Executive Summary: Overview

Corona Insights conducted 17 interviews to gather input from external stakeholders of The Colorado School of Public Health. Interviewees have varying levels of public health expertise and represent a range of industries and organizations located both on and off the Anschutz campus.

The goals of this research were to inform, generally, the strategic planning efforts of the school and, specifically, the work of each strategic planning working group (Educational Mission; Strengthen Our Research; Public Health Practice/Service; School Life and Diversity; and School as a Unit). This report has been organized to be most useful for the working groups by illuminating:

- The most promising and actionable opportunities for the Colorado School of Public Health
- The most significant threats for the Colorado School of Public Health
- Possible areas of focus for the school in the future, including potential public health challenges to address
- Ways to create or improve collaborations and partnerships
- What the future could and/or should hold for the public health student
- How specific stakeholder viewpoints shed light on the issues above

As the Colorado School of Public Health aims to build on its remarkable 10-year start by charting a path to further mission impact and relevance, stakeholders provided insight on a vast range of relevant topics, issues, and perspectives. This report is organized around the relevant findings and insights gleaned from each question asked during the interviews.
There are opportunities for the Colorado School of Public Health to be seen as more of a resource for Colorado for public health-related issues, namely in educating the public, impacting state and local policy decisions, providing public health expertise and training to communities in need, and developing the future and current public health workforce of Colorado.

There are a substantial number of public health issues and challenges that the School of Public Health might consider as areas of focus and a significant set of potential partners and collaborators who want to work with the School of Public Health to address these wide-ranging public health issues and challenges. With the appetite for collaboration, however, comes the challenge of deciding which issues/challenges to focus on.

Advanced communication and collaboration was among the most frequently-selected public health skill students should be prepared with, demonstrating the potential for the school and its students to play a critical role in both translating public health research to impact public policy and in collaborating with other disciplines and industries to address public health issues.

Translating and communicating the significance of public health research to the public and to policy-makers is a key role interviewees see for the Colorado School of Public Health in the future.

With respect to generating more and deeper collaborations and partnerships with organizations working on similar public health issues, the biggest opportunity for improving partnerships lies in strengthening linkages between practicum or curriculum and actual public health work.
Detailed Findings
Most important public health challenges

Interviewees were asked to identify the most important public health challenges that should be an area of focus for the Colorado School of Public Health. Responses were organized around global, national, and state/local public health challenges.
The most frequently mentioned **global public health challenge** was **climate change and its impacts on public health**, with interviewees pointing to air pollution, radiation exposure, and extreme heat and fires as examples of climate change’s impact on public health.

> We could identify ways to increase populations’ resilience to climate change.

Another global public health challenge for the school to consider as an area of focus is **population-based prevention research**, with one interviewee describing this as an “increased focus on basic and applied public health research for important diseases in the region and globally.”

> Being victims of our own success – there is the risk of regression in the work we’ve done in recent years. Population-based prevention methods tend to be forgotten about once they are working. Inconsistency here is always a risk.

Interviewees also brought up several issues and challenges that **apply to the field of public health as a whole**, including **food safety, knowing how best to make an impact on populations, and cancer prevention and control**.

> Knowing what we can do to make a significant impact on the population as we are often unable to maintain interest and funding to do so.
Interviewees mentioned a diverse set of national public health issues and challenges, with mental health and the often-related issue of substance abuse (including opioids) noted as one of the most significant public health challenges.

Mental health is the single most underfunded health need in our society today.

Chronic and emerging infectious diseases — including researching the early markers of chronic diseases like diabetes, lung disease, and arthritis — were also suggested frequently as potential areas of focus for the School of Public Health.

There are issues related to disease development, including the early markers of disease that the school could be a part of. Not just cancer but lots of chronic diseases like diabetes, lung diseases, arthritis.

Other national public health issues and challenges included vaccination (especially related to the measles outbreak); environmental health sciences; the social determinants of health; smoking; violence and prevention; and obesity, poor nutrition, and exercise.

Data are pretty clear. For a large segment of the population, those social determinants have a major impact on their ability to access health and be healthy. In the last 2 weeks, I’ve had at least 5 patients for whom the medical care that they needed was pretty easy to identify but, because of their social circumstances, the services were almost impossible to deliver.”
Interviewees also noted an array of state and local public health challenges that the Colorado School of Public Health would be particularly well-positioned to address. On the state/local level, mental health was again emphasized by interviewees as a key public health challenge in Colorado.

A troubling suicide rate and a relatively high level of opiate abuse (especially in rural Colorado) illustrate the extent of mental health issues in the Colorado community.

More generally, several interviewees mentioned the importance of behavioral health issues (including substance abuse and mental health challenges) as an area of focus for the school to consider. Specifically, one interviewee noted that the school could help establish behavioral health practices that lead to better health outcomes.

