

Holly J. Humphrey, MD, MACP (HJH):

Welcome to Season two of [Vital Voices](#), a podcast from the Josiah Macy Jr. Foundation. I am Dr. Holly Humphrey, the President of the foundation. Our second series of Vital Voices is focusing on the remarkable careers and accomplishments of the individuals and institutions who have received the [Josiah Macy Jr. Foundation Awards for Excellence in Social Mission](#).

Social Mission in Health Professions Education includes activities or initiatives that teach, model or improve community engagement, reduce healthcare disparities, and address the social determinants of health. Social mission means making health professions education not only better, but fairer. These awards are supported by the Josiah Macy Jr. Foundation, and their selection is made through the [Social Mission Alliance](#). This alliance was formally known as the Beyond Flexner Alliance, and this national organization focuses on health equity and training health professionals as agents of more equitable healthcare. The alliance is based at the [Fitzhugh Mullan Institute for Health Workforce Equity in the Milken School of Public Health](#).

Today's interview is with [Dr. David Carlisle](#), who accepted the award for Institutional Excellence in 2021, on behalf of [Charles R. Drew University of Medicine and Science](#). Dr. Carlisle has served as the President and CEO of Charles R. Drew University of Medicine and Science in the Watts/Willowbrook area of Los Angeles County since 2011. Dr. Carlisle is a national leader in health policy, quality of care, medical education, diversity, and eliminating health disparities. As a physician, his clinical work focused on caring for the underserved. Dr. Carlisle has been affiliated with the UCLA Department of Medicine for over 30 years, currently, as Professor of Medicine and Public Health at Charles Drew University. We are excited to learn more about the work being done under his leadership and how this institution has been truly transformed during the time he has served as its leader.

You can find all of the episodes of season two of Vital Voices on the Macy Foundation's [website](#). And now, here is my conversation with Dr. David Carlisle.

HJH: Dr. Carlisle, thank you so much for being with us today. Charles R. Drew University of Medicine and Science (CDU) has a unique history, very much connected with the community in which it resides. One of the things that I know our audience will appreciate hearing is your brief overview of CDU's history since being founded over 50 years ago, and what the mission and values for the school were at the time of its founding.

David Carlisle, MD, PhD (DC): Well, thank you Dr. Humphrey, I appreciate that, it's great to be here. Our school, our university, and we are a full-bore university, was founded 56 years ago for a purpose. And the purpose was really the aftermath of the Watts Uprising of 1965. There were 37 people who lost their lives, probably a mile and a half to a mile from our campus because of things like protesting and objecting to things like discrimination, oppression, lack of opportunity, etc. The McCone Commission at that time, convened by then-Governor Pat Brown of California, said that lack of educational opportunity was a major contributing factor to the angst that the community was experiencing and expressing in the Watts Uprising. That led directly to the creation of our institution one year later. We're here purposefully 56 years later, and we're still training students to serve underserved populations in healthcare. That is our mission.

HJH: Thank you for that. I know that many in our audience will recall that time in history and others may not, but it's important that we all learn from what happened. This is certainly an inspiring example of what can happen. Let's fast-forward to when you began your tenure as President and CEO in 2011, just 10 years before the national recognition that you received with the award from the Social Mission Alliance. At the time, I believe CDU was really struggling. What challenges did you and the school face at the time that you joined, and how did you go about meeting those challenges head on?

DC: We have had some peaks and valleys in our 56-year institutional history. Probably the deepest valley that we experienced occurred between 2007 and 2010. In 2007, our major affiliate, the LA County King/Drew Medical Center, right across the street from our campus, closed. This created a great vacuum in healthcare in South Los Angeles, losing a major public hospital like that. We also lost all of our residency programs that we were the educational sponsor for, roughly 15 programs. Three hundred residents disappeared from South Los

Angeles, making an already underserved area, more significantly underserved. We also lost funding at that time. The university then had several years of continuing financial losses. This brought us to the point where we had less than a million dollars of cash on-hand.

We were wondering if we could make payroll from pay period to pay period, and you can imagine all the repercussions. We also were placed on accreditation probation. Basically, the point was no margin, no mission, and if we were having financial issues, we probably were having educational issues as well. This was kind of a perfect storm, no money, accreditation probation, and the university really started to approach a nadir point. We had a finance audit at that time that had almost 40 audit findings. Today, we have audits where we have zero or maybe one finding every year. We had 40. Our auditors weren't sure that we were a going concern. Of those findings, 13 were material weaknesses. Those are defined as something that is existential for an organization. We were really on the brink, the precipice of closing.

I just want to give a shout-out to some individuals who said the role of this university, in terms of primary care, diversity, healthcare disparities, etc., is so important for the state of California and Los Angeles County that we will do what we can to try to keep it open for the foreseeable future. I want to especially recognize [Dr. Robert Ross of the California Endowment](#). I also want to give a recognition to then-LA County supervisor, Mark Ridley-Thomas, and others, many others, and organizations including our state government who worked together to do what they could to preserve our institution. UCLA, Cedars-Sinai Medical Center, the list goes on and on, and I could exhaust our time by mentioning people, but we're here today because of the efforts of others to keep us from sliding beneath the surface.

