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Dear Friends and Colleagues, past, present, and future:

I'm excited to be able to share with you the UC Berkeley School of Public Health's new strategic plan. A year ago, when we began this process, we knew we wanted to build on our existing strengths. Ours is a relatively small, responsive school of public health with a history of accomplishing big things. Our location in the Bay Area, adjacent to Silicon Valley, and our position in California, on the Pacific Rim and sharing a border with Mexico, give us both the mandate and the opportunity to embrace diversity, champion social justice, and innovate for health, locally and globally.

At the same time, we wanted to identify ways we could adapt to meet new challenges in public health as they arise. I believe our education can be even more innovative, our research more impactful through radical collaboration in key areas, and our community partnerships can be deepened and strengthened.

During the planning process, we made sure to adhere to the values we were developing. After a lot of hard work, the result was a plan that reaffirms many of our values, and reshapes others. We will invest in our historical strengths and advantages, and apply positive disruption to our core missions of education, research, and service.

In education, our mission is to develop future public health leaders who can adapt in a rapidly changing world to transform the health of our communities. We seek to give them the knowledge and skills they need to succeed—this requires us to provide richer educational experiences for our students, in and out of the classroom. We will conduct a full review of our current curriculum,
optimize our use of educational technology, and increase our students’ access to hands-on, practical experience. We will create a new division to support curricular innovation, which will house our interdisciplinary programs, including the On-Campus/Online MPH, the UC Berkeley-UCSF Joint Medical Program, the Center for Public Health Practice, and others. And we will expand our online course offerings in order to reach more students worldwide.

In research, we remain committed to supporting our investigator-driven research and to conducting research to achieve health equity and improve health outcomes in disadvantaged populations. To do this we must continue to increase diversity in our faculty, students, and staff. I’d also like to see our school make some big bets in a few key areas where we have the foundation and partnerships to make a major impact. These include big data and technology, global population health, nutrition and obesity, children and environmental health, demography, and adolescent health. As a school of public health situated on a world-class letters and sciences campus, we have unparalleled access to preeminent partners in key disciplines—including engineering and computer science, business, law, public policy, and journalism. We also benefit from our close partnership with UCSF, a campus entirely dedicated to medicine and health sciences. I look forward to strengthening existing partnerships and building new ones, across the Berkeley campus and across the Bay, in order to increase the impact of our collaborative research.

In community partnerships, our goal has always been to disrupt systemic threats and eliminate inequities in order to build healthy populations. The School has a legacy of community-based participatory research that has changed and saved lives. Our work has also led to transformative policy changes—locally and globally. We want to take this engagement even further by developing community studios based on best practices in academic-community collaboration, which will embed students and faculty into communities for mutual benefit. The Bay Area community will be our first priority, but we will also expand our global reach. One example of an opportunity for community partnership is the planned Berkeley Global Campus at Richmond Bay. While the campus will have an international focus, our school is also committed to partnering with the City of Richmond, where health disparities continue to pose a major challenge.

I hope that reading through the pages that follow will engage and excite you as to the possibilities for the future of our school and the impact we can have on the public health threats of today and tomorrow. I expect you to hold me directly accountable for ensuring that we implement the strategy and realize real impact. If these plans spark thoughts about how we can improve our approach, I invite you to share them with me. This should be a living document that evolves over time.

Our plans may seem ambitious, because they are. In addition to committed and sustained effort, success will require targeted investments of resources, increased donor funding, and new members on the team. With your support and participation, I believe we are more than up to the challenge.

Sincerely,

Stefano M. Bertozzi MD, PhD
Dean and Professor of Health Policy and Management
The public health challenges society faces are constantly changing and, as a consequence, the field of public health needs to be dynamic enough to evolve with those changes and meet new challenges as they arise.

The past few decades have seen a dramatic increase in the pace of change in public health. The world is increasingly interconnected, and the lines between local and global concerns have become fundamentally blurred. We are faced with new public health challenges caused by climate change and our reliance on fossil fuels. We are burdened by a growing and rapidly aging global population, complex and costly health care systems, and a collective failure to share health advances equitably. Our increasingly diverse communities are challenged by epidemics of obesity and preventable chronic disease and injury, emerging infections, violence, and unsafe environments.

At the same time, our ability to understand how health is changing, what influences it, and how we can best affect it is improving at an ever-increasing rate. When one of our 24-year-old students was born, the first SMS message had not yet been sent. Comparatively, in 2014, the mobile industry shipped 1.3 billion smartphones, connecting over 50 percent of people on the planet. The world has also produced more data in the last three years than in all of prior history. Electronic medical records are already a $20 billion industry, and the convergence of accelerating data generation and massive leaps in analytic capabilities hold the promise of transforming big data into big health impact. Similar changes have happened in biotechnology. Our 24-year-old student was
10 when the world’s largest-ever biomedical collaboration produced the first human genome. Today, we can sequence one for little more than the cost of a smartphone, and we can begin to speak of understanding the genomes of populations.

