

Today, we come together to celebrate Downstate and its history. This milestone brings the campus together, and makes us all feel proud.

I want to encourage everyone to get involved in the Sesquicentennial over the next year -- whether it's by participating in one of the many planned events, or by contributing to our account of historic achievements.

I want to again emphasize that this is a *campus-wide* celebration and history. The College of Medicine is our anchor and our linchpin, and we would not be who we are without it – but all of our colleges and our hospital, as well as our teaching affiliates, are equally important.

Legendary giants have walked our halls and made great contributions to medicine and to science -- both on our faculty and among our graduates.

Our history started when the science of medicine was young, and many of the standards of practice that we take for granted today were unknown or in their infancy.

1860 was before Pasteur and Koch established the germ theory of disease. Anesthesia was primitive -- and there was no antisepsis. Epidemics of cholera, influenza, and other infectious diseases felled large numbers. Drug manufacture was crude.

But it was also an exciting time. Scientific investigation into the causes of disease had begun. Tools such as the stethoscope were making diagnosis easier. Even how medicine was taught was changing – and we led that change. We were the first to bring the teaching of medicine to the patient's bedside. We were the first true teaching Hospital in America.

In addition to innovation, several qualities have defined us from the start: Commitment to community; to providing educational opportunity; to diversity. And we have been defined, shaped and strengthened by the immigrant experience – just as Brooklyn has been.

The men who founded the Long Island College Hospital came from the same immigrant stock as Brooklyn's earliest settlers, with its mix of Dutch, English, Irish, and German cultures. It was Dr. Louis Bauer, a German immigrant who came to Brooklyn by way of London and the Royal College of Surgeons, who suggested bedside teaching as part of the curriculum.

His recommendation to start a teaching hospital was strongly supported by another founder, Dr. William Henry Dudley, a physician who emigrated from Dublin. And it was Dr. Dudley who backed this recommendation with financial support at a critical moment. Although its first faculty had been chosen, LICH was bankrupt and its board had voted to close the hospital and sell its land. Dr. Dudley advanced \$28,000 to buy the property outright. The day after his purchase, the first course of medical lectures began.

So you see, we owe our very existence to immigrants.

It would be difficult to tell the full history of Downstate in a short period of time. I want to share a few stories that I think capture the essence of who we are.

We were founded on the eve of the Civil War, an epic battle for human rights and freedom.

We don't know what year we graduated our first African American student. We do know that right after the Civil War we were one of 10 northern medical schools – and the only one in New York City – that accepted black students.

One of our first African American students was Dr. William Burney, who graduated in 1877, taking six years to graduate because he had to work his way through. Dr. Burney would go on to found his own medical school in Kentucky, the Louisville National Medical College. This was the first black proprietary medical school and the only one to be managed entirely by African Americans.

TODAY, we continue to be a leader in fostering diversity among healthcare providers. We are fourth in the nation, behind the three historically black medical colleges, in the number of African American faculty members. We are in the top ten in the number of black and minority medical students we enroll.

In our early years, one of our best-known graduates was a Scottish immigrant, Dr. Alexander Skene, class of 1863. He joined the faculty in 1865, after serving in the Civil War, and spent nearly his entire career at LICH. He served as dean, and then as president, from 1886 through 1899.

Dr. Skene presided over Long Island College of Medicine during America's Great Wave of Immigration that began in the 1880s and lasted until the early part of the twentieth century. Large numbers of Central and Eastern European Jews, Italians, and Slavs, along with Scandinavians, came to these shores – and to Brooklyn -- looking for a better life. While there are no records of how many of our students were immigrants, or the children of immigrants, it is reasonable to assume that our student body reflected the changing society.

TODAY, SUNY Downstate is one of the most diverse academic health centers in the country. Every year, when we hold our Commencement exercises, I am reminded anew of how richly diverse we are. The College of Medicine conducts surveys of entering students and asks for their place of birth and that of their parents. For the class of 2013, students listed 30 different homelands for themselves and 48 for their parents, with an astonishing mix of languages spoken -- from Albanian and Assyrian to Urdu and Yiddish.

