

ARNOLD N. WEINBERG

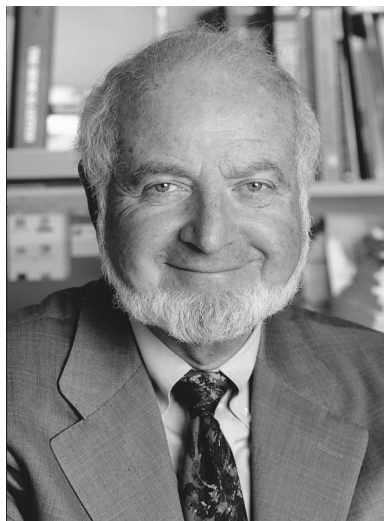
b. 1929, BS 1952 Cornell University, MD 1956 Harvard Medical School; joined the faculty of the Harvard Medical School in 1969, after serving as an instructor and associate, 1962-1968; professor of medicine, 1971- ; professor in health sciences and technology (HST), Harvard University-MIT, 1987- ; medical director, MIT Medical Department, 1986-2000; member, Standing Committee on Minorities, Harvard Medical School; board of directors, Whitehead Institute, 1988- ; fellow, American College of Physicians, 1966; recipient, Boylston prize for excellence in teaching, Harvard Medical School, 1973; clinical teaching award, 1980 and 1981.

I was born and grew up in Brooklyn, New York, one of the great centers of activity in the world. My father had died when I was three years old; my mother never remarried. We lived in, I would say, a lower middle-class neighborhood. My mother worked in New York. I had a brother and a sister who are older than me—by ten years and five years, respectively—so I was influenced a lot by them as a kid growing up. My sister was very intellectual, very musical—played a lot of instruments and things of this sort. My brother was interested in sports and, being ten years older, had a lot of older friends. Because I loved sports also, I used to engage in a lot of competitive sports with these kids who were ten years older than I was, while he was going through City College.

So that was a big influence, my siblings were a very big influence. A second big influence was that I lived across the street from the Brooklyn Botanic Garden and so I got interested at a very early age in plants—horticulture, plant pathology. Actually, it was a very important piece of my early life because I couldn't go away in the summers. I used to have usually a job in the afternoons from when I was a young kid, but my mornings were devoted to working in the children's garden at the Brooklyn Botanic Garden. I also was very active in scouting. I was very much into my Boy Scout troop and the merit badges. By the time I got to my third year of high school, I actually was working summers at the Scout camp for the Greater New York Council. So that got me out of the city a bit. I also worked on farms in the summers during the war. That was a good experience because I

was destined for a career in plant pathology and I was going to go to the College of Agriculture at Cornell. This was kind of preparing me for that.

Among other experiences that were important in those years, there was a black woman—Jessie Daniels—who worked for the family. She worked for many different members of the family. She did cleaning and she did ironing and she also was just a stalwart person in the family. She called my uncles and aunts Uncle So-and-So and Aunt So-and-So. She came from Barbados originally. She was very hardworking. She had one son, Mitchell. During the summers when I was out of school and Mitchell was out of school, she used to bring him when she came to work for us. So Mitchell and I kind of grew up together. He was about two years younger than I was. It was my first experience having a really close friend who



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was a black kid. We used to play and talk and stuff like that.

One of the really major impacts on my professional thinking and career was when Mitchell took sick with meningitis and died as a young adult. I was still in medical school when this happened. He was living in Brooklyn. That was really a very important moment in my life. It was that experience and the experience that my sister had with tuberculosis and the experience of my father dying of an infection when I was three years old—an infection in his central nervous system—I think a lot of those things got me more and more interested in medicine, as well as the other big interest I had in plants and plant pathology.

High school days. I went to a place called Erasmus Hall, which used to be one of the great public high schools in the country. It had lots of great athletic traditions, like Sid Luckman—the quarterback of the Chicago Bears—and a variety of other people. I played basketball for my high school team. In my senior year we went to the finals of the city championships and played Benjamin Franklin High School. The reason I mention this is that at Ben Franklin the team was all black. It's a Harlem high school, and a lot of comments and jokes used to be made. We actually did have one black player on our team, but basically the coach, who in many ways was a really great coach, was kind of a person who had a fair amount of bigotry. He thought he would get us revved up for playing Ben Franklin by pointing out that we were a lot smarter than they were. He would make fun sometimes of some of the black players on the Franklin team by talking about the fact that if they didn't like the way things were going, we'd better watch out because they might carry switchblades and stuff like that. That created some tension between me and the coach because I thought that was bullshit. He was doing it as a joke, but it pointed out a type of bigotry.

