



Inside the Family Van, Nancy Oriol (from left), dean for students at Harvard Medical School (HMS), and Alvin Poussaint, faculty associate dean for student affairs at HMS, talk with client Pette Roger.

## Family Van has Healthcare, will travel, Offers confidential screening, counseling

By Gervis A. Menzies Jr. Harvard News Office

In 1989, Nancy Oriol, now the dean for students at Harvard Medical School (HMS), had a vision: to establish a program that could provide basic health services to individuals in Boston who are unable to access primary health care. Three years later — after Oriol reached out to everyone she knew in the various Boston churches, community organizations, neighborhood health centers, and even people on the street, about how this program might take shape and what it might look like — that vision became a reality in the form of a Winnebago.

Along with Cheryl Dorsey, an HMS student at the time, Oriol launched the Family Van, a mobile health care program designed to increase access to health care for — and improve healthy behaviors of — individuals in the lower-income neighborhoods of Boston.

“The vision was to work with the community to help bring knowledge and services directly to the people in the community,” said Oriol. “I was seeing people in the hospital who were entitled to health care and needed information, but they didn’t understand the system; they didn’t know how to navigate the system.”

Still going strong after 17 years, Family Van staff members and volunteers conduct free screenings for a number of chronic illnesses, while helping patients better understand their own health.

“We are working with a population that is predisposed to having chronic illnesses. Because of environment, health disparities, all kinds of things, these people are going to have higher incidences of these chronic illnesses,” explained Jennifer Bennet, executive director of the program.

“Someone may come onto the van not feeling great but they don’t know why,” said Bennet, “and our staff and students work with them to determine, through these screenings, if, in fact, they are at risk, and then we identify these folks and get them into care so they will not have a stroke, go into a diabetic coma — all these sorts of things.”

Bennet noted that close to 30 percent of the patients who visit the van have a chronic illness such as diabetes, hypertension, or HIV — and are completely unaware of it. But once diagnosed, 85 percent of the patients referred to a doctor keep their appointments — thus, the van creates a bridge to the medical assistance they need.

“Despite having insurance, what we see is that many people still do not go to the doctor,” said Bennet. “And the whole concept of the van is ... bringing services to their community, at their convenience.”

“The idea was to drive through the barriers [of lack of knowledge and resistance to the medical system] and, working with the community, build a program that is useful, helping to bring together all of the different resources that are already out there,” said Oriol. “There are many wonderful resources, but they are highly disconnected, and many people do not even know what is available. ... [The van] is a bridge ... into mainstream health care. It's a place for free and confidential screening, education, and counseling.”

In addition to serving communities in need in the Greater Boston area, the Family Van gives program volunteers — many of whom are Harvard Medical School students and employees — the opportunity to provide care to these underserved neighborhoods and to get a close-up look at communities in need.

“For the volunteers,” said Oriol, “it is a chance to listen and learn about the two-way street of communication and caring.”

A number of the student volunteers attest that the work has been eye-opening as well as life-changing, providing meaningful, real-life experience that can't be replicated in the classroom.

“The experience has really helped me put faces and personal stories to the socially determined disparities around chronic conditions that we read and hear about,” said Devika Buhshan, a first-year medical student at HMS who spends Friday afternoons on the van in Mattapan Square. “For instance, I spoke to some patients about the reasons they wouldn't want to do preventive screenings like Pap smears and colonoscopies, and they said that they would just rather not know if ‘something bad’ was happening to them, even if there was a chance it could thereby be prevented.”

Many grateful patients go the extra mile to thank the van's staff and volunteers. “One elderly woman comes to the van every week and, without fail, brings a loaf of banana bread for the staff,” said Jan Reiss, a senior writer at HMS in the department of communications who volunteers Friday mornings in Uphams Corner. “The people we serve appreciate the fact that we're there and they can count on us to be there,” said Reiss.

First-year medical student Fola Babatunde, who also volunteers Friday mornings in Mattapan, noted the deep connections patients make with van staff and volunteers. “It really is like a family,” she said.

“With some individuals, some of these institutions seem intimidating, and I think [that for them] the family van feels very comfortable ... in terms of access, as well as because the people are more likely to know how to talk to them — to get them to participate and feel comfortable,” said Alvin Poussaint, faculty associate dean for student affairs at HMS and a strong supporter of the program. “That also, in turn, makes the users of the van feel more comfortable about the health care system in general — and that's important. It helps establish trust ... around health care issues.”