Summary Report: Brand Focus Groups

January 2016
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Background

In November – December 2015, the University of Minnesota School of Public Health (SPH) convened focus groups to understand perceptions of SPH, and how best to convey the school’s impacts and strengths in a more powerful and unified way. The focus groups explored internal and external perceptions of the school, gathered insight into what matters to internal and external audiences, and explored the factors involved in audience decisions to connect with SPH.

This report presents findings from focus groups with people in six of the school’s key audience groups: students, faculty, staff, alumni, community partners, and University of Minnesota affiliates. Since these focus group sessions do not produce quantitative information, the conclusions in this report are advisory and not definitive.
Method

To begin the qualitative research process, a fully trained focus group moderator on staff, Sherlonda Clarke, was invited to conduct the sessions. SPH communications designed the focus group sessions with input from Sherlonda and University of Minnesota Relations.

A total of 46 participants were involved in seven focus group sessions held in November 2015 (see Appendix 1 for more information about focus group participants). School leadership selected the participants. Sherlonda asked each focus group the same set of questions (see Appendix 2). We recorded all sessions and took notes. In December 2015, in-depth interviews were held with five focus group members who were unable to attend their sessions due to conflicts. They were asked the same questions as the focus group participants, and their comments were incorporated into the session notes of their corresponding group.

Key findings

New and unexpected insights emerged from these focus group sessions, yet much of what we learned confirmed responses from SPH leadership interviews conducted in Summer 2015 (see Appendix 3). Groups echoed leadership comments about the student experience, community and industry partnerships, SPH’s visibility challenges, and the things that make our school unique.

New remarks from the focus group sessions centered around a sense (or lack thereof) of unity within the school. All groups were consistent in their remarks about this topic and all believe that creating more unity would benefit the school greatly.

Another new insight that emerged surrounded the SPH curriculum. Although many participants view the curriculum as top notch, students and affiliates were vocal about discussing some concerns about the curriculum. Reasons for concern include a lack of practitioner-based teaching and barriers in taking classes across SPH and University programs. Since only 8 students and 4 affiliates were included in these focus group sessions, we recommend additional research if SPH wants to explore this topic further.

Through qualitative data analysis, we grouped focus group responses into six overarching themes:

1. Initial connection to SPH
2. School unity
3. The student experience
4. Collaboration with partners
5. Visibility issues and barriers
6. Distinguishing factors of the School
**Initial connection to SPH**
Participants in the focus groups made it clear that they are deeply passionate about public health and express great pride in the school. Most groups were divided equally on how they initially became connected to SPH: by chance or by intent. Most people in the student group already knew that they wanted to study public health and actively sought out the school.

**School unity**
Every group emphatically discussed the need for SPH to have a more unified presence and vision. These two things would create consistency and strength in the school’s internal culture, while also having an impact on the ways external audiences connect with the school. When it comes to unifying SPH, participants discussed four major issues to address: vision, space (geographical location), division barriers, and visual look.

**The student experience**
The focus groups gave varied responses about specific components of the student experience; however, most groups stated that the student experience overall is inconsistent and varies depending on which division or program the student is enrolled in. All groups discussed the student experience in depth.

**Collaboration with partners**
Many groups stated that one of SPH’s greatest contributions to the field of public health is its impact on the state of Minnesota through research findings, its relationship to MDH and other organizations, and the public health workforce. At the same time, many people stated that the school lacks intentional school-wide connections with partner organizations and that there is great opportunity to collaborate more with external and internal partners.

**Visibility issues and barriers**
Focus group consensus is that SPH is virtually unknown to people who do not work in public health. This includes the University of Minnesota community, undergraduate students in other degree programs, community organizations, funders, and the general public. This invisibility is compounded by the fact that most people don’t know what public health is. Focus groups suggested that by increasing our visibility, we would attract more funders, greater University support, and high caliber faculty and students.