And it's not just our College of Medicine that is diverse. At a time when nurses are playing an ever more crucial role in healthcare, approximately three-fourths of our students in the College of Nursing are minorities. Similarly, the College of Health Related Professions is the gateway for students from many backgrounds who are seeking to enter some of the most competitive and highly paid careers in healthcare today.

Brooklyn's diversity is also reflected in our Master of Public Health Program, which started with a single major in Urban and Immigrant Health, and has become Brooklyn's first School of Public Health. What better place than here to train for a career in public health?

I am proud of the fact that more than 40 percent of our students come from Brooklyn itself. We offer opportunities for education and careers that no other institution of higher learning in the borough can provide. And we offer these opportunities to a population that lags the nation in socioeconomic status, but sees education as a way of joining the economic mainstream.

I am also proud of the commitment that we have to our community.

Back in Dr. Skene's days, LICH provided free care in its outpatient departments, and a number of its patients came to the hospital direct from Ellis Island. Many were laborers who worked long hours in deplorable conditions and lived in even more crowded tenements.

TODAY, we continue the tradition of outreach to the community, through programs that expand education and access to health care. At last count over 80 community service programs are offered year round, including free health screenings, science enrichment for young people, patient and family support groups, disease prevention and treatment for people living with HIV/AIDS, and collaborative projects with other community groups.

Our commitment to diversity and inclusion is also illustrated by the story of Dr. Dorothy Bocker, the first woman to graduate from Downstate.

Women were all but excluded from the field of medicine through the early 1900s. Although the faculty voted in 1880 to allow women to be admitted to the College, Dr. Bocker was the first woman to graduate, in 1919. (Harvard, by the way, didn't admit its first female student until 1945.)

Dr. Bocker played an interesting role in the history of reproductive rights in America. When Margaret Sanger – the birth control activist – wanted to open a clinic to dispense contraceptives, she needed to open a research bureau and staff it with a physician in order to circumvent laws that prohibited this. It was difficult to find such a physician -- because it meant potentially losing your medical license, or even going to jail.

"I needed to find a physician with the moral courage to risk her liberty and enter this battle with me," Sanger later wrote.

She found that physician in Dr. Bocker, who ran 13 separate clinical research trials on different methods of contraception and implemented a unique coding system to ensure her patients' confidentiality – light years in advance of today's HIPAA safeguards.

It wasn't until the 1970s that women began to enter American medical schools in large numbers. In 1970, 103 women, out of a total study body of 817 were enrolled as students at Downstate.

TODAY, roughly half of our medical students are women. We have graduated or had on faculty many women who are pioneers in their field, and have made major contributions to Downstate.

We have also made great strides in admitting students and hiring faculties from other groups that have suffered discrimination across the years – Asian Americans, gays and lesbians, older students. And we have also accepted a number of students from nontraditional backgrounds – pilots, accountants, actors, and sculptors – who have found it difficult to gain entry into other medical schools.

I want to share one last story that illustrates our philosophy of inclusion, and is also the story of our merger with the State University of New York and how we came to be SUNY Downstate Medical Center.

What many of you may not know is that between 1920 and the early 1950s, there was strong discrimination against admitting Jewish students to medical schools. This reflected the Immigration Acts of 1921, which were steeped in prejudice against eastern and southern Europeans. It also reflected a decrease in available slots in medical schools, as a result of the Flexner Report, which recommended closing many schools because of quality concerns. As a result, the number of medical schools in the country fell from about 200 in 1910 to 83 in 1921.

Many medical schools imposed admissions quotas. The dean of Yale Medical School said, “Never admit more than 5 Jews, take only 2 Italian Catholics, and take no blacks at all.”

In 1946, the New York City Council convened a special committee to investigate why graduates of the City’s public schools and CUNY had difficulty obtaining admission to graduate and professional schools.

When the report came out, it documented that although the number of Jewish applicants had sharply risen, the number of Jewish students from CUNY had sharply fallen – including at the Long Island College of Medicine, our name at that time. The admission rate was higher if their parents were born here than if they were born abroad.

