



# *fellow*

## SPOTLIGHT:

**RHEA POWELL, MD, MPH**

*Fellow since 2018*

*By Jon Goff, Associate Director of Fellowship Relations*



**W**hen did you become a Fellow and what interested you about joining the College?

I was thrilled to become a Fellow this year. I first learned about the College when I was introduced to the Philadelphia Public Health Grand Rounds series over a year ago. I had been looking for resources that would bring a local Philadelphia perspective on public health issues I cared about and was excited to learn about the series, which is jointly sponsored by the College and the Philadelphia Department of Public Health. I was also really pleased to see that the prior Grand Rounds had been archived on YouTube so I could catch up with ones I had missed. From there I learned more about the College and wanted to be involved.

**Tell us a bit about your education and career, including your current position at Jefferson.**

I'm currently an Associate Professor of Medicine in the Division of General Medicine within the Department of Medicine at Jefferson. I am lucky in that I have a wonderful variety in my work - I have a busy primary care practice, and I am also actively involved in the medical school. I spend a portion of my time directing a course for first year medical students to introduce them to clinical settings and teach them about social determinants of health. I also spend a portion of my time involved in a number of health services research projects and am broadly interested in how health policy and health care delivery impacts patient experience and outcomes.

Before I came to Philadelphia, I spent time in Ann Arbor, Michigan at the University of Michigan Medical School and in New York where I completed my internal medicine residency and a general medicine research fellowship, and a Master of Public Health degree at Columbia. I'm looking forward to building on my public health training and getting involved in the College's Section on Public Health and Preventive Medicine.

**Earlier this year, you were elected as a Democratic State Committee Person. In the US Congress, there are only 16 elected physicians (out of 535 members) and certain studies have shown that physicians vote at lower rates than the general public. Why do you think physicians are loathe to get involved in politics?**

I was quite surprised to learn that physicians vote at lower rates than the general public! I suppose I am less surprised that we have relatively few physicians elected to US Congress and not that surprised that physicians are loathe to get involved in politics. It hasn't always been that way (I recently learned that five of the signers of the Declaration of Independence were physicians), but I can understand the reluctance to get involved in politics. Being a physician is incredibly rewarding work, but also incredibly consuming! It can feel like there is little time left at the end of the day to stay up to date on political issues - even ones that have relevance to healthcare - and to take steps to be involved. I also think advocacy and political work requires using skills and communication styles different from the ones we physicians usually rely on. As physicians, we often use data, evidence, and expertise to form and communicate our recommendations, but sometimes the best way to communicate a policy problem is through sharing an anecdote or story that exemplifies that problem. At the same time, I think physicians are uniquely positioned to be able to understand the challenges in our healthcare system today and to communicate them effectively. Physicians are still trusted voices (I hope!) and it is important to use that voice to help find solutions for the challenges that we see in healthcare.

**In your opinion, what could be done to bring physicians and other important voices in healthcare to the political discussion?**

Bringing physicians and other important voices like nurses and social workers can only improve political discussions about improving health. In order to do so, I think it starts with educating trainees like medical students and other health professions students about how policy impacts the care that we deliver, the outcomes we see, and associated costs of our current system. And then we as a community have to foster oppor-

tunities for those who are interested to find avenues to advocate for issues that they care about - whether it's through a professional society, or an issue-based organization, or even in elected office!

**You recently published a paper that measured patient satisfaction with real-time video visits across a number of healthcare settings. Many insurance companies and health systems are now making these telehealth visits available to patients. What do you see as the pros and cons of telehealth for physicians and for patients?**

In so many parts of our lives, we see how advances in connectivity can improve flexibility and ease of communication, and healthcare is figuring out how to leverage these technological advantages. Telehealth has been and will continue to be important in rural areas, but we are now seeing how it can improve ease of access to care in urban areas too. Telehealth modalities like real-time video visits or e-messages between patients and providers can help address transportation or time limitations that might otherwise be barriers to seeking care. At the same time, I think telehealth use has to be implemented thoughtfully to avoid exacerbating disparities in care between those who have easy access to and comfort with smartphones, computers and wifi, and those who do not. Also, it's not a replacement for in-person care. I know for me, it is always nice, and necessary, to see my patients face-to-face.

**Tell us about one of your favorite items in the Mütter Museum or College Library.**

One of the part of the Mütter Museum that interested me the most was reading about and looking at the photographs from the Civil War. There is a photo of the United States Colored Troops, and next to it was a poem by Miles O'Riley and James Clark called **"We've Drunk from the Same Canteen."** The poem is a moving tribute to the troops and how they fought and struggled and died together regardless of race. ■



**The Broken Bodies, Suffering Spirits: Injury, Death, and Healing in Civil War Philadelphia exhibit**