

Interviewee: Gurnell, Kathy Scott

Interview Date: April 6, 2009

**UNIVERSITY OF HOUSTON
ORAL HISTORY OF HOUSTON PROJECT**

Interview with: Dr. Kathy Scott-Gurnell

Interviewed by: Lauran-Kerr Heraly

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Transcribed by: Suzanne Mascola

LKH: Today is Monday, April 6, 2009, and this is an interview with Dr. Kathy ScottGurnell.

Could you spell your name for the tape?

KSG: KATHY SCOTT-GURNELL.

LKH: Could you talk first about when and where you were born?

KSG: Right here in Houston. Born in Houston, Texas.

LKH: Native Houstonian.

KSG: Yes. Rare form.

LKH: My grandmother is a native Houstonian. She is the only one in our family. So, why did you decide to stay in Houston with your practice?

KSG: Well, I guess I really never went anywhere else much. I went to Austin for college and I went to Galveston for medical school, so I have always stayed in Houston and lived here. I never had a thought to go anywhere else.

LKH: So, you went to the University of Texas Medical Branch?

KSG: Correct.

LKH: Could you talk about your experience there?

KSG: It was great. I had a whole host of friends. At the time, UTMB probably was admitting more minorities than the others.

LKH: What year did you start?

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KSG: I did it from 1986 to 1990. So, we had a good little group. There were about 25 of us there. We were all pretty close. It was a good experience. Great memories.

LKH: Did you have supportive faculty?

KSG: I did. At that time, we used to have an Office of Minority Affairs. I don't think they have that anymore but we did then and that was one of the things that attracted me there. They had that also at UT San Antonio. I interviewed there but they didn't have it at UT Houston. And so, that was a source of support. And I guess just the network. The seniors took care of the juniors, took care of the sophomores, so there was that network where everybody sort of took care of everybody.

LKH: _____. My sister actually went to nursing school there. She had a really good experience. Tough course work though.

KSG: Right.

LKH: Now, what other schools did you apply to?

KSG: I applied to the UT schools. All the UT schools. I think that is all. I was a UT girl.

LKH: After you finished medical school, where did you do your residency?

KSG: Here at UT Houston.

LKH: What was that like? Was that as good of an experience as medical school?

KSG: When you say that, I guess I need to know the preference. I need to think about what we are looking at. With regards to being black? Where are we coming from?

LKH: Was it enjoyable? Was it what you expected?

KSG: I have had stories everywhere I have gone about being black and stepping into it so if you wanted to go there, I could give you a story for every place I have been. But

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UT Houston, one of the things that stands out here is a group of us -- myself, another female, a male, and a Hispanic girl, we wrote some papers about experiencing medicine from our perspective. Mine was called "Survival of the Fittest." And we actually went across the nation presenting that at that time. And I think some of the struggles was the feeling of no matter how much you give, no matter how good you try to be, you never could be good enough. To be honest with you, I cannot think of any specific situations. I do remember one time, I was presenting I think at grand rounds, rearing African American children. That was the topic. And I can remember somebody in the audience asking why would you do it any different for an African American? And, of course, I got an opportunity to explain because I was the presenter. I can remember sometimes sitting in grand rounds. I remember specifically one time we had a presenter who presented some data that was biased, very biased, and I remember challenging that. They had gone to inner-city schools and interviewed students to find out about their sexuality. So, they did it here in Houston and they did it in LA, and one other major city. And then, from their results, they talked about how the blacks were having sex more often or more earlier than the whites and blah, blah. And I was like, well, wait a minute -- how many whites did you find in the inner-city of Houston and LA to really get those numbers? So, little things like that. I have had the opportunity to see change, too. I can remember residents who had conflicts with certain attendings, for example.

LKH: Other African American residents?

KSG: African American. I watched it happen as an African American resident and it kind of destroyed the resident. And then, with the same person, it happened and I was an attending. It happened to a resident and I was an attending and it just so happened that this person came to me and kind of confided in me about what happened. I made a stink about it. I

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kind of . . . sometimes when things like that happen, you go, you talk, your supervisor talks to you and sends you back on your way. Well, this time, we did an alternate path because I sent the complaint to the boss and to the Affirmative Action office. So, that person had to end up going through some cultural sensitivity classes by the University and also, my boss made them counsel with me. And so, years have passed and I have seen that person transform and change. That was really good to see. Just to see that, O.K., some progress here. Something different.

LKH: Where did you do your internship?