Doing more nudging in our state and population to continue to nudge towards more healthy practices that don’t cost a lot and are more behavioral (ex: wearing a seatbelt, exercising, etc.).

Other state and local public health challenges mentioned by interviewees included oral health, addressing health disparities and inequity in access to health care, and researching toxins that are specific to Colorado industries and communities.

On the local level, understanding the geography of Colorado and the specific toxins that are part of the agricultural, mining and oil communities that individuals are exposed to.
Most important public health skills

From a list of 9 choices, interviewees selected the 3 most important public health skills that the school should prepare all students with.
Most important public health skills

- Core public health subject matter expertise in their chosen discipline

  - A given – may change over the course of a career – but having an area of expertise makes it easier to switch later.
  - They’ve got to have the basics.
  - Training folks in the discipline is key.

- Advanced communication and collaboration skills

  - Most of the important issues are going to involve bringing teams together across disciplines and these skills are essential for that.
  - A lot of talented young people with a lot of potential don’t succeed because they don’t collaborate. We train a lot of people who have a lot of knowledge, but when it comes to implementing and collaborating with people, they fail. That really distinguishes people who will really succeed in their field versus those just doing their job.

- Practical experience in the field

  - Important for students to get out and see what the options are in the public health field and see what they want to learn about.

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<td>Advanced communication and collaboration skills</td>
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<td>Practical experience in the field</td>
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<td>Public health policy development</td>
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<td>Advanced quantitative skills</td>
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<td>A robust understanding of the social determinants of health</td>
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<td>Practical experience with public health research</td>
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<td>Advanced leadership and management skills</td>
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<tr>
<td>Other (“how to merge with other fields to be more impactful”)</td>
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Being a better partner

From a list of 6 choices, interviewees selected the 2 most important ways in which the Colorado School of Public Health could be a better partner.
Being a better partner

**Strengthen linkages between practicum or curriculum and your work**

We have a big interprofessional education curriculum across disciplines – the School of Public Health is notably absent from those interactions.

We’re one of the largest employers of public health employees in the state – if students have experience working with us, that is practical and useful for us and for the School of Public Health.

**Create opportunities for training exchanges**

We have four clinics run by nurse practitioners; there are great needs and disparities in these communities. The School of Public Health could be a part of these clinics, as they aren’t yet. Put students in these clinics to assess communities and find needs.

This could be community work, public health work and research, or in clinical practice.

I think it would be great to have stronger collaborations across departments. Now, team teaching happens for undergraduates. There are some individual faculty collaborations, but there could be more.

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**Q3 Selections**

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External Stakeholder Interviews Report
Being a better partner

Being more engaged in collaborative research. Everyone brings their expertise to bear on a particular problem. The more collaborative research, the more of a partner they would be to the whole of the University of Colorado.

Reaching the public in ways that we currently aren’t.

They could talk more purposely about the role and action of philanthropy in areas that intersect with public health. Academics look for funding. Innovation and risk-taking are unique to philanthropy – these are hard to do in government and hard to get paid for in academia. School has to have a better understanding of philanthropy partnerships.

There’s a lack of resources (at the School of Public Health). With resources, it is easy to recruit collaborators from other schools and other centers. Without resources, it is hard.

1. Developing research collaborations and being an important partner. The key is (given it is a new school and embedded in the campus) finding the opportunity to build connections to medical, dental, nursing schools, etc.

2. Collaboration around evidence-based public health policy. One example of that – the School of Public Health has partnered with the Children’s Hospital to understand community health needs. Really important to interact with campus partners.

Better communication in general, including research findings. Partnering with us on emerging topics, like vaping, would be a fun way for us to collaborate together. Offering opportunities for partnerships on emerging public health issues.

Other

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External Stakeholder Interviews Report
Primary roles for the Colorado SPH

Interviewees were asked to name and describe the primary role(s) they would like the Colorado School of Public Health to fulfill.

Interviewees pointed to various roles the School of Public Health could play in the future, with responses generally coalescing around three areas core to the mission of the school: education, research, and service.
Primary roles - Education

On the education front, interviewees emphasized the importance of developing the future public health workforce, with some focusing on the critical role that the school can play in this endeavor in Colorado and the Mountain West region.

Specifically, interviewees saw opportunities for workforce development both in terms of educating students new to public health and also strengthening the current workforce by offering training and education to those already working in the public health space in Colorado.

“...There wasn’t a school of public health here for a long time. A lot of the people who are current employees in Colorado aren’t people with a lot of training and experience. As a supervisor, I want to be able to tell my employees – hey, there’s a class/training at the School of Public Health, you should go take this for some more formal training.

“...To educate and train health professionals who can work across disciplines to address the major public health issues facing society.

In terms of public education, stakeholders also considered how the school can be more of a force for drawing the public’s attention to public health challenges and helping them understand them.

