

MGH INSTITUTE OF HEALTH PROFESSIONS

A MAGAZINE FOR ALUMNI AND FRIENDS OF THE BOSTON GRADUATE SCHOOL FOUNDED BY MASSACHUSETTS GENERAL HOSPITAL



ENRICH



**A new growth initiative
points the IHP to its future.**

School of Nursing
Dean is Named

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A Spotlight on
Invisible Labor

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Honoring Memory
Of Two Alumni

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Philanthropic participation of our alumni this year —and every year—is vitally important.



“Giving to the IHP is a double gift: we’re helping students achieve their professional goals, and also playing a role in helping patients receive care from providers who have been educated at a graduate school that values patient centeredness, high quality, and commitment to professional excellence.”

—SHIRA WINTER, NS '16

“As a student, I was impressed with the high level of interdisciplinary collaboration and encouragement I received from both the faculty and fellow PhD students. Now, as a faculty member myself, I continue to support the IHP because we truly believe in graduating health care professionals who are well-equipped to provide team-based care, while also creating opportunities for collaborative research.”

—MEGAN SCHLIEP, PHD '20

“As a student, I experienced the high caliber of education and sense of community commitment encouraged by the Institute. I feel it is important to help the next generation fulfill their goal of becoming a well-prepared health care professional with the power to become a leader in their field.”

**—ARLETTE FREDERICK,
PT '95, '02**

From innovative interprofessional curricula to leadership opportunities across campus that allow our students to develop skills as collaborators and problem-solvers, your gift makes the IHP experience possible. Your annual support of the MGH Institute Fund empowers our students to thrive in a challenging learning environment and demonstrates how IHP alumni help bolster future graduates.

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ENRICH
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MGH Institute of Health Professions Magazine

Summer 2021, Volume 7, Number 1

MGH Institute of Health Professions Magazine is published twice a year by the Office of Strategic Communications. It is mailed to alumni, friends, and supporters of the MGH Institute. Please send any correspondence, including letters to the editor and address changes, to news@mghihp.edu.

mghihp.edu

A Time of Transitions

I hope this message finds you and the people you care about healthy.

The fall of any academic year is always special—new students beginning their programs in their chosen careers, faculty excited about how they have re-envisioned their courses, and staff eager to make all of our systems work perfectly to serve our community. This is the excitement I have felt for many years each September.

But this year definitely feels different. In March of 2020, we closed the campus due to COVID-19, and all of our faculty, students, and staff were sent home to do their work. And our community was amazing. Because of the commitment, ingenuity, and persistence of faculty in teaching and students in continuing their studies, we graduated a full class of students in 2020 and another just recently in August. And our staff also was amazing in how they innovated and went beyond their roles and responsibilities to make sure our students could continue their education

For the first time after almost 18 months of mostly online course delivery and the majority of our employees working from home, the IHP campus will come alive again this fall. We will welcome new and returning students with a combination of virtual and in-person events. Our academic programs will largely be delivered in person, retaining the successes that strengthened our programs during the pandemic, when we created new models of education that combine the best of pre-pandemic and pandemic pedagogy.

The excitement is palpable as we look forward to the opportunity to see our students and colleagues in person after a very long time. Ours is a community



Paula Milone-Nuzzo, President and John Hilton Knowles Professor

that thrives on relationships, collaborations, and collegiality. Being on campus again will allow us to experience the joy of personal connections many of us have been missing. Of course, just as we have done over the last 18 months, we will continue to protect the health and safety of our community through our Commit @ IHP (mghihip.edu/commit-ihp) initiative, and we will be vigilant in assessing when change needs to occur and reacting quickly. We have become masters of the ability to change and adjust with the latest and most relevant science.

The transition back to campus is not the only one the IHP will be experiencing this fall. You will read in this magazine about a major growth initiative, ENRiCH, that was envisioned prior to the pandemic with the majority of planning done during the pandemic—a real testament to the resilience of our IHP leaders. An important element

of this initiative allows the IHP to build on its strong foundation in clinical education to include non-clinical health-related disciplines in our academic portfolio. We know that the complexities of health care require providers who understand the way health care works, and administrators and data scientists who recognize the challenges of clinical practice. Our new programs in health care leadership and health care digital analytics will be essential partners to our clinical programs as we prepare providers and leaders for the challenges facing health care. Our ENRiCH programs make the IHP an even stronger contributor to the world of health care delivery.

Transitions are never easy. They are sometimes messy and are experienced differently by individuals based on their own circumstances. While I mentioned above the excitement and joy of returning to campus, at the same time I know there is anxiety about the persistence of this virus, vaccine mandates, mask mandates, and many other variables that we have little control over. The one thing I am sure of is that, as a community, we will face these challenges together, support each other through the difficult times, and continue to build on the excellence of the Institute. Our world has forever changed over the last 18 months, and the IHP has successfully adapted and in many ways capitalized on those changes. That is who we are and that is what will continue to distinguish the IHP.

I hope you have an amazing and healthy fall. If you have not already been vaccinated, please consider doing so. It is safe and effective and the best way we can keep ourselves and the people we care about healthy. I wish you peace.

FIVE QUESTIONS

Kimberly Truong, PhD Chief Equity Officer

Kimberly Truong, PhD, is chief equity officer in the Justice, Equity, Diversity, and Inclusion (JEDI) Office. Dr. Truong is also an adjunct lecturer on education at the Harvard Graduate School of Education and a faculty affiliate of the MGH Center for Cross-Cultural Student Emotional Wellness. Prior to coming to the MGH Institute in 2019, she was director of inclusion programs at the Harvard T.H. Chan School of Public Health.



1 Last June, the Office of Diversity, Equity, and Inclusion became the Justice, Equity, Diversity, and Inclusion (JEDI) Office. What was the significance of that change?

Kimberly Truong: It wasn't just a change in name, but in the alignment of our work with justice and equity. The mission of the IHP is to advance a caring and diverse society. The role of the JEDI Office is to help guide the institution toward fulfilling that goal, leading with equity. I shared with President Paula Milone-Nuzzo the reasoning behind why we wanted to rebrand the office and she was on board immediately. And because of the Institute's commitment to JEDI, our office was able to expand in size during the pandemic, despite the IHP's hiring freeze. I've never worked in an institution like this, where change can happen so quickly.

2 What does the new focus mean in practice?

KT: The office used to focus on stand-alone programming, but we're focusing now on providing targeted support to marginalized and minoritized community members as well as capacity building for everyone. A lot of the work we're doing is aligned with the goals we set in June 2020. One recent accomplishment has been establishing the guidelines for

invisible labor for faculty of color [story, p. 22]. Invisible labor has been discussed so much in the higher education literature, and no institution has actually tackled it. Although I've had conversations about it for two years at the IHP, it only took about a year working with faculty to put the guidelines in place. We're implementing the hardware to institutionalize justice and equity.

3 What are some ways you're working to institutionalize JEDI learning for students?

KT: JEDI staff and our student JEDI Fellows are providing support for curricular changes in the school's academic programs. Dr. Callie Watkins Liu, associate director of JEDI curriculum, pedagogy, and faculty support, and I guest lecture in a series of classes addressing implicit bias, microaggressions, intersectionality, and critical race theory across semesters, and we're working to add sequencing content for students across the IHP. We plan to support faculty to be able to facilitate their own courses related to these topics. Similarly, the JEDI Office has restructured the Power, Privilege, and Positionality student orientation

program to have explicit goals and learning outcomes. There are many things to come, such as alignment of course content with JEDI core competencies and support for sequencing JEDI education content.

4 How do you see the JEDI Office's mission going forward?

KT: For many years, we have been operating within the status quo. The JEDI Office, with its inception alone, disrupts this. As JEDI concepts and language continue to evolve, our office will continue to provide capacity building, support the IHP community in learning, and provide targeted support for marginalized and minoritized members. We also hope to expand the number of affinity spaces, caucus spaces, and employee resource groups. We will be exploring what equitable support looks like and work with our IHP partners to implement these supports.

5 What's been an unexpected obstacle to your work?

KT: I've noticed a culture of perfectionism at the IHP. It's not that people don't want to engage in JEDI topics, but they want to do it the right way, and they're afraid to make mistakes. We need to normalize making mistakes as part of the learning process and understand that practicing skills helps us to develop them. As educators at the IHP, especially, we must model vulnerability to our students and demonstrate how there are always opportunities for growth. This includes going out of our comfort zone, learning about JEDI issues, and taking action. Through discussing this openly and introducing the concept of Brave Spaces, helping individuals to have brave dialogues, the IHP culture is starting to change. I'm greatly encouraged by the direction the school is going in.

Kenneth R. White Named Nursing Dean

Kenneth R. White, PhD, APRN, FACHE, FAAN, has been appointed Dean of the School of Nursing at MGH Institute of Health Professions.

Dr. White, who recently completed service as the associate dean for Strategic Partnerships in the School of Nursing and endowed professor of Nursing at the University of Virginia (UVA) and where he continues in that affiliation as an emeritus professor, began his new role at the MGH Institute on July 1.

“Dr. White brings a wealth of academic, health care, and administrative experience to the role,” said Alex F. Johnson, PhD, CCC-SLP, the Institute’s provost and vice president for Academic Affairs. “We look forward to having him join us in leading our School of Nursing in its next chapter.”

“Building on the nearly 150 years of nursing education innovators at MGH and the Institute, I am honored to be the new dean,” said Dr. White, who takes over from Elaine Tagliarini, EdD, RN, CNE, FAAN, who served as dean for the past two years. “With our faculty, staff, alumni, and donors, plus our partners in the Mass General Brigham system and in the IHP community, there is much we can and will do to improve patient and community health outcomes, increase access to the best health care possible, and raise our profile in research, clinical education, and our commitment to justice, equity, diversity, and inclusion.”

