OREGON HEALTH & SCIENCE UNIVERSITY ORAL HISTORY PROGRAM

a project of OHSU's Historical Collections & Archives

an interview with:

Susan Smith, Ph.D.

interview conducted on: May 22, 2018

by: Mary Stenzel-Poore, Ph.D.



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Interviewee: Susan Smith, Ph.D.

Interviewer: Mary Stenzel-Poore, Ph.D.

Date: May 22, 2018

Transcribed by: Teresa Bergen

MARY STENZEL-POORE: My name is Dr. Mary Stenzel-Poore and I am interviewing Dr. Susan Smith for the OHSU Oral History Program. It's May 22, 2018 and we are in the BICC building at OHSU.

Susan, let's start with your early days. What is it that got you stimulated and excited about going into science? How did that begin?

SUSAN SMITH: It was kind of serendipity. I didn't start out that way. I graduated from a little high school, no mentors, no counselors. My parents didn't go to college. I was kind of on my own. And I had a music scholarship, but I didn't want to do that, because the only thing I could think of at that time was that I could teach music, and that's not what I wanted to do. I had taken a lot of entry exams at the University of Michigan, and I got accepted into a number of schools. And so, I decided to go into the College of Engineering, which was a huge mistake. You know, there were hundreds and hundreds and hundreds of freshman students and two women; and it was very quickly made known to both of us that we were not welcome there. At the end of that semester, we were out. So from then I got into chemistry and then I finally got into biology. And I needed a job, so I started working as a lab tech in a lab that did endocrinology, physiology, and that's where it all started.

STENZEL-POORE: So that was your introduction to research, wasn't it?

SMITH: Yes.

STENZEL-POORE: What caught your attention about research? Because there was much you could do with endocrinology. You could have gone on to be a physician. What really stimulated you in that?

SMITH: Well, I guess to be honest, you know, when it came time when I was finishing by undergraduate degree, nobody was encouraging me to think about medical school. And so I didn't have a history to even think about medical school. But I knew I liked research. But in the meantime, I got married. And so it took me four years, finally, to get into graduate school, thanks to my husband, who's probably been my best mentor ever. But it just took a while. I didn't have the background. I didn't have the confidence. I didn't have a mentor. I didn't have a supporter. So it kind of just, it happened. It wasn't planned. And I started graduate school at Florida State University, because that's where my husband was doing his PhD. I started working there as a technician. And I finally realized that we had a lot of friends who were graduate students. And I said, "I can do this." And my boss, who I worked for as a lab tech, said, "You can do this." And so I got into graduate school. And that's kind of how it all began.

STENZEL-POORE: That's a very interesting answer. And I think it's true in many lives that it's not planned. I want to ask you something about that. Was there something about research that compelled you, that got you to say, "Hmm, I am going to look at that more seriously?"

SMITH: I loved it.

STENZEL-POORE: Loved it.

SMITH: Yes. The thing I like about research is you're never done. There's always a new question. There's always more places to go. And one thing builds on another. And I like the hands-on part of it. I like the precision of it. I like the doing. I actually like the doing part of it. And it was just a completely different life. I didn't know anything in my life before that was anything like doing research. I love learning new techniques. And once I started going to national meetings and meeting other people, I mean, I just, I loved the culture. I think that is not only being a researcher, but all the people that inhabit that culture. I just loved it. You know?

STENZEL-POORE: Yes. I completely, I know. And you've just described a piece of it that many people don't highlight. And you loved the culture. It's a very interesting and different culture. What did you like about the culture?

SMITH: I liked always asking questions. I liked not being part of an ideology, you know? I liked that you never accepted anything. You could always ask new questions. And I liked what it did to me personally. Because I grew up in a very small town, very conservative, very kind of somewhat authoritarian. And I like the culture of research because you don't have to hold onto the old ideas to feel good about yourself, or to feel confident about who you are or what you are. And I think that whole culture invaded me personally my whole life, the way I looked at things and the way I viewed the whole world. I wanted to experience new things. I wanted change. I liked things, they didn't have to stay the same for me to feel comfortable. And I think I got that out of that culture. So it informed everything I did. And I just really liked it. I like that a lot better than what I grew up being.