“...How can the school be a force in public awareness, in educating individual citizens about how to think about public health in the state of Colorado and beyond?
Primary roles - Research

Translating or communicating public health research in a way that is meaningful and understandable to the public and to policy-makers was a primary theme amongst interviewees. Stakeholders saw the opportunity for the School of Public Health to be a research authority in specific public health areas and noted the importance of partnering with institutions that are responsible for policy-making.

Equally important is partnering with those entities that are responsible for decision making, whether they are governments, foundations, or others. Governments are not disjointed from the people in a democracy. The school can be useful in this arena by bringing science and expertise to decision-makers to make good, solid decisions.

The school should be establishing itself as one of the premiere institutions that does this sort of relevant research and where people can interface with this information. Be known as an institution that partners with institutions that need these resources and can be partnered with for implementation.

Engaging in collaborative research was also mentioned as a vital role the school can play. Stakeholders considered possibilities to partner with the school on emerging public health issues as well as the constraints on current collaborations.

We need to be more engaging in how we could work together. I would appreciate if they reached out to start meeting and put a plan in place for how the colleges could work together, including introductions between faculties and opportunities to introduce newer faculty. How can we collaborate?

A lot of times our partnerships are one-sided. We’re happy to do it, but could do more if the school had resources that could actually drive the direction of each project more.

One difficulty for the School of Public Health is that they have to focus on both research collaboration and on independent research simultaneously.
Primary roles - Service

Stakeholders also spoke extensively about the service-focused role the school can serve, noting the many dimensions involved in public health service including professional service, community service, and serving as a thought leader. One interviewee explained service as “service to the profession, service to the community, and serving in a leadership role on issues that matter to community writ large.”

(Service is) service to the profession, service to the community, and serving in a leadership role on issues that matter to community writ large.

Interviewees considered the various ways in which the school could expand its role in service, including being more of a resource for the state for public health-related activities, offering consulting services to counties in need of public health expertise and training, and providing trained public health experts to the communities and organizations that are in desperate need of services.

Why can’t the School of Public Health have a consulting service for counties and others who need an outside voice for solving these public health issues? Can the school provide these services, likely for a fee? Be thought of as a go-to for those sorts of things.
Most promising and actionable opportunities

Interviewees offered their thoughts on the most promising and actionable opportunities for the Colorado School of Public Health. Responses revolved around various internal and external opportunities as well as opportunities in research and collaboration.

**Internal** opportunities are those particular to the Colorado SPH. **External** opportunities apply generally to the field of public health.
Most promising and actionable **internal** opportunities

- Interviewees suggested that there are opportunities to **increase the impact of the School of Public Health and to build on its strengths**. Interviewees noted several strengths of the school, including:
  > Strong leadership; great collaborative partners around the state and the world; and great faculty with research funding

- Stakeholders considered **opportunities to deepen the mission-relevant impact of the school**, suggesting the school focus on building a more diverse public health workforce in Colorado, working with public health professionals to develop a practically-relevant public health curriculum, and increasing access to rural students.

  "Building a more diverse workforce in public health. We have a better workforce now but we need to mirror the community that we serve, especially low-income communities. Graduates should come with a professional experience that allows them to take leadership positions."

  "Increasing access to rural students by continuing to improve and make it easy to access what the school has to offer in a distance learning or remote sort of way. Areas like Durango, Grand Junction, and other population centers in Western Colorado are a few areas in need."

- Interviewees offered suggestions related to several **opportunities to strengthen and grow the School of Public Health**. Interviewees mentioned establishing a Bachelor of Arts program pipeline (perhaps at CSU), carefully considering MPH concentrations to ensure relevance, donor development, and growing the program in Colorado.

  "We have an opportunity to grow the program in the state of Colorado, as it has been a little flat recently. There is a need to tweak the business model to grow the program"
Stakeholders coalesced around the notion that the School of Public Health has a significant opportunity to play a bigger role in influencing public policy, noting issues such as gun violence, environmental health policy, and the social determinants of health as public health issues where the school could help influence relevant policy.

This issue of promoting policy implications of scientific findings is something the SPH could be particularly good at and provide a unique area of expertise in.

Interviewees also saw an opportunity for the school to be more active in promoting public awareness of the school and of public health in general. There’s an opportunity for the school to be even more of a thought leader.

Think about op-eds and develop a communications plan to raise the voice and face of the school. People need to know what public health does, it cannot be secret.

Several interviewees reflected on different educational foci the school could integrate in the future to address public health challenges, including emphasizing the technical aspects of public health (the sciences), modernizing public health surveillance systems, and translating public health research into policy action.

