

Interviewee: Dr. Marianne Felice  
Interviewers: Andrea Burnette and Lorin Colucci  
Date: April 4, 2013  
Place: University of Massachusetts Medical School-Shrewsbury Campus  
Transcribers: Andrea Burnette and Lorin Colucci  
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**Abstract:**

Dr. Marianne Elizabeth Felice was born in Greensburg, Pennsylvania in 1943 and works at UMass Medical School in Shrewsbury, Massachusetts. She and her husband, John Giles, moved to Shrewsbury in 1998 when Marianne was offered the chair of pediatrics. Marianne has devoted her time to her job, advocacy efforts, and her husband. Networks of women have played an important role in her life and experiences, and she continues to value these relationships today. In this interview, Marianne reflects upon the struggles and joys of her life and experiences within the medical field. Growing up in a large family, Marianne lost her mother at age 10. A religious community of nuns then took on the motherly role in her life and contributed to her upbringing. She discusses the challenges she faced in building up a successful life amidst the hardships she encountered. Along with receiving many awards due to her significance in the community, January 3, 2012 was named Marianne Felice Day in Worcester. Marianne elaborates upon the importance of struggles and successes and gives positive advice to future generations of women when she states, "Go for it girl, go for it! You can do anything you want to do, and don't let anybody hold you back." In this interview, Marianne touches on her experiences in moving to the Worcester area, and how she has witnessed an inferiority complex and the ways the city has changed over the years.

**Quote: "And I think of the department that I ran as a garden...I think of all the faculty that I've recruited as a flower. I could have had all roses...real flashy, but they have thorns, roses do. So you can have all tulips, but I think of the faculty in the department as a different kind of flower. Some need lots of sunshine, some need lots of water, some are going to be okay with benign neglect. They don't even need you. "**

**AB:** We are completing a citywide oral history of the lives of Worcester women, aiming to collect stories about a broad range of experiences. Based on the goals of the 1850 National Women's Rights Convention in Worcester, we are focusing on the areas of women's education, health, work, and politics/community involvement. We want to focus today on your experiences with all of these listed focuses. Thank you for your help with this important project! Dr. Felice, do we have your permission to record your oral history today on Thursday, April 4, 2013?

**MF:** Yes you do.

**AB:** Okay. What is your full maiden name?

**MF:** My full maiden name is Marianne Elizabeth Felice.

**AB:** When and where were you born?

**MF:** Do I have to give a year? [laughs] Because if you tell people how old I am, I'll break your kneecaps! [laughs] I was born in Greensburg Pennsylvania a long time ago, actually, December eighth, 1943. And that's in western Pennsylvania, outside of Pittsburg, and in many ways the Worcester area reminds me of where I grew up.

**AB:** When did you arrive to Worcester, or the Worcester area?

**MF:** In August of 1998.

**AB:** And what brought you here?

**MF:** Well the University of Massachusetts Medical School recruited me to come here. At my level, that's generally how you end up somewhere. You don't apply for a job to be in a senior level position. And so in 1998 I was happily working at the University of Maryland Medical School, in Baltimore, downtown Baltimore, and the previous chair of pediatrics here at UMass [University of Massachusetts] stepped down, and they had a search committee, which is common, looking for the new chair. And so, I don't know how many they interviewed, and I guess they chose me after I interviewed and visited the campus. In spite of visiting the campus, and the interview, they still chose me, which is a miracle [laughs], but then, my husband and I moved to the Worcester area. We live in Shrewsbury, but we moved here in August of 1998, and I began my job as the chair, the job I had until two months ago, as the chair of pediatrics at the University of Massachusetts Medical School. I was the only woman chair here for over 10 years.

**AB:** Wow! What is your neighborhood like here in the Worcester area?

**MF:** In Shrewsbury, where I live now?

**AB:** Yes, Shrewsbury.

**MF:** It's wonderful. It's diverse, so that we have people from various racial backgrounds and ethnic backgrounds in our neighborhood. It is also diverse in ages. One reason why we chose the neighborhood is it had sidewalks. [giggles] I mean, I always grew up with sidewalks, I thought everybody had sidewalks, but here in Massachusetts there are a lot of people who live on country roads, and I wanted to be able to walk on the sidewalk. And I figured kids wouldn't be walking on the side of the road. I don't even like when they got dogs or they're taking the dogs out to walk. I get so worried that they're going to get hit. So, one reason that we chose it was that it was in a neighborhood that did have sidewalks. So that kids and their tricycles, and dogs, parents, etcetera. I mean, at Halloween we get over 200 kids at our door on Halloween night. So our neighborhood is diverse in race and ethnicity, and in ages, so we we've got older people, we've got younger people, we got dogs, we've got a nice variety of individuals. It is a friendly neighborhood.

**AB:** That's great. What is your husband's name, are you married, currently?

**MF:** I am currently married, and his name is name is John, his middle initial is M, and his last name is Giles. G-I-L-E-S.

**AB:** Do you have any children?

**MF:** Unfortunately not.

**AB:** No? So, no grandchildren either. Do you mind giving your mother's maiden name and your father's name?

**MF:** I don't. [Hmmm.] My mother, why do we need her maiden name? I'm not—You can. My mother's name was, her— her name was Anne, her first name, and her maiden name was Rey. R-E-Y. And, my father's name was John Charles Felice.