KSG: Here. But I did my internship in pediatrics so I was in pedi in Hermann and LBJ and those places.

LKH: So, why did you choose psychiatry? What path led you to there?

KSG: Interesting. I always thought I was going to be a pediatrician growing up. That was what I was going to be. And then, when I got to medical school, in my third year, you know everybody rotates through pediatrics. And the only part of pediatrics I liked was pediatric surgery. I really did not want to be a surgeon so that kind of put a question mark in my mind. Do I really want to do this? So then, I did what they call externships where you follow people around. Some of them are still in practice now . . . to see if I enjoyed and I did not. I even went to San Antonio, worked under a GI specialist and still did not like it. Then, I did my internship and I still did not like it. But, by that time though, I kind of figured out it was not going to be for me. What made me gravitate to psychiatry . . . I really loved every rotation I went through. My husband always said, "Psychiatry was the last one, that is why you chose it." But after I went through it, I sort of felt like, wow . . . now this is not what psychiatry is like but this is what I thought as a medical student . . . I thought, wow, I can get paid to be a best friend almost. Not quite. But that was one of the things. And then, I do like people, I like talking to people, helping people. It was not

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something that I always desired to be. I always thought I would never be a psychiatrist but I really enjoyed it. I enjoyed child psychiatry. I am a child psychiatrist. I enjoyed child a lot. I thought I would suffer through adult and then finally get to child but I even enjoyed adult. I almost changed one more time because I had to do neurology in my internship. They were really sort of flirting with me to change to neurology and I really liked neurology a lot. But I told myself let me go do some psychiatry, see if I like it, if I don't, I will come back. I like subspecialties. I like having my own exam. Psychiatry has mental status exams. Neurology has a neurological exam. So, I wanted to be the specialist. I did not want to be the type of doctor who you go in, you see, and then you have to call this person to help, call this person to help. So, it fit in that kind of subspecialty area.

LKH: So, could you talk a little bit about your background, your family growing up? You said you always wanted to be a doctor.

KSG: My mother was a nurse.

LKH: Your mother was a nurse?

KSG: Yes, my mother was a nurse and I think she started calling me her "little doctor" when I was 2 or something. So, I always heard it. I was always in the hospitals. I grew up in the hospitals. I can remember, I guess when I got to be about 16, she got me a job in the hospitals. I mean, I was always around it. I grew up here in Houston in a . . . in my eyes back then, I would have called it a middle class, predominantly black neighborhood. I can remember when I was very young that whites were there but they all moved out by the time I was older.

LKH: What neighborhood?

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KSG: This neighborhood is actually not a very good neighborhood right now but it is right by LBJ. It is called Kashmir Gardens. Kashmir Gardens is the name of the area. It is right by LBJ. I mean, I probably could walk to LBJ from where I grew up. Very close-knit neighbors. Everybody knew everybody. It was that village mentality. I mean, if a neighbor saw you doing wrong, you might get it twice kind of thing. So, same neighbors all my life. They are all still there, you know, the parents are still there. All the kids have moved out. I went to Kashmir Elementary, Francis Scott Key Middle School and Kashmir Senior High.

LKH: And then, you said you went to UT for your undergrad?

KSG: Correct.

LKH: In Austin?

KSG: Correct.

LKH: So, other than the inspiration of your mother, did anything else lead to your desire to go into medicine?

KSG: That is a good question. I probably have not thought about that in a long time. I mean, my mother also exposed me to a lot of doctors, so I knew . . . I never worked for any of them but she would have me talk to them. So, I talked to some of the local pediatricians and family docs in the area. They kind of counseled me some through trying to apply and that kind of thing. Make sure you major in this - that kind of stuff. I had that kind of guidance, I guess.

LKH: So, that was even in high school?

KSG: That is pretty much all my life.

LKH: That is unusual.

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KSG: My mother was very good friends with quite a few doctors, so she exposed me to all that.

LKH: Was there a certain aspect of medicine that attracted you as a child? You said you were interested in pediatrics.

KSG: I love children so it was always pediatrics for me.

LKH: Helping children?

KSG: Yes. I love children. It was always pediatrics until I got to medical school.

LKH: Do you have children?

KSG: I do.

LKH: Do you still like children?

KSG: I do.

LKH: How many kids do you have?

KSG: I have 3 children that I birthed and one that I sort of adopted. Not quite adopted.

LKH: How old are they?

