from New York’s mayor, Michael Bloomberg, in recent years, to support growth and development of programs.

Legislators, too, have focused their efforts on public health recruitment and retention. In 2005, Sens. Chuck Hagel (R-Neb.) and Richard Durbin (D-Ill.) introduced the Public Health Preparedness Workforce Development Act, which is aimed at increasing the pipeline of qualified public health workers at the federal, state, local and tribal levels by offering scholarships to students who enter public health disciplines. Concurrently, the measure encourages current employees to stay in public health jobs by providing loan repayments in exchange for a commitment of a designated number of years of service in public health.

The legislation, which is currently before the Senate Health, Education, Labor, and Pensions Committee, would authorize $35 million a year for scholarships, and $195 million a year for loan repayments. Eighty percent of the funds would be dedicated for placing public health workers at the state and local level. Bonus payments would be available to those who agree to be placed in underserved areas.

“I think it’s great,” Rasar King said of the new developments in the field. “We need people with public health degrees working in every industry you can think of. We’re realizing as a society that it’s more difficult to treat people on an individual by individual basis.”

— Rob Capriccioso

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