While at UVA, White also held joint appointments at the Darden School of Business, the McIntire School of Commerce, and the School of Medicine. He also maintained a clinical practice as a palliative care nurse practitioner at UVA Medical Center. Earlier in his career, he was an executive with the Mercy Health System, an international provider of health care, where he led the civilian hospital on Guam and served in



Photo: Dan Addison

Dr. White arrived at the MGH Institute from the University of Virginia.

various administrative roles with Mercy Health Center in Oklahoma City.

From 1993-2013, White was a professor and directed the graduate programs in health administration at Virginia Commonwealth University. He also held the inaugural Sentara Professorship in Health Administration until his transition to UVA in 2013. He has completed visiting professorships at the Luiss Business School in Rome and at the Swiss School of Public Health. He also has completed consultancies in the Republic of Kazakhstan, Guam, Micronesia, and the Republic of Palau.

His scholarly work is extensive. He has published many refereed articles as well as chapters and texts on several areas important to the practice of nursing including: intensive, hospice and palliative care; nursing innovation and entrepreneurship; the evolution of Catholic health systems; access to health care for vulnerable populations; and many areas of hospital leadership and management. He is widely known for his award-winning text, *The Well-Managed*

Healthcare Organization, published by Health Administration Press which now is in its 9th edition. In 2019, he received the American College of Healthcare Executives Gold Medal Award, its highest award for lifetime contributions to health and health care leadership.

White received his BSN, MSN, and PhD degrees from Virginia Commonwealth University. He also holds a Master of Public Health degree in health administration from the University of Oklahoma and a Post-MS Certificate as an Adult/Gerontology Acute Care Nurse Practitioner. In his work as a certified nurse practitioner, he also holds specialty certification in hospice and palliative care.

He was inducted as a Fellow in both the American Academy of Nursing and the American College of Healthcare Executives. Later this year, he will begin a two-year term as the president of the American Academy of Nursing, an organization with which he has been actively involved for years.

The Clear Choice for New OT Chair

Regina Doherty was the first person the MGH Institute hired in 2011 when its entry-level Doctor of Occupational Therapy program began. As the inaugural program director, she laid the foundation for the first entry-level Doctor of Occupational Therapy degree in the Northeast and set the program's vision. So when the department needed to hire its next chair, a nationwide search proved that the best option was already on campus.

Doherty, OTD, OTR/L, FAOTA, FNAP, who had served as interim chair for several months, replaced inaugural chair Dr. Lisa Connor. Doherty assumes responsibility for a department that has blossomed during the decade she has been its director and associate chair. It has educated more than 200 new occupational therapists, created the Tabor/Connor Family Occupational Therapy Center for Learning,

Participation, and Rehabilitation, earned an impressive ranking in the top 12% of all OT programs by *U.S. News & World Report* in its first year of eligibility, and launched a post-professional OTD program for practicing clinicians.

"It is an honor to have been named the next chair of the Department of Occupational Therapy," said Dr. Doherty. "We have an outstanding team and I am exceptionally proud of the outcomes of our OT faculty, staff, students, and alumni."

A regarded scholar in the ethics community, Doherty's national work in health professions education will position the IHP to advance OT practice, education, and research by innovating in ways that are learner centered, patient centered, forward thinking, and strategic.

"I look forward to leading the OT department and building on our record



Dr. Regina Doherty has been part of the Department of Occupational Therapy since it began.

of accomplishment and excellence," said Doherty, whose steadfast moral leadership throughout the pandemic has been commended by many. "Together we will strengthen the occupational therapy profession and contribute to the health and well-being of society."

Mass. Labor Head Speaks on Campus

Filling the large number of available health care positions caused by the coronavirus pandemic will be key to Massachusetts' economic recovery.

That's the key message delivered by Rosalin Acosta, the state's Secretary of Labor and Workforce Development, during a June visit to the MGH Institute campus.

Acosta noted that health care, the state's largest industry, has lost 91,500 jobs since March 2020. Health care is still down 43,500 positions, including a shortage of 14,000 nurses along with 10,000 direct-care workers and 1,000 behavioral health workers.

"In addition to bearing the brunt of the frontline response to the health outcomes of the pandemic, the health care industry also bore a disproportionate burden of the economic fallout,"

she said, noting the pandemic created a "rapid run to retire" that has exacerbated the shortage.

Acosta said she was optimistic about the future, pointing to the state having experienced its fastest recovery in history and the \$5.4 billion the state has received from the federal government. "This is a reckoning moment and we have to get this right," she said.

The MGH Institute is a member of the state's Health Care Collaborative, a private-public initiative created to combat health care shortages. The IHP is one of just six schools on the Nursing Faculty Task Force, which aims to strengthen the nursing pipeline, increase the number of clinical placements, and provide supports for nursing faculty.

Before her remarks, Acosta toured the Sanders IMPACT Practice Center, where



Despite a continuing health care labor shortage, Robin Acosta remains optimistic about the future.

faculty-supervised students in several programs provide more than \$1 million annually in pro-bono care to clients. "I love what you're doing here," she said.

A 38-Year Connection Comes to a Close

It was 1983, and Alan Jette was an early-career physical therapy researcher with a faculty appointment at Harvard Medical School. In those days, PTs usually only supported medical research, and he yearned to make his own mark as a researcher. While interviewing Boston-area physical therapists for a research project, he met Nancy Watts and Marjorie Ionta, two of the MGH Institute's early PT leaders. What they were doing was so intriguing that he decided to join the fledgling graduate school.

"It looked like a very interesting place to be," recalled Dr. Jette. "I liked the interdisciplinary philosophy of the IHP, and I felt I could pursue my own research at the school while continuing to teach."

While he has seen the school flourish over the decades, he said its current success was anything but guaranteed. "Those early years were extremely turbulent, as the school was trying to establish itself as an independent graduate school within Massachusetts General Hospital," said Jette, who recently retired after a 38-year teaching and research career. "No one really knew its future."

The school stabilized in the mid-1980s when Dr. J. Robert Buchanan, the general director of MGH, along with Dr. Henry Mankin, chief of orthopedics at MGH, became early champions of the Institute. The involvement of Buchanan and Mankin allowed the Institute to focus on growing its academic programs. "Without those two people, especially Dr. Buchanan, I believe there would be no IHP today," said Jette.

In 1986, Jette became director of the entry-level PT program and faculty chair under the school's first president, Dr. Stephen Collier. When Collier left in 1987, Buchanan asked Jette to become



Dr. Alan Jette in 2013 speaking with students in the first cohort of the PhD in Rehabilitation Sciences program.

interim president. Despite his reluctance to continue moving into administrative positions, Jette took on the role for a year but passed on pursuing a permanent position in favor of pursuing his own research.

Jette left two years later to become a scientific researcher for the New England Research Institute but maintained an adjunct faculty rank at the Institute for the next 24 years. He moved to Boston University a few years later, where in 1996 he was named dean of Boston University's Sargent College of Health & Rehabilitation Sciences and then director of the university's Health & Disability Research Institute in the School of Public Health.

Authoring hundreds of articles and being a visiting lecturer at scores of universities, Jette became internationally known for his research, which focused on the measurement and evaluation of rehabilitation outcomes, and the prevention and treatment of disability. His proudest

professional moment came in 2013, when he became the first physical therapist to be elected to the Institute of Medicine of the National Academies of Science. He currently serves as editor-in-chief of *Physical Therapy Journal*, the official journal of the American Physical Therapy Association.

When the IHP began making plans to jump-start its research initiative in 2013, Jette was among the first faculty Dr. Robert Hillman hired to teach in the new PhD in Rehabilitation Sciences program. "I feel as if I had an impact in the Institute's early phase, helping to create a strong connection with the MGH community, and more recently teaching the PhD students and helping the research portfolio grow over the past eight years," he said, noting he has taught his scientific measurement course to every PhD student since the program's inception. "I've always been committed and proud of the IHP's philosophy and what it has accomplished. It's exceeded all my expectations."

“There Are No Hospitals for Sick Planets”

Scorching-hot summers, raging storms, melting ice caps—familiar signals of climate change. However, climate change’s medical and human rights crises are equally urgent. The MGH Institute’s Center for Climate Change, Climate Justice, and Health addressed them during a virtual symposium in April, “Climate Change and Health 2021: The Intersection of Climate Change, COVID-19, and Structural Racism.”

Speakers included Senator Edward Markey (D-MA), co-sponsor of the Green New Deal. If passed by Congress, the bill is expected to create millions of new jobs while addressing climate change nationwide.

“There are no hospitals for sick planets,” said Markey. “We have to engage in climate care.”

Keynote speaker Dr. Renee Salas, a fellow at the Center for Climate Health and the Global Environment (C-CHANGE) at Harvard University and an emergency medicine physician at Massachusetts General Hospital, pointed to research demonstrating a link between climate change, physical and mental health issues, and antibiotic resistance.

“As converging crises layer on each other, our system is stretched,” said Salas, who also serves as an assistant professor of emergency medicine at Harvard Medical School. “The COVID-19 pandemic has demonstrated that prevention is key. We have to address that.”

The pandemic also starkly illustrated the effects of structural racism. Areas known as “heat islands,” usually located in low-income and minority communities, lack the green space, parks, and trees that keep wealthier neighborhoods cooler. Research suggests that residents in heat islands are more likely to suffer from health conditions such as asthma, which can heighten susceptibility to



U.S. Senator Edward Markey speaks during “Climate Change and Health 2021: The Intersection of Climate Change, COVID-19, and Structural Racism,” held on April 24.

COVID-19. “We have to develop a health care core that limits disparities,” Salas said.

Meteorologists Pete Bouchard, with NBC 10 in Boston, and Keith L. Seitter, executive director of the American Meteorological Society, said the window to act is narrowing.

“There is no vaccine for climate change,” said Bouchard.

Dr. Caleb Dresser, a fellow in Climate and Human Health Program at the Harvard School of Public Health C-CHANGE and an emergency medicine physician at the Beth Israel-Lahey/Beth Israel Deaconess Medical Center, and Dr. Regina LaRocque, with the Massachusetts General Hospital Division of Infectious Diseases, encouraged raising awareness as well as taking public action.

