



The UH Tilman J. Fertitta Family College of Medicine: *For the City*

The Tilman J. Fertitta Family College of Medicine stands out as a beacon for the city it serves.

All photos courtesy of the Tilman J. Fertitta Family College of Medicine unless otherwise noted.

*By Max Hosaka
with Grace Conroy*

Nestled just beyond downtown Houston sits “the largest medical city in the world” – the Texas Medical Center (TMC).¹ Yet, despite Texans and Houstonians’ proximity to the world’s leading site for innovation in medical technology and practice, Texas ranks forty-seventh out of the fifty states in primary care physicians per capita and has the highest rate of uninsured residents.² Seeing this disparity, University of Houston (UH) president, Renu Khator, announced in 2014 that the university sought to establish a new College of Medicine – the region’s first in fifty years – to serve the local community and address the state’s shortage of primary care physicians.³ The College of Medicine would tackle Texas’s health disparities by educating its medical students about the importance of primary care physicians in underserved urban and rural communities.

From that moment on, the college’s development progressed quickly. In November 2017, the UH Board of Regents voted unanimously to create the College of Medicine. Two years later, in May 2019, Governor Greg Abbott signed HB 826 into law, approving funding for the college. The following February, the Liaison Committee on Medical Education, which grants medical schools the authority to issue doctor of medicine (M.D.) degrees, conferred preliminary accreditation.⁴ These efforts culminated in two seminal events: the welcoming of the college’s inaugural class

in July of 2020 and its renaming as the Tilman J. Fertitta Family College of Medicine in May of 2022.

The Texas Medical Center Welcomes a New Member

The University of Houston’s College of Medicine became a member institution of the Texas Medical Center in 2021, joining the renowned medical community as its sixty-third member.⁵ Founding and current dean, Dr. Stephen Spann, who serves as the liaison between the college and TMC, indicated that the UH College of Medicine was “elated to join the Texas Medical Center as a member institution and look[ed] forward to engaging with colleagues at other institutions to advance clinical issues and best practices and further joint research endeavors.”⁶

The Texas Medical Center has a storied history. The first facility, Hermann Hospital, opened in 1925 to fulfill the final wishes of oil and real estate investor George Hermann, but he had no plans for the larger complex to come. In 1936, Monroe Dunaway “M.D.” Anderson, who made his fortune in the cotton mercantile business, created the M.D. Anderson Foundation to leave a positive impact on Houston into the future. The foundation sought to establish and support hospitals in Houston and to promote “health, science, education and advancement and diffusion of knowledge and understanding

among people.”⁷ Although Anderson passed away in 1939, the foundation embarked on plans to create what local doctor Ernst Bertner envisioned as a “City of Medicine.” The foundation’s trustees acquired the land between Hermann Hospital and Holcombe Boulevard and funded the creation of the M.D. Anderson Hospital for Cancer Research with Bertner at the helm, marking the beginning of the Texas Medical Center in 1941. Soon after, Baylor University Medical School (now Baylor College of Medicine) and other educational institutions and hospitals joined TMC.⁸

UH became involved with medical education in the post-World War II era when it created professional schools in response to the demand of returning veterans enrolling in classes under the G.I. Bill, which provided tuition, housing, and other benefits. The university’s first connection to TMC was the School of Practical Nursing (1948), and later the College of Nursing (1949), which collaborated with Hermann and Methodist Hospitals through the early 1950s. The university also established the College of Pharmacy in 1946 and the College of Optometry in 1952.⁹ While the College of Pharmacy became a member of TMC in 1980, the University of Houston itself did not officially join until 2009. The integration of UH into TMC occurred so that policy development, planning, education, and research could be congruent between UH and other TMC institutions to improve Houston’s health education infrastructure. This affiliation came full circle when TMC welcomed the Fertitta Family College of Medicine into the fold.