STENZEL-POORE: You know, what you just described, you described being a pioneer, if you think about it. You wanted to go in a new direction. You welcomed diversity of thought. And you were unafraid to do that. You were compelled. And that's what goes on, I think, in research all the time. So somehow in all of that, you also as a woman leader, looked at taking a job at the primate center at OHSU. And tell me a little bit about that. What caught your interest in it, and how did you end up doing this?

SMITH: Well as they say, it's who you know. And that's kind of what it turned out. I was very active in the Endocrine Society. And it was in the early '90s, '91, '92, that I was on the council for the Endocrine Society. And the other person on the council for the Endocrine Society was Peter Kohler, who was the former president of OHSU. I got to know Pete really well and I really liked him. I think he liked me. And there had been a search going on, I think in '93, to recruit a director to the primate center. I knew a lot of people at the primate center because they had

such a strength in neuroendocrinology, reproductive neuroendocrinology. So I'd known some of these people for years and years. And that search wasn't going well. I didn't know that. But out of the blue, summer of '93, Pete Kohler called me up, said, "Hey, would you like to think about this job?"

And I thought, oh my goodness. I was at the University of Pittsburgh at the time. I liked my job. My husband liked his position at the University of Pittsburgh. And I thought, okay, I'll come out there and look. I had some experience doing research with primates so I thought that helped. And I knew I'd been thinking about moving on, doing something new. I came out and interviewed, and that was that. It was a lot to learn all of a sudden.

STENZEL-POORE: Who had been the former leader?

SMITH: Vaughn Critchlow.

STENZEL-POORE: Ah. That's right.

SMITH: And he had stepped down. And so Harold Spies was interim director for, I don't know, several years, I think, before I even finally came in. It was interesting. You know, from the beginning of it, it was just a whole new world, because the primate center then was a completely private institution. It had no formal affiliation with OHSU, other than through the primary government grant that supported it. Pete was PI on that grant. But it was completely independent, small research organization. Very focused, very efficient. And of course within a couple of years, we started dealing with merging with OHSU and all of the issues that that entailed. But I mean, I loved my time as being director of the primate center. But I also liked it when I stepped down. I could just go back and just be a scientist.

STENZEL-POORE: Be a scientist.

SMITH: Yes.

STENZEL-POORE: What got you there in the first place.

SMITH: Yes.

STENZEL-POORE: I want to ask you more about some of the challenges. But before I do that, I think I've told you this, I'm not sure, that I was not here at the time. I was in San Diego at the Salk Institute and I heard about you taking this job.

SMITH: Oh, you did.

STENZEL-POORE: Yes.

SMITH: From Wylie Vale?

STENZEL-POORE: From Wylie Vale. And he was such a strong supporter of you. And he was delighted that the primate center had seen the wisdom of hiring a woman to lead the primate center, because he also was a very strong supporter of women in leadership. So I remember, I didn't know you at the time, but he came and asked me if I did. And then told me about you doing that. It was news that rocked the world a little bit. So it got there, which I think is exciting.

So let's come back to a couple of things that you said. You just glossed over them. But the very fact that you were able to bring the primate center into part of OHSU without losing its identity at all – in fact, enhancing its visibility – how did you do that, and what were the challenges in front of you to accomplish that?

SMITH: Well, I knew that one of Pete's goals when I came there was to merge the primate center into the university. And I'll be honest, there was no way I could understand all the implications of that before I actually got there and got into that. And also, the National Institutes of Health was very interested in the primate center becoming a part of OHSU and not being a freestanding research institution, so I knew that was on the agenda. And you know, the challenges were, I think, cultural, because here was a research institute that had one focus. I mean, we ran our own purchasing, our own—we did everything. And had a small, narrow focus, totally efficient. And of course gradually OHSU took over all of those independent functions. So for the people that were there who'd been running these things, it was very hard. I mean, for new people coming in who didn't know any different, life was normal. It did create a lot of tension. It cost a lot of money because to do business at OHSU is much more expensive than doing business out at the primate center. So we lost control of funds. Our reserve account started shrinking. You know what I mean. And of course we got caught up in a lot of what was going on at OHSU, too. So those were difficult times.

