The Thick of It: Freely Wandering in Academic Medicine

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See photographs, a list of scientific publications, and some carefully curated bio-blurbs that I wrote for a few Web sites. Cultural anthropologists would consider those Google results *thin descriptions*, artifacts lacking the thickness and texture that constitute a life. Information scientists would say Google revealed some data, less information, and no knowledge. In this essay, I am committed to telling thick truths that will provide the reader with some knowledge. I'm not thinking aloud, but my inner filter is set to low, and I have only a vague idea of what I am about to say.

EARLY YEARS

My parents were from neighboring areas of New York City (Bronx, Brooklyn). Their parents were from neighboring *shtetls* in Eastern Europe,⁵ the land of pogroms and mass murder,⁶ that includes parts of Belarus and Ukraine. My father fought with Patton's Red Devils (702nd tank battalion) and served as a Yiddish translator for starving people exiting concen-

tration camps at the end of a war that has been euphemistically called World War II. He later experienced shellshock⁷ and other untreated emotional conditions. He met my mother 10 years after returning from overseas. My mother rejected his initial overtures but reconsidered her choice 5 years later. They married, lived in Riverdale, and shortly after the birth of two children 16 months apart, moved to New Rochelle, where my sister and I went to public schools. Neither of my parents attended college but both expected their son to complete graduate school.

After high school, I entered the University of Pennsylvania. I applied to Penn because two cousins were there, several friends had applied there, and Philadelphia was a quick ride on Amtrak, ensuring swift returns home. My high school vocational assessment recommended that I should become an engineer. I did not know why that seemingly authoritative suggestion was wrong until I learned more about assessment. The test did not assess my willingness to do what all engineering students must do: trade off English and social science courses for engineering courses. With apologies to Paul Meehl,8 when making high-stakes decisions, we must "use our heads" instead of the algorithmic prediction formula. The reason is simple. Some problems are wicked, meaning that there is no optimal or correct solution because outcomes are assessed from multiple perspectives using multiple criteria.9

I was not an achievement-oriented college student. After college, I joined the nursing staff at New York Hospital (White Plains), miles from my childhood home. My job title was "mental health worker" – a clumsy phrase for a position that is vital to the smooth

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© 2017 American Association for Geriatric Psychiatry. Published by Elsevier Inc. All rights reserved. https://doi.org/10.1016/j.jagp.2017.12.001 operations of a psychiatric inpatient unit. Overnight stints on 3-North from 11 P.M.–7 A.M. were not uncommon. I became addicted to coffee, and enjoyed occasional cigarettes with patients and my nursing coworkers. I read widely—most memorably, *One Hundred Years of Solitude*, Garcia-Marquez's magical meditation on history, family madness, and the chaos of inner life. ¹⁰

After about a year, I decided to pursue graduate studies in clinical psychology. Upon learning of my decision, one of my aunts said, "You have to go to graduate school to figure out your father, the *meshugene* [crazy person]?" Partially true. I also needed to figure out myself. Yet there was a problem with my wish to get a Ph.D. in psychology. Most graduate programs wanted students with prior research experience. I had very little. I left my nursing position for a job with Kathryn Halmi, a psychiatrist with expertise in eating disorders. After working on a taste perception study, I recorded my first entry in the scientific annals. 12

I began exploring graduate programs that were psychodynamically oriented because psychodynamics was (and is) one of the few approaches to psychotherapy that unflinchingly addresses the inner life. I also wanted to receive advanced training in methodology and statistics. Buffalo had one of the few programs in the country that offered training in psychodynamics as well as research methodology. Students were given significant latitude to choose coursework and mentors, which was a plus because I disliked structured academic environments. I chose to take courses with several excellent teachers, including Joseph Masling, Jack Meacham, Erwin Segal, and Murray Levine. Rigorous coursework in psychometrics, research methods, and statistics ensured that I, like many psychologists trained in the late 20th century, would be profoundly influenced by Anne Anastasi¹³ (1908-2001) and Paul Meehl¹⁴ (1920–2003). Elective coursework in philosophy of science and sociology of science introduced me to the insights of three other intellectual giants: Thomas Kuhn (1922–1996), 15 Imre Lakatos (1922–1974), 16 and Paul Feyerabend (1922–1994). 17 In different ways, they all argued that science is a social endeavor enacted by flawed humans. Stephen Gould's (1941-2002) exposé of the misuses of psychological assessment similarly underscored the need for humility in science.¹⁸

Another important lesson from graduate school concerned the need to scientifically assess any and all clinical claims. Sigmund Freud's (1856–1939) psychoanalytic writings are no less amenable to scientific

inquiry than experimental psychologists' research on reinforcement in rats¹⁹ or community psychologists' research on the effects of childhood enrichment programs.²⁰ My dissertation advisor, Joseph Masling, edited several volumes of a series dedicated to psychoanalytic research. I contributed two chapters^{21,22} and co-edited one volume.²³ The market for these books is understandably small. Freud, like many of those influenced by his writings, had little use for psychoanalytic research.²⁴

While in Buffalo, I had the good fortune to meet fellow graduate student and my future wife, Nancy Talbot. We moved to Boston in 1988. I completed an internship at McLean, a Harvard teaching hospital, where I participated in seminars and received supervision from expert clinicians, including leaders of a feminist movement in psychoanalysis. ²⁵ McLean's intellectually stimulating environment was a plus, but there was one minus embodied by the inaccurate, Orwellian phrase that came into vogue: *managed care*. When I inherited my inpatient caseload, the average length of stay was nearly 1 year. Two years later, few patients stayed for more than 2 months. My experiences left me unenthusiastic about the prospects of a full-time clinical career.

Economics factored into our decision to leave Boston. The housing costs were more than we were willing to bear. One day Nancy saw an ad that caught her eye: A clinical faculty position in Rochester, NY. Fond memories of Western New York's pleasant summers and colorful autumns, affordable housing, and trafficfree roads were alluring, but Rochester had appeal for another reason. As psychologists we were reluctant to find employment in most medical settings. We reasoned that Rochester, home of the biopsychosocial model, developed by George Engel²⁶ (1913–1999) and psychoneuroimmunology, developed by psychologist Robert Ader (1932-2011),19 had to be friendly territory for psychologists. Moreover, Leonard Salzman (1929-1991) was Associate Chair of Psychiatry. After arriving in Rochester, I learned that the Department's founding chair, John Romano (1908-1994) was steeped in the writings of Paul Meehl. Psychology's strong position at Rochester was hardly accidental.

After Nancy received a job offer, I needed to find something to do with my career. Until now, I had been wandering aimlessly. Two defining moments pointed to a career in geriatric mental health. The first occurred in an Italian restaurant in Boston's North End

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