



Educating the next generation of
clinicians to serve all communities.

To celebrate our 50th anniversary as a Department of Family Medicine and Community Health, we asked for comments and reflections from previous and current research leaders in the department.

Linda Weinreb joined UMass in 1987 and became the first Vice Chair of Research in 2001. Dr. Weinreb is recognized nationally as an expert on the health and support needs of homeless families. In collaboration with her colleague Dr. Ellen Bassuk, she implemented the first population-based study of homeless families in the early 90's. This work, which involved a close collaboration with the Worcester community, was funded by NIMH for cross sectional and longitudinal studies, generated numerous articles and was at the forefront of identifying the needs of homeless families and children and the course and consequences of homelessness. Dr. Weinreb lead interventions that provided mental health and trauma-related services for vulnerable populations in the health care setting, including two SAMHSA-funded projects. She was also Principal Investigator of a Robert Wood Johnson Foundation grant to implement effective treatment models for depression in primary care described below by Carol Upshur. With Carole, she conducted many other observational and intervention studies focused on homeless and low-income homeless families and children during her time at UMass.

Carole Upshur, EdD landed at the Department of Family Medicine in 2001 after 25 years at UMass Boston where her undergraduate and graduate teaching, professional and public service work was highly focused on education, mental health, and healthcare services for disadvantaged populations. She provides a great summary of many innovative practice-based and community-based projects and shared that “my time at DFMCH was the most rewarding work experience I could imagine.”

Early on **Roger Luckmann, MD**, Benedict faculty member, approached Carole to study the impact of the growing opioid crisis on primary care. They received a grant from AHRQ in 2003 to gather data from both clinicians and patients. Amazingly they collected clinician questionnaires from 111 faculty at our Barre, Benedict, Hahnemann, and Fitchburg sites, Family Health Center of Worcester, Great Brook Valley (now Edward M. Kennedy Community Health Center, Hahnemann Internal Medicine and Greater Lawrence Family Health Center. Carole is sure many colleagues remember her hounding them to fill out paper questionnaires repeatedly stuffed in mailboxes until the project got an 80%+ return rate.

The article published in JGIM in 2006 has garnered hundreds of citations. A follow up with 17 patient focus groups in both English and Spanish from our practices and the 2010 Pain Medicine paper titled: “They don’t want anything to do with us” has similarly been continuously cited as the opioid crisis only worsened. This work led to a HSRA residency grant which trained faculty and residents in how to implement collaborative care for chronic pain. A junior faculty member from FHCW, Linda Clark, MD and Carole published a JABFP paper on what was learned on best practices for collaborative care for chronic pain.

While that work was ongoing, Linda and Carole led an RWJF project in collaboration with MassHealth, about primary care management of depression, reaching out to our Hahnemann and Benedict practices, the Lincoln Internal Medicine resident clinic, and several FM private practices to screen Medicaid patients for depression and initiate medication, care management, and mental health referrals. Practices screened over 1000 patients in two years; with quarterly clinician working sessions quarterly; and developed protocols that helped hundreds of patients improve symptoms and even reduced hospitalizations and ER visits.

As her career continued, Carole worked with Holyoke Health Center, New Haven Health Center and Neponset Health Center in Boston on an AHRQ grant to extend depression screening to diabetes patients. Linda and Carole also initiated an MCH-funded screening and support program for pregnant women with PTSD receiving care at Edward M. Kennedy Health Center and Family Health Center of Worcester; worked with Boston Health Care for the Homeless funded by NIAAA on addressing women's alcohol disorders; and a NIMH funded intervention with Health Care for the Homeless in NYC addressing depression care for women in city shelter programs with collocated primary care clinics.

Carole's last project, a \$3million Institute of Education Sciences grant with Melodie Wenz-Gross PhD, involved an RCT of over 60 preschool and Head Start classrooms to evaluate a prevention curriculum designed to address social emotional development. This grew out of Health Foundation and NIMH funded work on preschool behavior problems that resulted in a state-wide program to provide early childhood mental health consultation to preschools. Carole was recognized for this community-initiated work by being named as the University Zuckerberg Chair for University Service in 2006.

Many of you may have collaborated with **Suzanne Cashman, DSc** and **Robin Clark, PhD**. They are a testament to FMCH's commitment to mentorship, collaboration, and building partnerships to successfully conduct research.

Dr. Cashman notes, *"My research was focused primarily on nurturing partnerships to bring scholarship to our partners' work. Partners spanned the gamut from students reflecting on implicit bias instruction, to community health centers where we integrated primary care and public health, to community-based organizations where we delved into refugee health issues, to our family residency where we looked at education related to community health. My focus was always on working with our partners to expand and act on opportunities for discovery and integration. My current project, tracking graduates of the MassAHEC Rural Health Scholars elective shows that a higher proportion of these grads than UMass Chan grads overall went into primary care, especially family medicine."*

Dr. Clark shared, *"It was my pleasure to work with students and faculty for more than 18 years. FMCH has a long history of supporting students and junior faculty interested in research. You may have been one of many students Judy Savageau mentored in a research project. Whether this was a one-time experience or precursor to a research career, the discipline of scientific inquiry offers helpful tools for navigating a health care career. Skills like how to pose clear, answerable questions (not as easy as it sounds!) and learning to identify and address bias can be applied well beyond the boundaries of formal investigation. Openness to submitting your work to rigorous review, risking the possibility of having the quality or value of your work challenged—can also be a powerful tool for growth."*

Suzanne Mitchell, MD, MS writes, *"It has been my honor to support the revitalization of the UMass FMCH research team in the last four years. We achieved significant milestones including the addition of three funded primary care researchers to our department ranks and welcomed Dr. Jennifer Carroll as our new Vice Chair of Research. We have also experienced meaningful growth in the research funding and contributions of our entire team in the fields of substance use disorder treatment and medication deprescribing studies as well as our growing pipeline of early-stage researchers. U Mass continues to be a strong presence in primary care research and its influence on practice and policy. These are not easy accomplishments, and we owe our success to our collective presence and integrity as a community of colleagues."*

A new member of our research faculty, **Alison Karasz, PhD** is a clinical/ cultural psychologist and global health researcher. She writes: *"FMCH is a supportive and stimulating environment for social scientists. It has been a pleasure collaborating with Dr. Sonal Singh and Dan Mullin, among others, in studying long term users of antidepressant medication in our new Ambulatory Research Consortium. As a cross cultural psychologist, the ARC offers the opportunity to engage with a highly diverse primary care population, ranging from inner city, to suburban, to rural communities."*

There are many, many more researchers and collaborators, and projects and collaborations, than we can list here, including the wonderful work done to inspire the next generation of family medicine clinician researchers. We welcome and encourage you to check out our webpages and keep in touch!
