

# OREGON HEALTH & SCIENCE UNIVERSITY ORAL HISTORY PROGRAM

a project of OHSU's Historical Collections & Archives

an interview with:

**Dena Hassouneh, Ph.D., R.N.,  
A.N.P., P.M.H.N.P., F.A.A.N.**

interview conducted on: May 30, 2018

by: Martha Driessnack, P.h.D., P.P.C.N.P.-B.C.



2020 Oregon Health & Science University

This work is licensed under a Creative Commons Attribution-Noncommercial 4.0 License

<https://creativecommons.org/licenses/by-nc/4.0/>



Interviewee: Dena Hassouneh  
Interviewer: Martha Driessnack  
Date: May 30, 2018  
Transcribed by: Teresa Bergen

Martha Driessnack: My name is Martha Driessnack, and I'm interviewing Dena Hassouneh for the OHSU Oral History Program. It's May 30, 2018. And we are in the BICC building at OHSU. Let's start with my first question. And that's just thinking back to your early life and education, I'm wondering where in that did you first become interested in nursing?

Dena Hassouneh: Well, I wanted to go into, originally I wanted to go into social work. And I actually was taking an economics class that was a prerequisite. I happened to be out on the balcony. We were taking a break. And there were two people who were apparently social workers. They were talking amongst themselves. And I overheard a conversation. They were complaining about how much they were paid. And I immediately—

Driessnack: How much or how little?

Hassouneh: How little. Yeah, how little. And I immediately decided to change my major to nursing, because I didn't want to be really underpaid. But it was still in sort of the profession where you care for others, so it seemed like a good next choice.

Driessnack: And then you actually completed both, two undergraduate degrees, is that right, at the University of Washington?

Hassouneh: Mm hmm.

Driessnack: Do you want to talk a little about how you did that double major? And then how come you left there and came here to do the rest of your graduate studies?

Hassouneh: Well, I actually ended up doing my second major, which was women's studies, because I did not pass a clinical, and had to wait another full year, because it was only offered once a year.

Driessnack: Wait, which clinical?

Hassouneh: It was the first one ever.

Driessnack: Like the fundamentals thing?

Hassouneh: Yeah. The first time you're in the hospital. And I was devastated by it. I was totally devastated. But you know, I had a lot going on at that point in time that in retrospect it's kind of understandable what happened. I thought well, I'm going to have to wait a year to retake this, so I'm going to use the time to do something else that I'm interested in. And I was really grateful that it turned out that way, because I actually really enjoyed my women's studies course more

than the nursing course. It was really sort of a life raft when I was at UW. And I learned a lot, a lot of different perspectives that I had never been exposed to, and that I wasn't exposed to in nursing school, either. I'm really grateful that I actually ended up doing that.

Driessnack: I bet that surfaces, that early experience, in your later work.

Hassouneh: Yes. It does.

Driessnack: In many forms.

Hassouneh: Yes. And so why did I move?

Driessnack: Yeah.

Hassouneh: I moved because I actually had been a victim of a crime. And I wanted to relocate so that I would feel safer, basically. There happened to be, at that point in time there was like too many nurses or something, so it was hard to get a job. And there happened to be—

Driessnack: In Seattle?

Hassouneh: In Seattle and in, just around the Pacific Northwest. And there happened to be openings at the VA Hospital for people with BSNs with GPAs of 3.5 or higher. So I came here to take a job and kind of relocate.

Driessnack: Good. And then you stayed here, your education here at OHSU as a number of graduate degrees. Can you talk about those a little bit, how you put those together?

Hassouneh: Yeah. So when I first came, the rule was that you had to do a year of clinical practice before you could enter graduate school. Otherwise, I would have just gone straight into graduate school. So I entered as an MS/PhD student. And I was interested in community health, so that was my first major. That's what I got my master's of science in. But as I was working at the VA the whole time I was doing that, I thought maybe I might want to do something different in the clinical arena. And so I went back and got a post master's to become an adult nurse practitioner. And I worked as an adult nurse practitioner for a few years. When I was actually studying for my PhD, I worked there. And over time, my research moved into and continued to focus on women's mental health. I decided to go back for a psych NP. So I did that, actually, after I had completed my PhD.