We played them at Madison Square Garden for the city championship and we lost. It was 48 to 44, and we lost. We had low scores in those days. Actually, a guy named Hill, who was the center of the Franklin team, was 5'11". He was very strong. He was really built like a football fullback—exceedingly strong, very good player. But the nicest part of that experience was that Ben Franklin then invited our team up to the high school for a dinner, kind of an awards dinner and

all that. There were a lot of people who were nervous about going, and I remember thinking to myself that my lifelong experience with Mitchell Daniels, with Jessie, with just the way I looked on the world, made me excited and comfortable. I found that to be a high point of my high school career. Everyone had a good time. It turned out there were no incidents, there were no awkward moments. It was just a hell of a lot of fun. One of the things I was frightened about was that some jerk on our team might make some stupid comment about what Coach Bedane had said about playing this team, but none of that came up. It was just all good spirit.

I then went off to college with the idea that I was going to become a plant pathologist. Just to cut to the chase, a major event occurred. The first year we had an undefeated basketball team, freshman team at Cornell. Our center was a guy named Thurm Boddie. He was about 6'7", about three feet wide—powerful guy. We had a very good team—we were a very strong team. Our last game of the season was at Mercersburg Academy in southern Pennsylvania. We went down and we beat the crap out of them. We finished the season 22 and 0. Thurm had a great game. We went to celebrate by going to a local bar. It was one that had lots of tables and everything and we were sitting around. It seemed apparent, I guess, to the bartender that I was one of the outspoken leader types. He came over to me and said, "I'd like to see you." And he said, "We don't serve niggers here, so you're going to have to leave." My first reaction was to tell him, "This is the USA." (This is now 1949.) And I said, "We can do two things here. I mean, we're in Pennsylvania, for one thing. I can't believe what I'm hearing, but we can do two things here. I'll make some excuses and we'll get out of here after one drink and that's the end of it until I report this to the Cornell officials, but if you insist that we leave right now there are going to be chairs and tables thrown all over this place. Now what are you going to choose?" He said, "Okay, if you leave after one."

What I did was to make some excuses to my colleagues and we got up and left the place. Thurman never ever knew about that. I never said a word to him about that ever. He was a very, very sensitive person anyway. If he had ever gotten wind of that while we were there, he would have exploded. He would have carried a lot of the rest

of us with him in terms of wreaking some havoc. I kind of felt all along that you had to use a lot of good judgment, you had to be aware of the fact that there were some awful, dumb things going on in the world at that time. That was kind of the end of the incident, really.

I guess I have to say that my interest in furthering my education and finally becoming a doctor was really the influence of a mother who, in spite of having to work, said, “The kids have got to go to college,” accepting the fact that I wanted to go to college, supporting the idea that I would study in the College of Agriculture at Cornell, and then when I made a decision my third year in college that what I really wanted to do was be involved and take care of patients rather than taking care of plants, supporting that concept, too.

Your mother was a major influence, then.

Oh, a very strong influence. My brother, being ten years older, was also kind of a father figure and I had a very good leader—a good scout leader, very tough old Marine who was very important also. But I would have to say that my mother had the major influence, and through her my siblings also were very active about the fact that we needed to get an education.

I played freshman basketball at Cornell and then I played on the varsity for two years—warmed the bench most of the time, but played some. In my senior year I decided not to play because I could see I was not going to make the first team. I had by that time gotten so interested in getting into medical school that I wanted to work with a professor of biology at Cornell who could perhaps be a mentor for me. So I kind of moved out of playing.

Ross Smith was the coach of the freshman basketball team when I was a freshman. Ross and I were good friends. I see him occasionally even now when he comes through Boston. What I remember about Ross were his gray sweatpants and the whistle that he always carried around his neck. We’ve had some good laughs about that uniform. He was very important. He thought I’d make a great lacrosse player. He was the coach of the varsity lacrosse team and he always tried to get me to go out, but I didn’t want to play lacrosse.

Before I ask you more about how you happened to come to MIT, you mentioned mentors during that period of time. Who are the strong people beyond your mother,

particularly on the collegiate level and in your medical training?