**Distinguishing factors of the school**
Responses indicate that SPH has several features that distinguish it from its competitors: specific faculty members and research; culture; location; and services for students. One of the primary ways many participants describe SPH is to talk about the impact of specific faculty members and their research. The school’s welcoming and supportive culture is unique among competitor schools. Participants talked about the many advantages of Minneapolis/St. Paul. Many, but not all, groups indicated that services for students, such as the alumni network, career and professional development, and student events and opportunities, make the school stand out.
Detailed findings

Theme #1: Initial connection to SPH

By chance
Many groups (except for students and faculty) stated that they originally connected with SPH tangentially or by already working at the University in a different department.

“I met Karen Kuntz (actually through Harvard where I went to school), and she was my conduit into the school.”

“I was working as a research epidemiologist in rural Wisconsin and connected with Mike Osterholm. That’s how I found SPH.”

Aligned with my interests
(Mostly students, faculty, and alumni)

“I was attracted by the interdisciplinary nature of Epidemiology at SPH. Epi is usually separated into behavior/social and clinical/biological, but here those two areas of focus are combined.”

“I was living in New York because my husband was studying there. I applied to study public health at NYU, but I didn’t like the program because it was too Epi concentrated. I started looking for programs that offered Community Health Promotion. The options were Minnesota and Berkeley, and I chose Minnesota.”

Minnesota/Midwest ties
(Mostly students, faculty and alumni)

“This has always been my mental home. I got my master’s degree at SPH and started working at MDH. Minnesota is a very nice place to live and work.”

“I came here because I thought it would be a great place to raise a baby.”

Culture/atmosphere
(Mostly students, faculty and alumni)

“The admissions video from Dean Finnegan was very impressive and seemed innovative.”
“I felt the faculty here are very kind and approachable. I could see that they are willing to get students involved in research, even undergrads.”

Reputation
(Mostly students, faculty and alumni)

“My understanding of the University of Minnesota before I got here was that it was one of the best schools in the country.”

“In 2010, this was one of my top three schools. I only applied to biostatistics programs in schools of public health. I was drawn here because the Division of Biostatistics was highly rated and because of the proximity to the Mayo Clinic. I thought there’d be a possibility to work there or interact with it somehow.”

Theme #2: School unity

A common theme that emerged from all groups was the notion of a disjointed SPH culture as well as physical space. Every group commented on this in a negative way.

Vision
One concern is an apparent lack of a stated vision for the school. Participants suggested that everyone working toward one common vision would make SPH stronger.

“If we were unified in purpose, vision and look, we could be the #1 school of public health.”

“We need our own identity and that’s important. The School doesn’t know who it is and the faculty doesn’t identify with it.”

“Branding and symbols are important, but alignment, vision, purpose and goals are more important. Administratively, divisions have a purpose, but beyond that they seem to complicate and confuse things. We need one beacon we can all look to.”

Space
Participants stated that the physical separation of divisions and programs impedes collaboration across SPH, weakens the sense of school community, and creates an inconsistent experience for internal and external audiences.

“The physical dispersion is surprising. Epi colleagues are separated by a river and a highway and it’s incredibly unproductive to be traveling across them each
day to work with people in our own school. It hampers collaboration. A bit of a mess if you ask me.”

Divisions (or programs) as culturally siloed
All groups discussed divisions as being siloed and creating layers and complexity that deter from SPH’s overall strength.

“Divisions are siloed. Faculty side with their divisions first and SPH second. That’s quite detrimental to us working together in a strong way.”

“There’s tension between SPH and actual divisions. When we tell students, “Come here because it’s a great division,” we leave out SPH as a whole. When we market our division’s programs, we aren’t saying, “We have a great school of public health.”

“People think MHA folks are so different from anyone else at the school or we get lumped into ‘those people who care about margins at running a hospital.’ No one understands what we do [in the MHA program] so we just do our own thing and go forward from there. We are severely siloed from every other program. I didn’t even know there were four divisions.”

“Can you just imagine if [students from all the programs] were all in the same classroom and given a case study? We could collaborate together from all different angles and learn how each approaches a problem.”

Visual identity
Finally, people cited the visual look and feel of SPH as being inconsistent and having a negative impact on perception. The School doesn’t appear unified and audiences need to work harder to understand all of the things our School offers.

“Our look is chaotic. When compared to our competitors, we don’t look unified. Our competitors, just in their basic marketing and recruiting materials, look like they are more connected. We have to work harder on other things to make it seem like we are unified as one school.”