“We challenge you to contact your local legislators. We want to move the needle around climate change and health,” agreed Dr. Patrice Nicholas, director of the IHP’s climate center and a professor of nursing.

The next five to 10 years will “decide the fate of humanity and health care,” said Salas. “We can no longer put bandages on bullet wounds.”

IHP, MGH Team Up on Webinars

The MGH Institute’s Center for Climate Change, Climate Justice, and Health and the Massachusetts General Hospital’s Center for the Environment and Health are partnering on a monthly webinar series focused on climate change.

“Both centers have a common focus on the importance of the environment in health, sustainability efforts, and the growing body of knowledge regarding the health consequences emerging in our climate-changing world,” said Dr. Patrice Nicholas, director of the MGH Institute’s climate center.

Webinars have included “Climate and Health Curriculum Development in Medical and Nursing Education,” “Integrating Climate Change in Clinical Practice,” “Roles of Health Professionals in Interprofessional Education and Practice to Address Climate and Health,” and “Sustainability Efforts to Address Climate Change.” Speakers have included health professionals from Mass General, the MGH Institute, and other regional health organizations.

The MGH’s center, where Nicholas is co-director of advocacy, education, and community outreach, was created to integrate sustainability into the hospital’s clinical, research, and educational activities and to improve the environmental health of the hospital, as well as the health and well-being of the communities it serves.

“The MGH and the IHP have a shared mission to educate health professionals and the public about the impacts that climate change and environmental degradation are having on human health right now,” said Regina LaRocque, MD, MPH, a physician-researcher in the MGH Infectious Diseases Division and one of the MGH Center’s associate directors.

New Research Grant Could Be a Game-Changer for Struggling Readers

Dr. Tiffany Hogan and Dr. Maura Curran from MGH Institute of Health Professions will use a \$3.6 million, five-year grant from the National Institutes of Health (NIH) Institute on Deafness and Other Communication Disorders to investigate whether providing intensive, small-group oral language intervention improves reading comprehension for at-risk students.

The five-year project, “Translating Research Into School-Based Practice via Small-Group, Language-Focused Comprehension Intervention,” will provide first-grade students with intensive intervention sessions in small groups four times a week. The researchers will then follow students with low language through third grade, monitoring how much their vocabulary, reading comprehension, and oral language skills improve. Students with low language are at risk for language difficulties but don’t necessarily have a disability.

“We are asking if this type of early, small-group intervention is enough to make a difference in how well a student can succeed over time,” said Hogan, a professor of communication sciences and disorders and director of the MGH Institute’s Speech and Language Literacy (SAiL) Lab.

“If it does, it will be a game-changer for so many children who don’t have formal individualized education plans but might be falling through the cracks,” Hogan said. “These students’ needs aren’t severe enough to qualify for individualized service, but they still need some support so they don’t fall behind their classmates in the long run.”

The grant is the largest ever received by the MGH Institute.

The IHP researchers will collaborate with Dr. Shayne Piasta of Ohio State University, Dr. Mindy Bridges at the



Dr. Tiffany Hogan (left) and Maura Curran will use a five-year NIH grant to determine if intensive oral language intervention improves reading comprehension.

University of Kansas Medical Center, and Dr. Kandace Fleming of the University of Kansas. This is an extension of work Hogan and the three other researchers started over a decade ago with the Language and Reading Research Consortium, funded by the Department of Education.

Hogan pointed to three primary concerns that spurred the researchers to pursue the project: systematic teaching of language and comprehension skills is weak or missing in most U.S. schools, which is especially problematic for children most vulnerable to failure; implementing an effective evidence-based language intervention at the whole-school level is needed to determine how to best implement research in practice; and testing both clinical and theoretical implications for comprehension processes and interventions is critical.

Over the past two years, Hogan and her lab team implemented a pilot program called Raising Educational Achievement in Charlestown, or REACH, at the Harvard-Kent Elementary School in Charlestown, which was funded by a seed grant from the local office of accounting firm RSM. The NIH grant will enable them to apply in multiple districts and states what they learned through testing the effect of intervention with the local students. It will also allow testing both clinical and theoretical implications for comprehension processes and interventions.

The researchers will follow the progress of 480 schoolchildren in multiple school systems in Massachusetts and Ohio from first through third grade, a critical period for early comprehension development.

Nerve Stimulation Paired with Rehabilitation Could Improve Hand and Arm Function After Stroke

Results of a study co-authored by researcher Teresa Kimberley, PhD, PT, have the potential to be one of the most impressive advances in decades to help improve the lives of patients who have had a stroke with resulting arm weakness.

In a recent article published in *The Lancet*, “Vagus Nerve Stimulation Paired with Rehabilitation for Upper Limb Motor Function After Ischaemic Stroke (VNS-REHAB): A Randomised, Blinded, Pivotal, Device Trial,” the study reports that patients who incorporated vagus nerve stimulation during physical or occupational therapy showed two to three times the improvement in arm and hand function compared to those who received intense rehabilitation with sham stimulation.

“How to optimize recovery after a stroke has been studied for decades, but there has been little shown to dramatically improve people’s daily lives,” said Dr. Kimberley, who is a senior author on both the pilot and pivotal vagus nerve stimulation studies, directs the MGH Institute’s Brain Recovery Lab, and is a professor of physical therapy at the IHP. “Using vagus nerve stimulation paired with repetitions of therapeutic movement appears to help ‘rewire’ the brain to strengthen the brain pathways needed to perform the everyday tasks people want to be able to do. This may be an important new tool to improve people’s lives.”

The 108 patient participants in the study were implanted with a VNS system called Vivistim, produced by Micro-Transponder, Inc., an Austin-based, privately held, medical device development company, which funded the study. During six weeks of in-clinic therapy followed by three months of home-based therapy, participants received a stimula-



Dr. Teresa Kimberley, right, talks with a vagus nerve stimulation patient at the Brain Recovery Lab.

tion of the vagus nerve via a small electrical pulse from a cuff wrapped around the nerve, powered by a unit implanted under the skin near the clavicle. This pulse, delivered during their rehabilitation exercises, essentially helps the brain relearn how to perform tasks such as carrying a grocery bag, using a fork, or casting a fishing line.

Participants in the trial ranged from 9 months to 10 years post stroke. With 50% to 60% of the 658,000 yearly stroke survivors in the United States being left with upper extremity motor deficits that persist for months or years, the findings suggest they may be able to improve function and perform some everyday tasks once again.

The study reported there were no unexpected or serious adverse events associated with the Vivistim system.

Kimberley, who has an appointment as research staff at Massachusetts General Hospital Department of Neurology and as core faculty in the hospital’s Center for Neurotechnology and Neurorecovery

(CNTR), acknowledges the large team effort associated with running this trial, which would not have been possible without the multidisciplinary coordination provided by CNTR and the collaborative effort between the MGH Institute, MGH Neurology, and MGH Neurosurgery.

“We are only beginning to understand how to best stimulate the brain to regain function,” said Kimberley, who has researched various types of brain stimulation for over 15 years. “Rehabilitation has always been the key to maximizing recovery after a stroke. Brain stimulation, including methods such as vagus nerve stimulation, may make rehabilitation activity even more impactful and lead to greater gains than we previously thought possible for people with neurologic disorders.”

The Vivistim system is being reviewed for approval by the U.S. Food and Drug Administration and by regulatory agencies in the United Kingdom and European Union.

Donation by Chins to Strengthen Behavioral Health Care in Charlestown

A generous gift of \$200,000 will allow the MGH Institute's School of Nursing to assess the effectiveness of behavioral health practices at its Ruth Sleeper Center for Clinical Education and Wellness while expanding services to improve access to health care for residents of Charlestown.

May and Tom Chin are longtime supporters of the IHP School of Nursing and they both have strong ties to Charlestown. May Chin is a 1958 graduate of the former Massachusetts General Hospital Nursing School and to show gratitude for her nursing education, May and Tom have supported nursing students by establishing three nursing scholarships for IHP nursing students. Additionally, the Chins have been enthusiastic supporters of the Sanders IMPACT Practice Center, where they named the adult rehabilitation gym in addition to naming the nursing center after May's nursing educator and mentor at Mass General, the renowned Ruth Sleeper. Ms. Sleeper was also part of the group at the hospital who launched the IHP's nursing program.

This donation is the most recent in the Chins' deep commitment to linking access to care of Charlestown residents, especially those who are underserved,



Tom and May Chin, left, speak with School of Nursing faculty Ruth Palan Lopez (center left) and Kathy Sabo at the Ruth Sleeper Center for Clinical Education and Wellness.

Outcomes will be measured by collecting quality of life and client satisfaction data, evaluating student knowledge of telehealth, gauging faculty's increase in knowledge and skills in outcome research, using demographic and aggregate data to determine the program's effectiveness, and assessing interprofessional partnerships.

"Collecting and analyzing data on how patients are compliant with following their care plans will help support the role nurses play in the community," May Chin said, noting that much of health care is moving toward preventative care. "This can become a baseline where the

Sleeper, and it's something I used for my entire career."

According to Kathy Sabo, the Sleeper Center's director, the project's first year will focus on expanding behavioral health telehealth services at Charlestown's Robert A. Georgine Towers, more commonly known as 100 Ferrin Street. Many residents of the public housing development, where IHP students in the psychiatric mental health track have provided supportive counseling services under faculty supervision, have limited access to the internet. That has prevented them from receiving care since March 2020, when the coronavirus pandemic forced the center to pivot from in-person care.

Funds will be used to improve Wi-fi access and provide free tablets to enable virtual visits "We're interested in learning how much the lack of technology has been a barrier for residents," said Sabo. Interpreter services for residents, more than half of whom are Chinese and for whom English is not their primary language, also will be offered.

Services in the second year will expand to pediatric clients through established

"I learned how important it is to look at the whole patient when I was learning from Ms. Sleeper, and it's something I used for my entire career."

