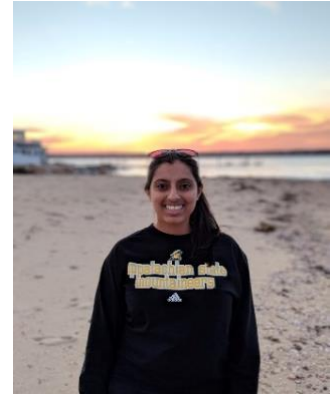


Meet the Rural Health Scholars

CLASS OF 2021

Nayha Chopra-Tandon- SOM (School of Medicine)

I grew up in a small, rural New England town where farmland made up an entire zip code. I learned kindness and community values watching neighbors help each other after bad storms, or fight against a commercial development that wanted to raze local farmland. I also learned firsthand from a patient's perspective that living in a rural community meant very little access to specialized healthcare. I volunteer every summer at a large occupancy camp in Tolland, MA (population ~500), focused on service and community where these rural values are magnified. I want the atmosphere of my practice to be one in which I can understand the environment of my patients as another parameter of the equation for providing holistic care.



Tess Curran- SOM, Class of 2021

I grew up in a suburban town outside of Boston called Sherborn. During my undergraduate and graduate career. I attended the University of Massachusetts, Amherst and I fell in love with the surrounding and relatively rural towns. I recently obtained an accelerated Master's in Public health degree with a concentration in community health education. I would very much like to return to western Massachusetts and become a part of the community working to overcome health disparities in this region of Massachusetts and perhaps influence policy for rural towns all over the country on a greater policy level. I plan to research and implement innovative social programs to care for the whole person, address community health disparities, and to communicate my findings of the efficacy of these programs on a state or national level. I hope to one day serve my community as a pediatrician providing primary care in a community health clinic or private practice driven by principles of public health.

Hallie Geller- SOM

Growing up in a small close-knit community and spending time on a commune in Northern Israel for a year exposed me to the challenges and benefits of practicing medicine in a non-urban setting. I remain interested in working with rural and underserved communities because I feel my impact will be greater felt and my role in the community can extend beyond that of healthcare provider. I am specifically interested in psychiatry, pediatrics and family medicine.



Jessica Kloppenburg- SOM

Heather Lovelace- GSN (Graduate School of Nursing)

I grew up in McKinleyville, CA located within Humboldt County, a small, coastal, rural community. Initially upon practicing as a future NP I would like to take part in working with medically underserved communities. This interest stemmed from my experience living and working in underserved areas throughout my life. The primary care provider who has taken care of my family since the age of 11, has always emphasized the skills, knowledge and impact one can have as a provider working in an underserved community. This exposure to rural medicine and encouragement to serve diverse patient populations from an early age has ignited my passion in this area. Currently, the areas of healthcare I am interested in are cardiovascular care, oral health, emergency medicine, refugee health, HIV prevention and treatment, and global health initiatives.



John Mandeville- GSN

I was raised in Salem, MA and now live in New Hampshire. I genuinely like the idea of working in a small close knit community. For example, when I go to the park with my 4 young children we frequently run into one or more of their teachers as well as several of the NP's from our family practice. This is how I'd like to practice as well. I would like to operate a practice that focuses on total health involving my patients in their care and working with them to make meaningful lifestyle changes that keep them fit and functional well into their golden years. Additionally I come from a working class community where men don't go to the doctor till something's broken or they're on their death's door. I would like to change that and really try and focus on men's health in working class communities as a way to improve their lives and their health.



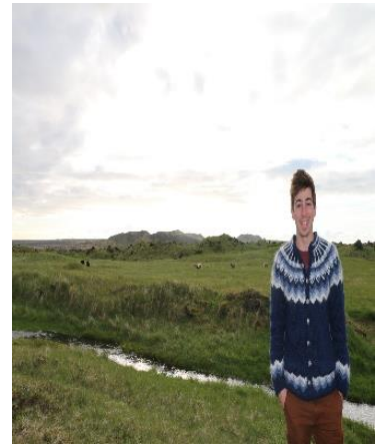
Mable Mason- GSN

The thought of living and working in a rural area is very idyllic. Currently enrolled in the acute care NP track, I am interested in what it might take in order to serve within a rural community.



Richard Moschella- SOM

Hailing from the small town of Dighton, MA, I grew up across the street from an old cattle farm. Since this young age, I have always felt connected to the small, rural, New England towns (even considering a careers as a farmer or large animal veterinarian before deciding medicine was right for me!). Ultimately, I would like to live in such a community and practice medicine in a close-knit environment. The Rural Health Pathway allows me to learn about the important issues affecting healthcare in these communities that are often overlooked, as well as some of the skills necessary for providing care for rural populations.



Julia Oppenheimer- SOM

I'm interested in practicing family medicine in a rural community. Growing up in Pelham, MA, I loved spending time outdoors on farms, in the garden, and in nature, and I hope to continue to enjoy these aspects of rural life. As a medical student, I'm interested in learning more about health concerns and healthcare systems in rural communities and honing clinical skills. I'm drawn to small-town family practice as a future provider because I would have the opportunity to wear many hats as a community member, physician, and patient advocate; to develop strong relationships with patients and their families, with other clinicians, and with the larger community to address community health needs.



Jessica Planamento- GSN

I grew up in a large suburban town in NJ and got my undergraduate degree at Colgate University. Since graduating high school, I have lived in small towns and loved the experience of the community and know in my heart that I plan on living in a rural area. In college, I spent a semester shadowing a rural family physician and I loved everything she did. She played so many roles for the community and wore so many hats as a clinician. She acted as the doctor, the therapist, the confidant, and sometimes even needed to help with insurance issues and fight for her patient's coverage. She knew all her patients and took time to listen to their problems. I loved what she did and knew I wanted to do the same with my career. I am interested in integrated and holistic medicine. I hope to go on to do functional medicine as a DNP. I also have an interest in women's health.



Jaya Rawla- GSN

Before moving to a small town in the middle of MA, I lived in the Boston area, and New Delhi, India. I love living in my small rural town and want to serve my community through my clinical practice. I am passionate about caring for older adults and eventually see myself working in geriatrics and/or geriatric psychiatry.

