

ACPM Member Spotlight:
Chris Pernell, MD, MPH, FACPM, Chief Strategic Integration and
Health Equity Officer at University Hospital, Newark, NJ

Donna Grande, MGA, CEO of ACPM

Despite the differences in professional roles and organizations in which preventive medicine physicians serve, there is one unifying passion — prevention. Recently, I had the occasion to meet one of our passionate members, Dr. Chris Pernell, who has been quite active in the media sharing her story about volunteering in the Moderna vaccine trial and losing her father last year to COVID-19. During our conversation, she shared her drive to make a difference using her skills, knowledge and expertise. Below is a peek at our conversation.

What attracted you to the specialty of Preventive Medicine?

Issues of human and civil rights have been very important to me throughout my personal and professional development. I initially entered medicine thinking I would be a neurosurgeon but the desire to focus on population-wide issues of health promotion and disease prevention and to connect with communities through the lens of health equity and health justice led me to pursue public health and preventive medicine. Racism is a public health crisis and we need physician leaders on the front-line of social justice, policymaking, and community-based advocacy in order to achieve whole, empowered and well populations. As a public health and preventive medicine specialist, I treat systems and take into consideration the upstream factors or structural determinants that influence health and well-being outcomes across groups, especially within historically excluded communities like Black and Brown populations. That allows me to operate fully in my purpose, passion and calling.

Was there a breakthrough moment that led you to take your PMPH Board exam and join ACPM?

Upon entering General Preventive Medicine training at Johns Hopkins, I always knew that I would take the PMPH Board exam. Being board certified has been important to me to indicate a level of commitment and expertise in the field. During residency, I joined ACPM and I've maintained my membership ever since. I think



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it's critical to be connected to other preventive medicine physicians as part of ongoing learning and development. It's also a way to network with others and to be part of the growth and progress of the field.

The pandemic has raised the importance of health equity on many fronts and your hospital role appears to be well suited to lead the way for institutional change. How has training/education in PM positioned you for your current role?

As a trainee in the Johns Hopkins General Preventive Medicine Residency, I spent essentially two full years doing project-based work since I had my MPH before entering the program. In those two years, I worked in local, county and federal government, in health care

institutions in both ambulatory and inpatient settings, in non-profits in the policy advocacy space as well as on the ground building in communities where Black and Brown people have been marginalized. Working at a public academic medical center in Newark, New Jersey in an inaugural role that oversees Equity and Inclusion, Population and Community Health, Community Affairs, Patient/Human Experience and Strategic Planning, I've been wholly prepared across my training and employment background.

Still, the pandemic in and of itself has provided harsh but relevant lessons. At University Hospital, at the height of the Spring 2020 wave, our organization withstood an unprecedented public health crisis. With nearly every hospital bed filled with coronavirus patients from our majority Black and Brown community, we experienced the devastation firsthand. Not only did we fight to save as many lives as possible, but we held the line to keep our frontline staff afloat. Across this pandemic, we've lost 12 members of our UH family and our staff have lost family members as well. The hospital also played a significant role coordinating logistics and a pandemic response across the Northern region of our state. We mobilized population health initiatives in socially and culturally fluent tones to help mitigate the information gap and to engage community members on how to stay safe and to keep them attuned of telehealth and other clinical services. As an academic medical center, we were also at the cutting edge of novel investigational therapies and a host of the Moderna Covid-19 vaccine trial, which I volunteered for alongside other hospital staff and leaders. My participation was fueled by my community and family's story and desire to walk in my accountability.

I've been personally impacted by this crisis. The epicenter of the pandemic landed on me and my family – losing my beloved father on April 13, 2020 and two cousins before the turn of the new year. Also, my sister, who is a breast cancer survivor, is a Covid long-hauler. Using the power of narrative to tell stories in communities that often feel unheard has been a deliberate focus. Data can tell a story but data through the lens of lived experiences can illuminate a topic in ways that statistics alone cannot. I've used my personal story to define how exposure, infection, hospitalization and mortality risks have been disproportionately experienced by persons of color, and even now as we broker trust conversations about vaccine acceptance and willingness in communities where healthcare and scientific institutions have failed to demonstrate trustworthiness. And, as we face more than 400,000 American lives lost, we must keep the focus on those families and communities most impacted in order to solve our way out of this crisis.

Health equity and health justice must remain a strategic priority in order to rescue our nation, neighborhood by neighborhood.

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

It's crucial for all young physicians to understand how upstream factors influence health and the role of systems and societal forces on health outcomes and life opportunities. For instance, all physicians, especially those who are beginning their journey in medicine, need to understand the impact of systemic and institutional racism and implicit bias on patients. The COVID-19 pandemic has shone a bright light on the disproportionate burden of illness experienced by persons of color. The devastation caused by the pandemic cannot be extricated from the role of endemic racism. The integration between public health and clinical medicine is necessary for health equity to be achieved.

As you reflect on your own professional career, what is the best advice you received that made a difference in the opportunities you explored or the risks that propelled your career?

Two pieces of advice stand out to me: 1) Choose a training program that values and recognizes your humanity and sees you as an asset. This can be said of career opportunities as well. People thrive where there are inclusive and intentional systems of support and connectedness. This is the substance that propels you when challenges arise, or barriers are faced. 2) Seek out diverse opportunities to develop a comprehensive yet agile skill set. Taking professional risks in pursuing an opportunity that may not be tailor-made for you, can still be ripe with potential to grow in dynamic ways if that position registers with your core. For example, I was trained in academic medical centers but sought out non-profit and even public sector experiences to give me a thick perspective on topics of health equity and population health. This approach has led me into previously unfamiliar sectors for a physician but dared new insights and problem-solving skills.

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

ACPM is a professional home. A place where one's insights are valued and where our collective identity as a field can be nurtured and honed. The narrative that we live and demonstrate about preventive medicine and public health is our power. We need to cultivate and curate our voice across all sectors because public health is fundamental to the human experience and even human and civil rights.