Place-based health solutions are addressing inequities and building healthier communities. Advances in health coverage and delivery models are transforming health access, quality and outcomes. Innovative policies have seen health coverage expand to populations previously unable to afford coverage and have begun to address broader health concerns around nutrition and obesity. Approaches to integrated care and preventative medicine have also significantly shifted thinking around health care insurance, focusing on keeping people healthy, rather than treating those ill.

However, inequities in health status continue to grow. At the University of California, Berkeley School of Public Health, as we reflect on these changes, we are committed to preparing our students and faculty to anticipate and respond to challenges in a world fundamentally different from just 10 or 20 years ago. How can we best confront new challenges and take advantage of new opportunities?

To answer this question, we entered into a highly collaborative review and planning process that engaged with hundreds of people to help us understand how to bring the most advanced research, education and community solutions to disrupt the field of public health. This process is further detailed in the Appendix.
**WHY UC BERKELEY?**

Our unique advantages

This strategic plan reinvests in significant advantages the School has built over the past 70 years; its geography at the center of the San Francisco Bay Area; and its position at the nexus of a tremendous international network of partnerships with communities, academic institutions, industry, and policy makers. Our planning process uncovered unique strengths that position us to achieve maximum population health impact in California, nationally, and globally.

**OUR LOCAL PRESENCE** adjacent to Silicon Valley and national centers of innovation puts us at the epicenter of advances in biotechnology, digital health, and big data. The Bay Area is also at the forefront of innovations in integrated health delivery, healthy communities, and health policies or health coverage.

**OUR GEOGRAPHY** in the largest, fastest growing, and most diverse state in the United States, on the Pacific Rim, and sharing a border with Mexico (with whom we share many demographic and epidemiological characteristics) provides a strong platform from which to strengthen our work locally and globally, and from which to expand to include the economic powerhouses across the Pacific.
OUR BROADER BERKELEY CAMPUS AND THE UC SYSTEM allow access to leading-edge collaborators in key disciplines including engineering, computer science, social sciences, public policy, journalism, international development, business, law, and beyond. As part of the UC system we have access to unequalled capacity and networks; specifically our close partnership with UCSF joins us with a world-class medical campus.

MORE THAN 70 YEARS as one of the nation’s preeminent academic institutions in the field of public health, on a campus with a legacy and commitment to social justice, provides a unique position to lead change. We are highly regarded for the quality of our faculty and students and have a reputation for excellence in education, research, and community engagement. Our graduates are transformational health leaders across all health sectors, with a legacy of impact and innovation locally, nationally, and globally.

As we plan for the future of our school, we will carve a path forward that ensures that our public health school of today is prepared to address the public health threats of today and tomorrow, by investing in three foundations across the School, and three disruptions to the public health status quo.
UC BERKELEY SCHOOL OF PUBLIC HEALTH STRATEGY

DISRUPTIVE EDUCATION

DISRUPTIVE RESEARCH

DISRUPTIVE COMMUNITY

DIVERSITY

TECHNOLOGY

RADICAL COLLABORATION
OUR VISION & MISSION

Healthy People, Locally and Globally

We improve population health, especially for the most vulnerable, through:

• Radical collaborations to meet priority health needs and achieve health equity in our increasingly diverse communities

• Preeminent education that challenges convention and develops diverse leaders who transform the health of our communities

• Transformational research on the major public health threats and opportunities of today and tomorrow
FOUNDATIONS
The major, cross-cutting underpinnings of our work

DIVERSITY
We will bolster our longstanding commitment to diversity, equity, and inclusion as pathways to excellence at all levels of the School, via recruiting, mentoring, and inclusively engaging with diverse populations of students, faculty, staff, and community partners.

TECHNOLOGY
We will invest in technology solutions across our education, research, and community engagement, expanding our ability to train the next generation of public health leaders, developing new research paradigms, and accelerating our impact in the communities we support.

RADICAL COLLABORATION
We will make fundamental shifts in the way we engage with partners across the UC Berkeley campus and across the world, fostering collective research efforts and partnerships that reflect the complexity of public health challenges and the diversity of resources required to build systemic solutions.
Disruption in this context builds on the idea of “disruptive innovation” coined by Clayton Christensen of Harvard Business School. For us, disruption means a way to shake up the status quo, not only in the way we work, but in the impact we have.

DISRUPTIONS
The change we want to see in the world

DISRUPTIVE EDUCATION
We will prepare future public health leaders, on campus and virtually, with the knowledge and skills necessary to adapt in a rapidly changing world. We will employ innovative and hands-on approaches to education inside and outside the classroom and work closely with alumni, partners, and employers to ensure students are gaining the skills they need to succeed in the communities, companies, and other organizations they work in.