Driessnack: Do you keep up both of those NPs?

Hassouneh: Yeah.

Driessnack: Oh. That's a lot.

Hassouneh: It is.

Driessnack: And I think they've gotten rid of that requirement now, for the year of work.

Hassouneh: Yes. I think, yeah.

Driessnack: I know that well. So then you end up going to the PhD program here. But you're also teaching in the PhD program here now.

Hassouneh: Mm hmm.

Driessnack: And I wonder, in that time, how have you seen the PhD program evolve or change?

Hassouneh: Oh, well, when I was a student, there were a core group of tenured, full professors with an active research career. I think that the funding environment was quite different then. And the educational environment was quite different. So those faculty had a different experience than those of us who are faculty now. But having the sort of cadre of senior faculty who were, had a long track record of working together and were really outstanding faculty made my years as a student really enjoyable and as positive as it could be, given that I needed to finish in three years.

Driessnack: And why was that? What made that rule?

Hassouneh: Well, I'd already borrowed a lot of money to go to school. And I applied for an F31 when I was a master's student. And I found out it was funded in September, the same month that I was supposed to be starting school. And nobody told me about the T32. Nobody mentioned that there was another alternative to help pay for school, other than just me paying for it. And I didn't think I could afford to amass much more debt. So I felt, you know, the F31 was for three years. And so—

Driessnack: That was it.

Hassouneh: That was it.

Driessnack: Yeah. So looking at it there, how was the PhD? Kind of coming back to the PhD program a little. Is it different for the student today in the PhD program now that you're teaching it, than was your experience there? Or is it, you know, got a lot of the same core experience to it?

Hassouneh: My sense is that it's different. We had some turnover amongst our faculty. And it's been going on for a while. That can lead to instability for people having to change chairs, because their chairs leave. And I think that it can also create a climate of anxiety for students, if they don't know what's going on, why are people leaving. And so, and there's not a lot of chairs to choose from at this point. There's much more emphasis on getting through fast now compared to when I was a student. There's much more of a focus on having a faculty match in your research area. It's not enough to have a methods match. It would have to be like, nowadays it seems like we really emphasize that faculty match, which I think can sometimes be difficult for students because they change their minds sometimes after they've been studying for a while. And they want to do something different. But they may feel pressured to stick with the line of inquiry that maybe they're not so interested in anymore. I think those are some pressures that our

students have that we did not have when I was a student. When I was a student, you really were encouraged to just pursue an area that was significant and of interest to you. And you would find a mentor who either was in your area, or had methods, expertise that you needed. And there was a lot more flexibility.

I consider myself to be a qualitative researcher, even though I've done RCTs, I still consider myself to be a qualitative researcher. And when I was a student, we actually had electives. We had a grounded theory elective. We had a phenomenology elective. And there was a strong cadre of qualitative researchers, which was really enriching. And we really don't have that anymore.

Driessnack: Right. It's not—

Hassounah: It's not. The breadth is not there. And we don't offer those electives anymore. We don't have that kind of—actually, when I was a student, you were required to do a minor outside of nursing. And I think that was really excellent. Because we can become very insular in our thinking if we don't expose ourselves to other ways of thinking, and other disciplines. And when there's no requirement to take your electives outside of nursing, I think what sometimes happens is we just continue to take courses in nursing or in the health sciences, perhaps, and not expand, maybe, into more challenging theoretical areas that challenge the world views that are common in our professions. You don't see as much of that, I don't think, now that we no longer have that requirement.

Driessnack: Yeah. I remember that. It was called a minor.

Hassounah: Yeah.

Driessnack: Or sometimes I think people referred to it as cognates or something.

Hassounah: Yes.

Driessnack: And didn't they have to support your dissertation?

Hassounah: Yes.

Driessnack: You had to support it. But they had to be outside of nursing. And I think outside OHSU. But you could petition it. Wasn't it? You could do something at OHSU, if it was a different—

Hassounah: I think it could be anything outside nursing. But most people went to Portland State or Oregon State were common.