**AB:** And your parents weren't from Worcester, you stated before they are from Pennsylvania?

**MF:** We're all from Western Pennsylvania.

**AB:** Can you tell us about your parents?

**MF:** Sure! My father was a barber. And he had to drop out of high school whenever the Depression hit, so that he could earn money to help support his younger brothers and sisters. I think there are 11 in his family.

**AB:** Oh m gosh!

**MF:** And he owned his own business in spite of dropping out of school, he was a right man when he owned his own business and did very, very well in that capacity. Not very, very well. I never wanted for anything, but we weren't rich, we were middle-class when we grew up. My mother was, had been in nursing school and had to drop out of nursing school during the Depression so that she could help support her family. So neither of my parents were well educated, or at least formally educated. But both were bright, and I think talented individuals who really believed in education for their kids. And so I never doubted for one minute that I was going to go to school. My mother died though when I was 10 years old. And so I went to Catholic school, and in many ways it was the nuns who really raised me. And taught me my set of values, I guess, and what was important to me, and what wasn't. And when I finished high school, I actually entered the convent for a few years.

**AB:** Really?!

**MF:** I was in the convent for several years before I went to medical school.

**AB:** Wow!

**MF:** Yeah!

**AB:** Do you currently have any family that lives close by, or in the area around here?

**MF:** I had a cousin, who since passed away, who lived in North Billerica, but that's about it.

**AB:** Do you, would you say you come from a large or small family?

**MF:** It's interesting. [laughs] So I come from, it'd just my brother and me as siblings, but my father remarried when I was 13, so, I mean, if everybody were alive, I would have 27 sets of aunts and uncles, and 40 first cousins, so that's a large family! I never know who's talking to who, when I do go home. But, most of them live in Western Pennsylvania, some in Maryland.

**AB:** Do you hold a close relationship with those in Pennsylvania?

**MF:** Some of them. Not all 40 or 20 [laughs]

**AB:** What culture or ethnicity would you say you identify with?

**MF:** Oh, I'm thoroughbred Italian.

**AB:** That's you! [Speaking to LC-other interviewer]

**MF:** So, I am three quarters in the Napolitano and one quarter Sicilian.

**AB:** What would you say your connection to Worcester is? Just working and living in Shrewsbury?

**MF:** Worcester, I mean although I live in Shrewsbury, and until recently my office was in Worcester, and I consider—I consider Shrewsbury part of Worcester. It just happens, that's where we found a house, you know when we were looking. Worcester's become my family. Even though I've stepped down as chair, I, we own a house in San Diego, I could be living in San Diego. After this winter, it was really tempting [laughs], but my heart is here. I've given my heart, blood, sweat, and tears to advocating for the children of central Massachusetts. It's not just Worcester. Worcester's the heart of Massachusetts and it's the biggest city, or the second biggest city, I guess, but it's the biggest city in this area. But we really represent or take care of the children in the entire area. As the Chair of Pediatrics of the only children's hospital in this area, I never thought of myself as Shrewsbury, I thought of myself as central Mass [Massachusetts].

**AB:** What challenges would you say the city of Worcester, or the area of Worcester faces today, if any?

**MF:** Oh yeah, there's many. I think it's a hidden gem that people don't realize, and it suffers from an inferiority complex. When I arrived here, I found that even the professors in the medical school would compare themselves to Boston. As if, since when did Boston die and create the whole world, I mean, the arrogance of the thinking that only Boston is the way anything takes place, for me, was a problem. I came from Baltimore; I thought Baltimore was pretty good. Boston is great, don't misunderstand me. The medical institutions there are magnificent, but they're not the only ones. And so I think for a long time out here, not just the medical school, but the whole area, has had sort of an inferiority complex. 'We're not Boston, we're just Worcester,' etcetera, etcetera. I think we have a lot to offer. We are friendlier, the standard of living is great, we have wonderful neighborhoods, great educational institutions, I mean what is it, we have 12 colleges and universities in this area, and we just got all you young people just bringing such energy into the area. I think it's wonderful, but I think, I do think we have an inferiority complex, at times, but that is starting to go away. I mean, it's starting to improve. Am I too much time? [Checked Ipad to be sure black screen was still recording] I think the economy, we are hurting, we are not a rich community, and we need—when we lost, I don't know when they lost it, I don't know history well enough, but all the industry left Worcester. The medical school, which is the largest employer is Worcester County, is the medical school, and UMass Memorial Health Care, quite frankly, the number of employees and the biggest employees. We've come in, and so has Biotech, come in, but the word hasn't gotten out yet, and if we get more of that, I think then the appeal of this area will be stronger. So that's one challenge that we have to overcome that. Secondly, I think we—that downtown is pitiful.

**AB:** Absolutely.

**MF:** And, until we can make our downtown a place where all the young people want to go, as well as the older folks. I mean the Hanover Theatre is a great place in downtown. Now we need restaurants around there so that that becomes a destination place. So our inferiority complex and I think our economy, and needing to refashion that downtown, making it a place everybody wants to go, is three of our biggest challenges. We have others, but they would rank lower.