DISRUPTIVE RESEARCH
We will fundamentally change approaches to increasingly complex health threats and opportunities of tomorrow by fostering innovative disruptive research in key areas. This requires radical collaboration between diverse disciplines and institutions as well as between basic research, translational research, implementation research, education, and action.

DISRUPTIVE COMMUNITY
We will deeply engage with communities working to disrupt systemic health threats and inequities, partnering with them on the path to healthy populations. Collective School of Public Health engagement with selected communities in the Bay Area and beyond will sharpen research, enhance students’ educational experience, and have a transformative impact on population health.
VALUES
Guiding principles and culture

Health as a Right
We believe in social justice and the basic human right to a healthy life. We strive to reduce or eliminate inequity and injustice that affects the health and dignity of all people, especially those who are most vulnerable. We live a shared commitment to equity among our faculty, students, and staff.

Strength Through Diversity
We embrace diversity in our education, research, and service. It’s the right thing to do and the best strategy for successfully engaging and transforming the communities we care about.
Think Forward
We innovate and train our students to lead innovation. We build a culture that challenges conventional thinking, leverages technology, and builds bridges between basic research, translational research, implementation research, public policy, education, and action.

Impact First
We demonstrate our commitment to maximum population health impact by focusing our research, education, and service efforts in areas with the potential to have transformative impact on the health of populations locally and globally.
INVESTING IN FOUNDATIONS

The strategic plan doubles down on investments in a set of the School’s historical strengths and natural comparative advantages.

As the cornerstones from which we will approach all of our work, these investments in the School’s Foundations—Diversity, Technology, and Radical Collaboration—will guide all of our educational, research and community engagement pursuits. We will constantly seek to understand and design our work through these three lenses.

DIVERSITY

Our key focus for diversity is to get into our ranks undergraduates, graduate students, faculty, and staff who represent, understand, and are committed to the communities we serve.

We believe deeply in the need to address health inequities. We are leaders in promoting and respecting diversity, equity, and inclusion in our education, research, and community engagement, within the School and in our partnerships with individuals, communities, and practitioners.

“We’re expanding on a long tradition of equity and inclusion in higher education. It’s at the heart of how we recruit, how we hire, how we educate, how we conduct research, and how we work in communities locally and globally.”

Abby M. Rincón MPH
Director of Diversity
We define diversity broadly as encompassing race, ethnicity, gender, socioeconomic status, sexual orientation, national origin, age, religion, language and physical abilities/disabilities, human rights, and social justice.

We believe that by building on our longstanding commitment to diversity, equity, and inclusion, we improve our effectiveness and ability to be sustainably transformative in addressing the health needs of diverse populations in California and around the world.

Our historical efforts to promote equity and inclusion have led to substantial progress in our drive to achieve compositional diversity that reflects the diverse population of our state. To build upon this, our future activities will focus on building school culture, climate, and practices that embrace diversity more broadly as a pathway to excellence and preparation of effective public health professionals and leaders.

Throughout our education, research, and community engagement, our diversity, equity, and inclusion goals will ensure that diversity remains a priority that is recognized as a pathway to excellence for all members of the School's community, and at all levels of the School, by the following means:

**STUDENTS**
We will recruit students, staff, and faculty who represent, understand and are committed to the communities we serve and provide them with the opportunities to lead and show us how to sustainably transform those communities.

**FACULTY**
We will expand the diversity of our current faculty through both intensified recruitment of underrepresented minority faculty and ensuring racial/ethnic/gender equity in promotion and compensation.
PARTNERS
We will invest in community, industry, and academic partnerships that reflect the diversity of the communities we work in and the challenges we are working to solve. Diversity is a core foundation in everything we do. This will help us achieve our goal of ensuring that graduates become world-class public health practitioners and scholars in a diverse world.

TECHNOLOGY
Technology is a core element of our disruption strategy.

The School of Public Health sees investments in technology as a critical priority across all of its education, research, and community engagement. Investments in technology help us expand the number of students we turn into public health leaders, the breadth and depth of our research, our ability to effect change in the community, and increase the speed and efficiency of our work.

The School’s recent investment in online educational resources has dramatically expanded the number of students we reach with a high quality educational experience. In addition, deepened partnerships with organizations such as the Center for Information Technology Research in the Interest of Society (CITRIS) have broadened avenues for collaboration on technology solutions to public health challenges.

As we continue to prioritize our investments in technology, we see tremendous potential through technology adoption in the following areas:

EDTECH
We will seek to find, develop, and use the latest pedagogical technologies, tools, and techniques to ensure the best possible learning experience for our students. We will also leverage these tools to expand and scale innovations in continuing education, professional development, and networking for alumni, partners, and professionals locally and globally.
PUBLIC HEALTH TECH
We will create and engage with leading-edge and emergent public health technology as a central component of innovative research agendas searching for high impact positive disruption.