Driessnack: What did you do?

Hassounah: I did a minor in cultural studies.

Driessnack: And where did you get that?

Hassouneh: Coursework at Portland State.

Driessnack: Yeah. That's great. It's great that it's right here, too.

Hassouneh: Yeah.

Driessnack: I'm going to shift on you a little bit here. And just to talk more, a little bit about how education overlaps, your experience of education kind of overlaps where you ended up doing some research, too. But I'm wondering if you could discuss some of the disparities you've seen in access, in terms of accessing health profession's education.

Hassouneh: Well I think, you know, as most of my teaching has been in the PhD program, I've done, when I first started, I taught in the master's program more, but I still taught in the PhD program. And I have some minimal involvement with the master's programs. But most of my work has been with the PhD program. And so that's kind of what I can speak about. There, I think, hasn't been a very good track record of recruiting and supporting under-represented minority students in our program. We have had, we've lost some students who were under-represented minorities that I think probably could have been avoided with better support, and maybe a different environment. Right now, my perception is people are welcome, those students, but we're not actually taking any steps to really try and bring students from those kind of diverse backgrounds in. We're just kind of hoping they apply. And not necessarily—

Driessnack: But no difference in, and so you're talking really about the experience within the School of Nursing here.

Hassouneh: Yeah.

Driessnack: And primarily within the PhD program.

Hassouneh: Yeah.

Driessnack: It's kind of like, if I'm hearing you correctly, it's kind of like we've opened the door, but there's nobody's helping them get through, or get through the, or there's not a separate scaffolding or anything there, so that the experiences are really equal, rather than the outcome being equal.

Hassouneh: Yeah.

Driessnack: Does that make sense?

Hassouneh: I think so. Yeah. I mean, we had a partnership with Howard University many years ago. That was under Dean Potempa. We had a partnership where we had some students from that university come to our school to get their education. And we had, I personally knew and worked with two of those students. And I know that they had a very negative experience. And they really faced many instances of racism. And they didn't feel welcome or comfortable. And there really

wasn't anywhere for them to go other than someone like myself. Or at that time we had a faculty member who was African American. Carol Parker Walsh was really, her office was kind of a haven for those students. And neither of those students finished the PhD.

Driessnack: So they weren't successful to get through the program?

Hassouneh: No.

Driessnack: No.

Hassouneh: They were very capable, but did not make it through.

Driessnack: Do you think at all that the School of Nursing has made any progress or improved access for health education? You know, for individuals. Or even in a more global sense, do you think the School of Nursing has improved at all in making sure that students learn more about access to healthcare across, you know—

Hassouneh: Well, in the PhD program, we just now recently developed a health equity specialty track that you can go into. And there's definitely, if you happen to go in that direction, you'll learn about those things. However, not all students will do that. And my experience has been that exposure to issues of equity seem to vary depending on the faculty person who's teaching the class, how much they will reference or address issues of equity as part of the content. Because it's really relevant to just about any content. And so it seems to really vary quite a bit.

Driessnack: In the curriculum for the students today, do all the students have to get introduced to this track, health equity? Do they get like an introductory course in it and then you can opt to go on? Or is it just only for the students who choose that route?

Hassouneh: I'm not 100 percent sure. When I taught the course that you're referring to that fall, there were some students who I would have thought would have been in the bio behavioral track, so I was surprised to see them there. They had, they said that they had made the choice for reasons other than scholarly reasons. And so, I think they do have to take both, but I'm not 100 percent sure.

Driessnack: I'm thinking that was the idea. But it's a pretty new curriculum.

Hassouneh: Yeah.

Driessnack: So at least it's nice to see that in there. I'm wondering what you think in terms of, especially because you've looked at a lot of schools, how OHSU School of Nursing in particular looks compared to other schools of nursing, or other health profession schools. So you think it's a similar experience across the United States?

Hassouneh: You mean for students of color?

Driessnack: Yes. In terms of access, you know, to the education.

Hassounah: Yeah. So you're referring back to my earlier work in this area.