HJH: Wow, that's just a remarkable story. I'm sure if I were to talk to any of those people who you just mentioned, they would likely, in turn, give you a fair amount of credit as well, because in addition to overcoming the list of challenges that you just shared with us, CDU has greatly expanded and diversified the number of health professions degree-granting programs that are offered to students. It would be of great interest to our audience to understand why your institution has

prioritized an interdisciplinary focus in health professions education as one of its goals.

DC: We really do walk the interdisciplinary walk, and our College of Medicine is in the same building I'm in. Our school of nursing is right next door. Our PA programs, radiologic technology programs are in an adjacent building. We get together on campus, we have specific interdisciplinary educational activities that go on. I was just welcoming our newest cohort of students to the campus, and those individuals represent all the educational programs at the university. The next academic year, we'll have 20 programs; we currently have 19. A new program is coming on board, and that is a master's degree in genetic counseling. You can imagine the significance of that program. One of the biggest genetically-related diseases in the United States, of course, is sickle cell anemia. The genetic counseling population has a real opportunity to increase its diversity and bridge that gap between the patient community and the provider community, which just speaks to the overall situation of healthcare as well.

We're here to take students from underrepresented, underresourced populations, diverse populations, and turn them into healthcare professionals who are motivated to serve those populations.

HJH: Thank you for that. The community will, in fact, be the great beneficiary of those programs. The last few years have presented their own unique set of challenges, and I'd be interested in hearing how CDU has faced the crisis of a global pandemic, which shone an even brighter light on the health disparities faced by many communities and individuals in America. My guess is that your community was no exception.

DC: I remember December 27th, 2019, 4:30 in the morning. I usually get up early in the morning and look at news sources to see what's going on in the world that might affect CDU. There was a story, kind of obscure, about an unknown pneumonia occurring in Wuhan, China. I had to go on Google and look up Wuhan, China. I found a city as big as Los Angeles; I didn't know much about it, but from my time in state government where we had to deal with SARS, my reaction was, "Oh, no. I hope we're not going to go there again," because SARS was difficult. Fortunately, it didn't propagate the way COVID did. As it turned out, we were

dealing with something much more severe than SARS in terms of lives lost. Originally during the pandemic, people who were traveling overseas and coming back were the ones who were symptomatic in the United States.

It seemed to be first a disease, maybe associated with international travel. But as anyone in public health recognizes and knows, that's just the tip of the iceberg, you may not see the rest of the iceberg. Sure enough, communities like South Los Angeles became the epicenter of the COVID-19 pandemic because we have so many people who have frontline jobs here, bus drivers, food workers, restaurant workers, people who can't take time off, who interact with the public on a regular basis, people who are disproportionately afflicted with chronic conditions, diabetes, hypertension, that we know are risk factors for COVID-19 respiratory conditions. Sure enough, in our community, COVID-19 began to place a disproportionate burden of pain and suffering and death on residents of South Los Angeles, and other communities like it around the country. Our response was, "We've got to get people tested. We've got to make people aware of COVID-19."

Working with LA County, the LA County Fire Department, the Departments of Public Health, Healthcare Services, and Health Services in Los Angeles County, we launched one of the first testing centers in South Los Angeles. We went from about 80 people a day to well over 1,000 people a day who were receiving testing. At first, the public was reluctant. This I think underscores the unique role of CDU. When our students started going out into the nearby community to strip malls and shopping centers and meeting people on the street and saying, "You need to come over and get a COVID test. It's free. You don't have to have health insurance. You don't have to be a legal resident of the United States. We're not going to report our results by name to anybody, but you should know whether you have been exposed to COVID-19 or whether you've acquired COVID-19."

When the public realized that the people who were doing the testing spoke their language, looked like them, went to the same churches they went to, and cared about them viscerally, our testing rates went up significantly. I think that's a real testament to how an institution that is connected to the community, and we consider ourselves to be a community-founded institution, can transcend some of

these artificial barriers created by man, and I'm quoting our namesake, Charles R. Drew in saying that, and work to eliminate disparities in healthcare.

HJH: Dr. Carlisle, that is a very powerful example of how your faculty and students engage with neighborhoods and communities in a very real way. Do you have other examples other than the COVID-19 pandemic where your faculty and students have meaningfully engaged with your community?

DC: Quite a few, as you might imagine, but one that really deserves significant attention has to do with that other pandemic that we've been fighting against for decades now. Ironically, when I started my medical career, HIV/AIDS did not have a name, but we had hundreds of patients in the area hospitals with it. Here I am, at this point in my career, and we're facing another pandemic, COVID-19. In battling AIDS and HIV, CDU, with this community focus, launched one of the first mobile testing units in the entire country. I'll give a shout-out to [Dr. Cynthia Davis](#), who has led that effort for many, many years. We travel to places in our region where people don't have access to healthcare, where they don't want to interface with the healthcare system. We say, "We know that you might be in a vulnerable position. You may be in a marginalized population. You need to be HIV tested, and we're here to test you."

Many people, despite the downturn of HIV in general, would discover that they were HIV positive, and they could go on and move into therapy that basically saves their lives because of our mobile testing unit. That's another example of CDU's work in the community.

HJH: That's another powerful example. I want to shift gears for a moment and let our audience know that when you were nominated for the award that we're highlighting and celebrating today, one of the statements that was made in your award materials is the following. "CDU is a beacon of hope for students who wish to pursue a career in health professions and to become advocates for those whose voices are silenced." So, Dr. Carlisle, I can't imagine how much pride it likely gives you to hear that kind of a statement about your institution. Of the many, many things that your institution has done, is there an accomplishment that gives you a particular sense of pride?

DC: Well, the thing that gives me the greatest sense of pride and accomplishment is not a singular accomplishment, but it occurs every time I walk around our campus, and I do this frequently to recharge my batteries, and I encounter CDU students. I basically ask them, “Where are you from?” and I’ll often get a wry look. A student will turn to me and say, “Oh, Dr. Carlisle, I grew up right around the corner.” “I’m from 120th and Central.” “I’m from Watts.” “I’m from Compton.” “I’m from Willowbrook.” “I’m from the Athens area of Los Angeles.” “My mother and father didn't go to college, and I'm the leader of my family now.” “I’m 21 years old, and I’m leading my family.” That tells me that CDU is doing what we were placed here to do by bringing students from backgrounds such as these first-timers in college and propelling them into needed and productive healthcare careers. That's our singular greatest achievement. Every time we graduate a student, we realize that we're accomplishing what our university was created to do. That's our biggest achievement.

HJH: That is a wonderful and very inspiring example. I hope you spend as much time as possible walking around that campus, hearing those stories firsthand, because I can only imagine how inspiring and energizing it must be for you to hear that. Charles R. Drew University of Medicine and Science was named in honor of a brilliant physician whose contributions to science, medicine and public health may not be as broadly known as they should be. I'm hoping that one of the things you and I are accomplishing today is to elevate awareness of [Dr. Charles Drew](#) and how his achievements and values continue to inspire the mission of your school today.

DC: Every time somebody in the world, certainly in the United States, receives a transfusion of a blood product, they owe an appreciation to Dr. Charles Richard Drew, because he led and coordinated a lot of efforts to put together blood banking in the United States. He led the Blood for Britain program in World War II that allowed allied soldiers to receive transfusions when others couldn't. Thousands of lives, no doubt, were saved and continue to be saved and benefit from that work that was started by Dr. Charles Drew, working of course, with many other people in this area, but this is perhaps one of his singular career accomplishments.

If he was alive and we could ask him, and his daughter is here at the university as we speak, he would probably say that his biggest accomplishment was his role as a teacher. He led the department of surgery at Howard University and was doing that at the time of his death. The accolades that he received from a whole generation of African-American surgeons are legion. He viewed himself as a teacher first. Despite his research accomplishments, probably a researcher second.

HJH: Thank you for sharing that. I, for one, want to read more about him because his legacy obviously lives on through your institution, through you personally, your leadership, and all those students who you encounter as you walk around campus. There's one other topic that I want to bring up today before we end our conversation. In the interval of time between you receiving the award for institutional excellence in social mission and health professions education, and today, your school has reached another remarkable achievement, and I'm hoping you'll be willing to share that with our audience.

DC: Thank you, this has been a great achievement as well. First of all, I want to thank the Macy Foundation for that special recognition. It was wonderful to receive, and we appreciate it greatly. You are referring to our receipt of preliminary accreditation from the Licensing Council of Medical Education to open a new four-year medical school on our campus that is actively receiving applications for medical students who will start in the fall of 2023. This is a wonderful affirmation for our university. It means we will be training 60 new physicians every year, most of whom, or many of whom, come from underserved, underrepresented, underresourced populations, whose motivation to go into healthcare is to turn around and serve those populations. I will say that this is actually an aspiration that has existed here in South Los Angeles since before the opening of Charles R. Drew University of Medicine and Science.

I know that historically there are and have been physicians here in South Los Angeles, the Charles R. Drew Medical Society for example, who were calling for the creation of a medical school to serve this community in the early 1960s, maybe even the late 1950s, because they knew how dire healthcare disparities were here even at that time. This has been a dream, aspiration and a goal here at

CDU and in South Central Los Angeles for 60 years, again antedating the incorporation of our university. We were finally able to achieve this. In doing so, return or answer a promise, a commitment that we made to so many individuals over so many years that we would be able to open this medical school.

HJH: Well, I can hardly wait to see what is yet to come, but achieving this first step is a major one. So, congratulations again to you, your faculty, and your students. Most of all, thank you so much for taking the time to speak with me today and to share more insight and experience with our audience about the truly remarkable achievements of Charles R. Drew University of Medicine and Science. We are all inspired and grateful to you for your leadership and for your time today. Thank you.

DC: Thank you very much for inviting me to be with you and your audience. I very much enjoyed it.

HJH: Thank you for listening, and we hope you'll share this conversation with others. Be sure to subscribe wherever you get your podcasts so you will be notified when the next episode drops. And make sure you're signed up to receive email updates from the Macy Foundation. Thank you.