TRANSLATIONAL TECHNOLOGY
We will seek to use technology and the latest communications and information tools in order to help communities improve performance, unlock results, track impact, and drive change.

RADICAL COLLABORATION
Effective public health is fundamentally about good collaboration. Bringing that insight into everything we do will allow us to move from ideas to impacts.

We will be able to discover and implement powerful new ways to tackle the health threats facing our local and global communities by relying on creative transdisciplinary approaches; innovative, sustainable partnerships; and meaningful community engagement. We will bring a radically collaborative approach to the vital work of maximizing population health.

This is a foundational strategy across our education, research, and service pursuits. We believe in bringing a broad range of universities, schools, and departments together to provide a comprehensive educational experience for our students. A similar mentality applies to how our faculty will work across communities and across the world, in pursuit of new solutions for the world’s most pressing public health challenges. Finally, within the communities in which we work, we will be persistent in working closer with a broader range of individuals and organizations in support of those communities’ public health needs.

To make sure the School is positioned to lead and support these collaborations, we will focus on two fundamental activities that are the foundation for any successful collaboration:

ENROLLING VISIONS
Whether in the community or in the classroom, we benefit from convening stakeholders to define a vision for the future, giving partners a common goal that guides the partnership and its activities.

INFRASTRUCTURE
We will make sure the School has the appropriate administrative infrastructure to identify, incentivize, streamline, and support a broad range of collaborations, whether across the School, the campus, with UCSF and others in the UC system, with our industry partners, or in the communities where we work.
“We’re training our students for a world we can’t predict. This means we need to give them educational experiences that not only make them subject matter experts, but also able to lead us through uncertain futures.”

Shederick A. McClendon MPH
Assistant Dean, Student Services

POSITIVE DISRUPTIONS

The School of Public Health recognizes that to adapt quickly to solve significant public health challenges, we need to stimulate positive disruptions in education, research, and our community engagement. To build on the School’s traditional strengths, including world-class education, cross-disciplinary investigator-initiated research, and engagement with local and global communities, we are investing in disruptive approaches to how public health challenges are solved. To lead these disruptions, we see the School collaborating differently with our partners across UC Berkeley and the public health field, applying advances in technology to public health, and increasing the representation of students and faculty from the communities we work in. Each disruption is intended to focus the School on select initiatives that achieve transformative impact in communities, encourage research across systems for better solutions, and provide meaningful educational experiences at greater scale.
DISRUPTIVE EDUCATION

We need to provide deeper and broader educational experiences to more students. The School’s educational mission is to provide preeminent education that challenges convention and develops diverse leaders who transform the health of our communities. These public health leaders need to be able to work across academia, communities, industry, and government, to identify transdisciplinary solutions to local and global challenges. To disrupt the traditional way public health leaders are educated, we implement leading-edge, innovative approaches to education, both inside and outside the classroom, ensuring that students have the skills necessary to be leaders in a rapidly changing world, by:

CREATING T-SHAPED LEADERS

We build cadres of leaders who combine deep expertise and knowledge, with an ability to engage a broad array of stakeholders to creatively adapt the knowledge and skills they have gained to understand and solve complex public health challenges.

The concept of the T-shaped leader emerged from engineering disciplines where vertical depth in a given discipline was seen to lead to narrow vision where it wasn’t complemented by a horizontal breadth of knowledge. This horizontality, as exemplified by leaders ranging from Steve Jobs to Thomas Edison, was prized as a core skill in employees who would be able to bring ideas and new relationships into their work from adjacent fields and interests.
EDUCATING AT SCALE
We work across the School and UC Berkeley, and in partnership with top schools domestically and internationally, we provide richer educational experiences for our students on campus and engage many more students locally, nationally, and globally through our technology investments.

ADVANCING COMPETENCY DRIVEN EDUCATION
To develop and deliver the most advanced training in the competencies students need to be effective in the health workplaces and communities they want to serve, we create flexibility for students to more effectively build on the knowledge and experience they bring to the program, and educate for and measure a student’s mastery of essential public health competencies and capabilities.

The disruptive education strategies and objectives presented here build on significant strengths at the School of Public Health, including a broad set of professional and academic degree programs, recent innovations in online education and educational technology, strong leadership and professional development programs, and innovative courses that provide opportunities for hands-on learning in transdisciplinary teams. They challenge the School to continue to innovate and collaborate better within the School, across the University, with communities, and with employers.

DIVERSITY

Strategy 1:
Diversify Graduates and Undergraduates
We will increase the diversity of our graduate and undergraduate public health students to more closely reflect population diversity and enhance the experience and success of all subgroups within the School. Critical mechanisms to diversify our study body include:
ROADMAPS TO SUCCESS
We will deepen our investment in providing comprehensive academic, career, and community support systems for undergraduate and graduate students from underrepresented minority and disadvantaged backgrounds. Programs that acknowledge and address the real-world challenges unique to this set of students can best develop their leadership potential and support them in having the greatest impact on population health.