KSG: The one that I brought in, he came to live with me when he was 15. He is now 25. I have a 20-year-old son, a 17-year-old daughter, and a soon-to-be-15, he's 14 now, year-old son.

LKH: What was it like trying to raise children and have a career in medicine?

KSG: Well, I was one of those kind of backwards people. I had my children while I was in school in training. Most people wait. So, my oldest son . . . well, the one who came to live with me, I was already a doctor when he came to live with me, but my 20-year-old, I had him during my third year of medical school. Then, I had my daughter during my second year of residency and the last child I had during my first year of child fellowship. So, by the time I started practice, they were already in school. And so, that was good.

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LKH: During that time, did you have any professors or support that sort of helped you with work/life balance? Was that something that was encouraged while you were in school?

KSG: I think I overdid it but I had a good friend . . . I pushed them all over the curb . . . but I had another friend who was very similar. Sherry Gaines. She is in Conroe now. She is a white girl, but we both would be pregnant at the same time all the time! So, we kind of did that together. I had a lot of support. When I was in medical school, I went to medical school in Galveston and I had aunts in Texas City/Lamarque area, and they really took care of my family, took care of . . . if I needed to study, they would come get my son, they would cook for us, clean for us. They just really supported me a lot while I was in medical school. And then when I came here, I had my mom here, so a lot of support there, too. Both of my parents are here so they helped a lot with my kids when they were young.

LKH: How old were you when you got married?

KSG: 26.

LKH: So, you were in medical school at the time?

KSG: Correct. I got married after my freshman year.

LKH: Lots of changes all the way through school then.

KSG: Yes.

LKH: Lots to balance all of them. Could you talk a little bit about your affiliation with the Houston Medical Forum? When did you join?

KSG: I have not been very good. I probably first joined maybe in 1995 or 1996 or something like that, and I try to support . . . they have an annual scholarship fund brunch and I do try to support that. I am not very active in the Forum.

LKH: Why did you first join?

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KSG: The networking, the support - a lot of support, and I do get a support from a lot of them still, and I got that all through my training as well. I am very good friends with a lot of the people in the Forum. I slowed down once my children got a little older and required a lot of time, and that kind of pulled me away from everything. I can remember when I was in high school. My mother was very good friends with a lot of the docs in the Forum.

LKH: _____.

KSG: Exactly.

LKH: So, you were exposed to it at an early age then?

KSG: Exactly.

LKH: What would you say is the biggest obstacle you faced along the way?

KSG: The one biggest?

LKH: A couple of the biggest.

KSG: I was always a very focused person. I went today to talk to a high school class and whenever I . . . for example, when I get with people from college, they remind me of how focused I was. I was always very focused, very serious about my studies. Obstacles. You know, I am sure there were a lot of obstacles but I think I was very determined, very persistent, and that is always the key. I mean, I grew up, like I said, in Kashmir Gardens, I mean, there was everything there. It wasn't as bad as nowadays. We didn't deal with gangs and that kind of stuff but, you know, there was certainly the share of kids who were getting into their little trouble here and there - smoking marijuana or whatever, things like that. I was always an athlete so I was busy. I stayed busy. Obstacles . . . there were people who thought that was a bit much for me to try to go to school that long. So, every once in a while, we would run into . . .

LKH: Do you mean friends?

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SG: Adults. Yes, they may be friends or neighbors or whatever that kind of thought, you know, you are going to drive yourself crazy with all that school. I mean, I actually had people say that.

LKH: So, it wasn't that they didn't believe in you, it was more that it just seemed like so much work.

KSG: It was so far of a reach. I think probably most of the parents on my . . . my mother was a nurse . . . I am thinking the people on our street, most of them probably were not educated as far as college education and that kind of thing. Had good jobs, worked for some good company - do you know what I mean? So, had a job and may have worked at that company 30, 40 years and retired from it. That might have been the mentality. My parents are older. They are 76 and 83.

Most of the people on that block, they are a little younger than my parents but not much. So, the mentality was that, you know, I guess if you went to college, you did enough already, or are you sure you want to

keep going kind of thing. That probably was a little bit of an obstacle. I don't deal with obstacles, I guess, I just plow through. I just kept going. I mean, if I had some failure, that is, try again, do it again. Just keep going.

LKH: Who were your role models besides your mom?

KSG: I think my pastor was a role model for me. He actually worked at my high school. They had this, it must have been a grant, now looking back. It must have been a grant. But his job was like kids who were truant from school, he would go to their house and see how they were doing, make sure they were all right. Just encouraged people. That is all he did at the school, walk around encouraging. But he would go to your house if you missed a day of school. If you had a fight, he might counsel with you. I had a fight one time. He counseled me.