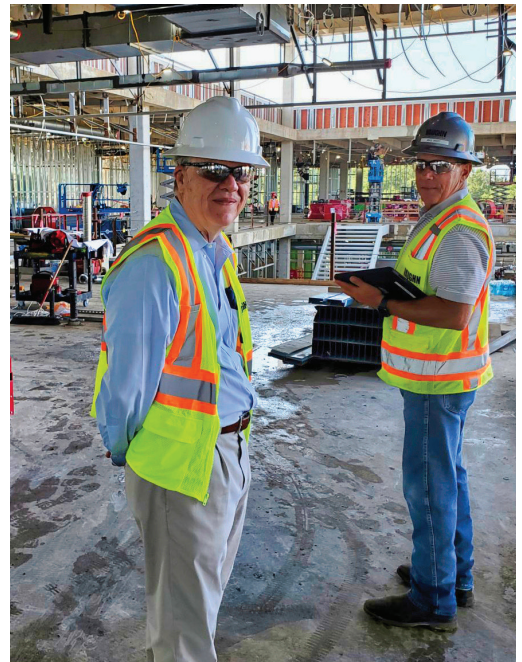
Community Outreach at Work

With new specialty fields, diagnostic technologies, and insurance protocols that did not exist when the medical center was founded, the delivery of medical care operates differently today than it did in the past. Patients rely



Governor Greg Abbott (seated), Lt. Governor Dan Patrick, Board of Regents Chair Tilman Fertitta, UH President Renu Khator, and Speaker of the House Dennis Bonnen celebrate the signing of HB826, acknowledging the creation of the UH College of Medicine in 2019.

Dean Stephen Spann, left, visits the UH College of Medicine construction site.



on primary care physicians (PCPs) to be the overseers of their care, but the number of PCPs is decreasing with more medical students seeking careers in cardiology, neurology, radiology, and other specialties. The Fertitta Family College of Medicine hopes to entice at least half of each graduating class to serve as primary care physicians.¹⁰ When the college received its preliminary accreditation, President Khator promised that the college’s faculty and students would “work tirelessly in clinics across the city, to advance health care delivery.” She noted that “by training the next generation of compassionate physicians who understand how to provide quality health care at a reasonable cost, [UH is expanding their] capabilities to serve the people and neighborhoods too often left behind.”¹¹

Improved healthcare in underserved communities is a chief concern of the Fertitta Family College of Medicine. It does not simply talk about community outreach, it acts on its convictions and hosts many programs and events in the name of community health, often collaborating with other UH departments or outside institutions. One such program is the Household-Centered Care Program that is a joint effort between the UH College of Medicine, College of Nursing, Graduate School of Social Work, and community health workers. Members of the program work directly with residents of the Third Ward, the predominately African American neighborhood that surrounds UH, and the East End, a Hispanic-majority area adjacent to the school.¹²

The Household-Centered Care Program seeks to improve health outcomes by collaborating directly with the community and establishing trust between community members and the medical providers. “Our hope is that as the community accepts us as people who can help them address their social needs, that what we do with the community creates a trustful relationship between us, and that the UH College of Medicine and our affiliated schools become resources for the



UH began its first nursing program in 1948 in cooperation with hospitals at the Texas Medical Center before creating the College of Nursing a year later.

The UH College of Pharmacy began offering classes in 1948 and, in 1980, became the first UH entity admitted as a member institution of the Texas Medical Center.

Photos courtesy of *The Houstonian*, 1948, Digital Collections, University of Houston Libraries.



communities to address what they need, not what [we] decide they need,” explained Dr. Claudine Johnson, the Household-Centered Care Program’s academic director.¹³ Cases such as the Tuskegee Study of Untreated Syphilis in the Negro Male (1932-1972), during which 400 African American men were left untreated even after a treatment became available, and the unauthorized harvesting of cancer cells (later named HeLa cells) for research and profit, from an African American woman, Henrietta Lacks, have left a stain of mistrust of the medical establishment among African Americans and other people of color.¹⁴

This mistrust has sewn itself into the fabric of many underserved communities, which plays a role in inferior health outcomes found in neighborhoods such as the Third Ward and East End, for example. The Household-Centered Care program aims to mend the damage by having interprofessional teams from UH connect with community members to provide health and social services. The diversity of the College of Medicine student body is especially important in this regard. Community health worker Joshua Lopez-Barrios

pointed out, “We have a lot of families that have a lot of barriers, they don’t have information because they don’t speak English, and it’s hard.”¹⁵ Something as simple as a provider who speaks Spanish can make a Spanish-speaking patient more at ease and help alleviate obstacles.