I think the people who mostly stand out were the people who were involved in subjects I was involved in, but who took an interest in me and other students. They were not too busy to interact with students and were not formal about it. I had a professor at Cornell in biology, Marcus Singer, who was very friendly, very relaxed, very informal. If anyone had a real interest, he would meet them half way. He was really a very important person. Then the person who was my major advisor, I saw a fair amount of him, was a guy named George Kent. He was exceedingly disappointed when I made the decision to go to medical school. It was kind of a tough one on him. The coach of the basketball team, Roy Green, was important in many ways, although I saw a lot of his shortcomings. That, I think, was always the case with me. The people I would deal with I kind of either felt they were genuine and you could be informal and honest with them, or they were phonies and then you kind of stood and backed away from them.

Of course, in medical school it was a little bit easier because it was a smaller class. There was much more communication between the students and the faculty. Probably the most important early person was my first clinical teacher. It was at the Beth Israel Hospital, a guy who was just a general internist and who was the salt of the earth. He had a wonderful way of dealing with patients and a wonderful way of dealing with students. In my college class, there were very few black—African-American—students at Cornell when I was there, and especially in the College of Agriculture. By the time I got to Harvard, there were two black students in my class, one of whom I got to know very well. I actually knew both quite well, but one, Eddie Harris, was just very special—a very gentle man. We’ve since lost contact. His wife died and he kind of drifted to the West Coast and all that. The other one was the son of a Nigerian chieftain from West Africa—a guy named Nwanneka Adimora, Samuel Nwanneka Adimora. He actually, I think, eventually came back to the States, but we used to talk a lot about the obligations that he felt towards his people in West Africa. He felt he really needed to go back there, but realized that maybe for a variety of personal or professional reasons he would end up back here. I think he did come back here.

In my medical school days, probably most of the people who were important to me were people at the hospitals and involved in the care of patients. There were people in the pre-clinical sciences whom I dealt with quite a bit who were important, but they were relatively less important than the doctors who were academicians, clinicians, and leaders at the hospital. One particular guy from Michigan, who was chief of medicine at MGH, was just a very important father figure really—a very powerful personality guy who got depressed half the time and the other half of the time he was quite lively. He was kind of a person with a cyclothymic personality, up and down. He was just very great. He was just an important person. One of the reasons I came back to the staff at MGH was because of his interest in my coming back.

One of the things I started to mention and which clearly ought to be on the record is that, particularly at Cornell and then going on to Harvard Medical School, you had an outstanding academic record obviously, but the beauty of it—and maybe because I played ball myself—is that the combination of being an athlete and doing well academically is not an easy trip. You obviously did exceedingly well.

Yes. I did exceedingly well in my studies, but I was motivated to work hard. I didn't do well by taking gut courses rather than the hard courses, or taking courses without labs in preference to taking courses with labs. I worked very hard. I was lucky because I didn't need a lot of sleep. But I felt fortunate that as an athlete I got to be close friends with a lot of terrific people. It broadened my horizons, really. I didn't have to be considered a nerd or bury myself in books. The balance was very healthy for my head, as well as for my body. I didn't smoke. I really was interested in healthy foods. The only part of the prescription I didn't do very well with was getting a lot sleep.

I noticed that when I've looked at the MIT basketball team, for instance. I remember saying to Leo Osgood once, "Why don't you arrange to play half a game on each of two days?" He kind of looked at me and he kind of smiled, like maybe he was catching on to what I was saying. I said, "You know, the team looks great for the first half and then they run out of steam." It's because the basketball team has an arduous academic schedule and they just don't have the staying power when they've got to be spending hours doing their work.

I remember when I was in college I knew, among other people, a guy named Hillary Challet, who was a great basketball player—a great athlete, unbelievable, but a fantastic football player. He was captain of the football team, a black man. He was from New Orleans. I can remember that some of my other friends who were on the football team would go off to one of these games in Michigan or something, and then there is Hillary sitting on the bus with a flashlight and he's reading comparative anatomy. Well, he wanted to go to medical school. He was using his time to make sure he kept up on his studies. I remember that as a very striking thing.

Talk a little bit about your coming to MIT and some of your general impressions and things that perhaps you have felt very proud about.

First of all, I knew very little about MIT—very little. I had never walked around this campus before I came here, when I first came here to look at the possibility of coming here as the medical director. I had been the chief of medicine at Cambridge Hospital for five years; I had driven by here on my way back from Mass General on my frequent trips back and forth; I had been associated with Harvard University as the infectious disease consultant to the Harvard University Health Service for over twenty years. So I knew what a university health service was all about that had international students and had an HMO, a health maintenance organization, that took care of more than just the students.

