

Defining Leadership

An Interview with Michael Dowling, President and Chief Executive Officer, Northwell Health

EDITORS' NOTE Michael Dowling is one of healthcare's most influential voices, taking a stand on societal issues such as gun violence and immigration that many health system CEOs shy away from. His leadership has been invaluable to Northwell's consistent expansion and prominence. In March 2020, he successfully navigated the health system through the first COVID-19 epicenter in the U.S., detailing Northwell's experiences in a book titled, *Leading Through a Pandemic: The Inside Story of Humanity, Innovation, and Lessons Learned During the COVID-19 Crisis*. Overall, Northwell treated over 300,000 COVID patients – more than any other U.S. health system.



Michael Dowling

Island Association. He is past chair and a current board member of the National Center for Healthcare Leadership (NCHL), the Greater New York Hospital Association, the Healthcare Association of New York State, and the League of Voluntary Hospitals of New York. Dowling was an instructor at the Center for Continuing Professional Education at the Harvard School of Public Health. He earned his undergraduate degree from University College Cork (UCC), Ireland, and his master's degree from

Fordham University. He also has honorary doctorates from the prestigious Queen's University Belfast, University College Dublin, Hofstra University, Dowling College, and Fordham University.

INSTITUTION BRIEF Northwell Health (northwell.edu) is a clinical, academic and research enterprise with a workforce of more than 85,000 and annual revenue of \$16.5 billion. Northwell is the largest healthcare provider and private employer in New York State, caring for more than two million people annually through a vast network of more than 890 outpatient facilities, including 220 primary care practices, 52 urgent care centers, home care, rehabilitation, and end-of-life programs, and 21 hospitals. Northwell also pursues pioneering research at the Feinstein Institutes for Medical Research and a visionary approach to medical education highlighted by the Zucker School of Medicine, the Hofstra Northwell School of Nursing and Physician Assistant Studies, and one of the nation's largest medical residency and fellowship programs.

Will you discuss your views on effective leadership and the role that business leaders have in addressing societal issues?

Leaders, in my view, have a special responsibility and obligation. It's not just a job and it is not about having a lofty title and a fancy office. You should never be defined by those things – you should be defined by what you do and by the positive difference you make.

There are two major roles, I believe – an internal one and an external one. The internal role is to manage and lead your organization – build an optimistic, team-oriented culture and attain the desired business results.

That role, of course, is primary, but I am a firm believer that leaders have an external obligation – to use their influence to improve circumstances in the community at large. This applies to all CEOs, but especially in healthcare. In most communities we are the largest employer. We have an obligation and mission to raise health, not just provide medical care.

I define health broadly. One's health is impacted by a multiplicity of factors. We raise health by providing employment opportunities; we raise health by enhancing educational opportunities; we raise health by dealing with nutrition and food insecurity; and we raise health by responding to the growing issue of gun violence. Gun violence is a major public health issue – how many people realize that guns are the leading cause of death for children and adolescents.

Our responsibility as leaders is broad and community-wide. We must stand up and lead. It is good to see many doing so, but more is needed, especially in the uncertain times we live in. Optimism is key and a core ingredient in any definition of leadership. We have the ability to change lives for the better – to build a better future. It cannot just be left to our political leaders, especially now.





Michael Dowling discussing gun violence prevention with New York Governor Kathleen Hochul at the fourth annual Northwell Health Gun Violence Prevention Forum (above) and addressing the Forum (previous page)

You mentioned that you define health broadly. How do you decide where to commit Northwell's resources and what issues to address?

We obviously cannot do everything. We analyze what's going on in the communities we serve and we get input from local leaders and influencers. We also target those issues that can have wide (even national) impact and where we can be a catalyst to get others involved. At the present time, we are targeting as priorities: gun violence, food insecurity, education (for children in poorer families), mental health, and immigration.

At Northwell, we have almost 85,000 employees. They are also community members, affected by so many of these issues. They are excited about our involvement and have expressed their happiness to work for and belong to an organization that cares about these issues.

How did Northwell's focus on gun violence prevention develop and how have you approached this effort?