**AB:** Over time, have you seen changes throughout Worcester?

**MF:** Oh, yes. We have grown. We're starting to, to say we don't care about you anymore Boston, you know we're on our own, and we're doing better. And I think that's an improvement. The fact that we have our first Nobel Prize winner, you know, from UMass, that's pretty good. Most new schools take a very, very long time in order to get a Nobel Prize winner, and we have ours. I've also seen a change in the government of Worcester. Michael O'Brien is a superb city manager, and is really trying hard to put us on the map. I was thrilled to read in today's paper that Jet Blue is going to be flying out of Worcester Airport; maybe we'll actually have a real airport now, you know, like other small cities of our size. But I see an improvement in downtown, is getting better. With the Hanover Theatre, with the Union Train Station, that's all getting better.

**AB:** Yes, it is. Are there any historical events you've been in Worcester to see?

**MF:** Give me an example of what you mean like that.

**AB:** Any historical event.

**MF:** Well, I was there for the opening of the Hanover Theatre.

**AB:** That's significant! [laughs]

**MF:** Elegant, etcetera. I'm trying to see what else. I've been here when any of the new buildings have opened for the medical school. I'm trying to think of what other historical event we've had. I haven't lived here that long in order to be involved in all of them, unless it was right in my immediate lifetime.

**AB:** What distinct characteristics would you say make up Worcester, or make it the place it is today?

**MF:** It's people. It's always people that make a place, anything. No matter, no matter how beautiful a place is, no matter how big a place is, if the people aren't the kind of people you want to be around, it's nothing. I think the people of this area- down to earth, salt of the earth, smart though. Here in the streets, I mean smart, and I think that friendly. I was so worried when I moved here that nobody would talk to me. I was told when you go to New England nobody will even speak to you until you've lived there 20 years. [laughs] That's the rumor outside of New England. So I thought, alright so nobody will speak to me for 20-although the workmen that came into our house the first week to work on the place-all friendly. You know, 'Hey do you like steak? Let me tell you the best steak restaurant!' Or you know, 'Do you guys fish? I'll tell you where we go fishing.' Stuff that was just wonderful of human-to-human interactions.

**AB:** What would you say women's experiences in Worcester have been?

**MF:** [Hmmm.] Again, I can only go back 15 years.

**AB:** Yeah, that's understandable.

**MF:** But even in 15 years, the fact that this was a fairly modern medical school, and that I was the only woman chair for 10 full years is remarkable. [laughs] We now have three women chairs.

**AB:** That's good news!

**MF:** It is good news for women. For men too! Its healthier for an organization. I don't want something that's all women, you want a mixture of people. Having a diversity of races, of genders, etcetera, its really good for a place. But I think for women here, that women can make it. Meaning, if you're really, if you're really good and you want to do something, in Worcester, you can do it. It doesn't matter what gender you are, or what race you are. Which is better than in

some places that are older and lots history, where you have to really, really fight. You still have to fight here, don't misunderstand me. It's not easy. But, you can. If you have the right personality, and gung-ho-ness or whatever else it is. So, yes it can, very, very easily. [Man interrupted interview, entered the room to drop paperwork off, Dr. Felice thanked him.]

**AB:** I'm going to bounce back to your childhood quickly. What would you say was the most difficult transition from your childhood to your adulthood years?

**MF:** [Hmmm.] I think the fact that I lost my mother when I was 10 years old- for any girl just starting puberty, it's a time when you really need her—even though I had tons of aunts the truth is, it still wasn't my mother. And so that was probably the most difficult thing for me. But, you again, I think things happen to you for a reason. And I don't, I think if, I think if my mother hadn't passed away I might not have been as close to the nuns, and if I hadn't been so close to the nuns, then I might not have been at the convent, if I hadn't been at the convent, I might not have become a doctor. In other words, I can trace things back to 'Oh, when that happened I did this, when that happened I did this.' So, in some ways I suppose that was the plan for me. And I sort of have been blessed ever since.

**AB:** Do you have any extremely fond memories of your childhood that you want to share?

**MF:** I've got lots of fond memories [giggles]. But it wasn't Worcester, I mean, in a little town-Greensburg, Pennsylvania. I can remember in those days that you could go to the movies on a Saturday afternoon for a quarter.

**AB:** Oh my gosh! [laughs]

**MF:** Actually, 26 cents—25 plus a penny. So, my brother and I, he was three years younger than I—we'd walk from home uptown, which was maybe 10 blocks, 10 long blocks, and my father's barber shop was across the street from the movie theatre. So, we'd look up to see what we wanted to see and in those days there were a whole lot of musicals- Annie Get your Gun- I mean, all sorts of musicals on the movie screen. So we would go in and in front of my dad's customers ask him for money to go to the movies [giggles]. And, so it would be hard for him to say no in front of his customers. So he would look at me and then I'd say 'and then we need popcorn daddy' or whatever and I'd grab my little brother's hand and we'd go in to see the movies. This was when my mother was even alive. And she'd know- in those days you were free, I mean you didn't worry about being picked up or anything else. And, I still remember going to the movies and it was some musical, maybe My Fair Lady, I don't know what musical it was. We came out, and I tap danced all the way home, through the town, and by the time I got home, my mother had been called by about I don't know how many people [laughs]. 'Your daughter is tap-dancing her way down the streets all the way home. You know that's the kind of thing in a small town that is sort of neat. Everybody knew who I was and didn't say I was nuts [laughs]. They might have thought it but didn't say anything.