“Creating a visual brand is something we should definitely do. We have a brand of quality, excellence, leadership and general commitment to making the world a real place, and we need people to know that.”
Theme #3: The student experience

All groups commented on factors that influence the student experience at SPH. Some factors received common responses across groups, while others elicited very mixed responses.

Common responses across groups

Alumni network

“I’ve heard a number of students talk about the alumni/mentorship program which helps them decide where they want to go and put their training to use.”

“Traci Toomey has an alumni panel after one of her classes. Alumni give tips to students for getting involved during school and suggestions for launching their careers. From my understanding, this is a unique opportunity for students. It’s not common across other classes.”

Student opportunities and events

“Students want to give back, and the school helps them do that through the student ambassador program, student senate, and other opportunities. They are shown different ways to help them make change. The student experience depends on which ‘pocket’ they are within SPH.”

“The networking events. The opportunity to be around those people who see the world in the way that you do is neat.”

Approachable and supportive faculty and staff

“I love the interaction with my professors. I want to be just like them — knowledgeable, intelligent, and exhibiting new ways of thinking and caring.”

“I’m not scared to email a professor here which is not my experience elsewhere.”

Real-world opportunities

“Providing students with field experiences is what propels them into their first job after their degree.”
Career & Professional Development Center

“The Career Center is exceptional, especially the help they provide with student resumes, and counseling on personality and career options.”

“Students go to the Career Office and come back happy.”

Mixed responses across groups

Participants gave equal amounts of negative and positive responses when talking about the curriculum and advising. In particular, partners, alumni, affiliates and students were very divided in these two items. Some people think the curriculum and advising functions are stellar, while others think that SPH has a lot of work to do to stay relevant with curriculum and provide a consistent advising experience.

Curriculum

Positive

“Students receive strong training in terms of curriculum and the tools/frameworks that they need.”

“The skills you acquire through all the relationships with faculty are important. With those skills, I’ve been able to build an entire program and transform organizations. You get certain skills in the public health curriculum, very practical skills, including learning to make relationships across communities.”

Negative

It is important to note that students were very vocal about curriculum. Many students are concerned with the caliber of the curriculum, the amount of professional skills they receive through courses, and the fact that they are discouraged to take classes in other programs across the school or the University, even if those classes would benefit their degree and interests. We suggest that this area be researched further with a larger portion of the student body and using various research methods.

“The issue of space and the siloing across the divisions creates curriculum problems: Epi doesn’t want their students taking HPM courses, etc.”

“We try, but fail, to provide the professional skills students need in a classroom setting.”

“This is a research institute training researchers, not the public health workforce.”
“Classroom discussions are not there with what’s happening in the world (ex: gun violence and shootings, etc.). Perhaps hard topics are not what people want to talk about, but there’s no conversation about current events.”

**Advising**

**Positive**

“We support the enthusiasm students came here with. They came here to make a difference in the world and we nurture that feeling. When they leave here, we give them the tools to really make a difference when they graduate. We keep that dream alive.”

“There are professors bestow work on their students which is neat. That causes real critical development.”

**Negative**

“There is a lack of support around the master's project experience. In PHAP they were more structured, but in my program it was a free-for-all and there was no emphasis or support to get it done.”

“We try to provide the academic and professional advising to help students attain their goals, but it's hard to recruit faculty to be academic and professional advisors. A lot of the faculty don't have an MPH degree. From an academic point of view that's good, but there's a disconnect between who the faculty are and what the students are striving to be.”

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**Theme #4: Collaboration with partners**

The school’s effort in collaborating with partners was brought up in terms of the strength of its connections with the state, MDH and other organizations, the AHC, and the community. Most responses indicate that we collaborate “somewhat,” in pockets here and there, but not in a concerted way across the school. At the same time, most groups stated that our strongest contribution to the field of public health is our impact on Minnesota through research and training the public health workforce. Many participants believe that one of our greatest opportunities is to increase our collaboration efforts across the school.

**Minnesota**

“SPH is really connected to the state of Minnesota. There are so many different sectors that our graduates go on to touch, which is hard to put data behind. We need to do a better job painting the collective impression of how our education and research impacts the state.”
“Minnesota houses so many leading corporations, but I don't see SPH collaborating/partnering with these big, strong organizations here.”