Each year, 40,000 die and more than 70,000 are injured by guns. That's a distinction the U.S. should not be proud of. Of all the children 0-14 who die from gun injuries in the developed world, almost 90 percent occur in the U.S. Things must change.

Our active involvement began in earnest about five years ago. I took a full-page ad in *The New York Times* calling on all healthcare leaders to use their influence to treat gun violence as a public health issue and focus – not on the 2nd amendment, but on prevention and safety. The response was minimal at first, but that is now changing.

At Northwell, we established the Center for Gun Violence Prevention and Safety – we focus on education, on enhancing public awareness, and partnering with other local, regional

and national organizations who are likewise involved.

At the beginning, many healthcare leaders were hesitant, but fortunately, as mentioned, it has changed. We have created a national CEO Council which now has 55 CEOs of the largest health systems in the country involved. That is progress. We plan to launch a robust national awareness campaign on prevention and safety. It is also wonderful to see the leaders of other non-healthcare organizations getting involved.

This is a long-term effort and I am optimistic that over time we will bend the gun violence curve and bring some reasonableness and common sense to our deliberations on this issue.

There are many aspects to gun violence. What are the keys to driving change?

The keys to driving change are optimism, education, public awareness, and consistency of effort. I remember, years ago, the discussion on automobile safety. Cars were dangerous – high death rates and injuries. We did not ban cars, nor will we be able to ban guns. We took a “public health” approach. We installed air bags, seat belts, we “softened” the dashboard, we changed speed limits in certain locations. We strengthened the requirement to have a driver's license. I recall how much Ralph Nader was criticized at the time – but he was right. We have to take a similar approach with guns – how do we lessen the impact, who should have access to them and who should not, how do we enhance their safety, etc. It's important to remember that 80 percent of legitimate gun owners are strong supporters of gun safety and prevention.

In today's culture and politics, there is no quick answer or solution, but that must not deter our commitment. It's a long-term effort.

How important is it to address mental health as part of the gun violence discussion?

This is an area where we need to be very careful. We have a huge mental health problem, and it is growing, just like we have a huge gun violence problem, and it is growing. There is an overlap – there are issues with mental health and issues with guns – we have both. Not all gun violence is related to mental health, and not all mental health is related to gun violence, but there is a segment of it that is both. We must acknowledge the fact that, as healthcare leaders, we have a mental health problem and this impacts gun violence, while acknowledging that mental health is not the cause of all gun violence.

Another aspect that is really difficult, especially when it comes to kids, is social media and technology. They play these massively violent games where people die and then they come back to life. There is blood all over the place and then it disappears because it is fake. We need to address the impact that this is having on the mental health of kids.

Is it difficult to remain optimistic when you look at the increase in gun violence?

In the short run – yes, but one has to maintain an optimism about what's possible in the long term. Success with anything takes time – and most progress is incremental, one step at a time. We have to give people the sense that there is always hope and to inspire them never to quit. In many ways, this is what leadership – good leadership – is all about. We have too many naysayers, too much negativity. We can look at the dark side or we can look at the bright side. We have to acknowledge the dark, but see the light.

How important has it been for you to never forget where you came from, even with all of your success?

Very important. We are all shaped by our past experiences and by the decisions we make along the way. Your past gives perspective. Growing up in the circumstance in which I lived taught me important lessons – the virtue of hard work, the importance of relationships, the importance of taking risk, of having integrity and decency. I learned that few people want to follow a pessimist – that optimism and a never-quit mentality is key to any degree of success. I learned that it's essential to keep your feet on the ground, treat people with respect, not be enamored just with yourself. When you look in the mirror, observe the good and the blemishes – it keeps perspective. It keeps you humble.

What motivates you?

I am motivated by realizing that I have the opportunity to make a small difference. I like to be challenged and I like crises. Big problems inspire me. I enjoy taking risks. Good people are always a little bit dissatisfied, which motivates them to get better. Ralph Waldo Emerson said, “Do not follow where the path may lead, go instead where there is no path and make a trail.” I ask myself what kind of trail can I leave? What do I want my kids to say about me? I want them to say that their father made a difference, not just in my children's lives, but in the lives of others as well. ●