

SOPHIE DAVIS SCHOOL OF BIOMEDICAL EDUCATION

The Sophie Davis School of Biomedical Education at The City College of New York (CCNY) is a unique 7-year combined BS-MD program with a social mission. The program has been around for 35 years, and during those years has brought more than 1600 physicians into the workforce, many of them from under-represented minorities and many of them practicing primary care in underserved communities. Remarkably, many medical educators don't know of Sophie Davis; indeed, we think of ourselves as the least-known and most-focused medical school in the country. During this period when renewed attention is being paid to training more doctors who will meet the needs of our communities and address health disparities – not just more doctors who will participate in the grave imbalances of access and care that contribute to poor health outcomes from a population perspective – it might be a good time to examine the Sophie Davis model

During Sophie Davis students' 5 years on the City College campus, they participate in a curriculum which combines the requirements for a baccalaureate with the basic science components which usually reside in the first two years of a traditional medical school curriculum. Our students then transfer to one of 6 cooperating medical schools for their last two clinical years of education. Thus, their Bachelor's degree is from CCNY and their MD is from the cooperating school. The program was started in 1973 to improve diversity in the medical profession by providing a medical education for young people from groups that are under-represented. It has endured because that gap has persisted and because of the documented failure of doctors to practice medicine in geographic areas (rural and urban underserved) and specialty areas (primary care) that represent the greatest areas of need. This social imperative is codified in the form of a Service Agreement. Graduates of Sophie Davis pledge to serve the community after they complete residency, by working for a minimum of two years as a primary care physician in an underserved community.

High School students who come to Sophie Davis are a special group. They must be certain that they're going to be doctors and must also be committed to a primary care career. They have to be academically strong enough to thrive in an accelerated and compressed curriculum. They have to be intellectually nimble. One of the challenges that we've identified is that some of the young people who are needed the most in the ranks of the medical profession – those from low-income families which are African-American and Latino – are often those who attend high schools with limited resources, challenges and expectations. We have therefore developed strong and comprehensive support services.

Although our educational model resembles well-tested European and British models – we admit young people out of high school, and combine university and medical education – our program stands out as being “different” in the United States. As compared to the other BS/MD programs in the US, there is no sharp line at Sophie Davis between the “pre-clinical” sciences and the “basic” sciences. Similarly, the development of professionalism, clinical skills, and critical-thinking skills are continuous achievements, rather than being demarcated between college and medical school. There is a distinct and strong focus on community health and social medicine. Our graduates are younger than their class cohort when they begin their clinical clerkships at the six cooperating schools, which leads to a variety of challenges.

Most importantly, Sophie Davis is a school strongly driven by its mission, and we measure our success by mission-defined outcomes. We admit approximately 55% under-represented minorities, and about 45% of

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our graduates are URM. Until recently 40% of our graduates have chosen primary care specialties (i.e. primary care internal medicine, primary care pediatrics, family practice, and general obstetrics/gynecology). Approximately 40% of our graduates fulfill the Service Agreement; the other 60% are liable to pay an obligation of \$75,000. We consistently strive to find ways to better fulfill our Mission.

The Sophie Davis model is important both functionally and historically. We demonstrate that it is possible to build a medical education around our vision of “Access, Excellence, Community.” We consistently try to recruit young people with passion and potential from schools all over New York. We meet challenges head-on. Because we do not have our own clinical campus, however, we are dependent on the good will of our Cooperating Schools. These relationships have shifted over the years but have been remarkably stable and enduring at many schools.

We are grateful to the Medical Education Futures Study for the opportunity to bring the perspectives and experience of the Sophie Davis School to the discussion.

The Sophie Davis School of Biomedical Education
The City College of New York
Website: <http://med.cuny.edu>

Additional Sophie Davis Information:

[The Sophie Davis School of Biomedical Education of the City College of New York: Career Outcomes Study](#)

[Addressing the Urban Pipeline Challenge for the Physician Workforce: The Sophie Davis Model. Stanford Roman. Academic Medicine, December 2004.](#)

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