Many of the choices made by educational and medical institutions offer insight into their goals and priorities. For example, faculty member Dr. Marino Bruce was drawn to the burgeoning UH College of Medicine due, in part, to the rallying cry, “for the city!” After being at other universities, he found that the University of Houston lived up to the slogan, and its efforts truly were “for the city.” This reflected his own beliefs about delivering medical care to community members who struggle to access quality care.¹⁶ At the same time, Bruce stressed how important it is for students to have excellent research and statistical skills, which are vital in the medical field. A physician must be able to scrutinize medical research and recognize patterns in ailments to best diagnose and treat patients.

As the associate dean of research, Dr. Bruce addresses those priorities and helps shape the college going forward. Having served in many interdisciplinary positions, he has experience in social justice, and his current research focuses on the disproportionate prevalence of chronic kidney disease in younger African American men who experience onset on average at age thirty-five, about twenty years younger than white men. Dr. Bruce identified correlations between hypertension and diabetes with low socioeconomic status as a possible cause. This type of research reflects the College of Medicine’s commitment to eliminating health disparities.¹⁷

The Fertitta Family College of Medicine also conducts Community Working Groups for the Third Ward and East End that offer monthly panels comprised of community-based organizations, healthcare and social service providers, churches, and other community members. The meetings aim to identify obstacles to healthy living, formulate solutions, and, if possible, act on them. For example, the Third



The Household-Centered Care Program strives to create trust and communication between the medical students and the community members they serve to improve their overall health.

Ward group identified food insecurity as a major health issue. To address this, the group collaborated with Riverside United Methodist Church in the creation and upkeep of a community garden open to Third Ward residents. Both the Third Ward and East End Working Groups have spread the word about food drives, community enrichment events, and COVID-19 vaccine drives along with encouraging residents to take part in health research.¹⁸

Both neighborhood working groups identified COVID-19 vaccine hesitancy as one of the major concerns facing residents. The East End group saw that “misinformation [was] rampant” and that a “recommendation from a loved one is a strong influencer.” Thus, it was suggested that they work with *abuelas*, or grandmothers, in the Latino community. By educating the family matriarch, whose opinion is valued, they hope the women will be able to persuade their family members to get vaccinated. Direct collaboration and discourse between the College of Medicine and the community allow for creative, culturally driven solutions to improve community health outcomes.¹⁹

Dr. Marino Bruce, Ph.D., M.S.R.C., M.Div. is the associate dean for research at the Fertitta Family College of Medicine who seeks to provide innovative medical care to underserved communities.



The Fertitta Family College of Medicine intends to establish and keep a tradition of homegrown physicians. Situated in the block between UH and Texas Southern University, a historically Black university, is Third Ward’s Jack Yates High School. Over the summer of 2022, the College of Medicine and other UH departments invited Yates students to participate in the STEM Research Inquiry Summer Enrichment program, or STEM RISE. This program gives students insight into UH and the College of Medicine as well as support, including mentorship from the medical students who offer hands-on assistance to the high schoolers conducting lab work and research. Hopefully, STEM RISE will recruit the Yates students to UH and eventually the College of Medicine, yielding more physicians suited to serve Greater Houston. STEM RISE exemplifies the college’s commitment to its community by inspiring the next generation of medical students and creating a cycle of community improvement.²⁰

The College of Medicine also supports future generations of medical providers by ensuring the student body welcomes



Members of the inaugural class of UH College of Medicine recite their vows, written by the class itself, to honor the practice of medicine and their journey forward at the college.