MDH and other organizations

“SPH partners with Optum, United Health Group and MDH. Generally in the state, we are very well respected.”

“There are a lot of people who work at 3M from SPH. We have enormous connections with the state.”

“Our connection with MDH is exceptional. We need to figure out how our relationship with MDH reaches outstate Minnesota.”

Community

“We struggle with connecting academic research with what’s happening in the community. For example, people who are working on HIV in the community wouldn’t necessarily know how to access the school’s research and understand what’s happening here. It’s more complicated than an academic institution pushing out information; the community needs to seek it out also.”

“We lack intentional community connections that would serve our students and the school’s relationships better.”

“Community engagement is left out of the SPH equation. If it’s a three-legged stool, that community engagement leg is very short.”

“As part of a land-grant university, I would like SPH to work with more local agencies and do more community outreach.”

AHC

“The AHC is strong in so many areas. The vet school is strong; their research is strong. [SPH looks at] global disease from wildlife to livestock to domestic animals to humans. The U has so many pieces in health that if they work together, it would be unstoppable. If we could do that, it would be tremendous.”

“Why aren’t we teaching the importance of public health to other disciplines if the AHC is right here? We’re so segregated.”

“There is an opportunity for greater integration with other aspects of the health center. I don’t see much collaboration other than the cancer-related area.”
We need more collaboration with other schools in the AHC. If we had more classes with different people with different brains, I think that’s a good way of growing relationships and getting a different perspective.”

Theme #5: Visibility issues and barriers

One theme that crossed all groups is the issue of visibility. Participants described the school as a well-kept secret. They claimed that we don’t do a good job talking about all of things we do and therefore, don’t get the support or attention we deserve. Many mentioned that this results in less recognition among our competitors and less support and attention from funders and the University of Minnesota. Moreover, the school faces another barrier insofar as the general public doesn’t understand public health. Oftentimes, when talking about the school, participants try to explain the field of public health through specific relatable examples.

General comments

“I am surprised at the relative lack of visibility of SPH and U of M outside of the upper-midwest. Pockets get known, like Epi in Minnesota or specific research groups.”

“Johns Hopkins has excellent name recognition and the U of M doesn’t have that so much. I was told to go to U of WA in Seattle, it’s a great place to live. People don’t recognize that Minneapolis is a nice place to live. They don’t recognize Minneapolis or the U of M.”

“It sounds like a Minnesotan thing and a public health thing to do — people don’t typically broadcast that type of work and things because it’s a humble place and field.”

“We don’t do a good job of patting ourselves on the back and touting the achievements we made; we just expect them to know it based on the work.”

“We’re becoming more swift in how we are talking about SPH and capitalizing on the work that’s being done here. But, we need to figure out how to share it more broadly and communicate about our impact. Our faculty are doing incredible work, now we need to share it.”

University of Minnesota

“Other public health schools have better integration with the other schools on their campus. The Medical School is here and they aren’t really interested in
public health — that’s an opportunity. We need something special to attract and incentivize clinicians to get trained here.”

Public health

“Only way to define public health is through specific examples. There was an outbreak of meningitis in Mankato and the school had a big role in vaccinating. Using this example, I would say, ‘that’s public health.’”

“Society benefits from public health, but don’t know what it is. The average person on the street has no idea what the School of Public Health is.”

Funding

“Even among our elected leaders it’s debatable how much they recognize and appreciate the importance of public health. A lot of our public health funds are federal funds at MDH, not state.”

“We’re almost happier not touting ourselves and complaining about the lack of funding.”

Theme #6: Distinguishing factors of the school

Participants expressed a lot of pride in SPH and have some wonderful things to say about what makes us great, including our training and research. However, they identified three main factors that set us apart from our competitors: specific faculty and research, culture and location.

To understand participant perception about the school’s personality, participants completed a written exercise and were asked to circle words from a list of adjectives that describes SPH today and the ideal SPH. The results of this written exercise can be viewed in Appendix 4.