**AB:** I wish things were still that simple.

**MF:** Yeah!

**AB:** For your education—Where did you attend preschool if you did, elementary school, high school?

**MF:** Yeah, I didn't attend preschool in those days. For the first three years I went to Holy Cross Grade School in Youngwood Pennsylvania. And then, my parents moved and I went to the Cathedral in Greensburg, grade school. And then my mother died. And then I won a scholarship to Saint (\_\_\_\_???) Academy for girls, and that was in Latrobe, Pennsylvania. These are all little towns next to one another. So it was all western Pennsylvania. And then I went to Carlow University for my college. And I went to Penn State [Pennsylvania State University] college of medicine.

**AB:** What made you decide, was it Carlow?

**MF:** Carlow?

**AB:** What made you decide that college?

**MF:** Well I entered the convent after I left high school, and that was their university, so I had to go there [laughs].

**AB:** What did you go there to study?

**MF:** I was being prepared to be a chemistry teacher at the college, actually. I was a chemistry major and I was being groomed to go get my Ph. D. in chemistry, and then come back to the—and this is only a college and then it became a university- to teach chemistry.

**AB:** That's tough work! I'm not very good with science [laughs]. Did you stick with that for your years at that college?

**MF:** I graduated as a chemistry major. But I always liked English as well, and oration. In high school I belonged to the National Forensic League, I think it was called. I loved to give talks. I still win awards for those. But I stayed in chemistry, but before I graduated, my mother superior thought I would be a very good doctor some day. And she's the one who suggested I go to medical school. That's why without her, I would never have done this.

**AB:** How much did the campus change over the time you were there?

**MF:** You mean Carlow, when I went to Carlow?

**AB:** Yes.



**MF:** Oh, I see because you guys—It, it changed somewhat, they were always building something. And that's a sign of growth. And that's the only way a college can show you that you're growing, is by building other buildings because of the needs for students. So, it changed somewhat, but now when I go back, it is even, my gosh, its even lots more changed. Although, the guts of it, as you drive up that, usually the regular entrance to any kind of place, you can still remember all of the things that you saw before. So new buildings were certainly being done even then.

**AB:** Did you participate in athletics or extra-curricular activities while you were there?

**MF:** In college, did I? I was in a convent so it was hard to do that. But, we had some—you would participate in contests, speaking contests oration contests. I did that.

**AB:** What would you say your favorite class was that you took, if you had one?

**MF:** You'd think I'd say chemistry [laughs]. I really liked English Literature a lot.

**AB:** What would you say professors were like? Are they any different today then they were back then?

**MF:** I think they're still very good. They were friendly because it wasn't a huge school. So you got to know a whole lot of people. Again, very friendly, very demanding, you know, they knew you, you couldn't get away with anything, and if you didn't show up they knew it, so the classes weren't that big. And so I found that delightful actually to have that. I don't know, I'm not the kind that would probably do well in a huge place where you're not known, or where you're just a number. I sort of thrive in a place where somebody is sort of looking out for me and would know if I'm not getting my assignments in. Although, I'm so obsessive compulsive that I would get my assignments in, whatever.

**AB:** What kind of technology did you have access to, to assist in your studies, or just for leisure?

**MF:** Sweetheart we didn't have computers then, okay? [laughs] We didn't even have cell phones. It must be hard for you guys to imagine this. We had typewriters. But you didn't have computers. You used carbon paper and if you made a mistake, oh dear God, you had to use that white out on your paper, and on the carbon paper, and so you tried really hard. And to cut and paste, oh you got to be joking. So what you might do like if you were writing a paper on here and you decided, oh my God, this paragraph goes better here, what you would do is take it out, literally cut- cut and paste comes from you'd cut the piece of paper, you'd put it on the page you want (\_\_\_\_???) it on the copy machine, okay? [laughs] Then it would look like it was the original maybe, and you'd slip that in and hope that nobody noticed. So, not we didn't have all of that stuff. [laughs]

**AB:** When you went to school there were you living on campus?

**MF:** Yes.

**AB:** You were? Did you have roommates?

**MF:** Not in the convent.

**AB:** That's interesting. Who would you say your best friends were at that time?

**MF:** Well, two of the nuns in the convent. As well as a woman who was not in the convent, a young woman named Barbara, who was also a chemistry major. We did our experiments together and complained together [laughs].

**AB:** Do you have any great memories from your college years?

**MF:** Oh, yeah. Oh, yeah!

**AB:** Grad [graduate] school. Did you attend grad school?

**MF:** Well medical school's sort of a big fancy grad school, I mean, yeah.

**AB:** Was there a specific program you accepted into?

**MF:** Well, all the medical schools—when you get into medical school, you don't get to choose what you major in. You're in medical school, everybody has to take all the same classes in medicine, so all of us took surgery, all of us took internal medicine, and all of us took everything. But it was only later, when you finished medical school that you get to do what you actually like, or wanted to do-specialize. But every doctor has to go through all of that. But I had great memories of medical school and so as well as college.