Policy is really the most practical area where we have the most bang for our buck. Health policy was huge, for example, for decreasing smoking rates. Seatbelt laws are another example – more cars on road but less deaths. Applying health knowledge to know where to focus strategic efforts is an important skill to have.
Most promising and actionable research opportunities

Interviewees mentioned actionable research opportunities on a diverse set of public health issues, including:

- The social determinants of health
- Climate change and its impact on communities
- Emerging infectious diseases
- Bioinformatics
- Behavioral health in public health (addictions, depression, suicide, opioids, etc.)
- Cancer prevention and control
- Learning from Colorado’s health outcomes – what are we doing right?

“Colorado is one of the healthiest states in the country. We always approach things from a negative perspective, but we are one of the leanest states in the country, so what are we doing right? How do we export what we’re doing to others? How do we focus on the positives?”
On-campus partners and collaborators saw **possibilities to deepen relationships with the school:**

- There needs to be well-defined linkages between the School of Public Health and the rest of the campus. Not sure what they look like, but they almost need to be well-defined areas that foster interaction and integration between outstanding scientists and programs at the School of Public Health and investigative groups across campus.

- Training and education programs that could foster well-defined linkages between the School of Public Health and the rest of campus

- Partner effectively with other schools on the campus in policy development (pharmacy, medicine, psychiatry). Healthcare is a team sport, meaning we need multidisciplinary teams to address issues in the state and region – the School of Public Health could be a leader in this.

- I would like to partner with the school to help us develop a Bachelor of Arts program here at CSU that would be a feeder into the School of Public Health.

**Suggestions for off-campus opportunities for greater collaboration and partnerships** revolved around training exchanges, being more inclusive in scholarship by inviting others outside of the school to be a part of public health research, developing relationships with philanthropists in Denver, and offering public health expertise to industries (like agriculture, manufacturing) that need this perspective.

- We are well into an era where health expertise is needed everywhere. I just believe that public health is one of the most important domains of health generally and the more expertise we can deliver to the state in that arena, the better we will all be down the road. Great entrance into a variety of careers, too.
Most significant threats

Interviewees identified the most significant threats for the Colorado School of Public Health. Interviewees identified threats that revolved around three areas: funding/financial uncertainty, threats to the School of Public Health specifically, and threats to the field of public health generally.
Funding and financial uncertainty were, by far, the most frequently mentioned threats by interviewees. Interviewees noted several factors to consider with this threat, including the lack of state funding, the school’s high indirect rate, ongoing pressure on federal research dollars, balancing tuition with appropriate support for faculty, and the limitations of the school’s tuition model.

Related to that, a lot of the funding and mechanisms that are being applied now are “keep the lights on,” incremental funding – we have to be innovative and on the front of the curve of public health. You can’t really create and take chances with this sort of funding.

They have an economic model that makes it challenging to support a vibrant research enterprise. Turns out research is an expensive hobby.

FUNDING! Tuition model is good, but this requires having the right number of students and revenue streams to make it work. Colorado is a state that doesn’t support higher learning institutions in the way it should. This forces us into some avenues that are more difficult.

They have a really high indirect rate – if there’s a competing institution where it is cheaper, granters/funders may want to go there. That makes funding opportunities a bit harder and more competitive. Funders may feel they are getting more bang for their buck with a 20% vs 50% rate. I would consider that a threat to them.
Most significant threats – Public health as a field

- Interviewees identified a set of threats to public health as a field, including isolation, a range of political threats, the financial attractiveness of the profession, and the lack of public and legislative awareness of why public health matters.

- Political threats to the School of Public Health were primarily related to the difficulties involved in persuading the public to accept the validity of public health research and to the potential for public health to be de-emphasized in the policy arena due to complacency and lack of interest in public health.

  - The apparent failures of the community to really be able to convince the citizens in our society to believe us when we put out scientific announcements, things we know we have great evidence for, but the pushback can be withering (example – vaccines and clean water). People not really understanding what the science really means.

- As one interviewee put it, public health can’t be a victim of its own success by continuing to be the “best kept secret.” When public health practitioners are successful, people often don’t notice. Interviewees spoke to the importance of helping the general public and our legislators understand what public health is and why it matters.

  - There’s the potential for public health to be de-emphasized in policy arena. Why do we need public health and why does it matter anyway?

  - The general public and our legislators don’t understand what public health practitioners do and what an important role public health can play in our society and in policy formation.
Interviewees noted several threats that are specific to the Colorado School of Public Health, including isolation on campus, a saturated market in the region for public health-trained students, the need for a freestanding identity, and losing high-quality faculty due to an inability to reward faculty with incentives for excellence.

In terms of the school’s position on the Anschutz campus, there is a threat of becoming isolated from other schools on campus while also juggling the challenge of maintaining and integrating three campuses.

Isolation on campus – are they fully engaged with other schools? Does the School of Public Health have the credibility to guarantee the role and the value of public health in other disciplines?