Driessnack: Yeah. And just like, I'm just thinking as I'm listening to you, you talk about the students like we opened the door for certain students to come in. And we're thinking oh, yay. But we maybe have not scaffolded that experience to the best of ability. Or we didn't put as much thought into scaffolding the experience as to opening the door. You know?

Hassounah: Yeah.

Driessnack: Do you think that's a similar experience across the United States?

Hassounah: I think that it's probably common, yeah.

Driessnack: I'm just wondering about it. Shifting a little bit to your research, why were some of the experiences and challenges that you've observed in your research on faculty of color, especially in these predominantly Euro-American schools of nursing?

Hassounah: What are the challenges for equity, you mean?

Driessnack: Yeah. Or what you've seen. What you've come across in your research. What was the focus, was on faculty's experience?

Hassounah: Yeah. It was basically looking at how do faculty succeed? How do they enjoy their roles?

Driessnack: And these are faculty of color.

Hassounah: Yes. Faculty of color in the health professions.

Driessnack: Right. So what are some of the challenges that you've found for them, or you're finding?

Hassounah: Well, there was variability based on the climate of, it could be the school or the department or it could be the larger university. Some people had more positive experiences and others had more negative experiences. Overall, there were more negative experiences than there were positive. And just a lot of exclusion. Being left out of, not being invited to be involved with the projects, not finding mentors, not being invited to meetings. Not having anybody sit by you and just chat. Just a lot of exclusion. As well as if someone didn't know them, they might mistake them for being a janitor or something. Things like that.

Driessnack: So not even being recognized that they're faculty?

Hassounah: If they were in an area where people didn't know who they were, yeah. And a lot of resistance amongst the majority group to tackling racism, to talking about it, acknowledging it, doing anything about it. A lot of resistance. And because racism has a negative effect on faculty



and students of color, many, it's not uncommon for someone who's a person of color to think that that should be addressed in some way, or that some action should be taken. And so there was a lot of frustration around that, too, that there was so much resistance to making real change, instead of lip service.

Driessnack: So resistance in the way of people would notice, or the faculty of color would notice, bring something up, and it was not addressed or silenced in some way?

Hassouneh: Yeah. So they might, one example is a participant, if he would speak, people would start, basically start freaking out like he had said something really bizarre or offensive, when it was just a normal statement, that people would get all upset. And there would be such an emotional reaction that he eventually stopped saying anything. And—

Driessnack: Sort of stuffed it.

Hassouneh: Yeah. And I remember, just another example that's coming to mind, another faculty person who actually part of her role was diversity. I remember her talking about her bringing that up at a meeting. And the response of the faculty at the table were kind of, "What do you mean by that? What do you mean by diversity? Can you operationalize it?" And just this really obfuscating kind of response that was for that particular person at that time who was kind of battle-weary, she just said, "Never mind. Not going there again." Those were some of the kinds of reactions that people would encounter when they would speak. Sometimes if someone was too outspoken, they could be labeled as a troublemaker. And the problem might be seen as that that person has a problem personality, instead of the issue being the climate. And so that was a persistent pattern that I heard about from people that I interviewed.

Driessnack: So, they were excluded. But also sort of, it sounds like you found that they were also feeling, they also had to override their own emotions and feelings and expression, too, sometimes.

Hassouneh: Yeah. And as well, I think, in many instances if there were students of color or faculty of color having a negative experience, they might go to another faculty member of color to talk and seek support, which is helpful and important. But at the same time, can become burdensome if there's a lot of problems.

Driessnack: Burdensome to the faculty.

Hassouneh: Yes.

Driessnack: To the faculty who has to take on this extra burden.

Hassouneh: The emotional work.

Driessnack: As the interpreter, sort of, or just a burden of placement.

Hassouneh: Yeah.

Driessnack: Did you, you did this research with nursing faculty. But all health professions, right? Or was it physicians, too? Faculty physicians? Or was it just nursing faculty?

Hassouneh: It was School of Nursing, School of Medicine, School of Dentistry, and School of Pharmacy.

Driessnack: Did you find any differences in those faculty at all?