– MAY CHIN

while raising the bar to prepare nurses to measure and report the value of their interventions with clients at the Sleeper Center. Additional health care services will be realized over the next three years.

IHP can quantify social determinants of health, which can lead to better patient care and outcomes. I learned how important it is to look at the whole patient when I was learning from Ms.

partnerships with the Kennedy Center, Harvard-Kent Elementary School, and the MGH Charlestown Healthcare Center. In addition, nursing students and faculty will partner with their speech-language pathology, physical therapy, and occupational therapy peers in the Sanders IMPACT Practice Center to assist children with autism and speech literacy issues.

In year three, the interprofessional collaboration will add working with the IMPACT Center's Parkinson's support group for caretakers and expand programming for vulnerable populations to include end-of-life counseling, parent-child guidance, and addiction support. Clients referred by the psychiatric department at Mass General will continue to be served throughout the grant.

“This generous investment will expand the scope of activities and demonstrate the growth of research as a core strength of the School of Nursing.”

– DR. RUTH PALAN LOPEZ, SON
NURSING RESEARCH DIRECTOR

“The outcomes of the behavioral health services are not currently evaluated,” said Dr. Ruth Palan Lopez, associate dean of research and director of the School of Nursing's Office of Research and Scholarship. “This generous investment in nursing scholarship will expand the scope of recognized activities and demonstrate the growth of research as a core strength of the School of Nursing.”

The IHP is especially grateful for this significant investment by the Chins to expand its research footprint and to enable systemic change in health care inequities in its Charlestown neighborhood. ■

New Podcast Highlights Student Research



Amanda Tarbet, left, and Rachel Norton are the hosts of “Evidence-Based IHP.”

Student research experiences and how they connect to clinical practice is the focus of a new podcast launched by the MGH Institute's library.

“Evidence-Based IHP” is co-hosted by creator Amanda Tarbet, assistant director of library services at the IHP's Janis P. Bellack Library and Study Commons, and Rachel Norton, a second-year CSD student who works on research in the Institute's Brain, Education, and Mind (BEAM) Lab.

“Students engaged in research are more willing to think critically about things like clinical practice when they've had the experience of investigating a hypothesis,” said Tarbet, who assists students in preparing their research efforts, in the inaugural episode. “It builds self-confidence, professional values, and curiosity. It can be a transformative experience.”

Students from the genetic counseling, nursing, occupational therapy, and physical therapy programs have discussed topics such as supporting culturally and linguistically diverse learners in graduate school,

personalizing care for women with 45,X/46,XX mosaicism, raising awareness about new pediatric peanut allergy guidelines, and using telehealth during the COVID-19 pandemic. Students from other programs will be on future episodes.

Many of the episodes include bonus nuggets of actionable information, such as how to support Black women in STEM and how to use the Bellack Library to research and cite materials published by Black women. “Ultimately, it's a great tool for advocacy and social justice and disseminating really important information,” Norton said in the introductory episode.

“I really wanted something positive to come out of the chaos and the tragedy of the past year,” Tarbet noted. “I hope that when people listen to the interviews this season, they feel hopeful about the future because they will get to know the incredible people who are the future of health care.”

Listen to Evidence-Based IHP at evidencebasedihp.transistor.fm.

Partnership Between IHP and RSM to Focus on Charlestown Children

Early intervention programs significantly improve chances of optimal child development and academic success by identifying specific developmental areas that need attention right at the start of a child's education. With this in mind, the Charlestown office of accounting firm RSM decided to make early intervention a philanthropic priority in 2021. RSM partnered with the MGH Institute and the John F. Kennedy Center to fund a new early intervention initiative to benefit children in Charlestown.

Tapping the generosity of RSM, the academic expertise of the MGH Institute, and the early education work of the Kennedy Center, the program has one goal: improving academic performance of underserved children in Charlestown.

"What I think is so powerful about this model is its business, academic, and community emphasis," said MGH Institute President Paula Milone-Nuzzo. "Each of the three organizations has unique resources that can be pooled to solve a pressing problem for local children."

The initiative currently is in the fact-finding stage to determine the level of need and services required for the 200 young children (through the age of 5) that the Kennedy Center serves. Dr.



(L to R): Cathy Leslie, MGH Institute assistant professor; Griselle Tejeda, program director, Kennedy Center; and Colleen Boyce, executive director, RSM Boston Foundation

Cathy Leslie, an assistant professor in the MGH Institute's occupational therapy doctoral program, is leading the initiative in collaboration with faculty and graduate students from occupational therapy, speech-language pathology, and nursing. The group is working closely with teachers at the Kennedy Center to understand the specific needs of children the center serves, most of whom live in the two housing developments located on nearby Medford Street.

"To be successful and make a long-term difference, we need to collect the right

data to drive the work we will be doing," explained Leslie. "The teachers have been amazing, and what is clear is the strong connection they have not only with the children but also with the parents."

"We are bringing together two teams of experts who are passionate about the education of young children," added Thara Fuller, the Kennedy Center's executive director. Both groups are committed to ensuring that young children are as ready as possible to succeed when they enter kindergarten in the Boston Public Schools at age five or six.

RSM, IHP Recognized for Collaboration

The partnership between RSM and the MGH Institute is one of four recipients of the 2021 Corporate Citizenship Partners of the Year award by the *Boston Business Journal*.

The two organizations will receive the award in September for their collaboration assisting the John F. Kennedy Center and the Harvard-Kent Elementary School. The awards honor businesses and nonprofits that have

made an immediate and lasting impact in the region by working together by demonstrating innovation and developing best practices at any level of engagement. This includes volunteer work, cash donations, in-kind donations, and board participation. Nominations are judged on four standards: mission, innovation, impact, and sustainability.

"In a year fraught with economic uncertainty, we want to highlight the

innovative partnerships between for-profits and nonprofits to bolster our communities, no matter the size of the contribution," said Carolyn M. Jones, the newspaper's market president and publisher. "The recipients of the Corporate Citizenship Partners of the Year awards have proven their commitment to these partnerships, whether it's by supporting entrepreneurship or the fight against cancer."

The project is designed to have an impact quickly by focusing on enhanced capacity to observe and screen children for developmental delays so appropriate follow-up services can be designed and implemented. “We aim to move more efficiently from identifying an area of concern to the actual intervention, whether related to speech and language, motor skills, or other aspects of healthy development. The sooner we act, the sooner the children benefit from services,” said Fuller.

This vital work is a result of a grant from RSM, which for years has made children in Charlestown a priority. According to Colleen Boyce, executive director of the RSM Boston Foundation, “Charlestown has one of the highest rates of economically disadvantaged students and one of the highest rates of English-language learners in Boston. We hope to make an impression on other businesses in the Boston area, leading by example on how you can focus on your neighborhood and make a difference.”

The early intervention grant marks the second time RSM has collaborated with the Institute. In 2019, RSM provided a three-year grant to MGH Institute researcher Dr. Tiffany Hogan to support the literacy work she is doing at the Harvard-Kent Elementary School. Hogan used findings from this work to apply for and receive \$3.6 million in funding from the National Institutes of Health to sustain her work in improving literacy outcomes in Charlestown and other school districts across the country.

“Charlestown continues to grow and change, and so do the learning challenges. COVID-19 will set many children behind, and we hope to set up more programming that bridges the gap that will be caused by the current crisis,” said Boyce. “Our employees continue to want to give back, and collaborating with partners like the MGH Institute is proving very beneficial.” ■

PA Department Rallies Around “Professor F” in Cancer Battle



Jenny Fanuele says the support she’s received is “extraordinary.”

When Department of Physician Assistant Studies instructor Jenny Fanuele was diagnosed with breast cancer, students, faculty, and staff began a months-long rally in January to support her.

Associate Program Director Josh Merson and students Jasmine Torrey, Hannah Kearney, Jillian Calero, and Caroline Rizzo created a virtual 5K fundraiser for the Dana Farber Cancer Institute, where Fanuele received most of her treatment. It raised almost \$6,300, while t-shirt sales raised another \$430.

For Torrey, Fanuele’s diagnosis hit “close to my heart”—Fanuele was her advisor, and several of Torrey’s family members have had cancer. “We all got together and knew we needed to do something to support Professor F,” said Torrey, using Fanuele’s well-known nickname.

While the plans were being formulated, Fanuele took a medical leave to focus on beating the Stage 1 malignancy. “The students showed incredible ingenuity and thoughtfulness,” she

said. “The support has been almost overwhelming. It’s been extraordinary.”

An unofficial support group developed when faculty colleagues connected her with two other faculty diagnosed with breast cancer: Tiffany Hogan, director of the Speech and Language Literacy (SAiL) Lab, and Caitlin Fitzgerald, associate director of the physical therapy program’s clinical education. “We’ve all been helping each other get through this,” Fanuele said.

Fanuele, whose prognosis for a complete recovery is good, has decided to be outspoken about her breast cancer to advocate for health maintenance and screening. “The reason I’m doing so well is because it was caught early,” she said. “I feel very lucky and fortunate.”

Fanuele plans to return to teaching in the fall. “I’m looking forward to getting back in the classroom and doing what I came here to do—prepare the next generation of physician assistants and health care leaders,” she said.

Contributions are still being accepted at jfwomen5k.weebly.com to reach a \$10,000 goal.

Student-Led Program Mentors Next Generation of Health Care Leaders

Last June, fresh from DePaul University with an undergraduate health science degree, Miguel Luna was debating pursuing a nursing career. Meanwhile, Albert Aba was in his second year of the MGH Institute's Master of Science in Nursing program. The two met thanks to the Mentorship Program for Underrepresented Groups in Healthcare, a student initiative to prepare and support minoritized students wishing to pursue graduate degrees in the health sciences.