INVEST IN DIVERSITY PIPELINES
We will strengthen the pipeline and increase the pool of qualified applicants from underrepresented and disadvantaged backgrounds.

INCLUSIVE CURRICULUM
We will reenvision the School’s curriculum to fully integrate issues of diversity, equity, and inclusion.

TECHNOLOGY

Strategy 2: CURRICULUM LAB
Technology has fundamentally altered the ways in which we learn. We’ll disrupt the traditional “informative” educational model, which focused on transmission of knowledge, to create a “transformative” model that develops competencies to support critical reasoning and adaptation of solutions to meet local needs.

REFRESH CURRENT CURRICULUM
Based on a thorough curriculum review, we will revitalize our curriculum to ensure our program structure, course content, pedagogical methods, and out-of-class experiences address today’s major public health challenges.

CLASSROOM TECHNOLOGY
We will optimize the use of educational technology tools (e.g., flipped classroom, technology in the classroom, intercampus courses) for all public health students.

TECHNOLOGY-FOCUSED CURRICULUM
We will prototype and test courses related to technology-focused public health interventions, with key partners on and off campus.

CURRICULUM INNOVATION CENTER
We will create a new division to support curricular innovation across the School and house the School’s cross-cutting educational programs (On-Campus/Online Professional MPH Degree Program, Interdisciplinary MPH Program, Joint Medical Program, joint and concurrent programs, DrPH Program, the undergraduate major, and the Center for Public Health Practice).

THE ONLINE LEARNING BUSINESS CASE
We will develop a plan to maximize benefits from online courses, including revenue generation, enhanced reputation, and expanded pool of potential students.
CHALLENGE-FOCUSED CURRICULA
We will prototype and test courses using case-based curricula that promote critical thinking and problem-solving skills based on problems that need to be solved.

FIELD-BASED COURSES
We will increase students’ educational experiences working with community partners, giving them practical experiences in solving critical public health challenges.

Strategy 3:
KEEP EDUCATING THE FIELD
We will expand continuing education programs to offer lifelong learning to our alumni, build partner capacity, and generate revenue to support expanded community engagement.

DISTANCE LEARNING OPPORTUNITIES AND TECHNOLOGY
We will assess the potential to leverage distance technology and content already available within the UC Berkeley School of Public Health or the Berkeley campus, for both domestic and international markets.

ALUMNI EDUCATION
We will expand alumni engagement through educational opportunities tailored to emerging public health. These opportunities could be physical seminars or virtual discussions and could highlight alumni perspectives and/or achievements where appropriate.
CONTINUING ED EXPANSION
We will explore business models for expanding continuing education and will evaluate feasibility.

UCSF AS A CONTINUING ED PARTNER
We will explore partnerships within the broader Berkeley campus, with UCSF, and with other universities to leverage existing infrastructure and relationships for efficient expansion of continuing education.

RADICAL COLLABORATION

Strategy 4:
T-SHAPED LEADERS
We will prepare students to be transformational global health leaders in all sectors, including research, academia, government, and nonprofit and for-profit organizations by providing them with the traditional deep vertical training and experience as well as providing a set of broader contextual and system-based educational opportunities, trainings, and experiences.

SCALING CROSS-SYSTEMS PARTNERSHIPS
To prepare leaders to meet the complex public health challenges of today's world, we will scale up our prestigious concurrent and dual degree programs.

TRANSFORMATIVE LEADERSHIP EXPERIENCES
We will expand transdisciplinary leadership and professional development opportunities through field placements, co-curricular programs, and coursework that support hands-on work with community partners over year-long fieldwork experiences.

FACULTY-DRIVEN TRANSDISCIPLINARY LEARNING
We will radically expand co-teaching to maximize transdisciplinary learning.

COMPREHENSIVE CURRICULUM STRATEGY
We will integrate assessments of problem-solving, communication, and leadership skills into the School's newly implemented pre-post assessment of public health competencies, to ensure that our graduates demonstrate competency in these critical areas. We will use findings in continuous quality improvement efforts.
DISRUPTIVE RESEARCH

Public health challenges are becoming more complex, requiring ever-closer collaboration with other fields beyond traditional public health. The School of Public Health's vision for Disruptive Research focuses on solving the biggest public health challenges. These projects will require systemic approaches to research, involving better coordination across the School and the University, collaboration with individuals and communities, partnerships with industry, and communication with policy makers. To develop research with high impact positive disruption, the School will be focusing on:

**MOVEMENT-MAKING RESEARCH**
We will make significant research bets and align our collective research efforts on strategic efforts that transform conventional public health approaches and achieve major impact on population health and health equity.