**LC:** Upon finishing your formal education what did you see as your options to come next?

**MF:** Well, I was a doctor so after getting out of medical school then you become an intern in resident. I mean you can't just become licensed. You just got the book knowledge now you need the practice. So you become an intern first, and then resident. So I knew I wanted to do pediatrics. I've always known I wanted to work with children and actually my sub specialty was adolescent medicine. So I did my pediatric residency and then I had a choice I could either just go into practice, well presuming I passed and got my license and everything else to practice medicine, or I could go on for more sub specialty training and teach. I actually—before I went to medical school, I actually taught high school. I loved it, loved teaching teenagers and so when I finished medical school I ended my pediatric training then I took more training as a sub specialty in adolescent medicine, where I cared for pregnant teenagers, anorexia nervosa, kids who were depressed, kids on drugs, all this stuff with teenagers, sexually transmitted diseases, etc. And so, I did think about my options, but for me, I think being with young people was just so important

to me, I still do. And I think teaching was so important to me that I knew that I was destined for an academic career and then from there I just moved up and kept seeing patients, doing research, publishing, until I became a chair myself.

**LC:** Did you face any significant challenges throughout your experience with education?

**MF:** Mhmm. So when I went to medical school only ten percent of the class could be women. So this is an era that you guys have never experienced, and, women it was like we were taking up a man's role because, 'Most women are just going to get married and have kids. Why should we educate them to be doctors, because they'll just drop out.' So I'm of that generation where we were fighting for women's rights and, it's hard to explain that even to our young medical students where fifty percent of the class are women and when I was a medical student there was so- they were all guys, well mostly all guys. But you go into gross anatomy, so anatomy was learning about the body etc. gross anatomy is literally gross. [laughs] A body that you're going to dissect in order to learn literally all the different parts of the body, and I remember we had our lectures, to get the guys attention, we didn't have power point. In those days they had slides like, and they always started with pictures from Playboy Magazine and we few women in our class, you wouldn't dare say a word. I mean in this day and age, oh my God that professor would be thrown out, cause that would be offensive. But in those days you just put up with it if you really wanted, if you really wanted to become a doctor. There were just so few women that we couldn't change the culture of the field until there were enough of us, that we could do that.

**AB:** They literally set it to ten percent, only ten percent?

**MF:** Mhmm, we're talking about all over the country.

**LC:** Wow.

**AB:** Things have clearly changed since then. [Laughs] Well, we're making progress.

**MF:** There's an argument I might add, everybody I know says ten percent of my class, ten percent of my class, at that time. There's an argument saying that ten percent of the applicants were women. And I would adamantly approve that, we could go back but it doesn't—if those few women were applying it's because it's not like there were so many women applying and they only said ten percent of our class but it always worked out that way. So I always find that interesting that in that era it would be the women, you know how you're close with the women in your class, if you were a mixed class? So in those days, the women in the whole medical school, we all sort of—well because there were so few of us [laughs] we would all sort of get together. But, it was ten percent.

**LC:** Wow.

**AB:** That's kind of shocking.

**LC:** What support networks or mentors have been especially important to you?

**MF:** Oh, that's a good question. I've had many. Many of mentors have been men. Good men who really said 'I don't care if you're a girl or not I think you've got potential and I'm going to help you.' But quite frankly my mother superior who saw something in me that she thought I would be a good doctor. She was certainly somebody who influenced me immensely, in spite of the fact that I used to get in trouble in the convent. [Laughs] And in medical school I didn't have that many mentors. But as I got into my residency in training, I've mostly men mentors who have, who've helped me advance. And in the convent there were a lot of nuns who influenced me and taught me things I had never learned any other way. It was a very good experience for me.

**LC:** Now you mentioned you are a social chair. What's the name of the full position you have here?

**MF:** A social chair? Did I say that? I was the chair, the chair of pediatrics at the University of Massachusetts Medical School. There is only one chair.

**LC:** Oh, okay.

**MF:** And that's the person in charge of the entire department. I think that's what my, oh no my card wouldn't say that anymore because I'm no longer chair. [Laughs]

**LC:** What does you come to do this... How did you come to do this work?

**MF:** Well I really wanted to take care of kids and influence the lives of children and that's by teaching other doctors to take care of them, and it's also by publishing and doing research as to what helps etcetera. And as I got to be known, then you get to be known nationally. You asked to speak everywhere, you're given grants, and invited to be on panels. So as you get to be known more, your leadership abilities get noticed by people and so at some point I had to decide am I willing to be a leader in the field, which is a lot more responsibility on your shoulders or not. Well I like—I like being in charge. I like—I like being organized and saying let's do it like this, let's try to do that. When you're in that position you also can have an influence on the younger physicians below you, you can guide them, you can facilitate their growth so that they can have an impact and that's sort of what lead me to do that.

