

As a young medical student aspiring to become a pediatrician, M. Keith Rawlings, '83 thought death was something he would not have to confront that early in his career. But tragically, Dr. Rawlings had to break the news to the parents of a five-year old that their child had died. "I decided at that point, I didn't want to do that anymore," says Dr. Rawlings, 46. "I didn't want to have to tell any other parents that their child was dying. That was very, very hard."

Today, Dr. Rawlings often deals in death. He is medical director of the Peabody Health Center in Dallas, Texas, where he treats about 600 patients who are suffering from an incurable virus—HIV. "It is one of the ironies of my career," Dr. Rawlings says. "Unfortunately, I have probably attended more funerals or have had to deal with the issue of dying than probably many of my colleagues. This is still, unfortunately for many people, a fatal disease."

In August, Dr. Rawlings was named Practitioner of the Year by the National Medical Association for his efforts in the fight against HIV and AIDS.

In addition to running the clinic, he heads Integrated Minority AIDS Network Inc., or IMANi, a non-profit organization that trains health care professionals involved in HIV care who focus particularly on the minority community. He also makes sure politicians understand the seriousness of the disease and that it is disproportionately impacting people in poor communities. "AIDS, for some parts of the country, is the primary cause of mortality among African Americans between the ages of 15 to 45," Dr. Rawlings says. "This has increasingly become a disease of poor people."

It is easy for people to believe that HIV and AIDS are no longer a problem. After all, high profile figures like basketball star Earvin "Magic" Johnson have been living with HIV for years. Death rates also have fallen as drugs have improved.

"AIDS is no longer front-page news," Dr. Rawlings says. "The reality is there are still a lot of people who are living and dying and having to deal with the disease."

"Many of these people are poor and minorities. These are people that many physicians don't want to care for," he says. "A lot of our colleagues have very strong feelings and don't care about substance abusers. If you are uninsured, you are not getting a lot of physicians clamoring to have you in their practices. That was true in the 1980s; it is true now."

There was little to suggest that Dr. Rawlings would one day become a leader in the fight against HIV and AIDS. An only child, Dr. Rawlings grew up in Baltimore. His father taught physical education and was a principal at a grade school, and his mother was a librarian and taught kindergarten.

After graduating from high school, Dr. Rawlings went to Amherst College, in Massachusetts, where he played lacrosse and was involved in the theater. "I wanted to use sports and theater to work with handicapped children," Dr. Rawlings says. "I hadn't even thought of going to medical school."

A professor told Dr. Rawlings that to help handicapped children, he would have to become a doctor. He received a scholarship from the National Health Service Corps and went to medical school, graduating in 1983. After a residency in internal medicine at Union Memorial Hospital in Baltimore, Dr. Rawlings opened a private practice, but also was obligated to pay back the Corps.

He spent two years at a health center in West Baltimore where he saw more patients with HIV and AIDS—many were poor African-American men and women.

In 1988, Dr. Rawlings joined the Baltimore City Health Department after being asked by the city's mayor to head its office on AIDS policy. After only a year on the job, the National Health Service wanted him to move to Lake Charles, Louisiana, or to Huntsville, Texas and work in the prison system. "I didn't even know where Lake Charles was," Dr. Rawlings admits. He argued to stay in Baltimore, and Baltimore's mayor and Maryland's governor wrote letters on his behalf urging the National Health Service to reconsider. But the need was too great elsewhere.

Dr. Rawlings, his wife, Illona Sheffey, and their two children, moved to Lake Charles in 1989. He was sent because the regional hospital was being closed, and the health center that he was assigned to had to serve the entire southwestern area of the state.

The group of five physicians and a dentist had few resources. There was no one on the staff who specialized in infectious diseases; so Dr. Rawlings called hospitals across the country for help. "It gave me an experience and exposure to what underserved care looked like," Dr. Rawlings says. Many of the patients were poor, and some suffered from HIV.

Dr. Rawlings began teaching physicians in the neighboring rural parishes about HIV and AIDS. Being the only black doctor in the area, he sometimes wondered "why exactly am I even here." Dr. Rawlings worked in Lake Charles for three years. However, in 1992, his wife, a lawyer, was recruited to teach law at Southern Methodist University. "The choice was hers regarding what we did next," Dr. Rawlings says.

Once in Texas, Dr. Rawlings landed a job at Parkland Health & Hospital System and became the associate medical director of the community oriented primary care system and clinical director of HIV/AIDS early intervention program. He works with patients in his clinic 40 hours a week, and says it is no easier confronting death. But what is important is that he and others do everything they can to treat people with HIV and AIDS.