those of various backgrounds, ethnicities, and identities. A member of the 2021 incoming class, Heavenly Webb described her peers, saying, “Our class is the epitome of what I feel diversity is supposed to look like.” She added, the experience is like “walking into a room where a whole bunch of people who look differently, speak differently, and eat different foods are working together.”²¹ The relationship between these individuals fosters “respect, cultural competence, and awareness” that is necessary in a city as diverse as Houston.²² Heavenly touched on why it is important to have doctors of all races when she recalled a patient saying, “My doctor looks like me.” Heavenly pointed out that when patients feel that connection, it “fosters community trust and builds new leaders,” in part because the patients can see themselves in those doctors.²³

Heavenly further stressed the importance of patients having primary care physicians who come from the patients’ communities so that the doctors understand and relate to their patients’ backgrounds. Dr. Portia Davis, disease state management and clinical pharmacist at the San José Clinic which services primarily low-income patients and collaborates with the college, explained, “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.”²⁴ The diversity and presence of students who understand food insecurity, as well as the financial struggles of low-income patients improves the care provided by the overall cohort of doctors at the College of Medicine while they are in the program and in their future careers.

A common experience for students at some universities are classes designed to weed out “unworthy” students. Medical student Maya Fontenot, a member of the inaugural class, recalled that “it felt like all of the faculty was personally invested in our success and that is such a nice feeling.”



Heavenly Webb, shown performing a head exam, is a member of the 2025 class. She pointed out that a plus at UH College of Medicine is that the student cohorts include people from lower socioeconomic backgrounds whose compassion shines through.

Establishing a positive connection between faculty and students leads to happier and more capable learners. Maya also appreciated the College of Medicine’s Longitudinal Primary Care (LPC), or clinicals, which begin in the students’ first year and continue for the duration of their time at the college. The UH LPCs integrate students into the clinical setting immediately. Throughout the four-year curriculum, a specified doctor at one of the clinics collaborating with the College of Medicine supervises each student. This fosters a deep connection with the clinic’s patients and their communities while providing the students with a long-term mentoring experience that will prove useful in their practice after graduation.²⁵

The Fertitta Family College of Medicine is unique in its practice of LPCs, as most medical schools begin clinical experience in the students’ third year of medical school.²⁶ Maya explained why this is important, saying, “None of us are good at seeing patients at first.” By starting clinicals earlier, “We’ve got those beginning jitters out [of the way,] and we can sit down and have a normal conversation with a patient.”²⁷ Exposing students to provider-patient interactions as early as possible better prepares new doctors to interact directly with the patients and, by extension, to the communities the physicians serve.

As with the rest of the world in 2020, the inaugural class members saw their medical school experience disrupted when the COVID-19 pandemic emerged. The College of Medicine stood unfaltering during this challenge, learned from it, and remained true to its mission—a promising sign for the future. The college operated out of Health 2, a building shared with the College of Pharmacy in the Bio-Medical District at the University of Houston main campus, until the summer of 2022, when the new College of Medicine building was dedicated. Located just south of the previous location

and separated from the main campus by Brays Bayou, the college is next to the communities it serves.

In 2022, the college became the Tilman J. Fertitta Family College of Medicine when the family generously donated \$50 million toward its mission and growth.²⁸ Tilman Fertitta acknowledged the passion and dreams his family has for the college, by declaring his hope that it will “be a game-changer for the health and well-being of Texans by improving access to quality health care, advancing medical knowledge, and improving patient care through health and health care research.”²⁹ By the turn of the next decade, the Tilman J. Fertitta Family College of Medicine hopes to be nationally recognized for graduating physicians who choose to continue as primary care providers for the underserved, educating physicians who are underrepresented minorities, and contributing to measurable improvements in underserved health communities.³⁰ **HH**



A member of the inaugural class, Maya Fontenot meets with Dr. Steven Starks. Fontenot comes from a Native American background and found the College of Medicine was willing to do the “hard work ... it takes to practice diversity, cultural competency, and socially responsible medicine,” enabling her to honor Western medicine and her cultural upbringing.

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