**INTER- and MULTIDISCIPLINARY DISCOVERY**
We will build on Berkeley's unique comparative advantages, both on campus and in the Bay Area, to create the best enabling environment for individual discovery, collaboration across the School, and with our research partners.

**COMMUNITY COLLABORATIONS**
We will partner with the community, government, and industry to harness leading-edge technologies and thought leadership to address priority needs in our local Northern California communities and in vulnerable populations globally.

“The School of Public Health is building on its legacy of leading-edge research with an ambitious redoubling of efforts to pursue new approaches, new technologies, and new partnerships to impact public health’s biggest challenges.”

William H. Dow PhD
Associate Dean, Research
By design, each of these strategic research areas is larger than the specific projects or scientific research agendas of individual faculty. To continue advancing the School’s thriving atmosphere of innovative research, we will have to balance and support both research activity driven by individual faculty research agendas, as well as the collective research areas listed below by ensuring high quality administrative support for all of its researchers.

DIVERSITY

Strategy 1:
DIVERSE TEAMS FOR DIVERSE RESEARCH

Many of our largest local and global public health challenges arise from inequities affecting society’s most disadvantaged populations. We must make sure the School has the diversity of perspectives, background, expertise, and skills to solve these challenges.

DRIVE FOR EQUITY
We realize the opportunity for improving health in diverse disadvantaged populations will require engaging deeply with those populations, which in turn requires diverse teams drawn from those same populations. We must invest in efforts to expand and leverage the diversity of our faculty, staff, and students to reflect our increasingly diverse state and world.
TECHNOLOGY

Strategy 2:
TRANSFORMATIVE TECHNOLOGY

We will build on UC Berkeley’s comparative advantage in new tools and technologies that lead to quantum improvements in public health strategies.

MEASURING BIOLOGY OF POPULATIONS AND THEIR ENVIRONMENTS
We will develop an omics initiative that draws together cutting-edge scientific tools that can uncover new understanding of health dimensions and threats across the life course, and brings expertise in genetics and epigenetics (examining interactions between genetics and environmental exposures), proteomics/metabolomics (in relation to both obesity and infectious disease), and exposomics (assessing environmental and infectious agent exposures).

BIG DATA TO UNDERSTANDING CAUSE AND EFFECT
We will create a Causal Inference Center for Big Data that develops signature implementation science methods for exploiting vast new health datasets both locally and globally.

NEW POPULATION HEALTH CARE TECHNOLOGIES
We will partner with leading technology firms to help develop and evaluate innovative tools to amplify health promotion, monitoring, and behavior change efforts, particularly for scalable delivery in underresourced communities. These partnerships will include areas such as ehealth/ mhealth/ sensors/ diagnostics/ devices, in conjunction with campus partners such as CITRIS.
RADICAL COLLABORATION

Strategy 3: MOVEMENT MAKING RESEARCH

We will focus Schoolwide resources on the greatest global population health threats of our day, particularly the intersection of climate change, demographic change, and economic inequities.

FACILITATE INTERCAMPUS RESEARCH COLLABORATIONS
We will formalize UC Berkeley School of Public Health agreements with UCSF to promote collaborations and increase the Bay Area’s profile as a leading center of global population health research, including the development of the Berkeley/UCSF Institute for Global Health that works synergistically with other global health entities on both campuses.

FROM AGRICULTURE TO OBESITY: FOOD, NUTRITION, AND EXERCISE
We will markedly expand research on food production, food processing, nutrition, physical activity, and health services to address the rising burden of obesity and associated non-communicable disease, as well as the environmental burden of inappropriate food production. This objective will build on current campus resources such as the Berkeley Food Institute and the Center for Weight and Health.
CHILD AND ENVIRONMENTAL HEALTH
We will build on Berkeley’s current strengths in child environmental health through a new transdisciplinary initiative to address child environmental health exposures in the Americas.

CONTROLLING OUR DESTINY: DEMOGRAPHY AND HEALTH
We will coalesce efforts of existing centers focused on demographic change, including the Bixby Center, Berkeley Population Center, Center on the Economics and Demography of Aging, and Health Initiative of the Americas, to amplify research on the public health implications of such change.

THE ADOLESCENT MIND
We will catalyze intense study of the adolescent period that shapes life course health in often irrevocable ways through biological developments, health behaviors, and sociodemographic decisions guided by larger social determinants. This will be achieved through a new interdisciplinary center for adolescent research, Innovations for Youth (I4Y).
Strategy 4: 
BECOME A RESEARCH SIGNAL CREATOR

We will reach a high level of research visibility among internal and external stakeholders, including students, alumni, community partners, policy makers, peer institutions, and funders.

SAY IT MORE, SAY IT LOUDER
We will increase publications and citations in high-impact journals and other prominent publication outlets, and we will expand research dissemination on the School’s website and through social media.

BETTER COMMUNICATIONS WITH THE PUBLIC
We will produce regular research briefs to translate to non-academic audiences the findings and implications of specific School research initiatives and achievements.