But I think on the positive side, we gained from the faculty associations, graduate student programs. But I think the biggest thing was when I came to the primate center – this is in 1994—and I remember going to my first OHSU Foundation board meeting to be introduced. And the comments were, "Oh, you're out at the monkey farm." And I thought, oh my God. So, at that time, the primate center was not well thought of, I think, on the hill, if it was thought of at all. I think it is a point of pride now that I think the primate center is considered one of the jewels of OHSU. It's unique. And so that is an incredible transformation. That's really the best of what you could hope to happen in a situation like that. And it did. So it's good.

STENZEL-POORE: It did. I credit you, actually, with having the fortitude and vision to do that. Because the primate center continues to be a successful organization that has pivoted completely. And I think you must have actually had to do much at the primate center alone to change the culture so that it was not a sleepy monkey farm.

SMITH: No.

STENZEL-POORE: But in fact, became one of the leading primate centers in the country. And that doesn't happen overnight.

SMITH: No. That takes time.

STENZEL-POORE: So I credit you tremendously with being able to do that. Let's change a little bit and talk about science again. Because I would like to hear from you about your own career as a scientist. And what, first of all, what do you think are your most significant contributions? And secondly, I'd like to ask you to explore a little bit about how your research team worked with you to achieve the kinds of findings and goals that you did scientifically.

SMITH: I think generally my research career is focused on how the brain regulates reproductive function, and the overlay of metabolism and food intake and how those two regulatory systems interact. And it's been known for a long, long time that the metabolic state we're in, particularly if we're malnourished or our brain thinks we're malnourished, the reproductive system tends to shut down. And it makes evolutionary sense. But I wanted to understand the mechanisms of that. And I'll have to say, I still don't know the mechanisms of that. I mean, it's still a question that's been out there for decades. But I think the biggest contribution we made, because when I started out, we talked about there's got to be some crosstalk going on here, but nobody had any idea how that happened. So we defined all of the neural anatomy and some of the neural physiology of how all those neurons that regulate food intake and metabolism, how they crosstalk over and regulate the key neurons that regulates reproduction. And the crosstalk's 100 percent. It's an amazingly integrated system, amazingly integrated. The key question still is, though, what is that signal that the brain is perceiving? Because you think about somebody who's undernourished, and maybe they're undernourished because they're in famine, or maybe they're not undernourished, but their body thinks they are. The best human examples of that are elite athletes, like ballerinas, dancers, skaters and gymnasts and people like that. These young women mostly all tend to be non-amenorrheic, non-cycling, they're not having their menstrual cycles because their reproductive system is shut down. So somehow, even though they're not skinny, they're eating, they're having such a huge caloric loss through exercise, the brain is perceiving they're malnourished, so their reproductive system is shutdown. So trying to understand what is the signal that's going up there.

We still don't know. We've done all kinds of experiments looking at the spinal cord and the brain stem and how it's transmitting all of these signals. And we still can't define what is the really key signal that is transmitting all this information. Or is it a multitude of signals that say to the neurons that regulate reproduction, the host is malnourished, we're going to shut reproduction system down because we don't want to waste energy, we can't waste energy on reproduction. There's not enough energy to support a pregnancy and all of that. That was kind of my major focus.

And then at the primate center, I collaborated with Kevin Grove. We started a brand new project of looking at how maternal environment, maternal diet, affects the offspring. And a lot of this came out of the David Barker hypothesis of the DOHaD, the developmental origins of health and disease, that the environment during pregnancy programs the fetus to respond to things later on in life and greatly increases the propensity for diabetes, obesity, a variety of metabolic diseases. David Barker, and Kent Thornburg for that matter, their approach was really looking at under-nutrition. And we said, "We don't live in a country that's suffering from under-nutrition. We're living in a country that's suffering from obesity." So we created this

monkey model where we put the moms on these high-fat diets. And you know, a lot of them get fat. And then they get pregnant. And then we studied the offspring. I mean, those studies are still ongoing. They take years and years and years to do. But there's no question that there's transmission of information. The offspring are heavier. They do have an increased propensity to be diabetic, although I don't think we have adult animals that have reached that stage. There are also some interesting behavioral differences that don't really know enough about to say a lot. It's been a model that, first of all, brought a lot of grant money into the primate center, a lot of recognition to the primate center, and also a lot of collaborators from around the country that do pieces of that model. Some people are epigeneticists. And people do other things. So I think that was a really great development.

STENZEL-POORE: The creation of that model was the first of its kind, wasn't it?