The School of Public Health is more matrixed than a lot of schools of public health. Building a freestanding identity is very important. All the public health people I interact with are heavily involved in the Cancer Center, department of medicine, etc.. It would be better to build a core within the SPH of people who set the agenda and determine the novel areas to pursue, the sciences they want, and the programs they need instead of finding a collaborator and negotiating.

Interviewees noted that growth could be a threat in the sense of being dependent on a specific number of graduates and having to balance the quality of students and faculty with tuition revenue.

Many students that come from out of state want to stay – people want Colorado jobs and we need to be concerned if we are close to saturating the regional market with public health workers.

Not rewarding faculty with incentives for excellence. I think of a faculty member in some ways as being a communist – with tenure, no matter what I do I get the same pay. Not that incentive is all about pay, but thinking of ways to reward faculty who are meeting objectives for the school. Another potential threat because if you don’t have these things in place, you’ll start to lose your highest-quality faculty.
Stakeholder viewpoints

Interviewees were asked a question related to their particular relationship with the Colorado School of Public Health. Responses were organized according to three stakeholder groups:

- Collaborators, partners, and leaders who are part of the University of Colorado
- Collaborators, partners, and leaders who operate outside of the University of Colorado
- Stakeholders who (currently or historically) are part of the internal Colorado School of Public Health (including founders, Advisory Board members, and school leadership)
Collaborators, partners, and leaders who are part of the University of Colorado

Specific questions were posed to stakeholders depending on their relationship to the Colorado School of Public Health. For this group of stakeholders, questions revolved around:

> Missed opportunities for collaboration and evaluation of current collaborations
> Possibilities for strengthening ties and encouraging collaboration, including new mechanisms for interaction
> New roles for the school and ways to raise the profile of the School of Public Health on campus and beyond

Missed opportunities for collaboration & evaluation of current collaborations

“ The most likely reason we haven’t had things move forward relates to time and people. It is not that we can’t get along, we just need individual meetings where we brainstorm opportunities and set a course forward.

“ I’d give us a B. I would say the nexus between the school of medicine and the School of Public Health related to Cancer Center is working better, particularly around cancer prevention programs.

“ (Our current collaborations are) functioning reasonably well, but could be better. Challenges in it – continuity of faculty and teaching various courses.

“ Expanding a 4 + 1 degree where students apply to go into the MPH from junior year.

“ It is functioning well and I want this to be functioning really well. There are four ways we are going to attack cancer – prevention, earlier detection, better treatment, and multidisciplinary approaches. Two of those – the first two – are public health.
Collaborators, partners, and leaders who are part of the University of Colorado

Possibilities for strengthening ties and encouraging collaboration, including new mechanisms for interaction

There could be more interaction around training – we could provide more support for your training programs. Your trainees could interact more effectively with a number of research programs in the Department of Medicine. There could be better training in clinical sites of practice – your students would understand issues they are studying from a more clinical level.

Educational research – lots of opportunities that we could be powerful together. I don’t know how many research faculty they have. In nursing – we need more scholarship and science in our school. The School of Public Health could be a great supporter in collaborating in mentorship and creating clusters of scientists that could be powerful together.

Considering bioinformatics and whether that is going to be just school of medicine or shared (with the School of Public Health). Were revising our medical curriculum and trying to figure out how to include public health.

In his role, he has set up pilot grants that encourage cross-department collaboration. Could we do set up pilot grants that encourage cross-department collaboration with the School of Public Health?

Cross-school collaborative research – there’s a need for some translational/ basic science work to connect to public health outcomes for our folks in pharmaceutical outcomes that get to take the public health courses and trainings. We need to figure out how to fund/incentivize this sort of interactions for research projects like this.

Putting resources in areas of mutual interest. We are in the process of recruiting a community engaged outreach person and we are investing $2 million in this, so we are definitely moving in this direction.
Collaborators, partners, and leaders who are part of the University of Colorado

New roles for the school & ways to raise the profile of the School of Public Health on campus and beyond

- We could be more aggressive in working on state policy than we have been.
- If you look at what interventions would have the most impact on the health of the American public, there are robust data sets that indicate that we know the answers to those questions but people don’t actually do those behaviors (wear seatbelt, exercise, etc.) We need to be doing a better job of getting people to do the things we know work. **We need to pull in people from outside our field to help us convince the public.**
- Other schools of public health are really big on infectious diseases – there is an opportunity here with a relevant global need. This would also strengthen interactions with CSU – infectious diseases from veterinary view.
- Hiring Jon Samet was a long way towards that (raising profile of school) since he has that reputation. Getting some real marketing endeavors going – they are doing some but could be doing a lot more. Helping people understand what the Anschutz medical campus really is.
- Related to research and training, there’s an opportunity to connect strategic planning to broader communication efforts, including joint seminars, conferences, other ways that people can get together.
Collaborators, partners, and leaders who operate outside of the University of Colorado

- Specific questions were posed to stakeholders depending on their relationship to the Colorado School of Public Health. For this group of stakeholders, questions revolved around:
  - How the School of Public Health could better support the mission of outside organizations like the CDPHE and Denver Public Health
  - Evaluation of current training programs
  - Evaluation of current collaborations and opportunities to strengthen/expand collaborations

- How the School of Public Health could better support the mission of outside organizations like the CDPHE and Denver Public Health
  
  "Considering emerging public health issues and how to leverage together. How do we work with each other so we are spreading the same message? How can we leverage the school’s relationships and capabilities to enhance the public health of Colorado?"