Hassouneh: Yeah. Actually, the pharmacy seemed to be the most positive environment overall, compared to the other professions. They have a lot of new pharmacy schools, and a lot of new pharmacy faculty, because of the changes in the educational requirements. And so there was, you were more likely to see faculty who were of a younger age. And that was an issue that was raised by many participants, concern that there's sort of this good old boys' club, or good old girls' club, in the case of nursing, that really didn't want to see anything change. And that basically just wanted to reproduce other people like them. And when you brought in people who were of different generation, they had a different experience growing up, maybe more integrated, that wasn't as much of an issue.

Driessnack: Interesting. Yeah. At BNA, you start to see that today again and again where the students are actually driving some of the movement today. We talk about flipping the classroom. But they sort of flipped on us, too, I think, you know, in making their own demands, like why isn't this this way or something.

Hassouneh: Yeah.

Driessnack: So you found that from the faculty's point of view, too, with the younger faculty?

Hassouneh: Yeah. I think that it's unfortunate that it falls to students to be in the position to be, you know, asking for change, because they already have a lot on their plate. And so it's, while it's really heartening to see the student involvement that we've been seeing here at OHSU recently around issues of equity, I also feel badly that they feel that it's necessary for them to do that.

Driessnack: One of your research interests is in mental health in women from marginalized populations. And I'm wondering if you could share some of those research findings.

Hassouneh: Yeah. When I actually did my dissertation, it was on domestic violence in the American Muslim community. And at that point, nobody was talking about it back then. It was a completely taboo topic. And my work in that area actually was kind of among the first papers to be published. It really is actually a source of satisfaction to me that one of the papers that I published was influential in the British Columbia Supreme Court decision to uphold the constitutional ban on polygamy.

Driessnack: I saw that. Your article was actually cited in the closing arguments, or whatever the argument they gave to uphold—

Hassouneh: Mm hmm.

Driessnack: And the ruling was against polygamy?

Hassouneh: Yes. There was, I think, a group of, yeah, it was in Canada, in British Columbia. And there was a group of Mormons that were basically challenging the constitutional ban, so it had come to the Supreme Court.

Driessnack: That's interesting. I bet you never thought that's where that would end up.

Hassouneh: No. I didn't. I did not.

Driessnack: And I bet it is a sense of pride. Are there any other findings that you found in particular from those women that you'd also like to share?

Hassouneh: Well that particular study, I think, is really an example of why it's important to do research with really marginalized and vulnerable populations. Because in that particular case, the women were not even able to speak in their own community.

Driessnack: How come?

Hassouneh: Because it was taboo. And this actually, this study was actually conducted before 9/11. But even before 9/11, it's never a friendly environment in this country for people who are Muslims. It's not really, it's never been friendly. So many people tend to socialize in the Muslim community, but maybe not have a lot of supports outside the community. And when you are in kind of a community that's sort of insular and then you're not allowed to talk about your experience, you are really kind of doubly silenced. And I think that there has to be, there has to be someone to really listen to those voices. Because otherwise the suffering just continues and nobody can even know about what's going on, or what are some of the things that we could do? So the community itself, when I completed my study, actually took the findings and one of the local communities, and formed a committee to address it in their own community. I think that, and I know that my work has been included on web page of other agencies in the country that now have mobilized to address domestic violence in the Muslim community. But I don't think we always have the opportunity to do that kind of work. Because they're not necessarily always on the funding agenda.

Driessnack: Yeah. That's interesting that would not be, for whatever reason, certainly doesn't bubble up to the top, does it?

Hassouneh: Yeah.

Driessnack: It's a truly marginalized—marginalized within the marginalized.

Hassouneh: Exactly.

Driessnack: The women.

Hassouneh: Yes.

Driessnack: Within that community. It must be cool, though, to know that what you did on a small scale as a doctoral student actually is held up as a model for other small studies. Sort of bird by bird, kind of moving that up. That's just really cool. And have you taken that, so that's like where you worked with Muslim women in particular. Do you think in general that there are barriers that Muslim women still experience here in this country, especially post, you brought up 9/11. But I'm just wondering what barriers Muslim women in the United States face in terms of, not just in their community, but just in healthcare and maybe healthcare education.