SMITH: Yes.

STENZEL-POORE: I don't know that people really understand just how much goes into creating those models, that you have to think long and hard about what it is you're going to call important features of a model.

SMITH: Right.

STENZEL-POORE: Right? Have you or Kevin or any of your team been able to take any of the findings you have and translate them to either interventions or changes in the way we treat and work with humans who suffer from similar kinds of, I guess, health disorders?

SMITH: You know, other than the kind of work that Kent is doing, which is really trying to get at young girls in high school before they get pregnant to eat a healthy diet. That's the biggest intervention you can have. But in terms of other things, it's branched off into studies. We're looking at placenta function; that's clearly affected by the high-fat diet and creates this great inflammatory state in the fetus. And we know that's going to have long-term consequences.

One of the other things that Kevin is doing, he's not at OHSU anymore, he's director of United States research for Novo Nordisk. So he's moved up big time, which is great for him. They have a huge grant to really screen for cerebro-spinal fluid changes in these animals, to try identify—you know how they do this drug discovery process. And they're identifying some really interesting molecules that may be useful in actually being able to cause weight loss, and to sustain it, which has been the big bugaboo about all of that. I think in terms of a therapeutic, you know, other than the big one of diet, and how important diet is. We know that from our monkeys, because if you take your high-fat monkeys, and then you switch them over to a control diet, their offspring are fine, so that's helpful to know. There's that aspect. But in terms of identifying a particular factor at this point, I don't think so. But I think it has impact on a lot of mechanistic studies, whether it's inflammation, immune response, or behavior or things in the environment that could influence that, so that you could then begin to go back and look at mechanistically how is that happening. So it is a great model, and certainly better than the

other obesity models out there, which are mostly rodents and they're just not so good for humans.

STENZEL-POORE: I think something you touched on which is particularly important, is that the knowledge that you've gained from working with this model that you developed, is information that both could lead to additional exploration for molecules for new drugs that could help treat various aspects of this. But something you alluded to is the kind of data that you get allows our society to think about the social science, those kind of interventions, behavioral interventions that can save lives. And I wonder if you'd like to, I imagine you've had to think about that. Because the work you do, ultimately translates to mothers and their infants. And that's a group, it's a sector of our population that especially during pregnancy, mothers are very interested in having the right nutrition, and then they want their children to have the right. So I wondered if that kind of social impact, what that means to you.

SMITH: Well I think if you can figure out a way to make it happen and make it last, it's great. I think that some of the things that Kent is doing, he has programs in various communities where they're actually trying to collect all this data and figure out how to make an impact. It's hard, because there's cultural aspects. And there's also huge economic aspects. And I think the economic aspects are probably the greatest of all. Because if you don't have very much money and you're trying to get as many calories for the cheapest price, what are you going to eat? You're going to eat Taco Bell and McDonald's and things like that. So it's very hard to change that if people economically can't change it, because they just can't afford to go buy all those vegetables and those fruits and all those lean meats and fish, all of which is very expensive. So it's frustrating, in a way, because that's part of it you can't control, and you can't change the economic aspect of things. But I admire the work that Kent is doing, because he's out in those communities and he's really trying to figure out the best way to teach families, young girls, the best way to do this. It's hard work. But it will be rewarded. Unfortunately I think it's a problem that is spreading worldwide is obesity is becoming more and more common.

STENZEL-POORE: Absolutely. It's one of the biggest problems, I think, that faces our world today.

SMITH: I think in the future, a little of a political comment here, people are going to look back at the United States and thank us for Coca Cola, McDonald's, Kentucky Fried Chicken, all of those processed foods that we're just shoving into these countries, even depressed countries, where they present all of these processed foods. I was reading an article lately, I don't remember which country it is, Ecuador, Peru, one of those, where there's just been this infiltration of processed foods that women sell from carts. They go around and sell it. So it's a little business for them. But in the last five years, the obesity rate is going like this, not surprisingly.

STENZEL-POORE: Yeah. So it's going up. And the impact on different genetics is really interesting. Because if you think about it, natural selection has played a very important role, ultimately, on food and metabolism.

SMITH: Yes, it has.

STENZEL-POORE: Huge. And when we remove those factors and simply supply food, and food of indiscriminate use, I think we're seeing the impact. And it has a bigger impact on certain racial and ethnic groups than others.

