In mid-December I attended a meeting organized by CEYE – the Center for Excellence in Youth Education, which is housed in the Center for Multicultural and Community Affairs (CMCA) at the Icahn School of Medicine at Mount Sinai. CEYE aims to prepare underrepresented minorities and economically disadvantaged students for careers in science and medicine. Because of my experience as a professor of Molecular Biology in a Federal University in Brazil for the past 10 years, I got interested in volunteering for The Lloyd Sherman Scholars Program, CEYE’s two-year biomedical research program for young men of color. Through this program, high school students are able to get experience in research, including classroom and hands-on lab activities dealing with genetics, cell biology, microbiology, and other areas of the biomedical sciences. As part of the recruitment process, 45 students from three different high schools – one each from Queens, Brooklyn, and The Bronx – came to Mount Sinai once a month to learn and conduct mini-experiments in the lab. The professors are PhD students, post-doctoral fellows, and physicians that volunteer as “Curriculum Design Team” members, choosing the subjects, planning the activities and lesson plans, and ultimately leading the classroom sessions. Each lesson is very rewarding for both the students and the volunteers.

However, the Lloyd Sherman Scholars Program is not the only program that CEYE offers to young students. Aiming to encourage and increase underrepresented groups and economically disadvantaged students in careers related to science and medicine, CEYE has a variety of educational programs stretching from 7th grade to the collegiate level that have been developed and implemented in the past 40 years, ranging in time from one-day to three years.

CEYE’s success can be measured based on the number of students that not only end up choosing a degree in science or medicine, but also those that are accepted to graduate and medical school programs throughout the country. For instance, for the 2014-2015 cycle, 32 of the 36 graduates of the 3-year Northeast Regional Alliance (NERA) MedPrep program were accepted to medical school! Although this program aims to prepare students for medical school, 34 have also ended up matriculating to graduate school since inception. For the 2014-2015 cycle, 100% of CEYE’s graduating high school seniors have gone on to matriculate to college, with 82% majoring in a STEM field.

With 5 years of experience working in the CEYE, Alyson Davis, Program Manager, comments that “working with students from diverse backgrounds and managing biculturalism that is inherent in diversity is often a challenge that requires special attention. It is important that we push our students to have the confidence to identify with a career in science and medicine – even when they may not always see many physicians and scientists that look like them”. She also added that students from underrepresented backgrounds often end up NYC’s under-resourced schools, which creates another set of challenges related to overcoming educational disparities these students face when competing with students from other schools like the exam-based specialized public high schools. Erin Page, who has been working in CEYE since 2014, expressed that “preparing students to face a professional life requires mentorship and coaching from our staff and faculty supporters. Developing a résumé, applying for school, preparing for interviews, presentation skills – these are all areas that our students need and receive support for in the CEYE”.

Both are tireless in their roles, dedicating countless hours selecting, coaching, and mentoring students, evaluating their progress, preparing curricula and activities to keep them engaged, and working with Mount Sinai volunteers to make student success possible. In the past 4 decades, CEYE has served close to 10,000 students, making a difference in their lives.

If you are interested in volunteering for CEYE, contact Alyson and Erin at: ceye@mssm.edu.
You can also learn more at: www.icahn.mssm.edu/ceye or www.facebook.com/ceye.cmca
Clownfish (or anemonefish) spend most of their lifespan in symbiotic, mutualistic relationships with sea anemones. In this way both fish and anemones will benefit from the relationship. Anemones have many stinging tentacles used to catch prey which clownfish are protected from due to a layer of mucous covering their skin. However, the fish must first acclimatize themselves to the anemone by swimming around it and brushing their fins and ventral side against it. This special relationship allows clownfish to hide amongst anemone tentacles where they are safely protected from predators. In exchange, clownfish keep the anemone clean by eating leftover scraps of food and any algae or parasites that would be harmful to the anemone.

In a small group of clownfish, the largest and most dominant is female and the next largest is her male companion. There may be a few smaller, non-breeding and reproductively undeveloped males too. Most interestingly, clownfish are sequential hermaphrodites, which means that they change sex at some stage during their life. This occurs when the lead female in the group is taken away or dies, then the largest male transforms into a fully functional mate. When breeding is to occur, the male fish builds a nest on a rock close by the anemone and will aggressively chase the pregnant female to the nest to lay her eggs. The male clownfish will fertilize and protect the eggs for the next 6-8 days by fanning them with his fins and eating any that are infertile or damaged by fungus. Clownfish hatch into a transparent larval stage for 8-12 days after which the juveniles will settle to the bottom in search of their very own anemone to call home.