Occupational therapy students Alejandra Luna (Miguel Luna's sister) and JP Bonadonna had launched the virtual mentorship program in March 2020. Formed by the IHP Coalition of Occupational Therapy Advocates for Diversity Chapter and the Student Government Association, the program pairs IHP mentors with undergraduate students and recent graduates interested in pursuing a health care career.

The first event, a health professions career day, drew interest from over 100 Black, Asian, Hispanic, and Native American undergraduates nationwide. Out of that group, 35 students became paired with a mentor from 90 IHP volunteers—students and alumni matched according to preferences including race, gender, and disability status.

Albert Aba was among those mentors. Aba, who previously worked as a community nurse in Las Vegas, had moved to Massachusetts for graduate school. "After COVID-19 hit, I wanted to give back something," he said about joining the mentorship program.

He had been mentored in Las Vegas, which had originally inspired him to become a registered nurse. Paired with Miguel Luna, Aba invited the recent grad to visit. Luna accepted, and spent several hours shadowing during Aba's



Albert Aba was among the IHP students who mentored undergraduate students from colleges across the country interested in pursuing a health care career.

clinical rotation with Massachusetts General Hospital's vascular access team. "You could tell that he was intrigued by everything," Aba said.

Luna recalls the visit as "phenomenal" and "a great experience." "I was really able to see what it meant to be a nurse," he said, noting he plans to apply to the IHP for admittance in 2022. "I was able to see the interaction between patient and nurse and how different areas of the hospital worked."

Langston Carter-Price, a junior at Dillard University in New Orleans who is majoring in public health with a minor in business administration, was paired with Doctor of Physical Therapy student Damian Johnson. "I originally had 30 graduate schools to consider, so Damian helped me to narrow the list," said Carter-Price. "He also helped me with doing mock interviews and critiquing my performance, which was great."

The 35 mentees were led over the past year through four dyads: Career Choice, School Choice, Application Prep, and Interview Prep. Many now intend to pursue careers in health care. "We worked hard to get the mentorship program off the ground in the midst of a pandemic, so the positive feedback received thus far from both mentees and mentors has made the experience undeniably worth it and highlighted the need for this type of programming," said Bonadonna. While he hopes mentees will apply to the IHP, it is not the program's primary intent.

The year culminated with a virtual Mentorship Award Ceremony in April, where Aba received the inaugural Outstanding Mentor Award. He graduated from the nurse practitioner program this spring.

With a second mentoring session beginning in September, Bonadonna and Alejandra Luna hope the program will become a regular part of the IHP's offerings. "It's nice to know we are not only supporting marginalized students with access to mentorship and resources, but we're working to address an existing lack of diversity within the health care fields in the process," said Luna.

"I was really able to see what it meant to be a nurse. I was able to see the interaction between patient and nurse and how different areas of the hospital worked."

— MIGUEL LUNA, ONE OF THE 35 UNDERGRADUATE STUDENTS WHO WAS MENTORED

For Genetic Counseling Students, Fieldwork Placements a Success



The placement Alice Metz, left (with faculty Allison Cirino) received gave her an industry perspective into genomic science.

As the inaugural cohort of students in the Master of Science in Genetic Counseling program entered their second year last fall, faculty were optimistic they would be accepted into highly competitive lab/industry fieldwork rotations.

And with reason—all students in the Class of 2021 who applied to lab/industry rotations were accepted.

Ann Seman, the program's director of clinical education, said, "Being accepted for these types of rotations can be quite competitive, so we were very pleased they all were accepted."

Other rotations included foci in prenatal, pediatric/adult, cancer, specialty (cardiology and neurology) settings, clinical genetics research, and advocacy.

After focusing on patient care at her first three placements, Alice Metz had her genomic science liaison rotation this past spring at California-based Ambry Genetics, which focuses on translating scientific research into clinically actionable test results. Metz said she gained valuable knowledge about a genetic counselor's role in industry.

"I observed client meetings, answered case-specific questions from clients, and delivered a final presentation for client education," she said, adding that her supervisor provided feedback on how to improve her genetic counseling skills within an industry perspective.

Clinical supervisors are critical to the success of fieldwork placements. Stephanie Hicks, a genetic counselor at Massachusetts General Hospital's Center for Cancer Risk Assessment, supervised two students this past year.

"These students had a level of confidence with how the flow of a session should go very early in their rotation, so my job was to help them apply that knowledge to the best of their ability in an easily digestible form for their patients to understand," she said. "I have no doubt that the Class of 2021 will be amazing genetic counselors."

A Big Hit for Accessibility at Worcester Red Sox' Ballpark

Think back to the last time you went to a sporting event. Try to remember what it was like to be among the crowd of fans—hearing the cheers, smelling the food, feeling the excitement. Now, imagine that you are taking your child to the game for the first time, and your child has autism.

When the Worcester Red Sox were building their brand-new ballpark for the team's 2021 inaugural season as the Triple-A affiliate of the Boston Red Sox, the team reached out to MGH Institute Assistant Professor Dr. Mary Beth Kadlec, who also is program director at UMass Memorial Health's Center for Autism and Neurodevelopmental Disorders.

Allison Klowan, a student in the entry-level Doctor of Occupational Therapy program who was doing her Advanced Doctoral Experience with Kadlec, joined her mentor to make a series of suggestions that helped Polar Park become a more sensory-friendly and accessible place for people with disabilities.

"I was brought onto this project by Mary Beth because it's an area of interest for me, so it was a very exciting opportunity," said Klowan, noting that occupational therapists are experts on environmental modifications.

Kadlec and Klowan made several suggestions including a large couch, beanbag chairs, floor crash pads, window coverings, and even a tent to give someone their own space.

"The room is intended as an inclusive, safe space for individuals with sensory-processing disorder, who may have hyper- or hypo-sensitivity to various sensory stimuli and who might become over stimulated during a game," Klowan said.

She and Kadlec also gave advice on other areas of accessibility, including improvements on entering the park, seating options, locations for persons using wheelchairs, and even where to put signs directing people to the sensory-friendly room.



Mary Beth Kadlec, left, and Allison Klowan helped the Worcester Red Sox' Polar Park be more sensory friendly.

ENRiCH

REPLACE WITH
FINAL GRAPHICS

The Future of the IHP

The MGH Institute is beginning an exciting time of growth and innovation, creating a new chapter in its 44-year history.

BY ALYSSA HAYWOODE

Over the next five years, the Institute will implement several changes to its educational approach that will affect the entire spectrum of students, from those just starting out in a direct-entry program on their way to a new career to seasoned professionals taking online courses so they can tackle new challenges. Degree programs in leadership, continuing education, and data analytics will be added to a portfolio of new programs launched over the past 18 years. Continuing and professional development programs will be expanded. Existing programs will be redesigned. A new program in Health Care Leadership

It's all part of a visionary initiative called ENRiCH, which will focus on six areas:

Existing programs

New initiatives

Redesign of clinical programs

Innovation

Continuing and professional development expansion

Helping faculty succeed

By 2026, it will have accomplished several things. It will increase the Institute's visibility and importance within the Mass General Brigham (MGB) system, enlarge the student population more than 40% to over 2,300, and provide new revenue streams to ensure the school is well-positioned to continue educating the health care leaders of tomorrow.

"We have to grow to sustain our commitment to excellence, which requires innovation and investment. And we have to work on ways to keep down the cost of an IHP education," says President Paula Milone-Nuzzo. "We're

building on a strong foundation and adding programs that will add to the richness of an IHP education and fulfill our mission of educating health care leaders.”

Existing Programs and New Initiatives

In 2019, Dr. Milone-Nuzzo set up a growth steering committee, which brought in the consulting firm Tyton Partners to work with the Office of Enrollment to identify potential new programs. She appointed Dr. Alex Johnson, provost and vice president for academic affairs, to lead the initiative.

“This is a great time, filled with opportunities for the Institute to do even more creative things,” Johnson says. Because the Institute’s direct-entry programs are at or very near capacity, he says diversifying the existing online programs was imperative to meet the enrollment goals as well as deepen the school’s commitment to interprofessional education, diversity, and research. The market research by Tyton, he adds, was essential to fully understand how adding post-professional degrees, certificates, and seminars would meet the health care industry’s needs.

Existing and new programs—the E and N in ENRICH—will help the Institute grow in myriad ways while preparing students for practice environments. There will be new degree programs and continuing education opportunities for working health care professionals to pursue online, as well as part-time education, from interprofessional certificates to master’s degrees that can flow seamlessly into both existing and new doctoral programs.

The most visible change will be the transformation of the Center for Interprofessional Studies and Innovation into a new hub of cutting-edge continuing education, the School of Health Care Leadership (SHCL). “This is the third leg of a large stool,” Johnson says of the new school, which joins the School of

Nursing (SON) and School of Health and Rehabilitation Sciences (SHRS). “It will complement everything we do.”

SHCL will be composed of five academic units: two new master’s degree programs in Healthcare Data Analytics and Healthcare Administration & Leadership; the Health Professions Education graduate program; an expanded Office of Continuing and Professional Development, which runs innovative programs for professionals in health care, education, and public safety; and the growing Prerequisites for the Health Professions program.

Additional new degrees in SHRS include post-professional doctoral degree programs in speech-language pathology and occupational therapy that launched over the past year. A third program in audiology is expected to begin in 2023 through a creative partnership with Mass Eye and Ear.

This combination of existing and emerging programs is intended to spark new ideas and more programs in the future. And it will enable the IHP to customize programs for hospitals within the Mass General Brigham system that want specialized training for their employees.

New growth also will take place in the SON, which is adding two master’s degree programs in Nursing Administration Leadership and in Nursing Education Leadership. The Nursing Administration Leadership degree will help meet the national demand for qualified nurse administrators; the U.S. Bureau of Labor Statistics estimates a 32 percent increase in employment of medical and health services managers through 2029.

“Managers say they are looking for nurses who have a background in nursing administration, who understand research data, quality improvement and informatics, who have a foundation in interprofessional team building skills,” says Dr. Elaine Tagliareni, who recently



“This is a great time, filled with opportunities for the Institute to do even more creative things,” says Provost Alex Johnson.

completed two years as the nursing school’s dean.

