Leadership for Healthy Houston Communities
2017 Grant Report
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Background:

The “Leadership for Healthy Houston Communities” project, funded by the Doerr Institute for New Leaders (Doerr) and the Humanities Research Center (HRC), was a leadership development program for Houston community wellness grounded in first-person medical patient and practitioner wisdom. The project ran from January to September 2017, in three staged modules:

1. A master class, “Medical Leadership” HURC 306, run out of the HRC through the pre-existing medical humanities initiative in the Spring semester of 2017,
2. A concurrent guest-speaker workshop targeted to the Rice and Texas Medical Center (TMC) communities, and
3. A competitive research incubator run over the summer, that payed stipends for three undergraduate fellows to work at, learn from, and contribute to the leadership cultures in Houston healthcare institutions.

The HRC and Doerr jointly funded the project, to pay for speaker honoraria and to provide stipends for the undergraduate summer research fellows. The goal was to develop future health leaders for the reshaping of healthcare and health policy from bottom to top.

Current Status of Project:

The first two modules, completed in the Spring, served as excellent awareness-raising and recruiting platforms for the core of the project, the summer leadership incubator.

We funded three research fellows and placed all of them in different departments at Baylor College of Medicine, where they explored the topic of leadership from the following perspectives:

- **Sarah Lasater**, who explored the topic of “horizontal leadership” in her work with a research team headed by Jennifer Christner, Dean of the Medical School. Sarah worked directly with Dean Christner as they designed a community outreach study as the beginning stages of redesigning the curriculum at Baylor.
- **Shaian Mohammadian**, who explored the hospital relationship between “suits” and “coats” in his work with Robert Trieu, Director of Clinical Affairs. Shaian’s day-to-day work for Mr. Trieu gave him an insight into hospital administration, and he conducted several interviews with physician leaders to round out his experience.
- **Augusto De Las Casas**, who explored the role of medical interpreters in hospital settings, and their opportunities for leadership under the mentorship of Ricardo Nuila, a bilingual doctor of internal medicine and a published literary author.
These students’ work received very positive reviews from their mentors, and their final research reports can be read on the new student projects site built for this purpose: http://hrc.rice.edu/practica/student-projects

Indeed, two of these students stayed on to continue their research at Baylor this Fall semester. Currently, **Sarah Lasater is working with Dean Christner’s team to conduct an extended survey of the community** to determine what the future of medical education should look like at Baylor. **Augusto De Las Casas designed his own experimental study**, and has just received Baylor’s IRB approval to conduct the study under the mentorship of Dr. Nuila and two other professors who mentored him through the IRB process: Dr. Larry Laufman (Assistant Professor of General Medicine) and Dr. David Hyman (Professor and Chief of General Medicine). **We expect both students to be published in medical journals as undergraduates as a result of this work;** we are hopeful that Augusto’s study will be expanded on and garner external grant money in the future. Sarah and Augusto are receiving credit for their continued research work.

**Use of Funds**

Overall, the HRC pledged $7,000 to bring in experts for the speaker series; we spent $7,000 from this fund. The Doerr Institute pledged $12,207 to fund the summer fellows’ research and events and web services to support it; we spent $9,425.71 from this fund, and will be returning the balance of $2,781.29. The funds were used in compliance with Rice University policies and procedures. Our expenses are outlined below:

1. Support from Doerr:
   - **Student Summer Research Stipends:**
     - $9,000 budgeted (3 students at $15/hour for 200 hours)
       - $8,092.50 spent
       - $907.50 remaining
     - $207 for associated fringe
       - $134.12 spent
       - $72.88 remaining
   - **Student Local Travel and Research Budget:**
     - $1,000 budgeted
       - $157.88 spent (On 2 monographs specific to the students’ research projects)
       - $842.12 remaining
   - **Symposium Space, Amenities, and Materials:**
     - $1,000 budgeted
       - $222.80 spent
       - $777.20 remaining
   - **Server Space and Web Development:**
     - $1,000 budgeted
       - $818.41 spent
       - $181.59 remaining
   - **Total remaining balance: $2,959.74**
2. Support from the HRC:
   - Invited speakers:
     - $7,000 budgeted
     - $7,000 spent on 5 guest speakers
   - Total remaining balance: $0

What We Learned

In the course of conducting this project, we learned that the literature on medical leadership is indeed reflective of a profound need in the medical professions for a values-oriented reexamination of the social role of medical institutions in our changing society. In the research projects put forward by our fellows, we found physicians, other medical workers, and community members searching for answers to difficult questions raised by changing economic conditions, reorientations towards patient-centered care, and the medical profession’s own critical self-examinations of its goals and methods. In this context, the theme of leadership served as a useful proxy for these different stakeholders to express and question their roles, values, and expectations, and to listen to those of others.

What We Would Do Differently

The pace of working with large bureaucracies, especially those with rigorous review procedures, was slower than anticipated. Augusto, for instance, was unable to receive his badge to work at Baylor for some time. The result was felicitous; we pushed him deeper into research and writing on the topics of leadership in medicine and medical interpretation, and the product was an undergraduate-designed study worthy of a medical school. Similarly, the IRB approval process for both Sarah’s team and Augusto’s project took longer than expected. In the future, we would design these programs with a longer timeline and structure them accordingly, with longer reading lists and activities of the sort that we assigned along the way, as needed for these projects. We would also, especially with a larger cohort, work with less-institutionalized community health organizations with more informal credentialing procedures and potentially more flexibility for fellows’ contributions.

Roadmap for Implementation by Others

From our perspective, scholarship is central to university engagement with community leaders in programs of the sort we conducted this year, as the core value we can offer to these partners. Our project therefore began with a course on medical leadership as a means of exploring what “leadership” meant in the domain of medicine. The critical and constructive perspectives on the topic that emerged from the course directly influenced the Summer fellows’ research agendas and put them in a position to contribute substantively and in an ongoing way to the (research) goals of their mentors.
At the same time, community engagement and experiential learning demands an intellectual openness that allows scholars to identify tensions between their knowledge and the daily practices of the groups they become embedded with. The HRC has been experimenting with experiential learning in its Public Humanities Practica for two years and this project represents a continuation of that mission. If scholarship can indeed contribute to positive community change, then channels should be established in any such project for the scholarship itself to be changed in the encounter, such as through the cooperative evolution of syllabi.