ALUMNI ENGAGEMENT
We will recognize alumni achievements, promoting them internally at the School, and engage alumni as advocates for advances in research and community service.

BRING THE SCIENCE TO POLICY MAKERS
We will strengthen relationships with local and state policy makers to enhance the relevance and impact of the School’s research, building on current activities such as through the California Program on Access to Care.
“The local and global communities we work in have a history of being marginalized. We’re engaging deeply with partners in these communities, through the School and across the Berkeley campus, to address inequities and achieve sustainable health improvement.”

Jeffrey Oxendine MBA, MPH
Associate Dean, Public Health Practice

DISRUPTIVE COMMUNITY

To achieve health equity, the School will invest in deepening existing and new community partnerships in the Bay Area and California as a first priority. We will also continue to expand our dynamic in international community partnerships. These investments mean we will work in deep partnership with several key communities and local health organizations with a history of economically and politically marginalized and underserved populations, achieving more disruptive and sustained positive health, systems, and community change. We strive to strengthen our understanding of community challenges and our ability to test appropriate technologies and interventions for maximum population health impact.

To succeed, we need to proactively coordinate our collaborations across the School and the Berkeley campus and invest in strong community engagement processes and infrastructure in order to proactively support our various community engagements. Finally, we need to build on the School’s longstanding history of community-based participatory research so that we continue to create authentic and respectful academic-community collaborations.

The strategies and objectives for Disruptive Community focus on the integration, coordination, and infrastructure for an expanded, more effective, and sustained community engagement through the development of:
COMMUNITY RELATIONSHIP MANAGEMENT INFRASTRUCTURE
We will increase our ability to track and manage the numerous UC Berkeley School of Public Health centers and programs that engage community, locally and globally, increasing our capacity to radically collaborate with community partners to achieve the goals of priority health initiatives. We will develop Schoolwide best practices for the ethics and conduct of academic-community collaborations that help prevent so-called “drive-by” research in which marginalized communities are the “objects” but not beneficiaries or partners of public health research.

COMMUNITY STUDIOS
We will develop community studios, focused on long- and short-term partnerships to meet priority health needs and develop sustainable capacity and systems change. Partnerships will be based on and advance best practices in academic-community collaboration. Studios will embed, evolve, and develop research, education, and deeper engagement in each community we serve. These are engagements that achieve critical mass and mutual benefit. They are intended to enable generations of students to cycle through them and multiple research efforts to use them as their community-based platform, and for students, faculty, and staff to provide service to neighbors in need.
DIVERSITY

Strategy 1: 
DIVERSITY AS STRENGTH

We will ensure that the School is working in geographically, culturally, and economically diverse communities, with a broad range of partners.

BUILD A DIVERSE COMMUNITY PORTFOLIO
We will ensure that the School builds a diverse portfolio of public health communities and challenges, providing students with relevant and stimulating educational experiences that prepare them to address the public health challenges of tomorrow.

ALUMNI CHAMPIONS
We will identify alumni working in target communities and integrate them into community planning and coordination activities, further embedding School and specific projects in the community, and grounding our work through our alumni working in the field.

ENGAGE WITH CROSS SECTOR PARTNERS
We will expand student opportunities to work with the broadest range of community programs and partners—locally and globally, public and private.
TECHNOLOGY

Strategy 2: COMMUNITY TECHNOLOGY

We will identify and adopt community appropriate technologies, expanding our ability to provide more comprehensive and tailored solutions to communities, households, and individuals.

COMMUNITY-APPROPRIATE TECHNOLOGIES
We will work with communities to develop and deploy community-appropriate technologies that solve specific public health challenges they face.

COMMUNITY COMMUNICATIONS
We will use technology to expand on the School’s ability to host bi- and multilateral conversations with communities.

COMMUNICATE WITH INDIVIDUALS
We will explore how technologies allow the School to develop programs that provide appropriate information to individuals, rather than community-wide communications. We will look specifically at mobile platforms, smart phones, and emerging wearable technologies.

RADICAL COLLABORATION

Strategy 3: COMMUNITY STUDIOS

We will intensively address the greatest population health challenges in our local Northern California communities, nationally and globally, by building community studios with local partners that integrate and expand community engagement and strengthen community collaboration across education, research and service. These studios will act as a central hub for school and campuswide activities that address priority health needs and underlying causes in those communities, providing proactive coordination across all range of programs, resources, and partners.

CENTER FOR COMMUNITY ENGAGEMENT
We will organize the School’s extensive community-based efforts within a new Center for Community Engagement that will support our community-based participatory research, teaching, and service relationships in Northern California communities, allowing for improved support and centralized information on community engagement activities.
EXPLORE CONSULTATION SERVICE
We will explore development of a consultation service to advance collaboration with community partners to address priority health needs.