Specific faculty and research

All groups reported that the school is very solid across the board in terms of reputation and research, but that doesn’t make us stand out from competitor schools. However, specific faculty and research does differentiate us, and their research extends far past our state lines.

“Professors carry out research that impacts health. The big hitter in our department is Jim Neaton. Ebola and HIV/AIDS contributions he’s made has been impactful worldwide.”
“Working with or doing research with world-renowned researchers. Brad Carlin is widely known in biostats. Jim Neaton. Whenever you hear students working with them, you think, ‘Oh, they’re special.’”

“Our school has the rockstars — tobacco elimination and exposing of all the emails out of the tobacco industry.”

“Jean Forster wiped out all cigarette vending machines in the country through her work. So many lives are saved with fewer people smoking. Helps more than surgery. Vaccination rates are incredibly high here and that work stems back to MDH.”

**Culture**

Groups attribute the school’s culture as a primary differentiator. The positive attributes of culture include a welcoming environment, approachable and hard-working faculty, dedicated staff and student support systems.

“There’s a different climate here at the University of Minnesota. There’s a collaborative nature here, a Minnesota way of being. It’s relaxed. You can have a balanced life—teaching, research and other educational passions.”

“I like how professors here are approachable. That’s not comparable to my previous graduate degree.”

“I’ve been pleasantly surprised by the faculty — daunting and humbling at how competent they are. Respects me, I can do my work, feel supported, I feel connected — it’s great. I don’t have to defend my research is sexual health and HIV, it’s accepted as important which is positive. I feel welcome as a gay man and this place is very accepting of minorities.”

“We are there for our students. There isn’t a fear of trying new things, the dean is very supportive of putting our best work forward to support students in the ways they need to be supported. There are some politics, but there is a strong sentiment to make things better for our students; although their voice isn’t always at the table.”

“Relationships. SPH cares for its students. Before you are an incoming student, you feel very welcome and accepted. Dean Finnegan is at events and playing with my daughter is incredible. That doesn’t happen at other schools. They are good at becoming family — especially when you’re not from here.”

**Location**

Location is also cited as a major differentiator. Participants described Minneapolis as a great place to live and work, and many commented that our location in a major metropolitan area that
is teeming with public health opportunities and partners (including MDH which is considered by participants as one of the best health departments in the nation) makes the school unique. There’s also a lot to be said about our stake in the midwest and how much Minnesota relies on us for research, expertise and training the public health workforce.

“Being in a major metropolitan city — a digestible city (livable, affordable, able to get around, place to retire) versus being in Baltimore or being on the east coast. Thinking of the top 10 Schools of Public Health, they’re on one of the coasts. We’re one of the only places in the midwest.”

“Students like to do outdoors things here. Minneapolis [is not seen as] a hip place to live, not attractive. If we could make Minnesota stand out. Location is important. Minnesota has a bland, all-purpose image (not spicy), and it is potentially negatively impacted by the climate, so how do we make that a selling point.”

“We are leaders and grounded in reality and respected. That respect is warranted. We have a lot to be proud of in Minnesota. We have disparities in Minnesota that makes us different and we need to take them seriously and work on them.”

“Minnesota depends on us; most of our students work in MN after graduating. We are part of what makes Minnesota one of the healthiest states. Outside of Minnesota, we contribute also, just less so. We are an incredible force in D.C. We contribute to public health practice across the nation.”
Recommendations

Based on the findings presented in this report along with responses from SPH leadership in Summer 2015, SPH Communications recommends the following action be taken to improve the perception and increase awareness of the School. These recommendations are consistent with goals inherent in organizational brand development, and are equally focused on internal and external brand positioning.

1. **Develop a dynamic, energizing visual identity system that represents the School of Public Health in all of its complex and diverse forms within the larger University.** Refine the ways in which the school is differentiated from its local and national peers, and articulate a compelling visual brand identity that inspires the support of its broad range of constituents. Intentionally use the process to unite the school’s community while allowing flexibility for divisions and programs to maintain a unique personality within the larger structure.

2. **Create key materials and messages that convey who we are and what we do in a compelling and consistent way.** Showcase the impact and value of the school through consistent and strong messaging. Developing targeted materials and messages for key audiences will allow us to get the right information to the right people at the right time for greater school support and awareness. It is also important that we create resources and tools for faculty and staff to communicate about the school in effective and efficient ways.