But I really didn't know very much about MIT, except that Jerome Wiesner was an important figure here. There had been Nobel laureates. Paul Samuelson is such an important figure in economics and stuff like that. But none of those things really meant too much. John Moses was a close friend. John was the one who said, "Arnie, why don't you take a look at this job? MIT is a wonderful place." John is one of these people who is absolutely the salt of the earth. He's been a friend of mine since he came from Cleveland back in 1963. He's a great doctor and very devoted to his MIT patients—very, very dedicated, very smart, very able, and an infectious disease doctor like me. We actually worked together for years at Mass General.

I came over and was very surprised when I started walking around the campus. I was amazed

at the physical plant, the art, the diversity of the student population, all of the other things. Then I finally added everything up. As long as I could retain my professorship at Harvard, which I had worked awfully hard for, as long as I could make some decisions about hiring and directions for the department, it seemed to me at age fifty-seven not a bad change. I also at the time, and this has to be emphasized, was not happy with the direction that Harvard Medical was going with their new pathway to a medical education. I really didn't believe in it. Since I was so deeply involved in the medical school educational process and saw that going in a direction mandated by the dean that I just felt was not the right direction, I decided that this was a good time to look at a position elsewhere.

A number of things happened during those first visits. In addition to John's enthusiasm, I liked a lot of people I met here. Again, talking to Constantine Simonides and getting some of his salesmanship, Paul Gray and some of his salesmanship. I remember going over to the Johnson physical area and here's Jim Smith's picture—Ross Smith's picture smiling down on me! I said, "Geez, I guess I better come." So as long as I could keep my ties to the MGH, because I felt they were valuable, I felt it would be a good thing to do.

I've never regretted, for a single moment, coming over here. If you were to ask me what it is, I would say first of all the genuineness of the student body, the diversity of the student body with lots and lots of young people who are very worthy and very committed and representing every sector of the globe. The philosophy I felt from the moment I got here was that the Institute was dedicated to making sure there was this diversity. I could see it in the people I began to see and in my practice and everything, and very rarely found among the students a misfit or someone I didn't feel had enormous qualities—sometimes a little different than the next person, but just a compendium of enormous qualities. And that's been very important.

Also, I found the faculty was much less pretentious, much less egocentric, than the Harvard faculty. I knew a fair amount of the Harvard University faculty too, because I used to see a fair number of them when they got ill with infectious disease problems. I found a larger number of very genuine people here. I found some who felt very empowered and egocentric, but for the most part

I really felt there was a lot of honesty, a lot of openness, a lot of caring. There was a lot of commitment on the part of the faculty to teaching. I learned fairly early about the large freshman courses, for instance, that senior faculty were involved in.

By and large, over the time I've been here I have felt stronger and stronger about it. I've occasionally gotten into trouble. You actually were instrumental in helping me when the African student body wanted me fired around an issue that emerged, because of my sense of the MIT student body really wanting to delve into all of the facets, all of the potential answers to questions, the theories, and everything else. It was a lesson I needed to learn, that there are some people who are coming with baggage and sensitivity who just cannot necessarily put aside an emotional side to an argument. And it was really a very important lesson to learn.

When I look at it, particularly knowing a little about your background, that had to be a very painful kind of experience. I've talked to a host of folks who are not black, and you are one of the few people I know who from almost early childhood has always had some kind of relationship with black folks. It is not an issue with you, so to be in that situation, where somebody is trying to say you are something you know you aren't, had to be very painful.

It was very painful, and you were enormously helpful. My own values were being challenged. I didn't doubt my own values. In other words, when this young man accused me of being a racist and a bunch of other things, I knew I was not and that the important thing for me to do was to not get angry, to try and be a bit convincing. But it was quite obvious, in a situation like that, there was enough emotional tension. Even though I wouldn't lose my cool, and I tried to explain that I've mentored African students and all the rest of it, it was going nowhere. I was quite surprised, actually, when the African student group on the basis of that interaction felt they wanted me withdrawn from my position, even before trying to get a little better idea of what all had happened. I think it pointed out the enormous emotional strain that that whole topic has created in people from the African nations—and just because some grad student asked, out of curiosity, where did the AIDS virus come from!

I just didn't think they were looking at it rationally. They probably still aren't at this point.