Hassouneh: Yeah. I think that the same problems exist and maybe are perhaps, maybe, more intense. But ironically as the sort of hate against Muslims has become more nationally known, that's also given Muslims a bit more visibility among people who maybe are sympathetic, or are interested in accepting more cultural diversity. Whereas that, I think, wasn't necessarily, they weren't, not on the radar screen before.

Driessnack: That's what I'm seeing.

Hassouneh: Yeah. I think even though the hate speech has really ramped up, there's more effort to, I think, reach out to that community than there was in the past.

Driessnack: And there seems, in the School of Nursing, at least, we have, at least I'm aware of it right now, a number of Muslim female students. We have male students, also.

Hassouneh: Mm hmm.

Driessnack: But most, are they from out of the country?

Hassouneh: Yeah. I think all of them are, yeah.

Driessnack: And how did that come about? Do you know?

Hassouneh: Well I mean, I think that, I did some work over at, helping develop a nursing school in the occupied territories on the West Bank of Palestine. So a little bit of exposure to sort of what's available for doctoral education in that region. And there's not a lot. There's limited programs to choose from. And really, for whatever reason, getting your degree from a western university is usually regarded as more prestigious. People are, nursing schools are looking to get doctorally prepared faculty. And they're just, because of the lack of programs, there just aren't very many. It's really hard to find. So they ended up sending their faculty for higher ed to complete their doctoral degrees so they can come back and teach. Just because there hasn't been, we don't have, really, a strong cadre of doctorally prepared faculty in that region. I think you see that the countries that can afford to pay for their students to come are doing that.

Driessnack: I like to think, though, Dena, that maybe some of those students chose OHSU because you're here.

Hassouneh: Oh, I don't know.

Driessnack: You talked earlier about a faculty member being sort of a haven. I'm just saying, or if they read that research, maybe, even if they're not going to do that research, they might come here because there's somebody who at least has lifted that voice ever so slightly, or whatever. It might be interesting, because they think that role modeling is really important. Or here's a successful person here. Maybe? I don't know.

Hassouneh: Yeah, I don't know.

Driessnack: I'm wondering, you've also done research with individuals with disabilities, including a community-based research project that was done in collaboration with members of the Oregon disability community. I wonder if you could talk about that a little bit.

Hassouneh: Yeah. I've done several projects in collaboration with the centers of independent living in Oregon, in various parts of Oregon. And what that started with, my post-doc, Mary Ann Curry was my sponsor for my post-doc. And she was doing work in the area of violence against women with disabilities at that time. As I had done my dissertation in the area of domestic violence, it was kind of the same topic area, but a shift to a different population. And so as a result of that, I had actually a one-year post-doc. I didn't have a two-year, because the T32 was coming to an end. But I was able to get an R15 funded based on that one year, the work that I did in that one year. I came in as a faculty member with a funded R grant. And worked with the person who later became my best friend, Elizabeth McNeff, was a co-investigator with me on all my projects that were in the disability community. And we were really close friends. She passed away two years ago. I think part of the love that I have for that work was because that's her community. And I noticed when I did my minor in cultural studies, because that's a lot of analysis of race, class, and gender. And some analysis of sexual orientation in that area study. But I noticed that people with disabilities were absent from the discourse when I did that. And so that also piqued my interest. Why isn't anybody talking about this?

Driessnack: Another silence. Or overlooked or something.

Hassouneh: Yes. Lizzy was really an active, kind of an activist in the community, and very devoted to the disabilities rights movement. And she and I just hit it off and just kept working together over the years.

Driessnack: What's your next step? What are you going to do next?

Hassouneh: So right now I'm—

Driessnack: Other than mentoring all these students that you're doing right now.

Hassouneh: Right now, I have another R15 that's really looking at modifying the intervention that we developed and tested for women with physical disabilities who have depression. It's a peer program, so that means it's run by and for consumers. And that's consistent with the independent living philosophy that the centers for independent living adhere to. So it's an evidence-based program that's also a peer program. And there's not a lot of choices in that area. They really embrace the program. And it's being offered, and it's been funded by the state. But the program's only for women, because it was designed for women.