LKH: What is his name?

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KSG: He is deceased now. His name was F.W. McIlveen. He was very well-educated. I think he had a doctoral degree probably in theology. Very, very intelligent man. So, he was one of my role models.

KH: What church was that?

KSG: First Ward Baptist. That is where I grew up and married and stuff. Other role models? I mean, once I got out of high school . . . I am sure I had one in high school. I used to love my teacher. I was good in math. I was offered engineering at A&M. That was real big when I came out of school. Mr. James, he was my calculus and all that kind of teacher. He actually was an engineer who retired and came and taught. He was really good at it. He was like a role model. As I got older, I think when I was in medical school, once I became a doctor, one of my role models was . . . I just blanked on her name. O.K., we will come back to that. I can see her face when you were talking to me. I can't pull her name out right now. It is O.K., we will come back.

LKH: In general, what contributions do you think African American physicians have made to the field of medicine?

KSG: Well, I mean, I would have to really do a lot of research and look at that.

LKH: Or perhaps a different way to phrase the question would be what contributions have other African American physicians made that maybe paved the way for you? As you went to medical school in 1986, correct? So, things were a lot different by then, than, say, the 1940s or 1950s.

KSG: Oh, yes. Ask me that question again. Rephrase that.

LKH: How have other black physicians maybe paved the way for physicians now? Maybe making it easier, possibly opening up doors.

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KSG: Well, I mean, I think probably one of the key ways is being hard-working. Some may have been a little bit more out spoken than others. I do think that still as a race, we do a lot of supporting of each other. Just like we have the APA, we have the BPA, the Black Psychiatrists of America and we have our conferences. We have the NMA, the National Medical Association. And we do a lot of nurturing through that, a lot of mentoring; whereas, I may not have anybody in research, for example, in child psychiatry here at UT but because I am a minority and we try to look out for each other, I might could go across the street from Baylor and get some mentoring from somebody there if I don't have it here. Or I might can call somebody, you know, in Maryland. Do you see what I am saying? So, a lot of networking like that. And now though, the medical field . . . like the NIH, now they are trying to offer more grants and try to get more minorities involved in those grants as well. It comes and goes in phases this diversity thing, you know, where it is really cool to be diverse and I think we are going into a phase now . . . it is interesting that we have Obama at this period in time but we are definitely going into another phase of looking at diversity again.

LKH: And do you feel that that is positive for the situation of medical schools now, for example?

KSG: It is very positive because when we lost Affirmative Action, we are at risk of losing admission spots again. And it is happening everywhere. Even UT right now is looking at their top 10 percent. That top 10 percent helps blacks. Not having it is going to hurt them. So, it is a critical period right now. I was very concerned when Affirmative Action closed because I said, well, it does at least get minorities in the door. It is not going to get you out. You have to study to get out but it gets you in the door.

LKH: It provides an initial opportunity.

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KSG: Exactly. And without it, you know, I find myself at meetings sometimes . . . I kind of pull it out and stop going, to be honest with you because I find myself fighting for an applicant . . . here is my disappointment: my disappointment was Affirmative Action was there for a while, forced us to take, let's say blacks. So, what I wished would have happened is that we would have done some studies to see, O.K., what are the criteria that let us know this is going to be a good medical student, a successful graduate? What should we look for so that when Affirmative Action is removed, we know exactly what to look for? Instead, what happened is when Affirmative Action was removed, it was like I don't know, we don't know, I don't know whether they are good or not. It went back to the guessing kind of thing. And that is very uncomfortable because it can easily get back to a point where they are not getting in. And the numbers are going down.

LKH: That is interesting. Well, at a point when, at least in the last 10 years or so, there were actually more African American women than African American men - just by a small margin, attending medical school. Do you see . . .

KSG: College, too.

LKH: Yes, college, too. Do you see that trend continuing?

KSG: Oh, definitely.

LKH: And why do you think that is?

KSG: Well, you know, I guess being a black male is not easy in America and I have never been a black male. I reared a few but . . . I want to hope that that whole mentality will change now.

