

# Editorial

## Credentialing in Public Health: The Time Has Come

Bernard D. Goldstein

---

The time has come for credentialing in public health. After many years of discussion, task forces, and committees, the National Board of Public Health Examiners (NBPHE) has been formed to develop an examination-based credential for public health, the Certificate in Public Health (CPH).<sup>1</sup> The purpose of the examination is to ensure that graduates of schools and programs of public health accredited by the Council on Education for Public Health (CEPH) have mastered the knowledge and skills relevant to contemporary public health practice. The five major public health organizations that have designated membership on the NBPHE are the American Public Health Association, the Association of Schools of Public Health (ASPH), the Association of State and Territorial Health Officials (ASTHO), the Association for Prevention Teaching and Research, and the National Association of County and City Health Officials. Additional at large members are selected with a particular eye toward diversity, in all of its meanings, and toward including other public health organizations such as the Council of Accredited MPH Programs (CAMP). The 20 board members include seven current or former directors of state or local health departments who, among them, head four of the eight board committees. The President of the NBPHE is Dr Charles Mahan, who is former head of the Florida Department of Health, former dean of the University South Florida School of Public Health, and former president of ASTHO. The board was incorporated in September 2005 and has been preparing this examination and considering the many issues raised by a credentialing process based on core public health knowledge. The 4.5-hour multiple-choice examination based on the core and cross-cutting educational competencies will be given at computer centers during the period August 11–30, 2008. Information and registration materials are available at <http://www.>

[publichealthexam.org/](http://publichealthexam.org/). The deadline for registration is April 30, 2008.

Described below are some of the driving forces leading to the development of the NBPHE and some of the issues that have been raised by the many thoughtful individuals and groups that have been involved in the discussion. Let me emphasize that this invited editorial solely reflects my own views and experience as the first chairperson of the NBPHE. It has not been reviewed by other board members or by any of the organizations involved with the NBPHE. I owe very much to the superb board and staff of the NBPHE, as well the many who have contributed to this process.

At least four trends are contributing to the recognition that it is now time to develop credentialing of graduates of accredited schools and programs of public health. Briefly stated, they are as follows:

1. A substantial increase in the percentage of public health graduates and workers who have no other credential but their public health degree. This is a major change from the past when most also had degrees and credentials in medicine, engineering, nursing, dentistry, law, pharmacy, etc.
2. Rapid growth in the availability of graduate education in public health through the now more than 100 CEPH-accredited programs and schools, as well as through distance education programs. There is no rationale for anyone dedicating themselves to a career in public health not obtaining advanced education at least to the level of a master's degree.

---

**Corresponding Author:** Bernard D. Goldstein, MD, Graduate School of Public Health, University of Pittsburgh, 130 DeSoto St, Pittsburgh, PA 15261.

---

**Bernard D. Goldstein, MD**, is Professor of Environmental and Occupational Health, Graduate School of Public Health, University of Pittsburgh, and Immediate Past Chairperson, National Board of Public Health Examiners. He was the first director of the New Jersey Graduate Program in Public Health and was involved as acting dean in the formation of the New Jersey School of Public Health. From 2001 to 2006, he was dean of the University of Pittsburgh Graduate School of Public Health.

3. Increasing focus on developing relevant public health core and cross-cutting educational competencies. The NBPHE examination will rely on the core and cross-cutting competency processes developed by the ASPH, the Council of Linkages, and others. An impact of the NBPHE will be to provoke continued discussion and improvement of these educational competencies
4. Pervasive societal demand for credentialing and for professional accountability which, whether we like it or not, has substantial implications to the public health workforce. We are almost alone in not having a broad credentialing process.

The sole focus of the NBPHE is on the core and cross-cutting educational competencies central to public health. As chairperson, I frequently have ruled out-of-order discussion by the board of any other credentialing activity. The historic compromise that resulted in the NBPHE means that for the foreseeable future we must remain narrowly focused.

In my view, an exceptionally important impact of the NBPHE will be the enhancement of continuing education in public health spurred by the examination and by recertification. We anticipate that recertification will occur every 10 years through both continuing education and reexamination. Among the continuing education efforts related to the examination is a study guide being prepared by the ASPH (available in January 2008). Other organizations involved with the NBPHE, as well as HRSA-sponsored Public Health Training Centers, are also planning programs to help study for the examination.

Along with other board members, I have been going around the country, speaking about the NBPHE. Of note is that the questions have mostly switched from the “why” questions concerning whether there should be certification in public health to the “what” questions related to the examination content and certification outcome. The response of students at schools and programs has been amazingly positive—particularly as our message is that they should take yet another examination and pay money for the privilege. Students catch on very quickly that if they will ever need to have the

CPH in their career, the best time to take the examination is when the material is freshest.

Some faculty remain unconvinced by the NBPHE concept. Many of them are also opposed to the development of educational competencies. As the NBPHE examination tests for knowledge of the core and cross-cutting educational competencies, the challenge for these faculty is whether to become involved in improving these competencies.

Sadly, the American Medical Association (AMA) has passed a resolution opposing the NBPHE. It was ironic that this resolution was passed almost simultaneously with the release of an Institute of Medicine report noting the decline in public health physicians. There is no basis for the concern expressed by the AMA about “misleading” the public into believing that individuals who are certified in public health are physicians. In my view the most misleading part of the AMA resolution is the implication that public health is solely a medical specialty. Let me emphasize my enormous respect for those physicians who have become board-certified in preventive medicine and public health. They are among the most effective in our field. But there are only 130 slots open each year for residents leading to board certification in preventive medicine and public health—and these do not fill. In contrast, close to 7 500 students matriculate each year at an accredited program or school of public health. Clearly, we cannot depend on the medical board system to solve the major public health infrastructure problems in our country.

In summary, the NBPHE credentialing process is one of many initiatives currently under way to increase the recognition and impact of public health professionals—a central issue for public health locally and globally. Take the test this year and become a charter holder of a CPH.

## REFERENCE

1. Gebbie K, Goldstein, BD, Gregorio DI, et al. The National Board of Public Health Examiners: credentialing public health graduates. *Public Health Rep.* 2007;122(4):435–440.