

## **Proposed criteria on joint degrees**

### **Background & rationale**

CEPH uses the term “joint degrees” for all programs of study that are presented as allowing students to complete two separate degrees at the same time, regardless of what terminology the university uses for them (e.g., dual degrees, combined degrees, concurrent degrees). Please carefully review the definition of terms that appears at the top of the draft criteria document, as well as definitions of terms that appear within the criteria themselves.

The current accreditation criteria address joint degrees solely through the criteria on degree length (e.g., Criterion D13), rather than in criteria specific to the degree type. These proposed criteria would apply to joint degrees *in addition to* all other relevant criteria. For example, a JD/MPH program would have to address the joint degree criterion Joint.2 as well as all of the criteria that pertain to the MPH.

Available for comment are the following:

- One criterion for bachelor’s to MPH degrees (often called 3+2 programs or accelerated programs)
- One criterion for *all other* joint degrees that involve the MPH
- One criterion for joint degrees that involve public health MS or PhD degrees but not an MPH
- No criterion for “joint degree” programs that involve a public health bachelor’s degree and a second non-public health bachelor’s degree, as these are typically well covered by current criteria and university guidelines for double majors or undergraduate double degrees
- No criterion for joint degrees in SPH that solely involve non-public health degrees (e.g., MSW/MSN), since CEPH’s oversight of these degrees is minimal

The following considerations guided the Council’s deliberations:

- Similar to other disciplines that articulate a prescribed curriculum of study, we are committed to maintaining the integrity of public health training for our primary professional degree, the MPH. The proposed criteria allow us to ensure that students in a joint degree program receive an educational experience comparable to all other students who receive an MPH degree.
- The Council has observed over many years of reviewing joint degree programs that efficiencies or reductions in credits often come from reducing the credits required for the MPH. Joint degrees more rarely achieve credit reductions by applying public health credits to the external degree.

In designing or redesigning joint degrees, public health faculty may discuss with their colleagues in other disciplines whether credits from the MPH degree may be appropriate

to count toward the requirements of the non-MPH degree so that reductions in overall credits for the joint degree can be more bidirectional, rather than simply reducing the credits associated with the MPH.

The proposed criteria *do* allow credit sharing, including up to 12 semester-credits of appropriate external credits to the public health degree, but they provide a framework for considering and documenting the appropriateness of credits from the non-public health degree program that count toward the MPH.

- Other possibilities exist for providing public health training to students who do not wish to complete a plan of study that is equivalent to the 42-credit MPH: certificate programs or other credentials, MS degrees in highly specialized public health fields, etc.
- The Council's primary responsibility is maintaining integrity and quality for the degrees we accredit. We envision that our revised criteria, including the proposed criteria on joint degrees, will prepare MPH and other public health degree graduates for the needs of a 21<sup>st</sup> century workforce by ensuring that all students who receive a degree have completed an appropriate depth and breadth of public health training.