When Roy Wade was a medical resident at the University of Virginia, Charlottesville, one patient in the pediatric clinic he was working in really stuck with him: a 16-year-old girl with a deeply troubled history of depression and risky behavior. “I couldn’t help, and her life spilled out of control after my visit with her,” he recalls.

The case highlighted for Wade the difficulty of helping patients with problems that are not just medical, but tied into the fabric of lives marred by poverty, racism, a family history of illegal drug use, chronic disease, or physical and emotional abuse.

When Wade heard about the Commonwealth Fund/Harvard University Fellowship in Minority Health Policy, “It just clicked for me,” he says. Looking to boost his skills as a leader within the health care system, he applied for and received a Commonwealth Fellowship to study at Harvard School of Public Health, completing the program to receive a master’s in public health in May.

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ILLUSTRIOUS ALUMNI
In doing so, Wade, MPH ’11, joined an illustrious group of alumni that includes the current head of the U.S. Indian Health Service, a key health policy adviser to President Barack Obama and U.S. Health and Human Services (HHS) Secretary Kathleen Sebelius, and at least one MacArthur Foundation “genius grant” recipient.

The prestigious program, which celebrated its 15th anniversary earlier this year, provides potential physician-leaders with the skills they need to help people who come from minority, disadvantaged, or otherwise vulnerable groups get better access to high-quality health care.

Launched by Harvard Medical School (HMS) in 1996, the program offers recipients funding to pursue a master’s of public health from HSPH or a master’s in public administration from the Harvard Kennedy School of Government.

Since its establishment, the Commonwealth Fellowship, combined with funding from the California Endowment Scholars in Healthy Policy and the Joseph Henry Oral Health Fellowship in Minority Health Policy, has supported 99 fellows in minority health policy, 95 of them at HSPH. The training covers not just policy and leadership issues, but nitty-gritty subjects such as accounting, epidemiology, communications, and economics—all of which may be quite new to young physicians.

FOCUSBING YOUNG LEADERS
Critically, the program helps each fellow identify the issues that engage him or her most. “We all want to address social inequities, social injustice, poverty, and racism—issues that affect public health,” Wade points outs. “We come to the program with ideas about what we want to work on, and the program is very good at helping us refine those ideas into our respective research and policy areas, and at providing avenues for us to continue to work in these areas. Doing projects on the child welfare system, I realized that’s where I want to work.”

Each fellow carries out a practicum analyzing a highly specific issue in health policy. For Wade, that was an analysis of school-based health care centers, which provide a major safety net for 2 million patients but often face severe funding handicaps. While most of these centers bill their states for Medicaid reimbursement, managed care organizations often raise barriers for this reimbursement.

was given by the IHS’s then-director. HMS Dean for Diversity and Community Partnerships Joan Reede (who heads the Commonwealth Fellowship program) told Roubideaux that she should pay strict attention, making the prophetic suggestion that Roubideaux herself might eventually get the speaker’s job.

“The fellowship broadened my perspective and gave me new tools to keep focused on my original goals,” says Roubideaux, who later switched career plans toward teaching, research, and service. (To learn more about Roubideaux’s career, read the profile that appeared in the Spring/Summer 2010 Review at http://www.

“Without this fellowship, I doubt that I would have been able to make the same kind of impact on African women’s health and female genital cutting.”

—Nawal Nour, MPH ’99
TACKLING DRUG ADDICTION TREATMENT
Kima Taylor, MPH ’02, now directs the Open Society Foundation’s National Drug Addiction Treatment Program, which directly tackles the challenges posed by lack of access to treatment for the more than 23 million people addicted to drugs and alcohol in the U.S.

“Only 10 percent are being treated,” says Taylor. “It’s a chronic disease and it needs to be treated that way—handled in the health care system and not the criminal justice system. It’s also still publicly stigmatized and seen as a moral failing, even by many MDs and others in health care.”

Taylor adds, “The fellowship opened my eyes to professional possibilities that I would not have known even existed. It exposed me to subjects—economics, leadership, and statistics—that people rarely feel doctors need or will use. The fellowship also helped me nurture my inner advocate. I was able to learn to advocate more effectively for myself and my sanity, as well as for others.”

Taylor currently manages a $10 million nine-state pilot program that seeks to boost access to treatment for addicts by rethinking advocacy, communications, and operational strategies. While results vary by state, so far the program has opened up access to treatment for 300,000 more people, she says.

ADVISING OBAMA
For Dora Hughes, who received her MPH from HSPH through the program in 2000, the fellowship “let me be effective on a much broader field.” After working as an aide to Senator Ted Kennedy and to then-Senator Barack Obama, she became a health care adviser during Obama’s presidential run and now plays a major role in health care initiatives as counselor to HHS Secretary Sebelius in the Obama administration.

ERADICATING GENITAL CUTTING
Other fellows who attended HSPH through the program include Nawal Nour, MPH ’99, who later received a MacArthur Foundation “genius grant” for her work as a global leader in the effort to eradicate female genital cutting in Africa.

Nour also works with African women now living in the U.S., who face a host of issues because they have either submitted to genital cutting or face pressure to do so.

“The Commonwealth Fellowship was a career-altering experience,” says Nour, who is associate professor in obstetrics, gynecology, and reproductive medicine at HMS and director of the obstetric ambulatory practice at Brigham and Women’s Hospital.

“I returned to clinical work after the fellowship as a public health practitioner with the goals of bringing about social change to improve women’s health,” says Nour. “Without this fellowship, I doubt that I would have been able to make the same kind of impact on African women’s health and female genital cutting.”

PAYING IT FORWARD
“One of the most powerful aspects of the fellowship is the camaraderie and the family atmosphere,” Roy Wade points out. “You feel absolutely supported. You are able to express your strengths and weaknesses, and you are comfortable evaluating yourself and your colleagues.”

“It’s nice to know you have a support system,” agrees Kimberly Cauley Narain, another fellow who graduated in May. “But we all know that it comes with an expectation—that we will be part of an extended group that helps to nurture the fellows who follow.”