**LC:** What has this work meant to you?

**MF:** Oh, everything.

**AB and LC:** Mhmmm.

**MF:** Just everything, it has meant to me. It's meant that I can put my stamp on Central Massachusetts and in building a program for children's health. Before I arrived here the

department was only half the size it is now and we were accredited to be a children's hospital and I guess I recruited over 100 faculty to come and join us in PEDS. [Pediatrics] And we've been able to have influence in the whole community, so many of our faculty are out on the boards. I was United Way, Girls Inc. YWCA. I'm losing track of all the different organizations in Worcester that we could have influence on that helped children. And that's what it has meant to me that I could, particularly not having my own children, I think I just decided that all the children in Central Massachusetts are all my children. And that I can have an influence on what happens to them.

**LC:** Would you say that this has been your favorite job, or have you had any more...

**MF:** Well I had other jobs up to this point but being the chair has been the one that—It's such a privilege to have had that position.

**LC:** When did you first begin working as the chair?

**MF:** 1998.

**LC:** What are your responsibilities in terms of housework?

**MF:** Housework?

**LC:** [Laughs] Big switch.

**MF:** So at some point, when I was chair I was maybe putting in 70 hour work weeks, so it's hard to take care of your house and do everything at the same time. And I often did my emails from 10PM to 2AM, so it was very hard to do everything. But so, I hire somebody to clean the house and I fire them if they don't clean it as well as I do [Laughs]. But there's still some things that I still do. I still like to do my own grocery shopping. I still like to do my own personal laundry. I actually love to iron, there's something so relaxing to me, and the reason is you iron it, and fold it, and it's done. The rest of my work is I do it and it's still not done. You know its continuing whatever, but when you iron something it's done, and I have a sense of accomplishment like I've actually done something. One thing today that is, whatever. I like gardening. So even though there's a man that takes care of our yard overall there's a patch of flowers that I get, that I, they're mine that if they need to be weeded, I do them etcetera. So again weeding is, it's, you actually do it and it finishes. You know you've got something done. And I think of the department that I ran as a garden I think of every, I think of every, I think of all the faculty that I've recruited as a flower. I could have had all roses, you know, real flashy but they have thorns, roses do. So you can have all tulips but I think of the faculty in the department as a different kind of flower. Some need lots of sunshine, some need lots of water, some are going to be okay with benign neglect they don't even need you. So it's just like a garden is sort of how I thought of the faculty and I like gardening. It gets ya dirty and you know, whatever.

**LC:** How have you balanced different priorities, responsibilities, and roles of interest in your

life?

**MF:** Poorly. That's how I've done it. Just poorly. I don't know how to do that balance. I hope your generation figures out how to do it. When you're a woman who's the only woman of 10 you can't fail. You know, the women of my generation in medicine felt we had to be better than men to justify the fact that we had a place to sit at that table, and I don't think that men put it on us, I think we put that on our shoulders. I have trouble balancing, I also have this stupid idea that I have to do everything perfectly. So it's bad enough that I don't even balance it but when I do do it so that it would be perfect, which is stupid. So I don't do a good thing at balancing, but I have—my husband and I try to have a date night once a week. You know, our idea of a date was watching Netflix and having a bottle of wine, you know. That was about it but at least we would be spending some time together. I've tried to remember to do things outside of medicine. I love reading novels. I read a lot. I play tennis, and a couple years ago I took up the drums. Well when I was a little girl I tap danced.

**AB:** That makes sense.

**MF:** And at my age and weight tap dancing is not a pretty picture but I still have my tap shoes from when I was in high school. I still have my tap shoes. And I used to lead the Halloween parade for the children in the hospital, dressed up and with my tap shoes and whatever. And I could tap dance down the hall leading the parade. But I can't, I don't have the stamina to tap dance- a song, if you're playing a song it's about six minutes. And to tap dance, I can do one six minute then I'm done. But I'm like [starts panting]. [Laughs].

**MF:** But I can play my drums, my jazz set for six minutes. And I'm not real good because you know you have all four of your limbs are doing something different and at my age to take that up. You know I wasn't used to that, but I love it and I like playing tennis. I refuse to join the old ladies league. I prefer to play in the younger women's league so that they give me a run for my money, and even if I lose I can say well look I'm old enough to be your mother, or I'm old enough to be your grandmother [Laughs]. So don't be too proud of yourself. That's sort of what I do.

**LC:** How would you characterize the personal and professional costs of your chosen path?

**MF:** I don't know if I never managed to have children because of the stress of the job. I mean we certainly were evaluated etcetera, and we certainly tried. I don't know if that is one reason why I didn't have children, or if God knew I wasn't going to have children and said I want you to use your talents to take care of other people's children. I don't know that but in the back of my head, I sometimes think about that. Why couldn't I have had any? You know, why didn't I have any? I think the toll has been on sleep. I was sleep deprived for a lot of years. And delayed gratification. I couldn't just take off any time I wanted to, you know I have responsibilities that just had to be done. But that's the price you pay for moving up, and if you're not willing to pay that price then you shouldn't be wanting to move up.

**LC:** What type of work does your husband do?

**MF:** So, John was in the navy for almost 30 years and he has an engineering background and he's retired from the navy, but he'd be out at sea sometimes and his background was he fixed ships. So if a ship had problems he'd fix particularly the hull of the ship, but key the hull has always got to be intact or you sort of, it goes down, that kinda thing. So that's what he did.