Having an African American president does something for little kids, little boys. It used to be, part of my mental status exam is who is the president? And, you know, most kids . . . the average child, average intelligence . . . of course, now, everybody . . . they all know without a doubt. But

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there is just so much out there. There is so much out there to distract them from doing the right thing. I had to teach my boys and I think every African American parent has to do this eventually -- you have to sit down and tell them, you know, you are an intelligent child. My kids are bright. You are very intelligent. You are very handsome. You are tall, good-looking, but not everybody is going to see you like that. You know? They are athletes, too. My kids are like nerdy athletes. They don't look like nerds, they look like athletes but they are very nerdy.

LKH: They really like school and reading . . .

KSG: Oh, yes. Way smarter than I am. But you are talking about misunderstood, misread all the time. All the time. Some of that is because they are athletes and then some of it is because they are African Americans. So, it is still there, those little challenges. There is a guy, this black guy, his name is Chester Pearce, he has written a lot about racism and that whole trying to overcome different things. His writings . . . I guess he would be like, I don't know if you would call him a mentor but his writings were very helpful for me. And I had to watch myself . . . he wrote about something called fragmentation . . . because very often, what happens, and this can happen to anybody, but it happens a lot . . . this is what you will see - you will see a black person have a position and they lose it or they retire, they leave, and it takes 2 or 3 people to fill the spot because they were doing so much stuff. It happens all the time. And that is what he calls fragmentation.

LKH: Do you think that is true in your own experience?

KSG: Oh, yes. I have to watch it. Oh definitely.

LKH: So, you are constantly aware of how hard you have to work?

KSG: And you constantly add to your plate. You feel like I can do it, I can do it, and you add and you add. And what happens is you get mediocre because you are doing so much. You appear

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mediocre. And that is what he calls fragmentation. As a matter of fact, I am in a transition right now. I am going to, for the first time since 2000, I am going to come to the hospital and do nothing but see patients on the hospital unit and I have not done that since 2000. I have been doing this, this, this, all these different things.

LKH: All right. Well, that leads me to my final question. What achievements then do you feel like you have made in the field of medicine?

KSG: Of course, I have not achieved what I want to achieve just yet.

LKH: And what is that?

KSG: I want to write. I want to write. I wrote one book. I just have not . . . I patented it. Do you want to know the name of it?

LKH: Yes.

KSG: It is called Black, White or God. I wrote it some time ago and I just pulled it out and said I am going to redo it and see about resubmitting it again. But I also like research. I have always been involved with research and I want to do more writing, clinical research. I have done a couple of things but nothing . . . I have not done what I should do, what I should have done, and a lot of it is because I am doing too much. So, I am looking forward to this next year or so where I am going to slow down.

LKH: Maybe you will get some more time to yourself then.

KSG: I will get time to myself. As far as accomplishments, I feel very proud of my children, what I offered them. I feel like I have done a good job with them. My 20-year-old is in the Air Force Academy right now. He is doing very well. I think they all have very bright futures so I have done very well with them. I would like to think that I have served as a pretty good mentor for the residents that have come under me or whatever. I also have been . . . at times, my peers

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have come to me when they are having difficult times, so I think I have at least shown myself friendly or shown myself as somebody with maybe some bit of wisdom, that people seek me out to counsel with them or talk with them during difficult times. I have done a lot for the University with regards to helping them initiate programs, start new programs. A lot there. We launched an outreach program that is just flowing. That is in schools, where we go to schools. Somebody else is about to take over that. We opened an outpatient clinic for this hospital and I was one of the major role _____ the clinical director getting that going. And I guess my experience, because I used to have a private practice, my experience from private practice is the reason they asked me to do that. I was the consultant when they started this residential unit downstairs. I see those things as accomplishments. I am good at starting programs, getting them going, seeing what needs to be done - I am good at that. So, sitting down and being still, that I said I am going to do, which is still working but one job is going to be different for me and I am hoping it will keep me grounded or I hope I do not get bored.

LKH: Well, is there anything else you would like to add?

KSG: I think I want to just real quick go back for a second to the question you were asking about other docs and what they have done. I will say this: When I was a resident here, there was one doc, she just called me. She was an attendant. Her name is Sonja Rindle. Watching her be the only black in the department and handle herself and take care of business and she was a hard worker as well, that probably was motivational for me. And then, people like Dr. Ruiz, Pedro Ruiz, is like he is the acting chairman of our department right now but he has been around for a long time. He really tries to get people in academics, get you out there, get you presenting and get you out and about doing things, being involved. He is real good with mentoring minorities. And I think he was a great influence as well.

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LKH: O.K., well, thank you very much. This concludes my interview with Dr. Scott- Gurnell.