As for starting the Nursing Education master’s program, Tagliareni says the reasoning was simple: “If we don’t have enough qualified nurse educators, we won’t have enough qualified nurses.”

The two programs, she notes, will knock down some of the walls that traditionally stand between health care education programs. “There will be an interprofessional element because students will take classes with students in our School of Health Care Leadership and in our Health Professions Education program,” she says. “The health professions have been taught in silos for too long. We’re changing that.”

Ann Prestipino, the senior vice president for education, strategy implementation, and emergency preparedness at Massachusetts General Hospital, played a key role in creating the Health Care Administration & Leadership program.

Prestipino, who now is working with the Institute to develop a master’s program in perfusion studies, says the Institute’s efforts to diversify its academic offerings are a win-win.

“Because of ENRiCH, the IHP will be able to grow and also help the entire Mass General Brigham system by developing skilled professionals that are needed across all health care disciplines,” she notes. “And with these new innovations, IHP graduates will carry this team-based perspective with them whether they go on to work at MGB or at other institutions.”

An Innovative Redesigning of Clinicals

Every year, thousands of students from the IHP and other area schools vie for a limited number of clinical rotation slots in hospitals, community health centers, and other facilities. That’s why the R in ENRiCH calls for a redesign of how the IHP approaches a critical part of the learning experience.

“Clinical placement has been a pain point for a long time,” says Dr. Mary Knab, the associate Provost for Interprofessional Education and Practice, noting that the process of securing clinicals has changed little over the years, in some cases even decades. “We wanted to design an innovative model that is sustainable and leaves us less vulnerable to external placement shortages.”

Last year this process got an unexpected shove from COVID-19. Clinical placements abruptly ended during the pandemic’s initial phase and were slow to return. Faculty faced major challenges finding placements for students who needed required hours to graduate.

Working with Sierra Learning Systems, Knab and several teams of IHP faculty and staff generated several innovative solutions—the I in ENRiCH. The first was to expand the number of clinical placements at the Sanders IMPACT Practice Center, giving students supervised opportunities to work on-site and through online connection with clients offering the local population more options for care. Over the past 18 months, telehealth has become standard procedure for some of the

Center’s services, something the team hopes to continue where accreditation bodies allow.

The second solution was to increase the use of simulation and the labs that were expanded two years ago—again, in conjunction with accreditation bodies’ approval. “There are competencies students can develop on campus using experiences that simulate clinical environments, removing some of the burden of having all clinical education be in a live-practice environment,” Knab says. “The on-campus learning creates opportunities for programs to use a blend of experiences, removing some of the pressure on external placements to do it all.”

Clinical educators in hospitals, clinics, and community agencies will continue to play a major role, so the school is creating incentives for them such as deeper discounts for continuing education classes, a recognition program, and resources for consultation and career development. Johnson points to the potential for developing new partnerships with clinical partners and students’ future employers: “We are thinking about how to work with agencies that we haven’t worked with before—especially the ones that serve high-risk, low-resource populations—so we can create clinical placements that lighten the load of these hosting agencies.”

Rob Brodnick, a consultant who founded Sierra Learning Solutions, has worked for over a year on several aspects of ENRiCH. He ran discussions with faculty, students, alumni, and community partners so school leaders could better understand what various stakeholders want from the Institute and ensure the school could fill those needs. He says he has been highly impressed by how the Institute has embraced the company’s use of design thinking to identify, develop, and implement innovative improvements. “The IHP has taken a bold and aggressive approach to improving how clinical education is done

by using these innovative tools,” he says. “It is doing the kind of things that most schools won’t or can’t do.”

Expanding Continuing Professional Development

The Office of Continuing and Professional Development (CPD) already offers an extensive portfolio of innovative programs, mostly aimed at health care providers. Covering an array of topics as diverse as children’s learning problems, leadership development, human trafficking, and climate health, CPD is continually working to advance the skills and knowledge of health professionals. Expanding the office represents the C in ENRiCH.



Ann Prestipino of Massachusetts General Hospital says the Institute’s efforts to diversify its academic offerings are a win-win.

Because the Institute recently was designated as the only academic degree-granting organization in Massachusetts with joint accreditation status, it now can award interprofessional credits to meet the needs of nursing professionals, physicians, physician assistants, psychologists, pharmacists, and social workers.

“People sometimes think the Institute is like a medical school,” Johnson says. “But when it comes to accreditation, we’re like eight medical schools because



Rob Brodnick of Sierra Learning says the Institute is taking bold and innovative approach to clinical education that most schools won't or can't do.

we have eight different accreditors with many different sets of regulations and requirements.”

This designation also means the CPD can design credit-bearing programs that meet employers' specific needs, whether it's a primary care clinic, a skilled nursing facility, a rehabilitation hospital, or smaller health care settings that serve nonacute patients and those with chronic conditions.

“As we grow, we can dramatically expand our support for individual academic programs that want to engage their own provider audiences,” says Dr. Susan Farrell, the CPD's director. “We'll also expand leadership training, in part by drawing on the skills of an educator who teaches conflict management to help students think about how to have difficult conversations with other professionals or with patients.”

Farrell says more educators from different fields will be added to the faculty mix, and they will be able to discover where their teaching overlaps and form new collaborations. So, a speech language pathologist who is

developing a program for a skilled nursing facility could in theory work with a nurse practitioner and a physical therapist to develop more collaborative activities. “It's a level of learning that goes beyond training at the bedside to help build interprofessional teams' resilience and improve patient care,” she says.

A Focus on Support

To help faculty and staff succeed in this new era of growth—the H in ENRiCH—the Institute is building an innovative infrastructure to provide the resources needed to boost creative collaboration.

Promoting professional development and managing change are on the agenda, says Dr. Peter Cahn, associate provost for academic affairs. It includes implementing new approaches to maximize informational technology, instructional design, and simulation. Faculty will be able to leverage the resources of the Bellack Library and the Sanders IMPACT Practice Center to implement the new initiatives. It's all intended to create a nimble academic environment where people can quickly test and measure new approaches to optimize learning.

Cahn also is thinking about how to support faculty in the new School of Health Care Leadership. “Traditionally, we've had full-time faculty working in and across academic departments,” he says. “Now, with ENRiCH adding part-time programs and part-time faculty whose main responsibility is as expert practitioners, we're working on ways to support them even though they won't be physically here, so that they and their students feel included as integral parts of the Institute.”

A Transformative Future

Taken together, the initiatives that comprise ENRiCH promise to reshape the Institute in countless ways. In addition, the IHP's high standards in education, scholarship, and research will



Joint accreditation status will allow the CPD to design credit-bearing programs that meet employers' specific needs, according to Director Susan Farrell.

continue, as will its commitment to infusing all its programs with JEDI principles and practices—a topic that continues to take on greater meaning and purpose.

“Health care providers have to know how to address issues of race, sexuality, and identity,” Johnson says. “Providers have to be empathic and effective. The same issues come up in data analytics; so many of the challenges we have in research are when whole groups of people are left out. If researchers don't include women or people of color in important studies, then they have left a whole set of questions unanswered.”

And as ENRiCH rolls out, these innovations promise to lead to additional initiatives across the IHP. “The programs we're launching now will likely become models for future programs that we create to meet additional health care needs in the future,” says Milone-Nuzzo. “The measure of our success will be our ability to educate professionals to meet the challenges of health care in the 21st century. ENRiCH will be transformational for the Institute.” ■



Shining a Spotlight on Invisible Labor

BY BEVERLY FORD

Dr. Eleonor Pusey-Reid remembers being the only Afro-Latina faculty member in the MGH Institute's nursing program when she joined the Institute in January 2008. Almost immediately, a steady stream of Black, Latinx, and underrepresented students began arriving at her office. They were seeking help, advice, and direction from someone who looked like them, someone who could understand what it was like to be one of just a handful of people of color at the school.

"My colleagues used to say, 'You need to put a limit on your time,'" recalls Pusey-Reid, who recently was promoted to distinguished teaching associate professor in the School of Nursing. "But students, if they had a need, particularly students of color—I could not just focus on my own journey without helping them start their own."

What Pusey-Reid was doing is called invisible labor. In higher education, invisible labor means assisting students

and alumni who look to professors that possess knowledge and skills deeply informed by their identity for help in navigating the challenges of campus life and beyond, undertaking many forms of undervalued or unnoticed labor as well as assisting institutions themselves with pursuing their equity goals, and not getting recognized or compensated for it as part of their formal roles.

Higher education faculty are overwhelmingly white—at the IHP, for example, over 90% of the faculty, or 120 out of 140 faculty members, are white, although close to 30% of students identify as non-white. This means that the 140 faculty members faced a choice between ignoring requests for help or spending dozens of extra hours mentoring, coaching, and counseling students and alumni of color outside the classroom. The vast majority of professors of color chose the second option despite not receiving acknowledgment or remuneration for their additional work.

In addition to assisting students and alumni, faculty of color also support their white colleagues to learn more about JEDI issues and coach/counsel them about various JEDI topics. They support each other through racialized experiences. They also work within their departments and across academic programs to improve the experiences of students of color, and are also called upon to participate in many ad hoc committees where a person of color is needed.

However, things are starting to change at the MGH Institute. In April, school leaders approved and implemented a guideline to recognize the importance and impact of invisible labor. The guideline, considered to be the first in the United States, would trim up to four credit hours from the teaching workload of full-time faculty of color to acknowledge the extra work they are already doing.

"Across the country, few colleges and universities have taken concrete steps to

remedy this situation,” wrote President Paula Milone-Nuzzo in a message to the IHP community announcing the guideline. “The Institute would like to take a leadership role in this area by formally recognizing this invisible labor.”