**LC:** Do you consider yourself politically active?

**MF:** Hmm, I'm quietly politically active. As a state medical school employee, I can't be openly politically active. But when I feel strongly about certain issues I will write a letter, I will support it financially, I will do something like that. I believe in women's rights, I just believe in women's rights. I'm a strong advocate for children. And things like child abuse, and drunken drivers, and stuff like that mean a lot to me and I want to be tough on those things. But I'm not out there campaigning for somebody. But I sure will give my financial support because I can do that quietly without it making a huge fuss.

**LC:** What role has religion played in your life?

**AB:** The convent. [laughs]

**MF:** I think of myself as still very, very spiritual. But I don't think of myself as real religious. I don't know if you can know the difference there.

**AB:** I can relate.

**MF:** Can you relate to that?

**AB:** I can relate, yeah.

**MF:** Certain I was raised Catholic. And I was in the convent for seven years and—but the church, particularly in Massachusetts had problems. And I know that the church is made up of humans, and hence our human frailty, but there are times that that has bothered me a lot, and probably has influenced me a lot. But the values I learned in my Catholic upbringing, and my Catholic education, I've not forgotten. And the values I'm talking about are values about integrity, about honesty, about how you treat people well, about loving your fellow man, about not having to get even for everything. Those are the things that have mattered to me and I, I—The nuns taught me a lot of stuff. Is that what you mean sort of?

**LC:** Yeah. Have you been involved in any community service events or organizations?

**MF:** How many of them do you want me to list? [Laughs]

**MF:** I'd be glad to print out my CV if it would help you see the things.

**AB:** It would be neat to look at.

**MF:** Okay, so while you are talking to me let me print it out. I don't know if I have it completely up to date, but that might give you—because I'm not sure you know what it's like when you go to medical school.

**AB and LC:** No.

**AB:** No clue.

**MF:** I think it's only 40 something pages.

**AB:** Oh my God.

**AB and LC:** Oh my God.

**MF:** But we can keep—I can—If you, if you ask me something I can still answer.

**AB:** Okay, let's go.

**MF:** I hope I have enough paper for this.

[Printer opening and closing as paper is put in]

**LC:** Are there any health issues that have impacted your life or those in your family?

**MF:** Well the fact that my mother died when I was quite young. Certainly. She had heart disease. I think she, I think she had heart disease from her childhood that was never taken care of or whatever because she died she was only 39, I was only 10 years old. So that certainly impacted my life. But I've been lucky. I—except for infertility, I hate to even say that word. I think for my age, and I'm still pretty active, and would challenge either of you on a tennis court. [Laughs] Even though I would lose I would still say 'Okay I'll play with you.' You know, and I'm pretty old for doing that. And I can, I can often out dance at weddings. You know, I can out dance some of the younger folks on the dance floor. So I'm very lucky in that I'm fairly healthy, but I've worked—You know I've stayed active all of my life. So, and my family, there were some diseases that run in the family but so far [knocks on wood] I'm pretty lucky.

**LC:** Whose health are you responsible for besides your own?

**MF:** My husband's, all my aunts and uncles, and every cousin because I'm the only doctor in the family. If any—and I know nothing about elder care, and I don't want to take care of old people! I don't want to take care of people my age. I don't want to take care of adults, and I know nothing about that. But every aunt, every—I mean last week, one of my aunts, and they're old,



I'm old so you can imagine how old they are. They called me to say that my uncle's in the hospital and that he won't do what the doctor says unless I say it's okay. I said what does the doctor want to do and I forget whatever it was. I don't even know what they were talking about but I said if he gives me permission I'll talk to his doctor and now I'm talking to this guy and saying 'Look I'm only a pediatrician and you know I really don't, I, I'm doing this so I can help you take care of my uncle.' But that's what happens when you're in a family that has no other doctor, they rely on you and I try not to leave them astray. [Laughs] Okay I think this is my, okay, so this is my CV. I'll give you it, but you wanted to know what I've done in the community. Alright, let's see where that is. Personal accomplishments, so just the awards I've gotten, that will help you to know what I've done. So these are all my plans—here's my awards! I only have 26 so there aren't that many.

**AB:** Only 26!? [Laughs]

**MF:** Locally, so just locally and we'll start just Massachusetts, not Maryland, okay. So I've been a keynote speaker for the YWCA, I was the first advocate for girls award for Girls Inc., locally. The Massachusetts Medical Society asked me to be their orator in order to speak and I was only the third woman in 200 years to get that award.