They probably still aren't. What's happened is that it's all gone underground since that. No one talks about it. I called my good friend Robert Schooly, who is one of the principal AIDS people in the United States, and I said, "Here's what happened to me. How do you deal with this?" He said, "The only way I deal with it, if the question comes up about where AIDS originated, is to say it's totally irrelevant and let's get on to a real relevant question now." So I said, "Isn't that a copout?" He said, "Yeah, but it's a copout that's necessary." And that was it.

You've been the director of this Medical Department for approximately ten years now. There have been some changes over that ten years. I know for a fact that during that period of time the diversity of this Medical Department changed and, as the director, you had to have had a lot to do with that. Could you talk about some of those changes? I remember that shortly after you got here you said these were the things the Institute was interested in, you were interested in, and you made a difference. Do you remember some of these appointments you made?

Yes, I do. First of all, I think it's fair to say that because this is such a diverse campus, one of the pressures for anyone who runs a department, especially a department which is a service department, is that there are many voices out there that are speaking out wanting to see representation within a department like ours. Just as an example, when I first got here there was a feeling that an Asian psychiatrist should be hired. When I sat down with Simonides and we talked about this, I remember bringing up to him the fact that, "Well, is it going to be a Korean Asian or a Japanese Asian or a Chinese Asian or a Taiwanese Asian?"—because in reality the diversity goes even down to that kind of detail when considering psychiatric understanding.

What I did tell Constantine was that there wasn't any question that the most important appointments we could make were appointments of quality people who would be good citizens within the department as well as providing excellent care. We did a lot of calling and working to see whether or not we could accomplish this. Dr. Mike Myers turned out to be one of the early people recruited. I can tell you that he was not the

first person we looked at, because he was still in his training at the time. It was only later when an article came out in the *Globe*—in which he very honestly talked about the fact that he was spinning his wheels, having a difficult time making ends meet and everything—that I saw that as a window of opportunity to bring a person of color here who had excellent training and was someone known to a number of people in the community, having done his training at Mount Auburn Hospital after graduating from Harvard Medical School. From that, I think Mike's presence here was very symbolic of a direction that I felt very strongly we should go in.

Then David Henderson was another individual. I can remember we had talked a lot about the fact that we didn't have a psychiatrist of color here, and before we did anything else that we should try if at all possible to find someone who would have an interest. David Henderson actually turned out to be someone who was discovered by Chester Pierce, the wonderful senior psychiatrist who spent about five percent of his time here. He knew a fair number of the psychiatric people of color, and David Henderson has turned out to be a spectacularly important person in this department—solid as can be, a wonderful person.

Janet Moses was another individual. Janet was, I think, a person who—between the two of us—we were a little bit concerned about whether or not she was at a point in her development that she would work out. My own feeling was that she was a very mature person whom a lot of people could identify with. She was a mother of grown and growing children and she had gone into medicine, as you know, in her early forties. She had had a career in East Africa, in Tanzania, as a teacher. Her husband is an educator and a unique person in his educational interests. Her son played basketball and was going to leave Rindge High School and go to Georgetown or Pittsburgh at the time. I think he went to Pittsburgh and then he went to GW. That was it, Pittsburgh and GW.

There is a problem I have found over the years with recruitment of black physicians in this city. First of all, a real positive part of it is that there are now many black physicians and many black students in training in medicine in this city—at Harvard and Tufts and at BU. Secondly, there are many absolutely outstanding black physicians who are house officers, residents, interns, and fellows in

the various programs. The problem for a place like MIT Medical is that the vast majority of those very gifted people are not interested in careers in primary care, but are interested in careers in some specialty. You know, they're the cream of the crop. Their careers have been distilled to an apex like being a resident at Massachusetts General Hospital.

John Rich is a perfect example. John Rich was one of my favorite house officers at MGH. I knew him very well. I actually interviewed him for an internship when he came from Duke. A brilliant guy—balanced, wonderful person. He went through the MGH program and was a superstar, then took a primary care fellowship at MGH and was moonlighting, covering the off-hours clinic over here. So I used to still see him. I tried to get him to come here and basically, to his credit, he felt the need to go to the Boston City Hospital where he would be able to put more energy into a community that needed his help. Even to this day I occasionally talk to him about, "Maybe the time has come. We don't have many part-time people here because we try and discourage it, but there might be some way in which we can use you and your talents." He loved working here when he was moonlighting here.

Reverend Stith's wife was my advisee at Harvard Medical School. I remember when she was at the time down at the Boston City Hospital and working in adolescent care, doing a wonderful job. It was quite obvious that she was kind of burning out in that position. I remember having her for lunch over here and kind of trying to talk up the possibility of coming here as a physician. Now, as you know, she took a great position at the Harvard School of Public Health. She's doing important things.

