

“SAN JOSÉ SAINTS”: TREATING PATIENTS FROM HEAD TO TOE

By Grace Conroy, Caitlyn Jones, and Debbie Z. Harwell



From its earliest days, the administrators at the Mexican Clinic, now San José Clinic, recognized that addressing patients' medical needs alone was not enough. An individual's health depends on care for the whole person. It involves coordination of dental and eye care, pharmaceuticals, nutrition, physical therapy, mental health care, specialty care, and a host of ancillary services.

Inspired by the needs of Houston's Mexican American population when it opened in 1922, the clinic dispensed medications and had dentists volunteering there as early as

The local Sembradores de Amistad chapter held a fundraiser in 1970 to provide glasses for San José Clinic patients. Club president, Virginia “Vergie” Treviño, left, and fundraising chair Mrs. Roy Molina, right, walk with Beatrice Moreno proudly wearing her new glasses.

Photo courtesy of the Houston Metropolitan Research Center, Houston Public Library, RGD0006N-1970-1270-01.

1924. Within the first few years, the clinic added specialty care that included optometry. Volunteer physicians conducted eye exams and dispensed free glasses with assistance from the local National Council of Catholic Women, now

the Charity Guild of Catholic Women. While early records are sparse, during the first nine months of 1937, dentists and optometrists performed 798 dental treatments and 1,202 eye examinations. Four “graduate pharmacists” filled 10,500 prescriptions, which were offered free of charge or on a sliding scale thanks to donations. In 1938, San José was the only place in Houston doing free refractions, a critical tool in diagnosing vision irregularities and assessing prescriptions for glasses.¹

Over the decades, the clinic has moved to new and larger facilities three times, including to its current location at 2615 Fannin in 2010. It has expanded its services with the help of volunteers and partnerships with local institutions. Sometimes services have come and gone and returned again based on the availability of specialists and volunteers, but the clinic’s commitment to maximizing its patients’ overall health has never wavered.

Dental

“You can’t get a job when you don’t have good teeth. It affects your eating, it affects your speaking, it affects your appearance. It’s very difficult to move forward in life if your teeth are bad, or if you’re in pain. ... The same with ophthalmology and optometry services. ... How can you work if you can’t see? ... How can you read something if you can’t see it? The optometry services for people in need are just a life-saver.”²

– Diana “Didi” Garza, Ed.D.,
former San José Clinic board member

Dental care is one of the long-standing pillars of the clinic’s services. When San José relocated to a new, larger facility at 301 Hamilton Street in 1956, the Texas Dental College donated two dental chairs and lamps but demand quickly exceeded the accommodations. In the 1960s, Dr. George

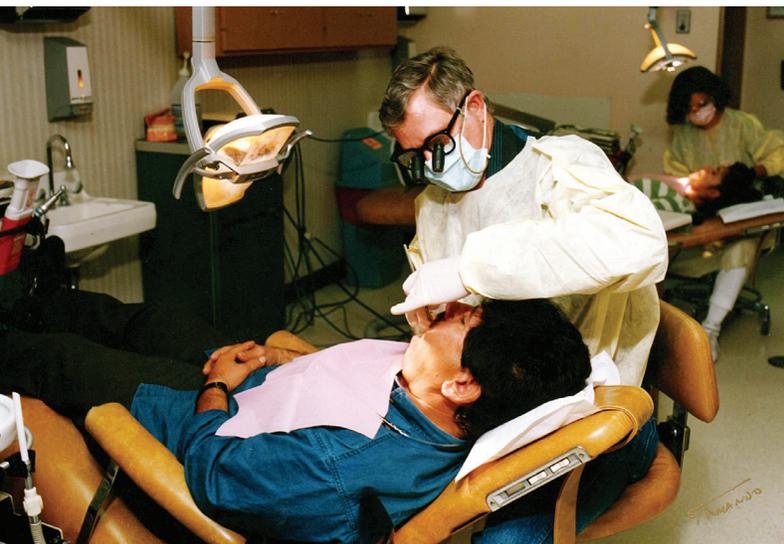


As part of their regular service, dentists in the Army Reserves volunteered at the clinic in the 1970s. Photo courtesy of the San José Clinic.

Quirk was recruited to volunteer at the clinic by his wife, Anne, who was a member of the Charity Guild of Catholic Women. The local dental association also required dentists to do community service, and the San José Clinic fit the bill. Dr. Quirk recalled patients sat in straight-back wooden chairs on which he clamped a “contraption” for a headrest that could not be adjusted. As a result, when patients put their heads back, “[dentists] had to bend over to get into their mouth.”