The ultimate result – after action by the New York State Legislature and Governor Thomas E. Dewey -- was the formation, in 1948, of the New York State University. The Legislature specifically recommended that the new university include medical schools.

The rest as they say is history, although it would take two years after the founding of SUNY before we officially merged, in 1950. We were the first medical school, out of the four that exist today, to join the SUNY system.

The faculty and students that came on board with us in those early days of transition should be considered pioneers. One of those pioneers was Dr. Chandler McCuskey Brooks, who was professor and chair of the physiology and pharmacology departments in 1948; and remained chairman of the physiology department until 1972. He founded and headed the graduate program from 1956 to 1966 and then served as the first dean of Graduate Studies until 1972. In 1975, he was appointed to the National Academy of Sciences.

It was Dr. Brooks who recruited and hired our Nobel Laureate, Dr. Robert Furchgott to head the Department of Pharmacology. Dr. Brooks had a vision for developing a world-class research institution, and many of our achievements in science can be traced back to his foresight.

The reason I am singling him out, among the many brilliant scientists and clinicians who have made Downstate what it is today, is that he strove to establish a medical center that was run not only on the basis of scientific excellence, but also on human understanding. Unlike other scientists with a limited field of specialization, his broad intellectual training and wide acquaintance with people from all over the world gave him a broad view of the human experience.

Among his contributions to campus life was a lecture series that introduced students to a wide spectrum of writers and thinkers. The famous British historian Arnold J. Toynbee, poets W. H. Auden and Archibald MacLeish, composer Aaron Copeland, and management consultant Peter Drucker were among the lecturers who came here. When critics said there was no good reason to bring such lecturers to a medical school, he had a ready answer: "The physician must confront and communicate with people as they are. The more he knows of man and his social state and culture, the better."

I would ask us all to keep that in mind, as we strive to propel Downstate to the forefront of medicine and science. It is important to stake out our leadership role, but it is just as important that we not forget the human element. That is the glue that has bound us together for 150 years – and will ensure our success for the future.

I am going to stop here, although certainly there is more to tell.

If you haven't had a chance to look at the history panels outside the auditorium, I invite you to do so, and to also explore the timeline on our website and in the program distributed today.

If you have anything you would like to add, please do so – ours is a living history, and we need the involvement of all to document it.

We are planning events and educational seminars over the next year that will also help us record our history, and Dr. Martin Salwen is also working on a book that will highlight the achievements of Downstate. I look forward to reading it—as I know many of you will. I want to thank everyone who is participating in making our Sesquicentennial Celebration a success, especially Meg O'Sullivan and Jack Termine.

Finally, I want to leave you with two thoughts: Our Sesquicentennial must be a time for reflection, not only on our history, but on our future. We should use this year to think seriously about where we need to go from here.

How can we best position ourselves to meet -- and shape -- the changes in clinical education and public health that will keep New York a healthy, vital, and thriving community for the next 150 years?

How can we continue to be a major force for economic and educational opportunity?

How do we build on our biotechnology projects – the Advanced Biotechnology Incubator and BioBat project on the Brooklyn waterfront – to take advantage of local, regional, and state opportunities.

How can we work with our sister SUNY schools on projects that will benefit research and scholarship and help brand the entire the SUNY system?

To examine these questions, we are committing ourselves seriously to Chancellor Zimpher’s important strategic planning initiative.

I have asked our Planning Department to reach out to all of you and I ask that you give thought not only to the specific needs of each of our schools and programs, but also to the ways that SUNY Downstate can continue to reshape and improve itself for decades to come.

My last thought is less grand, but no less important.

It is that we need to ensure that SUNY Downstate can continue its tradition of offering educational opportunity to all of those who will use it to benefit our borough, our city, and our state.

As a small step in doing this, we are developing a Sesquicentennial Scholarship fund called \$150 for 150 - one dollar for each of Downstate’s 150 years. I hope you will give it your full support. It will provide financial assistance for students in all our programs and schools, underlining our belief that health care is a team effort.

Thank you to all of our guests. Thank you all for coming – and a happy 150th birthday.