**LC:** Wow.

**MF:** Erskine, Erskine Award for Women in Medicine. I have to change that. That's in Mass—That's here in Worcester. The Great Book Valley Health Center gave me their leadership award in 2007. United Way gave me their Lois Green Leadership Award in 2008. Carlow gave me an award. March of Dimes locally gave me their leadership award in 2009. Massachusetts Law Organization gave me an award in 2009. Our chancellor gave me an award in 2009. Ah! This is the one! Oh, here's the one I really love! January 3<sup>rd</sup> 2012 the mayor and the city council declared that Marianne Felice Day in Worcester. Is that not cool? Is that not the coolest thing!? Love it! So I decided that every January 3<sup>rd</sup> is going to be Marianne Felice Day. Okay? No matter what. [Laughs] And then just recently the Massachusetts Medical Society said they're giving me an award next September. So those are just my awards. Now the reason I'm only mentioning them to you is because that will tell you what I'm—You have to look under local and regional committees and things. The University of Massachusetts, local community. Baltimore, Baltimore, Worcester! So I chaired at the Worcester Infant Mortality Reduction Task Force for nine years. I was on the board of directors of the United Way. I've been involved in the YWCA. I've been on the Tarabean Foundation, which raises money for kids with tumors. I'm at the Hanover Theatre for the performing arts ambassador group. Harvard Pilgrim Health Care Foundation in Massachusetts, I'm on their board of directors that gives out money for children's services. I'm on the Worcester Tennis Club board of directors. I'm on the board of, board of registration and medicine for the commonwealth. The governor appointed me—You'd sort of have to look at it.

**AB:** Mhmm.

**MF:** That gives you an idea of some of the things I've done I think. But you sort of have to go through it. Don't get overwhelmed by it, most of its just crap but you know just look at some of the things that you would pull out kind of the things that...

**LC:** Wow.

**AB:** It's like a book!

**MF:** Well, yours will look like that someday too.

**AB:** Hopefully

**MF:** [Background noise] I don't have time to do a whole lot of other stuff. What else do you need to ask?

**LC:** What are your experiences in accessing quality affordable healthcare?

**MF:** Well, I'm pretty lucky cause I know who the best is and probably each area, and so I'm able to access it. However, I have experienced it when my husband has been ill. And he tries to access it himself. He can get in, but often it's very confusing to somebody who's not in medicine to figure out what's more important. You know if you—He had cancer and he had to have a bunch of tests done before they could do surgery on him and he was making his appointments. So he asked me, who outranks- 'Do the pulmonologists outrank the gastrologist?' And I said, 'What do you mean outrank, what are you talking about?' He's a navy man he's trying to think like who's the Lieutenant commander versus what- 'I don't know what you're talking about,' and he says 'Well I've got two appointments but they're both on the same day with two different people.' Our system didn't notice that. You know but, but cause we were all—They were all in their cylos trying to just give you the appointment and not noticing that this man can't keep two different procedures on the same day at the same time. And so I think we need to simplify that for our, all of our patients and our parents. But, I'm not a good one to ask because I should know how to get into the system. But if you have to be the chair of a department to figure out how to get your services, we're in real trouble. Cause most people aren't the chairs of the department. The spouse of the chair of the department doesn't know how to do it. [laughs]

**LC:** Now that we are working to tell a further story of history of women that has been recorded in the past, what should we be sure to include?

**MF:** I would, I would be very proud if you made sure you mentioned that the medical school, which is key, key in this community as one of the biggest employers etcetera, that I was the only woman chair for 10 years. I also, I didn't even mention that to you, I forgot this. So after I was here for three years, only woman chair, etcetera, etcetera. The CEO, the chief executive officer of the health care system, stepped down and I was asked to be the CEO, the interim CEO for almost a year while they recruited the permanent CEO, who just stepped down, John O'Brien. And remember, I was the only woman chair so the men chairs didn't get that. In fact I think

some of them were expecting to be appointed, and they weren't, I was. And I'm the chair of pediatrics. PEDS is not exactly your richest field. You know pediatricians aren't the doctors who make the most money. They didn't put the chair of surgery in charge or the chair of some of the richer departments. They asked me to, which was quite an honor and frightening, but quite an honor, and what an experience for me. I—I guess I would want you to mention that the medical school was pretty important in this community and I feel as if I've played a role in that medical school. But...

**LC:** What advice would you give to women today and to future generations based on your life experiences?

**MF:** Go for it girl! Go for it! You can do anything you want to do and don't let anybody hold you back! That's what I would tell the women of today. And the next thing I would say is figure out how to balance because I never figured it out.

**LC:** Mhmm

**AB:** It's definitely tough, I'm still not figuring out how to balance.

**MF:** Just the studying and everything right?

**AB:** Yeah, it's horrible.

**LC:** Is there anything you think that is important to include in this interview that we have not yet asked about?

**MF:** Hmm. You could ask perhaps, are women in our community where they need to be? Is there anything we can do to make women in our community stronger? And I think we've started on that. United Way has a whole women's initiative, in which some of us started several years ago. [Clears throat] And we raised money, among women, in order to benefit younger women, particularly girls in school, for something to prevent violence against younger kids. I think that is so Worcester, so Worcester. And I wish that we did that more in other communities. That's the only thing I can think of that people might have thought of. But... anyhow that's it. I hope I didn't bore you too much.

**AB:** No! You're definitely inspiring.

**LC:** Yeah, very.

**MF:** You'll do even greater. You will be even greater than me. You wait and see. It just seems that way because—because that's so thick.

**AB and LC:** [Laughs].

**LC:** Thank you so much!

**AB:** Thank you for your time!

**MF:** You are so welcome! My pleasure, my pleasure!