Drawing Attention to an Ongoing Problem

To Dr. Kimberly Truong, the school’s chief equity officer who oversees the Office of Justice, Equity, Diversity and Inclusion (JEDI), now is a chance to meet the problem head-on. “Our faculty of color are a valuable part of the Institute, and it’s important we’re listening to them and the challenges they face,” she says. “What needed to be done was to level the playing field.”

“The guideline finally draws attention to the systemic issue of inequitable workloads long reflected in the lived experiences of faculty of color and allows

This narrow definition of service, she wrote, fails to take into account helping students navigate overt or subtle racism and manage feelings of isolation, mentoring students of color, connecting them with prospective students, educating colleagues about JEDI issues, and supporting newer and more junior faculty of color. Reducing their formal workload will allow these faculty more time not only for mentoring but also to pursue their own academic scholarship by publishing research findings and applying for grants—the kind of results that helps advance careers.

Invisible labor has been discussed in hushed tones among higher education faculty for more than 30 years, after a 1987 article by sociologist Arlene Daniels first used the phrase to reference work that goes unrecognized and unpaid.

“This is not an unfamiliar issue,” says Dr. Paulette Granberry Russell, president



Eleonor Pusey-Reid has spent considerable time mentoring students since she arrived at the IHP in 2008.

“Our faculty of color are a valuable part of the Institute and it’s important we’re listening to them and the challenges they face. What needed to be done was to level the playing field.”

– DR. KIMBERLEY TRUONG, CHIEF EQUITY OFFICER

us to work toward resolving that issue,” Truong wrote in a recent article in the publication *Inside Higher Ed*. “We espouse diversity, equity, and inclusion, but when we don’t recognize the valuable contributions faculty of color make to supporting our mission, and when we are not taking these contributions into account and equitably allocating workloads, we are perpetuating the very racism that we denounce.”

As the article later says, “While colleges and universities recognize service as part of tenure and promotion processes, usually only certain types of service count, such as serving on committees and formal advising opportunities.”

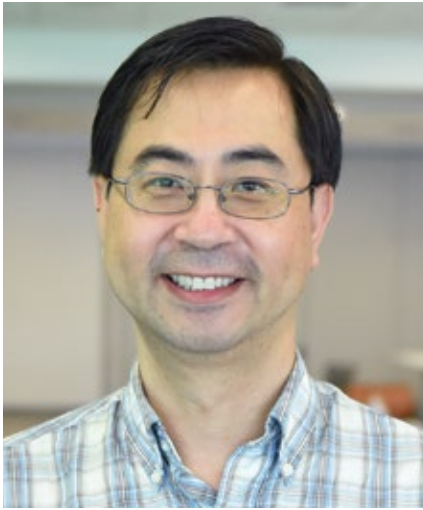
of the National Association of Diversity Officers in Higher Education. “It’s increasingly a part of conversations on campus, especially when we talk about equitability.”

Truong first raised the issue of invisible labor when she arrived at the IHP in 2019, after some faculty of color raised their concerns with her and continued this conversations with the Black nursing faculty and other faculty of color after the June 2020 racial reckonings. Professors and staffers in other programs were soon talking about rectifying a problem that many white faculty and staff hadn’t realized existed. As these discussions gained momentum, Truong set up a

meeting with President Paula Milone-Nuzzo to recommend that the school address the toll of this unpaid, unacknowledged work. It took less than five minutes for Dr. Milone-Nuzzo to agree that action was needed to rectify the long-standing problem.

“Through discussions with IHP faculty of color, reviewing current literature, and consideration of current IHP practices, we recognize that IHP faculty of color—like many of their colleagues across the country—are taking on an inequitable amount of invisible labor,” wrote Milone-Nuzzo in her message. “Many of these interactions and conversations can take an emotional toll on faculty as well as time to understand the complexities of the situation to help to advise students.”

While the new guideline limits teaching workloads, it gives school deans and program chairs the final decision on the number of hours faculty can reduce their teaching load. The guideline will be implemented for the 2021-2022 academic year starting this fall. Part-time faculty will be hired to cover the classroom hours for which faculty of color no longer will be responsible.



John Wong wants to increase awareness of how much invisible labor professors of color do outside the classroom.

“It’s Not About the Money”

For associate professor John Wong, the president’s message and the new guideline serve as a bright spot in an often-challenging profession.

One of just a handful of Asian faculty members, Dr. Wong teaches in both the School of Nursing and the Department of Occupational Therapy. He serves on two student clubs as the faculty advisor of Students for Racial Justice in Health-care and a member on the advisory board of International Student, Scholar, and Alumni Club, accompanied students of color on tours to examine the city’s checkered racial history, found apartments for visiting Chinese scholars, and developed an exchange program for IHP students to learn about clinical practice in China. He’s even hosted Chinese scholars at his home for Thanksgiving.

“Recognizing this work is not about the money,” says Wong, adding that it’s also not about special treatment for certain groups. What it is about, he adds, is making people more aware of the amount of invisible labor professors of color do outside their daily classroom routine. “We’re not looking for any specific awards or rewards for this invisible work, but there are ways to recognize teaching and advising and scholarship.”

He notes compensation could come in the form of performance measures designed to evaluate and acknowledge such service by faculty members who are on track for promotion. “These are opportunities to recognize our diverse faculty and the work that all those faculty have been doing,” he says.

An Opportunity to Help

As one of only a few Black students in the Master of Science in Speech-Language Pathology program six years ago, Indigo Young says there were so few faculty of color at the IHP that seeking one out as a mentor never crossed her mind. Today, as an assistant professor of communication sciences and disorders, the 2015 graduate counsels students of color, providing them the support she lacked.

“Students looking for guidance will be looking for people of color,” says Young, who spends countless hours counseling students on everything from juggling their academic and clinical requirements to navigating life in a city with a poor reputation for its treatment of people of color. “I want to provide the kind of mentorship that was not available to me.”

“These are opportunities to recognize our diverse faculty and the work that they have been doing.”

— DR. JOHN WONG,
ASSOCIATE PROFESSOR

Pusey-Reid says that while recognition may be the common goal, there’s still more that needs to be done to bring equity to the IHP and to higher education in general. “The guideline is a great start, but it will need to have ongoing monitoring in order to become a permanent part of the school’s culture,” she says.

The Institute will continue to hold workshops and events to discuss JEDI



Indigo Young wants to provide the kind of mentorship that was not available to her when she was an IHP student.

issues, educate faculty, staff, and students about how to recognize and respond to microaggressions, and revise the advising handbook to include content related to JEDI issues. A curriculum task force will continue reviewing courses and materials to ensure inclusion as well.

For Truong, the new guideline is significant, not only because it recognizes the contributions of the school’s diverse faculty, but also because it acknowledges the value they bring to the IHP. She notes that while the guideline is not perfect and more credit hours could have been reduced, it’s the start of an important and long overdue conversation—one on which the goal is for all faculty advisors to share in mentoring students of color.

Looking ahead, her office asked faculty and staff members of color to the types of invisible labor they’re engaged in to give IHP administrators hard data of this work. “I think this is going to be an eye-opener for how much they contribute to the Institute,” says Truong, who expects to begin reviewing the data this fall. “It will allow us to continue the conversation and recognize the invaluable work that faculty of color are engaging in to support our institutional mission. It’s definitely going to change things for the better.” ■

Honoring the Memory of Graduates Gone Too Soon

Maureen Ryan, RN, BSN '17

Maureen Ryan packed a lifetime's worth of living into 27 years.

Despite being diagnosed with Loeys-Dietz syndrome at birth, the 2017 Bachelor of Science in Nursing graduate never let the rare congenital heart condition define her. Rather, it spurred her to find ways to help those in need throughout her short life.

"Her passion was serving the less fortunate," said her father, Kevin Ryan. "She was totally committed to it."

Maureen began at 13, when she volunteered on the Alzheimer's unit of a nursing home near her hometown of Framingham. An accomplished archer, she started during high school an archery program for people with special needs. While at Bridgewater State University, she helped children with special needs, was a camp counselor for children with life-threatening illnesses, and tutored and mentored homeless children.

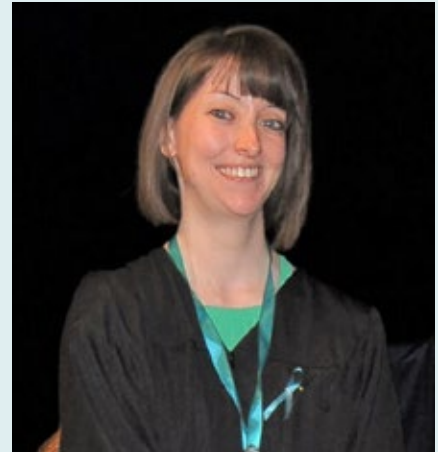
She did all this and more, despite having the first of many heart surgeries at 14 to replace an enlarged aorta that typifies the condition. "She knew she had only so many years to live, so she wanted to make

an impact every day," said Kevin. "She refused to let it define her."

As a student at the Institute, Maureen cherished her clinical experiences at Boston Health Care for the Homeless and the New England Center and Home for Veterans. "Even before she had acquired the initials of RN, she epitomized that which is best in the nursing profession—a strong clinical background and a heart that knew no bounds," Sharon Morrison, a nurse at the veterans center, said at a tribute to Maureen this past May.

While at the IHP, she learned that her condition was worsening and would require more surgical intervention. She postponed it, vowing to graduate and obtain her nursing license first. Achieving those goals, she underwent two surgeries and then eight months of rehabilitation to fulfill her dream of becoming a nurse by landing a full-time position at Newton-Wellesley Hospital and defying the medical consensus that she would never be able to work as one.

Kevin Ryan and his wife, Colleen, who also is a nurse, worked with the IHP's Development Office to create an endowed fund for student nurses after Maureen succumbed to the disease in 2020. "We're



Maureen was committed to helping the less fortunate.

doing this to support nursing students who share Maureen's passion and commitment to community health nursing and serving underserved populations," explained Kevin, "so her spirit will live on."