Greetings!

The Postdoc Executive Committee (PEC) has been busy recently with a few exciting developments that we’d like to share. First off, you may have seen the announcement of the recent appointment of Dr. George Huntley as the Ombudsperson for Graduate Students and Postdoctoral Fellows at the Ombuds Office at ISMMS. Dr. Huntley's role is to remain a neutral party in case of a complaint and to help resolve conflicts in case problems arise. If you have academic or career concerns, issues pertaining to authorship, conflicts with mentors or co-workers, or have been treated unfairly in any way, this is a great resource as a first step to finding a solution. Check out the Ombuds Office website at http://icahn.mssm.edu/about/ombuds-office.

As an extension to the Ombuds Office, the PEC has been working with the Deans office, the Office of Postdoctoral Affairs, and the Postdoctoral Advisory Committee to assemble a Postdoc Resource Panel. As postdocs are in a particularly vulnerable position due to their training status, we thought it important to establish a set of mistreatment guidelines to supplement the institutional policy on harassment and grievances, assist in developing and maintaining optimal training environments, and encourage mentors and postdocs alike to accept their responsibilities as representatives of ISMMS in their interactions with colleagues and staff. This panel is not a grievance committee (this already exists for all employees at ISMMS) but will provide a neutral board for postdocs to voice their concerns and is meant to supplement the Ombudsperson, who will also sit on the panel. The panel will consist of 6 postdocs and 4 faculty, and the elections for postdoc positions will be announced in the upcoming month so keep an eye out! These positions are open to both junior and senior postdocs from both basic science and clinical departments. This is a great way to get involved and obtain lucrative leadership experience!

We hope that these efforts of the PEC and Mount Sinai leadership will make ISMMS a safer and happier environment for all postdocs!

Delaine

Delaine K. Ceholski and Alison P. Sanders are your PEC Co-Chairs

Ways to keep in touch

• Our website: http://icahn.mssm.edu/education/postdoctoral-training
• Follow our Twitter account: @MtSinaiPostdocs
• Join our Facebook page: “Mount Sinai Postdocs”
• Follow us on LinkedIn (Mount Sinai Postdocs and Postdoc Alumni)
When I was a child, nothing was more comforting than having my parents talk, rumble around, or even snore next to me. It gave me an assuredness of being protected. That changed, however, when I fell flat on my face after a dog’s leash wrapped itself into my bike wheel and I had to be hospitalized for a week, which I spent, among other things, having my teeth stapled to my gums (the dog was fine, by the way). Perhaps worse than that, the lady next to me was unable to breathe properly and made horrendous piping sounds while inhaling. Back home after what seemed an eternity, it soon became clear that I had developed a heightened sensitivity to all those involuntary sounds that people make, such as chewing, loud breathing, drumming fingers on the table, and so forth. I started to bother my parents by threatening to eat by myself if they wouldn’t stop the noise and earned myself the nickname “Bat’s Ear”.

They thought I was crazy. I thought so, too. I still have this problem to this day. Child psychologists back then had made sure the inside of my head was not affected by my dive, but they couldn’t help me otherwise. What finally consoled me two decades later was a brief article in a blog of the New York Times on a phenomenon called misophonia – a constructed word from the Greek (not Japanese!) “miso” – hatred and “phonia” – sound. It is a condition in which people show an aversion against certain sounds. We all have it to some extent. For instance, most of us cannot stand the sound of bones cracking or nails scratching on a black board. However, in misophonia, even “normal” sounds such as gum popping or swallowing can leave you anxious and disgusted. What surprised me was, that nearly 20% of the population has misophonia. I then started a little Facebook campaign to see whether this applied to my friends and family – it turned out that all cousins from my father’s side that have a Facebook account answered positively. This is unpleasant for them, but it left me joyous. I was not alone, weird and, the black sheep of the family. Hence, simply by giving a name to this condition, I was able to find other people that shared my experience. Therefore, next time people complain about a new “Designer Condition”, allegedly to make money in the drug industry, think twice. What a difference the word “posttraumatic stress disorder” made to the life quality of thousands of soldiers – by studying causes of the condition, reducing stigma, and developing coping strategies. The same applies to misophonia, which since its first mention in 2001 has become a research field of its own. The latest research from Northwestern University even suggests a link between misophonia and creativity. Whether this is pop-science or not remains to be seen. The fact is that putting a name tag on it changed my life for ever.

References: