It has been said that if you meet one Preventive Medicine physician, you have met one preventive medicine physician, given the diversity of their practice and the places in which they work. This column highlighting various preventive medicine physicians has offered a glimpse into the careers and various roles and experiences the specialty of preventive medicine offers a physician. The member selected for this article is Dr. Celeste Philip, an active member of the American College of Preventive Medicine and a very passionate physician who cares deeply about ensuring true health equity in our nation.

Member Spotlights highlight Preventive Medicine physicians and their careers—how they found preventive medicine as a specialty and how the training enhanced their careers. Previous spotlights have included Dr. Brenna VanFrank of the U.S. Centers for Disease Control and Prevention in Georgia, Dr. Leith States, of the U.S. DHHS Office of the Assistant Secretary of Health, Dr. Linda Hill of California, Dr. Michael Crupain of New York, Dr. Tista Ghosh of Colorado, Dr. Maria Mora Pinzon of Wisconsin, Dr. Ed Fess of Arizona, Dr. Chris Pernell of New Jersey, Dr. Lisa Waddell of Atlanta, and Dr. Ankush Bansal of Florida—all engaged members of ACPM. Now I share highlights from Dr. Celeste Philip, a preventive medicine physician now based in the greater Washington, DC area.

Dr. Philip has had an incredibly rich career from leading county health departments, serving as a State Surgeon General of Florida, to leading the four non-infectious disease centers at the U.S. Centers for Disease Control and Prevention (CDC) in the midst of a worldwide pandemic. She has recently been appointed Professor of Public Health Practice at the new School of Global Health at Meharry Medical College in Nashville, TN. Her expertise across all levels of public health provides her with very rich experiences to inform her public health guidance and decision making.

You have had a very rich career in public health, what attracted you to the specialty at the start?

While in college and already considering a career in medicine, I was introduced to the concepts of prevention and caring for the health of communities as well as individuals. Immediately I was drawn to both the logic and the creative potential of a focus on well-being where the goal is to preserve or restore optimal health.

In our conversation, you shared several examples of your work in global health. How did those experiences influence your career path?

As a second-generation American who grew up with many childhood friends whose parents are from many different countries with varying languages, fashion, cuisines and customs, experiencing and valuing other cultures is a foundational principle for me. In college, medical school, residency and fellowship training, I sought opportunities that would allow me to live and work with international colleagues—in six continents—to further my understanding of not only policies and practice, but also how to hone skills in communication, respect and diplomacy. These principles in international settings have served me well in my governmental roles, and I look forward to sharing lessons learned with the next generation of global public health leaders at Meharry’s School of Global Health and beyond.

What were the most impactful, and perhaps stressful, decisions you had to make as the head of a public health organization? What are the differences between those at the county vs. state vs. national levels?

In state roles, one must try their best to direct and oversee statewide programs that have different implications in various communities while adhering to national guidelines.
and best practices. Balancing these often-competing demands with limited resources is challenging. However, working with and in communities where you experience firsthand how efforts of local government are or are not working is humbling, rewarding, challenging and fulfilling. The recent national dialogue on the critical importance of community voice and buy-in is refreshing and will be a key strategy in equity efforts and building resilience.

Many preventive medicine physicians came through the CDC’s Epidemic Intelligence Service (EIS). What in your mind did that program offer beyond your residency training to solidify your work as a preventive medicine physician?

As a family physician with an MPH and an interest in prevention and well-being, EIS training enhanced my skillset by providing me with applied epidemiology experience to understand how to use large datasets and contextual background to understand community and national level health issues. It was also during this period that I participated in regional and national surveys and projects with international teams. The combination of technical, management and leadership roles was unique and served as a launching pad into my next and final year of training as a CDC preventive medicine resident where I felt prepared for the high level of responsibility and autonomy I was entrusted with.

What advice would you offer young physicians who are beginning their journey in medicine?

Technological advances such as the rapid integration of artificial intelligence into daily life must be contemplated from a health perspective in both direct and indirect ways. As more automation is introduced into health care, the role of clinicians will change. Physicians who understand large systems must be involved in these systems changes to ensure quality and equity are at the forefront for patients and communities. We also must contemplate how these changes will impact care models and how to prepare for different clinical and non-clinical roles and responsibilities that utilize our skills and bring professional and personal satisfaction.

What is the best advice you received that made a difference in your career decisions?

While it is important to dream big and have a sense of how you can contribute to society, being open to unexpected opportunities may lead to even greater blessings and magnify your impact.

From your point of view, what is the key benefit that a professional association such as ACPM can offer an individual?

ACPM has celebrated and uplifted the atypical and unique ways that preventive medicine physicians can serve their patients and communities. More innovation and embracing emergent unconventional roles will allow for us to thrive and serve our patients and communities well; ACPM has and continues to lead efforts to catalyze and amplify support for these new opportunities.