And so the centers were really just reaching out and asking that we do some work, develop a similar program for men. Men, I've never done work in the area of men's health, and that's frankly not my area that I would pursue. But I am a community-based participatory researcher, and I listen to my partners. And so I said, "Okay, we'll go ahead." We submitted. And that's the project that we're doing now is doing that, modifying and pilot testing the program for men.

Driessnack: You get to be a little uncomfortable, then.

Hassouneh: Yeah, for sure. And especially without Lizzie, because she really could talk to anybody.

Driessnack: It's interesting when a research team, when you do get very allied, it's really hard to disrupt that.

Hassouneh: Oh, yeah.

Driessnack: And you talked about before, like when you were a student, that the core faculty way back when had teams of people that were sort of established, that really created like a ground floor for people.

Hassouneh: Yeah. Absolutely. It's really a, when you're—

Driessnack: Nice to grow up in that, isn't it?

Hassouneh: Yeah, it really was. I think sometimes you don't really know what you've got at the time. You know, being a student, never having gone into another PhD program, we didn't really have any basis for comparison. But now, having taught in the program here for so long, and seeing different curricula come and go, and different faculty, I see that I was very fortunate.

Driessnack: I don't have any formal questions left for you. I think I was trying to track down through all of your research. But I'm just wondering if there's anything that we talked about at all that you'd want to revisit or expand on. Or if there's something we haven't talked about that maybe you wanted to talk about.

Hassouneh: I think that one of the things I might mention is that I've noticed during the time that I've been here. And I started my first master's program in 1993. And by the time I'd finished my other degrees and went through my post-doc, it was 2000. And then I've been on the faculty since then. What I've noticed has been kind of a change in the academic environment. When I

first came, I think that we were closer to the, what used to be the OUS system, model. Because OHSU used to be part of the OUS system. And then there was a movement away. But it hadn't been as long as it has now. It was kind of, even though the OUS model wasn't completely upheld, because otherwise it would not have need to, would not have left the system, still there were a lot of strong elements from that that were carried over that I think really affected the climate of the education. And for the faculty just as faculty members. That is quite different now than it used to be. I think we've seen a slow change to what I would consider to be a more corporate culture.

Driessnack: Do you think that's unique to OHSU? Or do you see that happening across the United States in academics, or to academia?

Hassouneh: It's not unique to OHSU. I think the fact that OHSU is not part of a larger state system makes it worse for us, because we don't really have any kind of, we don't have any colleagues that we have to kind of fit with the program. We're going our own way. So I think that's a bit different. You don't necessarily see that.

Driessnack: I hadn't really thought about that. That's kind of an interesting thing. That may have been an impetus for, or a clear divide where you started to see it happen. Even though it's happening everywhere in its own way, it might have been a quicker slip.

Hassouneh: Yeah.

Driessnack: For not having the larger academic environment. Or graduate school. Just that, not having that—

Hassouneh: Yeah.

Driessnack: Even though we have a number of graduate programs here, missing that larger academic environment.

Hassouneh: Yep. I would agree. And I think that there has been a shift in faculty satisfaction as reflected by recent surveys. I think that that can be tied to that change.

Driessnack: Interesting. Anything else you want to talk about? Thinking back now. You can take a moment, because here I've been drilling you. But I'm just thinking, you know, I did my typical go down your CV, talk about this research. It's very academic in its own way. I'm just wondering if there's anything between the lines, or anything that you might want to end on, a note, or a—

Hassouneh: Well I think I would like to end on just recognizing the mentors that I have had. And really expressing appreciation for what they offered me. Chris Tanner was my chair. She was an excellent mentor. Pat and Barbara were amazing to be around. And Bev Hoeffler was one of the faculty at the time that I was there. She wasn't a direct mentor, but she taught some of my classes. And so really, Linda Robrecht is another faculty member who taught classes when I was

a student who's really a wonderful mentor. And I just want to express my gratitude to all of them for what they gave me.

Driessnack: And you get to continue to pass on, I hear, because you have quite the stellar reputation as a mentor yourself.

Hassouneh: Thank you.