When the clinic expanded the dental area, it added about five dental chairs placed in a row. It was an improvement but not ideal. “The thing that bothered me so much,” Quirk noted, “was I’d be taking in an adult that had a full-mouth extraction ... and down at the end [of the row] was this young child waiting for his dentist to arrive. He was sitting there watching while I was doing surgery on this adult. I was so uncomfortable, I just felt so sorry for him.” Dr. Quirk eventually had curtains installed and was grateful when the clinic added two dental rooms with more privacy in 1975.³

To encourage dental health at an early age, the San José Clinic adopted community outreach programs, such as Dental Brush-In, Great Sugar Fast Day, and Sealant Day. The brush-ins began in 1969 to stress proper dental hygiene and provide free fluoride treatments. While the program ended in the 1990s, the clinic currently offers a similar program through Give Kids a Smile Day. Great Sugar Fast Day educated patients to avoid sugary foods to promote healthy eating, and Sealant Day provided free dental sealant, dental examinations, and teeth cleaning.⁴



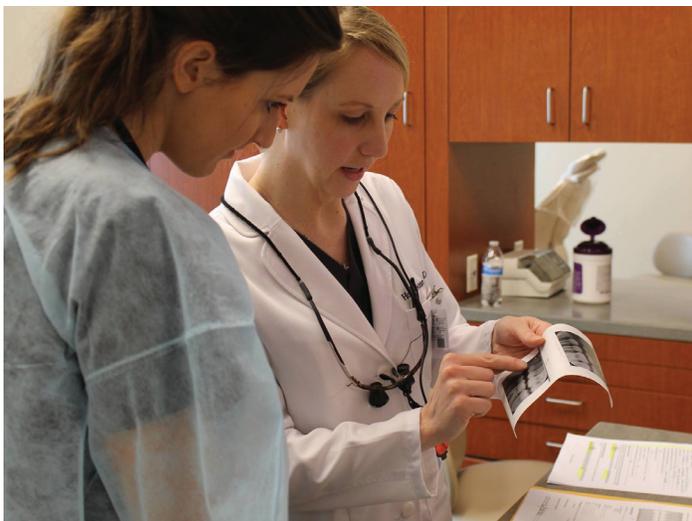
Prior to remodeling, the Hamilton location had dental chairs lined up in a row, making it difficult to maintain patient privacy.

Photo courtesy of the San José Clinic.

Various partnerships over the years enabled the San José dental clinic to meet the demands for care. In 1975, a group of dentists from the Army Reserves volunteered their expertise on Saturdays. They arrived dressed in battle fatigues, ready to assist patients in return for nothing more than the clinic's gratitude. A partnership with the University of Texas Dental School formed that same year, with dental students doing their clinical rotations at San José. Before that time, the clinic relied solely on volunteers, which meant if a volunteer could not come in, the patients had no one to see them. The dental students helped ensure appointments were kept, advancing the clinic's reliability.⁵

The late 1970s saw the creation of a denture program led by UT's Dr. DeYoung, who arranged with Stern Laboratories to provide dentures. Later Phifer Laboratories took over the service. The clinic's volunteer dentists registered the color, size, and impressions of the patients' teeth for the lab to create the dentures. Once patients received their dentures, they saw an improvement in their health, as well as a personal transformation.⁶

Former CHRISTUS Foundation president and current CEO of Northwest Assistance Ministries, Les Cave, reminisced



Dental volunteers discuss a patient's x-rays to determine an appropriate treatment. Photo courtesy of the San José Clinic.

about a young man in his thirties who was taken aback by his changed appearance after receiving his dentures. For years his smile consisted of a few scraggly teeth, but now, a full set of straight, clean teeth sparkled at him in the mirror. In that moment of self-evaluation, the young man knew his whole life would change. He no longer had to worry about the ability to chew and, most importantly, how people perceived him. Sister Pauline Troncale, director of the clinic from 1990-1992, confirmed, "The dental was just so key because dentistry is so hard for people in the low-income group to obtain."⁷

Other partnerships and staff additions followed. In 1988, San José expanded its care to include a special dental clinic, hosted at Bering Methodist Church, for those suffering from AIDS. In 1992, the clinic named Jana Wood director