SMITH: I think so, too.

STENZEL-POORE: Yeah. So I have to applaud the long game, the way you've looked at we're going to build a model, and we won't know the answers for many, many years, because it's a reproduction model, and it takes generations to really understand.

SMITH: Right.

STENZEL-POORE: But I think you'd probably agree, we can't make better progress knowing less about the system.

SMITH: Right. And you can only do what you can do. I mean, I think one of the things I appreciate about science is I think back over my long career, and a lot of the fundamental questions we were asking back in the early 1960s still don't have answers to them. I mean, really fundamental questions. But the amount of data we know is just horrendous. The complexity of it is just mind-boggling. I don't do research anymore and I don't keep up with, I still read stuff. And it's just, the explosion of information is just amazing. So the ability to finally get to answer some of these questions. You're a neuroscientist, too. The ability to understand the brain and how things connect and how they rule each other is amazing compared to even ten years ago. That's how science is made. You build a base, and then if you have a new technology, there's all this information there you can mine, right? Using that new technology. So you're not starting from scratch to define the elements of a system; you keep adding on and adding on. And I think it's what a lot of people don't understand about science. They'll say, "Well, why do you need more than one project studying Parkinson's disease?" I mean, the complexity of it.

STENZEL-POORE: Right.

SMITH: And there's nobody could understand the complexity of it. But the reason that you have to have hundreds to thousands of people is because we're all studying a little piece, and those pieces add together. They bring up new questions. You start addressing those new questions. Sometimes you can't answer them because you don't have the technology to do it. The question's there, and then maybe ten years later, the technology. So it keeps building.

And I think now, I mean, it's such an exciting time for science. It's just mind-boggling. It's too bad we don't have better funding to fund all the scientists that we want to train. But that's another issue.

STENZEL-POORE: Yeah, but a really important one.

SMITH: It's critically important as to what's happening with our students.

STENZEL-POORE: The comment you just made, happening to our students. Not completely related, but I'm going to bring it up. I've known students who have been trained by you in post-docs, and they speak to what a special experience it is. So I'd like to hear from you how it is for you. What does it feel like to be a mentor to students in post-docs as you ran your lab? That was part of our workforce, right?

SMITH: Well, you know, I think I appreciate the mentoring concept because I didn't have any until I really got into graduate school. And I didn't have a woman mentor. And it's hard for a guy, I think, to understand that, because they've had male mentors from the day they were born. But for a woman, it's really important. And I didn't really meet what I would consider to be my first woman mentor until I was in graduate school and started going to national meetings and met Nina Schwartz. She's at Northwestern, retired. Wonderful woman, and just took every young woman she could find, she just gathered them in. And even though I wasn't in her lab, we were doing research in a similar area. I think one of the things with students, I always felt that you can't use them for your purposes. You are there to train them. They need to have publications; you can't go four or five years and have nothing, like a lot of students do. They need to learn that discipline of doing research in bits that they can get those publications out there. They need to go to meetings. They need to practice their talks. They need to do all of that.

And I also train technicians. Because I was a technician, so I'm very sensitive to that, to technicians. Most of my technicians were somewhat independent. They had their names on papers. They would go to meetings. And so it was kind of a team. And then when I got to the primate center, within that first year, I brought Kevin in as a sort of a senior research associate. And that was one of the best things I've ever done. We just really hit it off, teamed; it was a wonderful relationship and grew into a huge joint research enterprise. But I still think the key is, you have to respect what those students are trying to accomplish, and not just what you're trying to accomplish. And so it really still irritates me, or when I used to be on dissertation committees and stuff, and you sort of look at what's going on and you think, this is not good for the, you know what I mean? It's not good for the student. They don't have anything that's really very publishable here. It's not a stepping stone. It's not going to lead them someplace. And they've been going at this for six years. I think that's really a shame.

STENZEL-POORE: Yeah. So you have the right sort of gut feeling about students. They are trainees. And they're there as apprentices to learn from you. So the moment you take your eye off that, you've done a disservice, really.

SMITH: Yeah.

STENZEL-POORE: And I think I know your students and post-docs recognize that. And that's actually the true mark, is when they speak to it.

Okay. I'd like to move in a little different direction. Something that I really didn't know about you and only learned recently is that our wonderful Center for Women's Health was started by you.

SMITH: It was.

STENZEL-POORE: And I didn't realize that. So tell us a little bit about that.

SMITH: Well, it wasn't really started by me. That's not, I was the founding director, but I didn't really start it. It's kind of an interesting story, and it was a real eye-opener for me. There are a group of women in Portland, well-connected women, who are interested in establishing a center for women's health, this kind of concept of one-stop shop for women. And I've always been totally in favor of that. And so this group of women, many of them were very grateful patients of Miles Novy. You know who Miles Novy is?

He was an OB/GYN professor. And Miles was very interested in this, too. So they started talking with Miles. And then these women, some of whom were significant donors to OHSU, I think started talking to Pete Kohler. And so from there, they had conversations with him. And he decided, he made the commitment to start up a center for women's health. Then I had been at the primate center for three years as director, so he approached me about, would you be willing to sort of shepherd this along and get it started up? And I thought about and I thought, yes, because I really believe, that's a mission I really, really believed in.

So we had our meetings and we got some people, we got involved in educational programs and we tried to do some research. We didn't have any money. We were a virtual center, in essence. Mandy Clark was also involved. She was an OB/GYN professor. And so I got going for two years, and then she took over. But during that two-year time we established there had to be a physical presence for the center that would encompass some, tried to put together some clinical space that would reflect that one-stop shopping concept, although it really couldn't, because we didn't have the money and the facilities. And we also had an educational component to that facility, so that started up.

The other interesting thing is in talking about the location for it, I'm pretty sure of my timing, the women did not want it up here on the hill. They wanted it down in the city. And they thought the waterfront would be a good place for it. So we actually started talking about a waterfront presence, how you'd commute. We were talking about trams before anybody else was really talking about trams.

STENZEL-POORE: When was that?

SMITH: This would have been like '96, '97? And so all that happened. We had some community education programs that were very well-attended. And then I stepped out. Mandy took over. And I think Mandy was director for maybe two years. And then Joanna Cain came in as the chair of OB/GYN. And a bunch of money went into this new facility that they have. I think my personal perspective, I think the center is still a work in progress. I'm not trying to be critical here. I don't think it's really realized its full potential for research collaboration, and it needs to work more on that. And everybody's trying to do that. Because women's health is everything. I

think too many people at OHSU look at it too much as just being OB/GYN-related. And that's what those ladies from the very day one were trying to get away from. So I think it's still a work in progress. I think clinically it's doing well, and still trying to fulfill that mandate, so they're making progress. I think they've tried to separate it administratively more from the Department of OB/GYN by making two different directors. So I think it's still a work in progress.

STENZEL-POORE: It's a wonderful thing.

SMITH: It is a wonderful thing.

STENZEL-POORE: Conceptually it is exactly the kind of care that women want. And when I look at it again objectively, I think that the ideals are reflected there. And to be a patient there feels like a privilege. It really does. It's interesting. And I'll just tell you that I would not have considered going there. I had my own care throughout this institution and other places. It was my twenty-five-year-old daughter who said, "You should go to the Center for Women's Health." And I said, "Well, why?" Even though I know the people that run it. It's just, once you understand the philosophy, and I'd like to say to you, for being the founding director, how important that was. And I think these things take a while to incubate before they reach this critical stage. And everything seems to require it, that there's this, you have to incubate. And you get some things wrong, and some things right.

SMITH: Yeah.

STENZEL-POORE: And then in some cases, and I suspect for this case, there will be all of a sudden this big jump-up in visibility and functionality.

SMITH: Well, it's like everything at an institution, like OHSU or any academic institution. It's very hard to do something different. And this required doing things different. Because their goal, and I don't know if they're there yet, but their goal would be, if it's a one-stop shop and somebody comes in and they need to see a cardiologist or to go see this or that, that they wouldn't have to wait four months to do that, which you can do up here. So they've really had to work hard on trying to make that happen. And it's been more successful with some units than other. For example, with the cardiovascular institute and Sanjiv Kaul, he's on the Center for Women's Health board, so he gets it. He's made a huge effort to make that connection close, so that it's easy to get those connections into any aspect of cardiovascular medicine. It's been more difficult, I think, with other aspects. But it just takes time, you know, to kind of permeate through.

STENZEL-POORE: It's run by two very talented women.

SMITH: Yes. Michelle and Renee are great. And they complement each other. The tall and the short of it.

STENZEL-POORE: Yes, yes.

SMITH: They complement each other very, very well.

STENZEL-POORE: They do. So let's transition, then, to the topic of women. You touched on it, the importance of role models for women. And I think for you, you joined OHSU at a time when there were few women in leadership positions, not many. I'd like to explore with you a little bit what you think existed then and where we are now in terms of women's leadership.

SMITH: I think actually, well, OHSU when I came there didn't have a huge administrative infrastructure. There was Peter and there was Lesley Hallick. I think it's really, I mean, I think it's improved. I think OHSU probably would stand in the top group, I think, of academic health centers with senior women leadership, at least in the administrative roles. I don't know about department chairs and I don't know particularly clinical chairs. I think it's a really, really tough area. I know you've been on the admissions committee for the medical school. I wasn't here, but I was at the University of Pittsburgh, and it was just so discouraging to me how many really bright women, they're not making career choices that is going to put them in the ability to be in a leadership role. Even though, I think the majority of medical students are women now. The majority of graduate students are women. And they have been for enough time to filter up to the top, but they haven't. So I get asked that a lot – is that just bias against women, or what is it? And I'm always uncomfortable with that question, because I think in some circumstances, I think there are. I don't think, well, I came in as kind of an executive physician, but I never felt any of that here at OHSU, and I think OHSU has had many women in prominent leadership positions. But, I don't know about you, but a lot of my women students, some of the best students I've had are women, but I don't know where they are, you know what I mean, what they're doing. They didn't make those choices to take the road that requires that huge investment of time to build yourself up to those senior positions where you have the experience to qualify for these jobs. I mean, is that bias against women? Or is it, it's cultural, for certain. I don't know. And I don't know the statistics anymore, whether things are getting better or not. I'm guessing they're kind of at a plateau, I would guess. So, I don't know.

One of my more recent graduate students who went off to Harvard to do a post-doc and has come back, she would make an incredible independent investigator, but she's not making that choice because she doesn't want to leave here. And there's no option for her other, if she stays here, than to be sort of a research associate in the lab. And we both know lots of people like that. It's not just women. It's guys who make those decisions, too. But it's frustrating. And I don't know what the answer is. I just don't know what the answer is.

I remember once at Pittsburgh, this one young woman, I just really liked her. And she was right at the top of the class. So when she was doing the residency match, I said, "Well, what are you going to do?" She said, "Oh, I'm going to go into pediatrics because I want to get a part time job at a hospital or clinic so I can spend half time at home." And I thought, okay, I get that. But that's part of the reason why, I think, there aren't as many women in leadership positions as there could be.

STENZEL-POORE: I think that you've said part of the formula. And I think there may be a flipside to it. And you've been at an institution that actually, about the time that you came, I think there

was a slow transition to moving forward with more women in leadership, but not many. And there are something like twenty-six departments, and at any given moment, there's one or two—

SMITH: Women chairs.

STENZEL-POORE: Which is a shockingly low number.

SMITH: Yes. Yes, it is.

STENZEL-POORE: And I think academia in particular has been the slowest to change in providing meaningful positions for women in leadership.

SMITH: Yeah.

STENZEL-POORE: So I think that there's a couple sides—

SMITH: No, I agree there's the other side to it, yeah. It's a really, really tough issue. I think OHSU, I agree with you on the department chair level, that's always been the tough one. There are women in the provost office and there are women in leadership positions in the dean's office and things of that sort. But that key is the department chair, isn't it?

STENZEL-POORE: Right. So we started, we spoke in the beginning about mentorship, and about you. There weren't women mentors for a while. And that had a big impact on you. Because you look around and you see what people are doing, and you don't see women doing what you ultimately ended up doing. So that's not there. It's absent. And I think that's true for young faculty who come in and start in a department, and they have a male as their leader and that's who they see. So it doesn't appear as an option. It just doesn't look like that's open. It's not even that conscious. It's that you don't see it.

SMITH: It's just that you accept it. It's just what it is. It's the way things are. Yes.

STENZEL-POORE: Yeah. So I think OHSU actually doesn't have great statistics for women in leadership. But since you've come and others who have been in leadership positions that are women, does it seem like there has been a cultural shift? Have you experienced that at all?