INCENTIMIZE ENGAGEMENT
We will create faculty and student incentives for greater community engagement.

BUILD EXEMPLARY PARTNERSHIPS
We will develop a signature initiative in partnership with one or more Bay Area communities and key government, public, or private partners to achieve transformational, long-term impact and strengthen the School’s faculty and student community engagement.

STUDIOS FOR EDUCATION AND RESEARCH
As part of the community studios, we will provide deeper and more integrated opportunities for research and educational purposes. Faculty and students can gain more experience in and contribute to our diverse communities. Studios can also be used to evaluate innovative new population health models for integrating primary care, public health interventions, and social determinants policies.

Strategy 4:
POLICY CHANGE
We will influence local and state policy and regulatory change and implementation.

POLICY CLINIC
We will implement a Policy Advocacy Clinic for community-based organizations funded by the Center for Public Health Practice’s grant from The California Endowment.

TRAIN STUDENTS IN ADVOCACY
We will expand the Center for Public Health Practice’s Policy Advocacy Initiative to train and engage students and implement advocacy clinic.

BUILD RELATIONSHIPS
We will strengthen and expand relationships with government agencies, legislators, and associations.

POLICY LIAisons
We will work with School of Public Health alumni in policy positions to develop practical local, domestic, and international educational experiences for the School’s graduate and undergraduate students, and position relevant research and community service to have maximum policy impact.
LOOKING FORWARD

For each of the School of Public Health’s Foundations and Disruptions, success will require targeted investments of School resources, vigorous development of donor support, and hiring of new faculty and staff consistent with strategic priorities.

We understand that the School does not have the resources to achieve all of these strategies simultaneously, but this work is an attempt to show what would be possible with appropriate resources, highlighting those activities that have generated a critical mass of interest both among our faculty and among our stakeholders. Our ability to undertake these exciting projects will depend on our ability to turn that early enthusiasm into real projects that attract real financial support.

Finally, we recognize that we need to be judicious about allocating scarce resources. As we invest in our strategic plan, we will be measuring each success and failure, learning from these experiences and adjusting our approaches as we go, ensuring we’re making educated investments in the future of our School, in the education of future public health leaders, and in the field of public health.
Appendix
Overview of the Strategic Planning Process

The process
Strategic planning began in the spring of 2014, with the goal of ensuring extensive input from stakeholders, including students, faculty, and staff of the University of California, Berkeley School of Public Health; members of the broader UC Berkeley campus; UC Berkeley School of Public Health alumni; employers of the School’s students; funders; donors; and community partners. Dean Bertozzi established a Strategic Planning Committee composed of the School’s faculty and staff who represented a broad range of perspectives within the School. The Strategic Planning Committee was organized into five distinct working groups: Research, Education, Community Engagement, Administration, and Diversity.

Each working group formulated key strategic questions it wanted to answer by means of the strategic planning process. The groups then conducted a review of existing data on the School’s research, teaching, and community engagement efforts to inform their understanding of current strengths and weaknesses, and to determine where there were gaps in information available.

Additional data gathering was conducted through a variety of mechanisms, including interviews, focus groups, surveys, and quantitative analyses. The working groups met regularly over the course of six months to incorporate feedback received from a variety of internal and external sources, in order to answer the strategic questions they posed and to develop this strategic plan, which will guide the School's efforts for the next three to five years.

Strategic questions
Key strategic questions posed by the Strategic Planning Committee included:

- What will it take to meet or exceed very high expectations for research, teaching, and service over the next five years?
- What should be the key areas of investment in collective research efforts over the next five to ten years?
- What are the most important cross-cutting diversity issues in the School, and how can we address them?
- What are the most important partnerships we need to develop or strengthen?
- How can we better communicate with various audiences, including the campus community, local communities, state and federal government agents, international stakeholders, donors, and alumni?
- What administrative structures will best support research, teaching, and community engagement?
- How can we ensure that our curriculum, both inside and outside the classroom, is preparing students to be the next generation of leaders in their fields?
- How can we maximize the effectiveness of our service activities for students, faculty, and those whom we serve?

Data gathering
The Strategic Planning Committee began by conducting SWOT analyses in the working groups, which were used to develop a Schoolwide assessment of the School of Public Health’s internal strengths (S) and weaknesses (W), as well as factors external to the organization that could be classified as opportunities (O) or threats (T). The SWOT analysis guided the committee's efforts to develop a plan with maximum alignment between the School’s resources and capabilities and the environment in which it operates.

Each working group synthesized data gathered from the multiple sources noted above, in order to develop the goals, strategies, and objectives shared in this strategic plan. The goals, strategies, and objectives reflect the many opportunities and challenges that exist both within our school and in the rapidly changing field of global public health. An implementation plan will be developed based on this strategic plan setting forth milestones and a timeline for accomplishing the School's strategic priorities.