Members of the dental team celebrate Julie Hsiao' thirty-fifth anniversary at the clinic. The longevity and dedication of the clinic's staff members are part of what prompts patients to think of the San José as their home and family. Photo courtesy of the San José Clinic.

of the dental department to ensure patients received comprehensive care on a continuing basis, keeping toothaches and cavities at bay. And the UT Dental School began providing a full-time hygienist alongside two dental students on Mondays and Wednesdays in 1994.⁸

The San José dental clinic continues to rely on community partners and relationships to maintain quality care and fill gaps when they arise. In 2019, when San José needed a new compressor and a vacuum – essential to operating a dental clinic – clinic CEO and president Maureen Sanders reached out to 1,600 dentists in the community for help, and they donated \$35,000 toward a replacement. She then worked with the vendor to cover the balance as an in-kind donation so patient services would not suffer. She insisted, "You cannot be afraid to ask for help. You have to [ask]."⁹

Optometry

"I always say you can't throw a rock in this town and not hit a dentist that trained at San José Clinic. ... and you can't find an optometrist in town that didn't train at San José Clinic. Those relationships are so long and deep-seated."

– Paule Anne Lewis, CEO San José Clinic, 2011-2018

Optometry services at San José Clinic followed a similar trajectory to dental care. The reliance on volunteers impacted the clinic services in the 1940s and 1950s. During World War II, the clinic lost many volunteers and had to cut back its services, but the post-war era saw a resurgence of visits in all areas, with optometry leading the way by the end of the decade. In 1953, during the Korean War, the volunteer doctor was drafted, and Baylor College of Medicine had a shortage of residents to fill the void. The clinic went seven months without an eye clinic until a doctor in private practice agreed to see patients at his



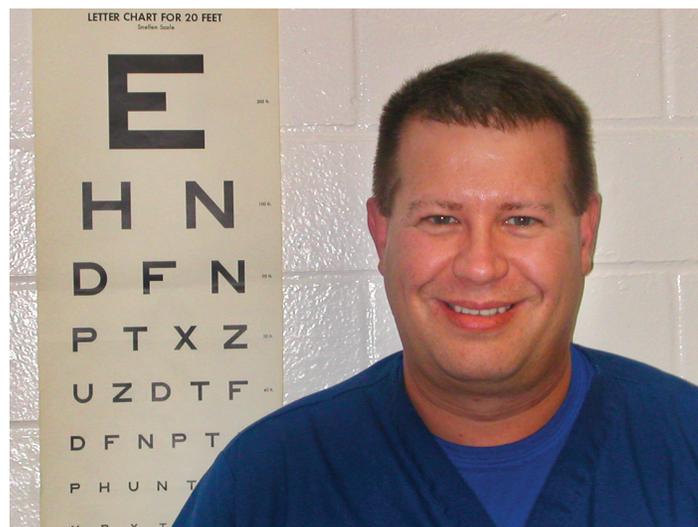
An optometry resident performs an eye exam for a clinic patient. The clinic has provided optometry services and assisted with glasses since its earliest days.

Photo courtesy of the San José Clinic.

office and refer them to the Lions Club for their glasses. By the following year, the clinic had resumed operation.¹⁰

The administrative structure of the eye clinic changed dramatically in 1980 when the University of Houston (UH) College of Optometry began training fourth-year students at the San José Clinic under the direction of Dr. Harris Nuessenblatt. Dean William R. Baldwin pointed out the importance of this outreach, “In the past, optometrists tended to wind up in the suburbs while our greatest need for health manpower has been in neighborhood clinics. The program fulfills a sense of responsibility to the community for this school and for the people personally involved.”¹¹

The arrangement benefitted the students who encountered – and learned to treat – acute eye conditions they would not normally see in general practice. The *Houston Chronicle* cited the example of one fourteen-year-old boy who had a severe eye infection that could have cost him his eyesight if left



Dr. Lloyd Pate completed clinical rotations at the San José Clinic while a student at the University of Houston College of Optometry. He continues to volunteer at the clinic and designed the optometry facility in the current building.

Photo courtesy of the San José Clinic.

untreated. Doctors also regularly identified other medical conditions during the eye exam, including tuberculosis and diabetes. Seeing the clinic as an oasis where patients are seen regardless of ability to pay, one grandmother waiting for her granddaughter to be seen was quoted in 1992, saying, “I thank God this is here. I don’t know where else I would go.”¹²

Dr. Lloyd Pate was a student at the UH College of Optometry when he was assigned to the San José Clinic for his clinical rotation in the early 1990s, and he has remained a stalwart volunteer. Of Mexican descent, he grew up speaking Spanish and felt a cultural kinship to the patients, some of whom he has kept up with and remembers fondly. Two of his patients from Central America came in with their mother who was legally blind. “The daughters would be like seeing-eye dogs for her while she drove. When they got old enough to reach the pedals, they would drive the car. ... Now

Maria Socorro Rouse was a longtime San José volunteer who was sadly struck and killed as she walked to work. In tribute, the eye clinic was named in her honor.

Photo courtesy of the San José Clinic.



one of the girls has a Ph.D. in chemistry, and she is supervising an analytical lab. ... The other one ... already had a master’s in nursing, and she’s looking at becoming either a physician assistant or a nurse practitioner.” He also had a patient who studied at UH and became an optometrist.¹³

Instrumental in improving the clinic facility at the previous and current locations, Pate has personally provided equipment to the clinic and checked out surplus equipment from UH many times. When the current clinic building was under construction, he designed the eye clinic’s floor plan in use today.

Pate sees his primary responsibility as providing the best care possible to his patients and supervising the students so that they also learn to provide excellent care. One of the biggest challenges, however, is the dependence on donations to provide for the patients’ needs. The clinic coordinates with other medical providers for diagnostic procedures like MRIs and with patient assistance programs for things like glaucoma drops that cost approximately \$200 per month. He explained, “It just takes a lot of effort being a social worker and a doctor and trying to get the treatment that the patient can stick to because it doesn’t do any good to prescribe a drug they’ll never be able to afford.”¹⁴ Nevertheless, the optometry providers have found a way to get the job done.

Today, the eye clinic is named the Socorro Rouse Memorial Eye Clinic in honor of Maria Socorro Rouse, a licensed vocational nurse who had volunteered at the clinic for fifteen years. Sadly, she was struck by a semi-truck as she crossed the street on her way to work. Rhonda Johnson, the clinic's nursing supervisor at the time recalled, "[Maria's] caring and compassion was the essence of the eye clinic, and she was very instrumental in creating a place for people who had special needs."¹⁵ That spirit remains true as the clinic aims to protect the eyesight of Houston's underprivileged.

Pharmacy

"You can prescribe the best medicines and order the fanciest tests, but if [a patient's] home situation doesn't support the things that you need them to do, they're food insecure, they don't have access to the healthy foods that you need them to eat to bring down their blood pressure or to lose weight or control their blood sugar, ... that really sets them up poorly."¹⁶

– Dr. Portia Davis, San José Clinic disease state management clinical pharmacist, associate professor of Pharmacy Practice, and interim executive director of Interprofessional Practice & Simulation at Texas Southern University

Historically, treatment regimens in many specialties at San José Clinic involved recommending medications and more. Pharmaceutical companies and hospitals donated medications, and by 1951, physicians contributed "many of the most recent and expensive antibiotics – to stock the clinic's pharmacy." But prescriptions given to parents of young children also included vitamins and cod-liver oil, or baby food, evaporated milk, strained vegetables, and cereals obtained by clinic staff and volunteers. Nurses then followed up with house calls to monitor children's health and ensure their mothers knew how to care for them.¹⁷

Today, the San José Clinic uses similar approaches to care for patients' overall wellbeing. Dr. Portia Davis, a disease state management clinical pharmacist at San José, trains students



Charles Ezeudu, a pharmacy student at Texas Southern University, examines an insulin device during a training taught by Dr. Portia Davis.

Photo courtesy of Debbie Z. Harwell.

who do rotations at the clinic and works closely with patients. She believes in the clinic's long-standing philosophy to treat the whole patient, considering their support system and home life. Davis describes the San José patients as fantastic. "They're just so thankful for any bit of time that you spend." She reflected, "I've had great relationships built with my patients and the [clinic] staff." Those relationships create trust so the patients can speak honestly about what does and does not work for them and be part of their own healthcare solutions.¹⁸

In difficult times, the San José Clinic has a reputation for stepping up to help the larger community with needed services. During Hurricane Harvey, the clinic opened up just six days after the storm hit to provide prescriptions and insulin to those who had lost theirs in the flood, to help supply the emergency shelter at the George R. Brown Convention Center, and to operate pop-up clinics, including one at Our Lady of Guadalupe in Rosenberg.¹⁹

During the coronavirus pandemic, pharmacy director, Dr. Adlia Ebeid, set up a drive-through pharmacy at the clinic's back dock so patients could stay socially distanced while taking care of their health. Knowing many patients had likely lost their jobs, the clinic also waived the patient contributions. And, as if the pandemic was not enough, when Hurricane Laura approached the Texas coast in August 2020, the clinic spent a week getting sixty- and ninety-day supplies of medication and insulin prepared for its patients.²⁰



The clinic operates a full-service pharmacy for its patients. During the COVID-19 pandemic, the staff shifted to drive-through service so patients could maintain social distancing.

Photo courtesy of the San José Clinic.

Larry Massey, president of the Scanlan Foundation, related a personal experience that illustrates how the clinic goes the extra mile. He helped sponsor William, a homeless man, through truck driver's school. One of only three to pass the exam, William immediately received a job offer from a truck driving company but had to be in Atlanta the following Monday to start. Massey helped William get his medications, so he could get there on time, remembering, "San José Clinic moved heaven and earth. ... They saw him, they got him his diabetic meds and we got him on the plane the next morning



After contracting multiple sclerosis and losing her ability to walk and control her upper body movement, Valentina Quiroga, assisted by volunteer physical therapist Dr. Beverly Newman, stood for the first time in five years thanks to a Sara power standing lift device donated to the clinic. Photo courtesy of the San José Clinic.

... He had no other place to go, and that's what San José Clinic does. It helps people who have fallen through the cracks, who have really limited options of their healthcare."²¹

Physical Therapy

"[The goal of physical therapy] is to get [patients] towards their highest level of function ... and get them back out there. ... [We do] not look at anybody as handicapped ... because that's a label that goes on to, 'I'm injured,' or 'I'm handicapped, so I can't do anything.' No, we don't accept that."

– Dr. Beverly Newman, volunteer and head of San José Clinic physical therapy

People also turn to San José Clinic for physical therapy (PT) for a host of reasons – an injury, an accident, a neurological change, or post-operative care – and the therapists address them all. The clinic does not have rows of expensive equipment, but Dr. Beverly Newman, a volunteer who heads up the PT department, is skilled at “hands-on intervention,” which she adds, “has been very, very successful at San José.” She teaches patients what to do at home, using the same skills employed in bigger facilities, just delivering them in a different environment.²²

Working with uninsured patients, Newman can devise a treatment plan that suits their schedules without an insurance company dictating terms. For example, rather

than being required to see a patient three times a week for four weeks, she can see a person once a month for six months if they choose, so the patient does not miss as many days of work.

The services offered can also be life changing. One of Newman's patients, Valentina Quiroga, was a young woman from Bolivia who had a good job until she developed multiple sclerosis and encephalitis that caused her to lose her motor functions. Challenged by the case's complexity, Newman first helped her sit upright, but she still could not stand, which is essential for circulation and weightbearing. One day, the clinic's volunteer coordinator reached out to Newman and described a piece of equipment someone wanted to donate. When Newman heard, she exclaimed, “Oh, my god, that's exactly what this young woman needs!” It was a Sara 3000 power lift device, in which the patient is secured and then stood upright. After five years of being unable to stand, Valentina was laughing, and her father was crying while watching her regain her footing. Newman beamed, saying, “She could stand, she could breathe better, her bones are better, and she was finally making a little bit of better progress.” Eventually, the family returned to Bolivia and took the frame with them.

While this type of case might not pass through the clinic every day, it is indicative of the care team members provide. As Newman concluded, “It is an environment that nurtures good dealings and a willingness to help.”²³

For a century, the San José Clinic has dedicated its time and resources to continuously seek out partnerships and advancements that expand its services and better serve its patients. The few memories highlighted here show the personal impact the clinic has had and exemplify the thousands of lives and hearts the clinic has touched.

When His Eminence Daniel Cardinal DiNardo first joined the Archdiocese of Galveston-Houston in 2004, he visited San José Clinic, which was now under his charge. “It's been a genuine, beautiful part of the Archdiocese,” he affirmed, “[providing] effective, good care for those who are uninsured or under-insured and truly need the assistance.” *Houston Chronicle* reporter Bonnie Britt once referred to the dentists who volunteered at the clinic as “San José Saints,” but it seems appropriate to extend that title to all the providers who work to secure the wellbeing of everyone arriving at the clinic for care.²⁴ ○

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