3. **Develop strategic communication plans for the SPH2030 Strategic Planning Initiative and the MPH Core Curriculum Review.** By doing both these things, we help address the needs for a stated vision and a unifying purpose. We can also create ways for key audiences to be involved in developing and implementing these two important school-wide initiatives so that both can more closely align to SPH priorities and goals.

4. **Focus on ways to connect SPH now, while exploring opportunities to bring the entire school together in one space.** While we are negotiating for our own space, build cultural strength and foster collaboration across the school by creating formal and informal ways for faculty, students, and staff to make meaningful connections.
Appendix 1: Participants

A total of 51 people participated in focus group sessions and depth interviews in November-December 2015. Participants were chosen by School leadership in Summer 2015. Participants represented key audience groups: faculty, staff, students, alumni, U of M affiliates, and community partners. Internal audiences represented distribution across units, divisions and programs. Other demographic attributes were not taken into consideration.

Table 1: Focus Groups Participants

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<th>Location</th>
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<td>Mayo A-301</td>
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Table 2: Depth interview participants

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Appendix 2: Questions

The following questions were asked during focus group sessions and depth interviews. Some questions were specific to group-type and are indicated below in parentheses.

WELCOME (15 min)
- Host welcome
- Food
- John welcome (5 min max. for alumni, partners)

WARM-UP (20 min)
- Introductions: name, org, what you do
- What drew you to the field of public health (faculty, students, alumni, community partners)?
- What first attracted/connected you to SPH? (all) Why did you choose SPH over other options (faculty/students/alumni)?
- What did you find most surprising about SPH?
- What is your proudest moment in your time at SPH (faculty/staff/students/alumni)?

WRITTEN EXERCISE 1: The Future (all groups) (5 min)
- How would the world be different if SPH didn’t exist?

THE SPH EXPERIENCE (20 min)
- How do you currently connect with SPH? (partners only)
- What do SPH students (you) aspire to be? What motivates them onward and upward?
- How do you think SPH helps propel students to attain their goals?
- How do you think SPH contributes to the field of public health?
- What are SPH’s greatest opportunities?

WRITTEN EXERCISE 2: Word association (all groups) (5 min)
This exercise will help us understand the aspirational appeal of SPH as well as a sense of what perceptions may need to change in order for SPH to realize its potential. Use list of adjectives.
- “What three words would you use to describe SPH today? Why?”
- “What three words would you use to describe your vision for SPH tomorrow? Why?”

DEFINING THE SCHOOL (all groups) (35 min)
- SPH is the sum of its parts. Is it important for all of the divisions and units within SPH to be unified under one look and feel? What, if any greatness can be achieved when that happens?
- How do you describe the University of Minnesota SPH to someone outside of your field of study/work? What about inside your field of study/work?
- How connected do you think the school is to Minnesota?
• What makes SPH different (i.e. the school in general, its people, its programs, its location)?
• Beyond our ranking and research, what is the one thing we do really well?

Additional questions for alumni only:
• What were the greatest benefits you received from going here?
• How did your training at SPH impact your career and what you are doing now?

WRITTEN EXERCISE 3: Comparison of competitor schools (students/faculty/alumni) (5 min)
Instructions for comparison sheets: “Quickly write down qualities that represent each entity.”
UMN v. Michigan
UMN v. Johns Hopkins
UMN v. Berkeley
UMN v. Washington
Appendix 3: Summary of Leadership Interviews

Overview

Why is brand important for SPH?
CEPH-accredited public health schools (and programs) have burgeoned in recent years: 40 schools (2008); 46 schools (2011); 56 schools (2015), and schools are challenged to find new ways to increase funding to support programs and research.

In this competitive environment, SPH has to improve its image and the way it connects with its audiences in order to attract the best students and faculty, and tap new funding sources. One way to help achieve this is to have a strong brand.