  "The school could better support our mission by helping us have a greater level of access to expertise at the school so we can do our own projects better and collaborate better. We need money for administrative funds, as we could host more trainees if we had more funds. Staff work is a significant cost."
Collaborators, partners, and leaders who operate outside of the University of Colorado

Evaluation of current collaborations and training programs as well as opportunities to strengthen/expand collaborations

They’re a great start – they could be strengthened by better listening to the needs of public health professionals in the field in terms of what they offer. The school has a lot of great classes that are spot-on and other times they have classes that don’t really fit what our state and local professionals need. Curriculum needs to be practical and useful to the public health field in Colorado.

Beyond case competitions, if students are working on a public health issue, could we offer opportunities for these students to continue working on these issues? There are opportunities to extend and deepen the linkages and relationships we already have.

We are happy to host students, but we have to limit that as it could be a source of frustration. We have to have the right circumstances and people to provide the best experience. Our program people are funded by grants, so we can’t distract them with trainees – we look for win-wins.

The training programs that I know about are good programs.
Stakeholders who (currently or historically) are part of the internal Colorado School of Public Health

Specific questions were posed to stakeholders depending on their relationship to the Colorado School of Public Health. For this group of stakeholders, questions revolved around:

- Evaluating the School of Public Health at the 10-year mark, including missed opportunities and interactions with other schools and departments
- The direction the school should consider over the next 5-10 years, including ways to raise the visibility of the Colorado School of Public Health and what else the school could be doing to fulfill its mission
- Advancing public health in the state and region

Evaluating the School of Public Health at the 10-year mark, including missed opportunities and interactions with other schools and departments

The school has made phenomenal progress as a credible training institution and is significant part of the health enterprise at the University of Colorado. Of all the schools of public health I'm aware of, none of the ones I'm aware of have come online so fast and efficiently.

Missed opportunity for more direct community engagement as the neutral expert in the room – bringing science to the room without having a dog in the fight otherwise.

Missed opportunity to be a more of a resource for state and local health departments. That expertise is there and there are examples of when they have collaborated but I don’t think they have built themselves as a resource as much as they should. That gets back to notion of how faculty have to devote their time – research pays the bills. There’s no resource to compensate for that. How do you have a different funding mechanism where faculty are rewarded for direct community work?
Stakeholders who (currently or historically) are part of the internal Colorado School of Public Health

- The direction the school should consider over the next 5-10 years, including ways to raise the visibility of the Colorado School of Public Health and what else the school could be doing to fulfill its mission
  - Identify appropriate faculty that can work with partners to produce training activities.
  - The one thing that I would suggest that we might look to upgrade – how do we get more cross-institutional research projects going? To do this, we would need more seed grants to fund these, to knit the faculty together a bit better. I know the School of Public Health’s deans have been dedicated to this, but putting even more resources towards this would be fun.
  - I would say being proactive about finding research opportunities is what is most top of mind for me.
  - There might be more training opportunities for mini-courses and certificate programs that are not MPH degrees but could be useful for students in other disciplines.

- Advancing public health in the state and region
  - Reaching out to areas of the state or the region where the school’s resources are really needed – where there are others who need training and expertise in public health. Trying to reach all of the corners of the region – up to individuals and communities and people to understand that. Important to be making those resources accessible.
  - Reaching out to public health professionals in the state to ask how we could more involved with what they’re doing. Reaching out in a tactical/strategic way to identify both research opportunities and placement opportunities for students of various levels. Our faculty could offer a broader range of opportunities.
  - Help broaden the definition of health and highlight inequities
  - Translational public health research – taking public health research and making sure it is implemented.
Appendix: Methodology

Research mode & recruiting
- Interviews were conducted over the phone and lasted approximately 30 minutes.
- Corona Insights was provided a list of potential interviewees by the Colorado School of Public Health.
- Interviewees were selected to reflect various stakeholder groups.

Interview guide
- The interview guide was designed by Corona Insights, with stakeholder-specific questions generated and distributed to stakeholders by Dean Jon Samet.

Execution
- 17 telephone interviews were conducted between January – February 2019.

