Meet the Rural Health Scholars

CLASS OF 2019

Annika Bannon - SOM (School of Medicine)
I became interested in rural medicine while doing consulting work with federally qualified health centers prior to medical school. There, I saw family physicians’ partner with local resources available to improve health on both individual and population levels. Through my experiences in the Rural Health Scholars Program at UMass, specifically the longitudinal preceptor program, population health clerkship, and clinical clerkships, my interest in the field has only been reinforced. I am planning for residency in family medicine and hope to find a program that will allow me to continue exploring rural medicine.

Nate Bombardier- SOM
I am from the small farm town Hadley, MA. Living my whole life there, I have come to understand the small-town dynamics and politics that are important for a rural physician to be able to navigate. A physician in a small town immediately assumes a leadership role that is not necessarily as evident when practicing in a city. I am interested in dermatology.

Tiffany Chen- SOM
After growing up in the suburbs, I found myself curious about what life would be like in a rural setting. I find that I work best when I can build profound relationships with people and eventually understand where they are coming from. In a rural area or small town, I think I would have the unique opportunity to gain a deep understanding of the big picture where my patients come from. I am interested in Geriatrics, family medicine, and palliative care.
**Eun Kyung Ellen Kim- SOM**
I joined Rural Health Pathways to learn about health care in all parts of Massachusetts. My family medicine clerkship at Barre Family Health Center and other rotations at Berkshire Medical Center showed me the role of primary care in Central and Western Massachusetts and the needs of the population they serve.

**Ellie Meyer- SOM**
I moved around a lot throughout my childhood, but I consider my hometown Easton, MA. My interests stem from working with marginalized populations. I enjoyed working at an AIDS shelter in Spain, volunteering for a nonprofit that aims to eradicate global poverty, learning about addiction and neuropharmacology at college, and working with children with Autism after I graduated. Working as a medical scribe at Barre Family Health Center, I enjoyed the strong relationships built between the providers and patients, and how the providers were truly part of the community. These experiences led me to my interest in full-spectrum Family Medicine, with a special interest in rural and underserved populations.

**Max Pianka, MS- GSN (Graduate School of Nursing)**
Born and raised in a small rural town in Connecticut, I became very close with my pediatrician growing up. I turned my focus towards medicine and developed an interest towards caring for my small community. I am drawn to rural health care because of the personal connections made between providers and patients. I find it delightfully challenging to maintain a comprehensive foundation of knowledge that is required to provide care to rural communities.

**Mary Nell Pinkston- SOM**
I was raised in Berkshire County, specifically, Housatonic, Massachusetts. Having worked at the critical access hospital in my town, I can appreciate the needs present in a small community, where often “your patient” also goes by other titles, such as “your bank teller,” “your garbage man,” or “your lawyer.” Our hospital functions as a family, valuing the role each and every employee has in providing excellent care for patients. Everyone takes immense pride in
their work to ensure the continuation of this asset in our town. I am applying for a residency in Emergency Medicine, where I hope to develop my career around improving healthcare in my community - perhaps one day even return to the one that raised me!

**Maggie Pollard - SOM**
I was raised in Uxbridge, MA. I believe that rural areas are underserved not only because of the large doctor to patient ratio, but also because culturally, individuals living in rural places might not feel comfortable reaching out for medical help until it starts to really interfere with their livelihood, and sometimes not even then. I think there is a need for outreach, education, and building a rapport of respect for those who might feel as if the health profession is too paternalistic. I really enjoy palliative care and hospice. I can also imagine myself taking some time to live in a more rural area (like Alaska or Hawaii) to gain some experience serving people with health outcomes that are connected to the population density of the surrounding area. I would also like to investigate working on a Native American Reservation.

**Steve Purcell, MS, MPH, FNP-BC - GSN**
I am originally from Ohio, but have lived in California, Pennsylvania, and Hong Kong prior to moving to Boston. My professional experience prior to the DNP program was in public health program management and applied research in rural areas in developing countries. My experience with and future aspirations for global health in challenging environments is well-aligned with rural health settings anywhere, including New England and the US. I am interested in emergency medicine, rural primary care, search and rescue, expedition, and disaster response.

**Meghan Schmidt, MS, FNP-BC, GSN**
I grew up in a small town in Massachusetts and I’m honored to be a nurse practitioner in my home state. I am a Central Massachusetts Advanced Nursing Education Academic-Practice Partnership (CMAAPP) grant scholar with an interest in rural health. I’ve always envisioned working in a small town and being a part of its community. As a health care provider, I value building relationships with my patients, providing evidence-based care and education about health promotion and disease prevention.
**Arielle Stopa- SOM**
I was raised in a Rhode Island suburb. Prior to attending UMass, I served as an Americorps/CommunityHealthcorps member at Boston Health Care for the Homeless Program. I am very interested in exploring the practice of medicine in a rural setting. I am very interested in public and community psychiatry, which would allow me to explore the integration of behavioral health and aspects of physical health and wellbeing.

**Heather Reily- SOM**
I am a 4th year medical student from Marblehead, MA. Before UMass, I studied geography and global health as an undergrad at Dartmouth College, completed my pre-medical post-bacc studies at NYU, and spent time working at the Aspen Institute and living in Colorado. I am interested in primary care in the setting of rural and global medicine and am dedicated to decreasing disparities in access to care. I plan to pursue a career in pediatrics, but first I am extending medical school for an extra year for more global health experience.

**Karsten Shick, RN- GSN**

**Rachel Wasserman, MS, FNP-C- GSN**
I am from Sharon, MA but got a taste of small-town life when I spent four months living in Wellfleet on the Outer Cape. I am drawn to the rural setting because of the increased opportunities for provider leadership, creativity, and relationship-building in the local community. I also appreciate the emphasis on public health and identify with a more holistic perspective that is common in rural practices. I plan on working in primary care in a community health setting with a diverse patient population. Particular interests of mine include nutrition/obesity medicine, behavioral health, and prevention and wellness

**Kari Whitney, MS- GSN**
I got the experience of living in many small towns in many different states growing up. My community changed often when I was younger because I had a father that was an Episcopal priest and we moved every 3 years due to his job. I’m interested in working in rural areas because I am excited about the prospect of living and working in the same town and creating a deep connection with my community.

**Inbar Yamin - SOM**
I grew up in Brighton, MA, and my main experience living in a rural area took place in a small village in Zambia for 3 weeks. I am interested in pediatrics and family medicine because of the longitudinal relationship that you can develop with patients over years of treating them. I also love the community aspect of rural health where a physician can develop a great relationship with the community as a whole and practice community health as well.

**Julia Yasek, MS, FNP-BC - GSN**
Although I grew up in an urban area, Rural Health Scholars has expanded my understanding of underserved populations. I have completed my clinical FNP residency as a CMAAPP grant scholar with a focus on underserved populations in a rural setting with a concentration in palliative care. I have focused on the differences and commonalities among medically underserved populations in both urban and rural settings and hope to contribute to health policy solutions that improve overall access to care. Prior to my nursing career, I did laboratory and clinical research in neurology with a focus on neuromuscular disorders (specifically ALS), genetics, and imaging. My background has inspired me to work in primary care serving underserved populations with a focus on palliative care integration with chronic and terminal illnesses.