Brand: what it is and what it isn’t.
Our brand is how people perceive us; it is the collective impression we give. Our brand is created by how our faculty and staff interact with our audiences and the messages they carry, how consistent our image is across all media, how we represent ourselves online and at conferences and events, the way our publications look and feel, and many other factors. Right now, SPH has a brand run wild. We don’t have a common vision for who we are and why that matters. As a result:

- We don’t give prospective students and faculty a clear, captivating reason to choose our school,
- Funders don’t see all the ways we provide value and aren’t inspired to give, and
- Current students and alumni aren’t always compelled to refer our school to others.

Interviews with leadership.
Discovering who we are at our best, and then codifying that into an honest and consistent brand takes time. And it is complex and involves long term cultural change. To discern our brand, it’s vital that leadership have a shared sense of what our brand is now and what we want it to be in the future.

In May-June, I conducted in-depth interviews with each executive team member. This document summarizes those interviews. It establishes common ground for the current state of the school’s brand, and clarifies goals for brand development.

SPH leadership’s initial thoughts on brand

Brand development is important for our school. Brand makes a lot of sense and the marketing efforts that connect our brand to our audiences make a lot of sense. (6 respondents)
We need to define the value a brand will provide. The notion of a brand and the value it provides to our school are difficult to understand. We need to be sure SPH faculty and staff understand these things. (6 respondents)

Our brand needs visual consistency. Things coming from SPH are serious and professional, not trivial—that is what the wordmark signifies. When it’s absent, the work doesn’t have the same credibility and people don’t necessarily associate it with SPH. (5 respondents)

We have a brand whether we like it or not. It’s time for us to grab hold of our story and make it what we want it to be. (3 respondents)

What are the greatest opportunities for our school?

Community and industry partnerships in the Twin Cities. We have a great opportunity to join with our communities and partners in the Twin Cities: students need more exposure to partners in the classroom and local experiences; faculty need more exposure to public health work in action. (7 respondents)

Right field at the right time. Health care reform and the Affordable Care Act are forcing a focus on preventative health care; people are more interested in taking care of their health; millennials, our student audience, are very committed to improving the world. (5 respondents)

Education. Technology is changing the very essence of student learning. The value of classroom time is no longer about access to information—students can get that online. Younger faculty see the value in teaching and what it means to teach well. We need them to be leaders in the field of teaching by grounding our students in professional skills and embedding innovation, open-thinking, leadership and teamwork in our learning environment. (4 respondents)

Transdisciplinary work across the U. We are poised for more partnership grants with UMN colleges. We need to do more transdisciplinary work in research and teaching. (3 respondents)

Diversity. It is crucial to have a more diverse student and faculty body so we can better relate to and serve our students and community. (3 respondents)

Global. Local and global public health issues are increasingly linked; becoming more global will extend our reach. (3 respondents)

What are the greatest challenges for our school?

Funding. Grant funding isn’t increasing and we’re competing for funds with other UMN colleges who have very large money interests. We need to make the argument that we are selling a product that has long-term benefits in order to bring in more funding from the university, alumni, the state and donors. (11 respondents)
People don’t know what public health is. Since there isn’t immediate satisfaction or one big single event that highlights the importance of public health, it’s hard to show the tangible effects of our work. (6 respondents)

Faculty turnover and transitions. Some older faculty don’t want to change and are stuck in how they do things. We need to let younger faculty push into new areas and create a community they can enjoy. (5 respondents)

Who are our primary competitors?

Numbers represent unique mentions (audiences with 1 mention are omitted).

<table>
<thead>
<tr>
<th>University</th>
<th>Mentions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Michigan</td>
<td>10</td>
</tr>
<tr>
<td>UNC</td>
<td>10</td>
</tr>
<tr>
<td>Washington</td>
<td>8</td>
</tr>
<tr>
<td>Johns Hopkins</td>
<td>3</td>
</tr>
<tr>
<td>Emory</td>
<td>3</td>
</tr>
<tr>
<td>Harvard</td>
<td>3</td>
</tr>
<tr>
<td>Berkeley</td>
<td>2</td>
</tr>
</tbody>
</table>

What makes us shine (among our primary competitors)?