Lauren Chesnard, BSN '12, is running the 2021 Boston Marathon in October to support the Maureen Ryan Community Health ABSN Nursing Scholarship. To contribute, please go to giving.mghihp.edu/chesnard.

Christopher Norman, CSD '07

Christopher Norman's warm and magnetic personality ensured he made friends everywhere he went. The long list includes former faculty, staff, and classmates from the MGH Institute who, a decade after his untimely death in 2011, continue to remember him as a bright light taken far too early.

"He had an enthusiasm and passion for life," recalled his mother, Anne Norman, who noted he especially enjoyed dancing, good food and wine, his family, and his friends. "He made a big impression on everyone he met."

Recently, the Institute organized a virtual 5K road race to honor the memory of Christopher, who graduated in 2007 with a Master of Science in Speech-Language Pathology. More than 100 people completed the race, raising almost \$5,000 for an endowment fund that bears his name.

"I couldn't believe it," said Anne, who along with her husband, Richard, created the endowment fund to help SLP students

at the Institute attend conferences and support their research, among other things. "After all these years, I'm so grateful that so many people at the Institute continue to remember him."

Christopher stuttered for most of his life. But, characteristically, he turned that difficulty into a positive. "One day in the fourth grade, he came home after being helped by a speech pathologist and said he wanted to work with people who had speech problems," said Anne, noting that he practiced long hours so he could read aloud the name of his Rockland (ME) High School classmates as they walked across the stage at graduation. "He took on everything as a challenge to overcome."

After earning his undergraduate degree in communications disorders from the University of Maine, he came to Boston for his master's. "He loved everything about the Institute," Anne said, noting he was particularly close with several faculty, among them Charles Haynes and former department chair Gregory Lof.



Chris made a big impression on everyone he met.

"He loved life, so I'm sure he's very happy knowing the fund is helping students follow their passion, just like he did," she said.

To contribute, please go to giving.mghihp.edu/christopher-norman-fund.

Class Notes

Class Notes are compiled through a variety of sources, including information sent in by alumni, hospital publications within Mass General Brigham and beyond, and public information released by various organizations.

Communication Sciences and Disorders

Amanda Hitchins, MS-CSD '12, was a guest on the podcast "Speech Uncensored." She spoke on the episode "SLPs Partnering with Overseas Organizations." She is a SLP at Northeast Rehabilitation Hospital in Methuen, MA, and the US program coordinator/instructor for the Center for Education and Community-Based Rehabilitation (CERBC) in the Ituri province of the Democratic Republic of Congo, where she has been traveling and working remotely since graduating from the IHP.

Health Professions Education

Dr. Farrukh Nadeem Jafri, MS-HPed '19, who is pursuing a PhD in HPEd at the IHP, received a 2021 Tribute to Excellence in Health Care Award from the United Hospital Fund. Jafri, who recently was appointed medical director of WPH Cares at White Plains Hospital in New York, was honored for implementing several patient safety initiatives during the COVID-19 pandemic.

Nursing

Elizabeth Hylton, MSN '10, recently took her passion for social justice and her theater degree from Holy Cross to the stage in *The Niceties* at BrickBox Theatre in Worcester, MA.

Jason Fox, MSN '12, director of the Grayken Addiction Nursing Fellowship program at Boston Medical Center where he also is a nurse practitioner, explains the program's purposes in an article published on the Addiction Professional website.

Joanne Fucile, DNP '12, CEO at Spaulding Rehabilitation Cambridge, was named the Mary B. Conceison Award recipient by the Organization of Nurse Leaders - MA, RI, NH, CT, VT.

Jennifer Derkazarian Wall, DNP '14, MSN '99, was named chief quality officer at Hebrew Senior Life in Boston. Previously, she was chief nursing officer at Atrius Health in Newton.

Amanda Sadat, MSN '15, and **Meredith Hogarty, MSN '14**, are featured in *New Hampshire Women Magazine*. They are the co-owners of Psychiatric Wellness Center in Bedford, NH.

Chandra Miller, MSN '16, joined Spaulding Academy & Family Services in Northfield, NH, as its medical director. Previously, she was medical director of student health services at Crooked Mountain Foundation in New Hampshire.

Occupational Therapy

Alesia Ford, OTD '18, is the lead author on a research article published in *The American Journal of Occupational Therapy*, "Recruitment and Retention of Occupational Therapy Practitioners and Students of Color: A Qualitative Study." Adjunct nursing professor Gaurdia Banister and occupational therapy professor Diane Smith are co-authors.

Nikki Blanc Ephraim, OTD '19, co-created a four-part video series on the cultural sensitivity activities of daily living as a member of the Spaulding Rehabilitation Network's Equity, Dignity & Respect Council. The videos educate providers throughout the network in ways to support the needs of under-represented patients.

Physical Therapy

Deborah Givens, DPT '00, MSPT '90, was named a Catherine Worthingham Fellow by the American Physical Therapy Association, its highest honor. She is an associate professor and director of physical therapy at the University of North Carolina at Chapel Hill.

Donna Applebaum, DPT '02, an assistant professor of physical therapy and director of clinical education at the IHP, was named the recipient of the 2021 Lucy Blair Service Award by the American Physical Therapy Association. The award, which honors the legacy of pioneering physical therapist Lucy Blair, is given to those with exceptional contributions, including leadership and service, to the APTA.

Monica Jain, DPT '08, discussed mindfulness practice in her APTA-featured podcast, "Mindfulness: Just What the PT Ordered."

Jessica Chung, DPT '10, was named Employee of the Year by MelroseWakefield Healthcare.

Meaghan Costello, DPT '12, a physical therapist at Mass General, has been named to a four-year term on the Neurologic Specialty Council within the American Board of Physical Therapy Specialties. She also received the Outstanding Service Award by the American Neurologic Academy of Physical Therapy.

Physician Assistant Studies

Harrison Keyes, PAS '18, was profiled in "Boston PA Helps Safeguard the Homeless Through the Pandemic," published on the website of the American Academy of PAs.

CSD Grad Receives Fulbright Fellowship

Marissa Russell, CSD '20, will use a Fulbright grant to help researchers better understand the brains of bilingual people.

Starting this fall, she will work with Dr. Gitte Kristiansen of Complutense University of Madrid in Spain to adapt questionnaires that measure bilingualism by incorporating cognitive sociolinguistic information about when, how, and why people choose to use one language over another in their daily lives.

Cognitive sociolinguistics seeks to use knowledge about cognitive processing to help explain language variation in social settings. Russell said this will allow researchers to better understand the bilingual brain.

"Clinically, a better understanding of bilingualism could provide clearer information about its role in preventing neurocognitive decline and treating language disorders in bilingual individuals," she said.

Russell, who learned of her award after graduating last year, is the first IHP student to be awarded a Fulbright scholarship.

"There's not a lot of research on cognitive-linguistic processing in bilingual people who have experienced a stroke or brain injury," Russell said. "Deepening our understanding in this area can help us create improved, evidence-based treatments and better support these individuals as they work toward regaining access to their language ability."



Marissa Russell, CSD '20, will study why bilingual people choose one language over another in daily life.

A Delayed Calling Ultimately Fulfilled

A calling.

Not many people can use this term when describing what led them to their career paths. A “calling” is reserved for teachers, clergy, and, of course, health care professionals. I feel fortunate to count myself among those who have felt called into the nursing profession.

In a way, I’ve had multiple callings that eventually led me to becoming an RN. Since I was young, I have felt a sense of wanting to serve people. I started college in 2006 as a nursing major. But because I had been a pianist all my life, I also heard a calling to music. So I switched majors and graduated with a music degree. I eventually went on to earn a master’s in music at the Boston Conservatory, which provided me with amazing opportunities to travel the world, make music with others, and play for opera companies.

It was exciting, but I felt something was missing. The classical music world didn’t exactly fit my goal of helping the downtrodden. Sure, I gathered my musical friends to put on concerts in homeless shelters and soup kitchens around Boston, and that gave me a great sense of accomplishment, but it just wasn’t enough. I needed to help people full time. So I returned to my original calling. On my first day at the IHP in 2016, I looked around at all my bright-eyed colleagues and realized, these are my people. I had the chance to finish what I had started 10 years earlier.

Today, I truly feel that I have found my calling, this time in the nursing profession. I am the lead nurse and clinical coordinator for a mobile health care program at Greater Seacoast Community Health in Portsmouth, New Hampshire. We bring primary care services to those experiencing homelessness or unstable housing throughout the Seacoast area and surrounding rural communities. Our team consists of a



Sally Naredla works with the mobile health care program in Portsmouth, NH.

provider, a registered nurse, a social worker, and either a physician or a nurse practitioner—all of whom ride on our amazing big yellow bus that’s full of donated clothes, toiletries, and food items we share with those in need.

With the benefit of experience, I find myself looking every day at my patients and colleagues and saying yet again, *These are my people.*

We connect patients to mental health resources, substance use treatment, and dental care as well as area community service organizations that may be able to help our patients get back on their feet. It is so inspiring to collaborate with other community-service-oriented professionals who share my calling and desire to serve the destitute. With the benefit of experience, I find myself looking every day at my patients and colleagues and saying yet again, *These are my people.*

Our patient population faces many unique challenges that make my job difficult at times. The “system” is not in their favor. Many of my patients are in and out of jail, in and out of the throes of substance use, in and out of shelters. Their lives are in a state of constant chaos. My heart aches for those who can’t seem to get out of the cycle, no matter how hard we try to steer them in the right direction.

I now know I cannot fix everything for them. Many times, there is simply nothing I can do. Their struggles are far greater than any medical care I can provide. They need stable housing before they can even begin to address their underlying health conditions, and I cannot make that happen. However, I can love them. I can listen to them. I can validate their stress and anxiety. And I can give them the time of day when most others would just walk on by.

These are my people.

Please email alumni@mghihp.edu if you are interested in submitting a first-person essay.



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GROWTH

Through Adversity:

THE IHP TODAY

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www.mghihp.edu/celebrate

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