But I guess all along what I've been interested in is recruiting good people, and at the same time keeping an eye on the diversity issue. We've hired an Asian, a child psychiatrist, in the last year. We're constantly aware of the need for maintaining balance. I really feel it's important, and it's important not only for the "customers" out there—for the patients out there—but I think it's also important in how we educate ourselves and each other. We learn from each other as much as we learn from the books and the conferences and everything else. It seems to me a leavening part of our department that these things happen.

Take a person like Rodney Edwards. I have always felt uncomfortable when I walk through the basement of the Mass General Hospital and I see that most of the people doing menial jobs are either speaking Spanish or are black individuals from the community. I have on occasion written letters to managers about an individual I have watched working, for instance, as a person cleaning the labs in our infectious disease area at MGH, talking about how this is a person who I really feel is ready for a step up. We have to constantly be thinking about, "Yes, entry may be at a lower level if the person hasn't had a lot of education and doesn't have a lot of credentials." Rodney is a good example of a person who has mental gifts and personality gifts and has over the years really taken on more responsibilities. Every time he's taken on a bigger job, he's done a better job.

I think that's maybe a metaphor in a way. People can't just feel stuck, in a rut. Of course, the excitement for a student is a different thing. Students may feel that they're in over their head, but they also know that they have youth and intrinsic intelligence, and if they work hard that they can build on their experience, they can build on their education, and they end up becoming more and more secure—self-assured—and surprise themselves by their growth. I think it's a little tougher with people who are in low-paying, menial jobs who don't have an education and don't quite see the future. And that's why Rodney is such an important metaphor in this department. I felt all along that Rodney's experience should be the kind of symbol that other people in the department look on as being hopeful for the future.

I remember when he first came here. I at least remember him having a lot of difficulties, and I dealt with a lot of them before we changed our whole process. He was having a hard time, but something happened and all of a sudden, like you're saying, he just has progressed and is extremely proud of the work.

Absolutely, and he's got a lot of self-confidence. He'll come to a staff lunch meeting wearing the most outrageous tie, shirt, and jacket—all three of which don't match at all. Of course, he knows that I'll make something of that. What he knows is that he used to be someone who was a blue-collar worker around here and he knows now that it's fitting for him, with increased responsibilities, to

dress up a bit more for formal lunch meetings and stuff. But not completely—he still wants to make a statement. That’s a very refreshing thing. It’s like kids who can really be angry and act out at a parent, because they know the parent loves them and won’t reject them.

What advice would you have for blacks interested in coming to work at MIT?

First of all, if a person is interested in working in a place like MIT I think it is very important that they understand this is a meritocracy. If they apply for a position here and they come here, it’s because there is a very strong feeling that they are people who can do a good job. I think that’s number one, and I think that that level of confidence is very important for people to get across.

Then I think the key thing is hard work, engagement with other people, not being a loner, being courageous to speak out if there are concerns you see, but doing it in a way that doesn’t embarrass you, the individual, or doesn’t embarrass the person or persons you’re speaking out to. In other words, it’s not a question of ignoring some issues that you feel are important for the entire group, whatever that group is. I think the important thing is not to put those things under the rug with the idea that “Maybe someone’s going to think that I’m rocking the boat, that I’m a troublemaker.” This really goes for anyone, but I think that minority people, for good reason, sometimes have a lower threshold for sensing comments that may be considered bigoted or thoughtless. I don’t think it’s good for those things to just be put under the carpet and ignored. I think what you have to do is bring them up in a context in which the person you’re working with can understand your concerns and can perhaps help you see some other way of looking at it, or in being aware of it to just work a bit harder to see to it that everybody is respecting and supporting the people who work around them.

And, I think, engagement—not looking at the clock necessarily, but rather saying, “Hey, I have a job here. If I’m a professional, the most important thing is to be sure I do my work as well I can, and if I don’t know something, not to be embarrassed—come right out and say it.” I always used to say to students, “I don’t care so much about knowing all the things you know, since if you know them already, I’m a useless teacher. But what

I like to do is ask questions and maybe find out what are some of the things you really are unsure about. Those are the areas that are growth areas for you.” As long as it’s done in the spirit of just that and not wanting to embarrass, not wanting to put down, then the milieu is there for everybody to grow and learn from each other. And each individual really does have, through their own personal experiences and knowledge, something to offer to the other people.