Reputation and ranking. SPH is known as being strong in: public health nutrition (considered by many to be the best); obesity research; cardiovascular health; biostatistics (ranked in top 5 nationally); MHA (ranked 3 in the nation); and grants and contracts per faculty. We are #8 in US News & World Report. (7 respondents)

High quality faculty. Some students decide to come here based on our faculty. We have a very solid base of experts and leaders who are making impacts in the field. (6 respondents)

Our culture. People are attracted to our culture and community: understated, unpretentious, generous, hard working. We are not looked at as the ugly, pushy American, which is really important for the global market. (5 respondents)

Price. We provide a ton of value for the cost. (4 respondents)

Unique position of the U. We are one of the few major public, land-grant universities in the middle of a large metropolitan area, giving us an advantage we don’t always appreciate. The U has everything and is positioned to be a leader in transdisciplinary education and research. (4 respondents)
**Location.** The Twin Cities is a really liveable urban area that exudes the principles of public health. It is a place that still works, and there is a sense that you can make things happen here. (4 respondents)

Who are our primary audiences?

Numbers represent unique mentions (audiences with 1 mention are omitted).

<table>
<thead>
<tr>
<th>Audience</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prospective students</td>
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</tr>
<tr>
<td>Current students</td>
<td>6</td>
</tr>
<tr>
<td>Donors</td>
<td>5</td>
</tr>
<tr>
<td>University</td>
<td>5</td>
</tr>
<tr>
<td>Grant funding agencies</td>
<td>4</td>
</tr>
<tr>
<td>Public</td>
<td>4</td>
</tr>
<tr>
<td>Alumni</td>
<td>4</td>
</tr>
<tr>
<td>Policy makers</td>
<td>3</td>
</tr>
<tr>
<td>Healthcare industry</td>
<td>3</td>
</tr>
<tr>
<td>Current faculty</td>
<td>3</td>
</tr>
<tr>
<td>Prospective faculty</td>
<td>2</td>
</tr>
</tbody>
</table>

How is the current the SPH experience for our students?

**Overall, the experience is inconsistent.** The experience for students is fractured. They might get welcomed at one point and turned away at others. (6 respondents)

**It depends on the student.** Student experience depends on the student’s ability to seek out and take advantage of opportunities at our school. (5 respondents)

**There is ambiguity about what students can expect when they come here.** Some students leave here wanting. There is a disconnect in communicating expectations. Prospective students might not know who we are and what we do best, and we don’t give them a clear enough vision (because we don’t have one). (4 respondents)

**Insufficient time dedicated to student advising.** Our pressure to do research is so high that we have to keep both burners on (teaching & research), and the one that often gets less attention is advising. We need to have shared guidelines for how frequently advisors and program coordinators must meet with each student. (3 respondents)

What are the touchpoints that affect the student experience?

- Advising
• **Space:** we need to provide a space for informal student/faculty interactions to happen
• **Faculty/staff contact with alumni:** build in touchpoints after students graduate
• **Communications:** students should have access or receive the right info at the right time
• **Offerings and events**

What are your goals for our school brand?

**Improve reputation and increase visibility.** SPH needs to generate more communication and outreach that clearly states the school’s value. We need to show our impact locally and globally so people know who we are, what we do, and how it affects them. (9 respondents)

**Highlight faculty and research.** Our brand needs to signify that our school is focused on research and that we are on the cutting-edge of solving problems. We need more marketing and outreach that highlights our accomplishments in order to attract the top students, and get more grants and funding. (6 respondents)

**Use brand to create energy in the school and bring the school together.** We need to create a strong fellowship among faculty and staff, and generate the feeling that: we are all in this together; we have pride in what we do; and, we are a force to be reckoned with. (6 respondents)

**Consistent look that make our materials instantly recognizable.** Enforce a consistent look that creates context and portrays everything we do. (5 respondents)

**Develop our story.** We have this amazing resource and we are located in one of the best places to solve issues. We need to create our story so we can talk about our work in a way that matters. (5 respondents)

**Attract funders.** We want people to invest in our school because they believe in what we’re doing. We need to inspire philanthropy by showing donors that we are benefitting the state and the world. (5 respondents)
Appendix 4: Written Exercise—SPH Personality

During the focus groups, participants were given two sheets of paper with the same list of adjectives on each and were asked to choose three words from each that describe SPH today and the ideal SPH. Findings are visualized in the graphs and word clouds below.