SMITH: I think, you know, I think there has been. It's sometimes difficult to sort all the personalities. Are they insiders or outsiders? Are they male or female? Or the whole thing that goes into it. But I don't know. I mean I guess in my contact with people on the executive committee at that time, chairs, I didn't get any sense that they didn't want to hire a woman. I mean, they probably didn't think about it. But I didn't feel there was any overt kind of discrimination out there. This is in basic science. I don't really know about the clinical departments. But they have certainly hired women into key positions at OHSU. The dean is now a woman. So I think that helps. I mean, that has to help to be a role model to medical students

that a woman is dean of the medical school. And there are a couple of you who are basic science chairs who are women, and that certainly helps all of that. And so the graduate students are certainly seeing women in leadership positions, almost as many women as men, at least if you just narrow down the basic science chair component. So I think it is a help. I guess the question is, what are these young women thinking in terms of what they want to do, and how they want to get there, and how they think that's going to happen? I think that's really a key component of it, too. Are they willing to work with the system? What's their vision of it? Because they're coming in with kind of preconceived notions, too, about what they can do and what they can't do. So I think it behooves the university to mentor them and to educate them as much as it can. I don't know. I haven't had a graduate student for a while now. I haven't been involved with medical students for a while to know what's on their mind. What are they really thinking? What are a lot of these young women thinking? Are they thinking I really want to go into academia and I'm going to really work my way up there and I'm going to be a department chair? Or I'm going to be a chair of basic science department? I don't know if they're thinking that or not.

STENZEL-POORE: I think that's probably right. And I suspect for you, and certainly for me, our training was about being a scientist.

SMITH: Yes.

STENZEL-POORE: That's all that it was.

SMITH: That was the be all and end all.

STENZEL-POORE: And it's only when you look up and think about what you might want to do in the community at a larger level that you start to look at that. And I think that's perhaps the shortsightedness of a scientific career is that it creates, it sort of pushes you along a path. And it's one path.

SMITH: It's a narrow path.

STENZEL-POORE: Yes.

SMITH: I agree with you. You're not taught to teach. You're not taught to mentor. You're not taught to think about the community. You're not to think about any of that. No, I understand exactly what you're saying. And I think the pressure on scientists is definitely, they have to get out of that mold.

STENZEL-POORE: Now.

SMITH: Now. Definitely.

STENZEL-POORE: That's right. So is there anything else that you'd like to add that we haven't covered? We've talked a full range of your accomplishments and what it's been like to be a woman leader. What OHSU was like, especially the primate center, and as you described it, more uni-dimensional at the time and now has become this fantastic place. Is there anything that you would like to add about your career here?

SMITH: No. It's been a great time here. And I've met wonderful people. I've learned a lot. But I've been lucky throughout my academic career. When I started out with my first assistant professor job with the University of Massachusetts Medical School, it was a new place. So it wasn't hidebound in terms of how it did things. And my department chair was a big fan of mine. And I also got to know kind of the president and all of that. In my first three or four years there was an assistant professor, I got to do amazing things. I was on a presidential search committee. I was the medical school representative for the statewide U Mass system. So I got to meet all the people that were involved in the other U Mass campuses. I got to do a lot of really, I think, amazing things, that I would not have gotten to do at a big, established school. I realized I really enjoyed that. And it gave me a lot of self-confidence, a lot of experience. It was great. And so coming here, I enjoyed it. I liked thinking about the big picture. I just wasn't totally focused on the primate center. I liked knowing what was going on at the other institutes, and what they were trying to do, and how could we work together more and all of that. So it was good. It was a really good time. And I'm very thankful for the day that we decided to come out here. Because I love Portland. I can't imagine living anywhere else. I'm here to stay.

STENZEL-POORE: I look back at what it was like to be here when you were here. And you can't see it from this perspective, but I can, that what you brought is for those of us that were looking at our leaders, you brought an absolute, it was a breath of fresh air. Because you were extremely candid, direct, you knew where you wanted to go. And you didn't just charge ahead; you brought others with you. That's what we got to see. And I think it's leaders like you that have made OHSU the place that it is today.

SMITH: Well, I appreciate that.

STENZEL-POORE: I think we were lucky.

SMITH: I was lucky too.