Analysis
- Responses from interviewees were compiled and analyzed in aggregate, by question and by stakeholder type.
Appendix: Interviewee List

- Bill Burman, Denver Public Health
- Chris Wiant, Caring for Colorado Foundation
- David Schwartz, CU Anschutz – Department of Medicine
- Denise Kassebaum, CU Anschutz – School of Dental Medicine
- Donald Elliman, CU Anschutz - Chancellor
- Elias Provencio-Vasquez, CU Anschutz – College of Nursing
- John Reilly, CU Anschutz – Vice Chancellor for the Office of Health Affairs
- Jon Campbell, CU Anschutz – Skaggs School of Pharmacy
- Karen McNeil-Miller, Colorado Health Foundation
- Ned Calonge, Colorado Trust
- Pamela Jansma, University of Colorado Denver – College of Liberal Arts and Sciences
- Richard Hamman, Colorado School of Public Health
- Richard Schulick, CU Anschutz – Cancer Center
- Rick Miranda, Colorado State University
- Roderick Nairn, CU Anschutz - Provost
- Stephen Daniels, CU Anschutz – School of Medicine
- Tista Ghosh, Colorado Department of Public Health and Environment
Our founder named the company Corona because the word means “light.” It’s the knowledge that surrounds and illuminates an issue; exactly what we provide. Our firm’s mission is to provide accurate and unbiased information and counsel to decision makers. We provide market research, evaluation, and strategic consulting for organizations both small and large.

Learn more at www.CoronaInsights.com
Date of Interview: 4/2/2019

To illuminate the viewpoint of those in the northern Colorado public health community, this addendum to the Stakeholder Interviews Report includes the key takeaways and insights from an additional interview conducted with Mark Wallace, Executive Director of the Weld County Department of Public Health & Environment. The sections of this document correspond to the organizing framework used in the full report.

The most promising and actionable opportunities for the Colorado School of Public Health

1. Continuing to strengthen the field of public health by communicating what the practice of public health is around the state and by preparing students who have the necessary core competencies to hit the ground running in public health practice right after they graduate.
2. Playing a prominent role in how Colorado defines the fundamentals of public health. If we know we have 18 core areas we're focusing on as Colorado public health practitioners, how is this reflected in the school’s curriculum? How do we take back our understanding of core competencies and share it with the faculty?
3. Public health organizations like ours have a tremendous amount of data. How could we be in conversation with the school to provide a different analytical lens that would allow us to tap into the enormous amount of data we have in public health practice and figure out how to benefit both sides?

The most significant threats for the Colorado School of Public Health

1. Are we drawing in the talent we are going to need to succeed in public health? There’s a need to make the school more affordable, as a lot of community folks who have a different lived experience than the traditional public health student who will strengthen the school simply can’t afford it. If we don’t make it accessible to a much broader representation of a workforce, I worry about the school’s ability to secure funding.
2. How do we continue to create an interest in public health when it is really hard to describe?
3. There’s a challenge for academia in general in that research can be provocative but it can also be disruptive. How do we go connect research more to its practical application? How does the school look for a research opportunity to go beyond a publication? If it is meant to have an impact in the field, it should be considered in conversations with policy makers, practitioners, community members, etc.

Possible areas of focus for the school in the future

- As the director of a local public health agency, the #1 thing for us is that we need to be certain that the formal training students receive and the core competencies they leave with match the deliverables we have in our everyday work.
- We are looking to the Colorado School of Public Health to inform us about the practical and policy implications of research. When a student or professor publishes research, we have to figure out how to make that work in practice. We should be having rounds of conversations between policy makers, practitioners, and the school to understand what a piece means in practice and in policy.
Ways to create or improve collaborations and partnerships

- As far as the desired role of the Colorado School of Public Health goes, we need the school primarily to develop the public health workforce. We need them to be developing a robust, competent workforce that can fill the day to day needs of public health practice. We also need the school to be developing the current public health workforce by providing education and training opportunities on the fundamentals of public health to those already working in the field.
- In terms of ways in which the school could be a better partner or collaborator, it is most important that the school…
  o Strengthen linkages between practicum or curriculum and your work
  o Better communicate what is happening at the school and better listen to the needs of our organization. We need to strengthen communication between practice and academia to get on the same page about what “practical experience” means. Public health practice needs to inform curriculum and vice versa.

What the future could and/or should hold for the public health student

- Regarding the skills public health students need now and into the future, it is critical that students have…
  o Core public health subject matter expertise in their chosen discipline
  o Practical experience in the field
  o Advanced quantitative skills + qualitative research skills + analysis
- Communication and collaboration are also key to what we do, as we can’t own public health in only public health agencies. We have to rely on a myriad of public agencies to create the outcomes that we want. If you can’t communicate our role and the roles of others, you won’t get much done in public health.

Specific to Northern Colorado

- We’ve been talking with people in Colorado about internships, training experiences, opportunities, etc. to understand how the workforce needs related to public health are different for northern Colorado.
  o In this area, there is a tremendous opportunity for students to get a lot of exposure to community-based programming. Something unique about northern Colorado is that students and graduates get an opportunity to come into a tightly knit, collaborative group for a much tighter and more genuine community-based experience.
  o There are also opportunities for students to find their way into public health practice without working necessarily for a public health organization like mine. Students, for instance, might work to address homelessness while working at a housing public agency here.
- The school should maintain its position as a regional institution by ensuring UNC and CSU have equal emphasis. Moving forward, how do we avoid losing the ability for this collaboration to be successful? How do we avoid the mothership from swallowing up everything? The entry points into the school and profession are benefited by having different campuses, as those who find their way in through CSU are different from those who find their way in through UNC and Denver.
Date of Interview: 4/30/2019

To illuminate the viewpoint of those in the northern Colorado public health community, this addendum to the Stakeholder Interviews Report includes the key takeaways and insights from an additional interview conducted with Linda Black, Associate Provost and Dean at the University of Northern Colorado. The sections of this document correspond to the organizing framework used in the full report.

The most promising and actionable opportunities for the Colorado School of Public Health

1. Taking research and practice findings out into the community across the state. This endeavor could lead to additional funding opportunities as well as opportunities for students to participate in this work in relevant areas such as native health.
2. Allowing for more social activism in the school to talk about health care inequities and disparities.
3. Playing a unifying or integrating role across other disciplines; serving as cultural ambassadors to get people across disciplines together.
4. Stabilizing funding through endowments and enrollments.

The most significant threats for the Colorado School of Public Health

1. Adequate support for students, as tuition is pretty high. Being able to offer discounts or scholarships is key to students being able to afford ColoradoSPH.
2. Although this is not currently my experience with the Dean’s leadership, it is possible that the school could fragment into separate campuses if we are not careful.
3. If we don’t adapt pedagogy to today’s student, we may become less relevant or less interesting.
   a. A related challenge is in curriculum delivery. Students today want online, but don’t want to sit on the stage at graduation. They want learning to be more active and applied. The education is just as rigorous today, but students have different preferences. The scientific method matters, and they need to understand that, but does it HAVE to be in a 3-hour class?

Possible areas of focus for the school in the future

- Certainly, community behavioral health. Related to that are the areas of clinical mental health, mental wellness, and school-based wellness for youth. The intersection(s) of public health and environmental science are also important (examples: hydrology, oil and gas).
- ColoradoSPH should also be a leader in the state in translational research. For instance, taking the findings of research and talking about the impact on air quality for Coloradoans. It is important to be able to have a regular process of communicating to the public about what this research means. Also, providing opportunities for public to further this research with us.
- The policy piece is also critical for ColoradoSPH. For example, the school could lead and partner with the school counseling program on the impacts of school violence or the impact of opioids on kids, families, and schools.
Ways to create or improve collaborations and partnerships

- **Strengthen linkages between practicum or curriculum and your work**: This is important because we have 3 very different campuses. Where are the areas of connection? Each campus has a very different feel, but important to for there to be value and respect for multiple forms of knowledge and curriculum. It is at times tough to be the smallest of the 3 institutions.

- **Create opportunities for training exchanges**: Important that this happens for both faculty and students. We are spread out (geographically) across the front range and it can be hard to get us there and vice versa.

- **Being open to more partnerships**, especially those that allow for more opportunities to integrate with other disciplines. For example, are we looking at partnership opportunities between ColoradoSPH and audiology?

- **Better communicating what we do to elevate the profile of the school within the state**. Critical for us to consider “what is our presence on the Western Slope? How are we disseminating info? How are we impacting offices of public health across the state?”

What the future could and/or should hold for the public health student

- **Core public health subject matter expertise in their chosen discipline**: This is critical, as it is the foundation on which everything else is built. Integral to translating research and being able to talk to communities about subject matter from expert point of view.

- **Advanced communication and collaboration skills**: Being able to understand not only the content of what you want to communicate but being able to do some perspective taking of what your listeners are going to hear. Knowing how to change your language for different audiences. Communicating across multiple platforms is important as well.

- **Practical experience in the field**: In public health, the application matters so much; this is the value of field-based practicums. **This skill is most important for undergraduates.**

- **Advanced leadership and management skills**: **This skill is most important for graduate students.**

- As a field, public health has to find a way to communicate to today’s undergrad. Do they know what public health means? **It is important to make the degree more focused on outcomes as this would attract more students.** Graduate students, for example, are interested in how they will be of service, not the name of their degree.

Specific to University of Northern Colorado

At UNC, it is going to be important for the new president and provost to make a firm commitment to the ColoradoSPH. At UNC, we have to be **able to show up as a partner on par with the other two campuses.** The Interinstitutional Steering Committee is **useful for these efforts as it helps make sure we are interacting and deepening our relationships.**