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Interview with Stella Zahn

Interviewers: Andrea Vasquez

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Andrea Vasquez: This is Andrea Vasquez interviewing Stella Zahn on July 26th, I think, 2013. And we're going to talk about the City University and the City College School of...

Stella Zahn: The CUNY Biomed Program.

Andrea: The CUNY Biomedical Program, right, and it's inception and I would like to open up the discussion to maybe, just tell me your first recollections about the forming of the school, or your first participation at the school.

Stella: I was at Montefiore Hospital Department of Social Medicine and we were invited to participate in teaching in the summer before the program started. So it was a mix of interested students and undergraduates.

Andrea: What year would that have been, about?

Stella: I don't know, I'm terrible with years.

Andrea: We could look that up. [Circa 1973]

Stella: I invited Dean Gellhorn to come to my class to talk about biomed, what was the program was about, what was it like, what were the goals, what was it going do. And he gave a wonderful presentation to the students and then he asked me to come on board as the Director of Student Services. That was interesting because I was only an R.N. with a bachelor's degree and I didn't have a master's or a Ph.D. So I was hired on bin line...

Andrea: Bin?

Stella: The administration line. And under Dean Gellhorn, I worked as the Director of Student Services. The program started with about twenty-five, twenty-six students and then we rapidly expanded to about sixty students a year.

Andrea: What were the twenty-six students like?

Stella: Well, they were fascinating because the first time you get these kids there they are, seventeen, eighteen years old, they're eager to become doctors. The program was fascinating because it was a six-year B.S./M.D. program, and the way it worked was, the students started with human growth anatomy. They're first class in the medical school piece of it was human growth anatomy, so they were introduced to their cadaver. They were teams of four for each cadaver.

They modified the organic chemistry course so you just took enough organic to learn physiology and to learn biochemistry. You took just enough biochemistry so you could learn physiology. Dean Gellhorn felt that students needed to focus on what medicine was, not was science was, and the science classes. And the model, it wasn't a new model. The model was the same way the whole world trains doctors, in six years, everywhere else except in this country. And we had this dichotomy between wanting doctors to practice medicine to work in groups, and yet we focus on recruiting students who majored in sciences and were told look to the left of you, look to the right of you, one of you is not going to last in this course. So it kind of makes it difficult to select students.

We had a lot of candidates, applying. Trying to make sure that they could successfully complete the program with the first academic

requirements. Also for the stress because you're going to do two years of medical school integrated with four years of undergraduate work. And the deal was, after the first two years, they applied to the medical school of their choice and we had a deal with these medical schools. So they finished the four years with us and then two years with the medical school, so that got the M.D. for them from the medical school that they were accepted into.

The program got modified, we extended it to seven years because the rate of failure was so high. We didn't set up a tutorial program for students until much later and we should've done that sooner. And we didn't set up enough support systems for these students to succeed. It didn't help that they were commuting students and that would make it very hard. So some of the students, for example, would come from homes where the family just whispered because junior was studying, and others where the families were just not cooperative at all. The radios might be blasting, they'd be overcrowded. We did try a number of options, I had for example, students live here for the summer when they were studying for their boards. I had students living at my apartment, as a support process.

Andrea: And were these mostly students of color?

Stella: Yeah. Mainly students of color.

Andrea: Black and Puerto Rican kids mostly?

Stella: Yeah. Puerto Rican kids and African American kids.

Andrea: And men and women as well?

Stella: Yeah, the student that lived with me was a female student. And it worked sometimes, it didn't work at other times. The group that studied here one summer all passed their boards. They all did well. But after Dean Gellhorn left, there was another dean, and he wanted to reorganize the school along the same lines of traditional schools. I would've liked to make it into a four-year medical school, but it was unsuccessful at that.

Andrea: So what was the first dean like? What was he like and what was his goal and vision for the place?

Stella: His goal was to prepare primary doctors to come in and to practice medicine. His goal was to try and increase the number of minority students entering the medical field. He was an amazing man with a fantastic history. Everything he ever touched, turned to gold. He was the dean of the medical school in Pennsylvania. He was a cancer researcher at Columbia Presbyterian. He was involved in a special program called Bridge to Medicine which was recruiting high school kids to prepare them to enter the biomedical program or medicine. And the day before he died, he was on his way to Albany to plead for more money to get the programs going.

Andrea: Was this during the fiscal crisis? What happened to the school during the 70s fiscal crisis.

Stella: We were just out for about a week. I think we were only out for a week and then we all got back. The Biomed program was so separate from the rest of City College. We were an isolated program, so we were not involved with much of the faculty. There was some integration with the physics department and with the chemistry department because they were teaching those classes, but otherwise we tended to be our own little enclave.

Some of the novelties that we had was to start students in the summer program, we had them doing clinical work. Working with patients early in the game so they got to know what the issues around family would be. They learned to work with families that were desperately poor. They learned to work with families that needed much more than they could've. And some of them represented those families in the program. But a lot of those kids had a harder time. Again, I think not having a dorm, they have a dorm now, but I don't know how many of the biomed kids are involved in that.

When I started recruiting for the school, that was a whole other life for me. This other dean, Dean Micelis, wanted to restructure it, so I became Director of Recruitment, and started trying to increase the number of minority students in the school. I was lucky because I was a nurse I could go to any of the health fairs. I wouldn't mention Biomed

at those fairs, I would just give kids the background that they needed, the information that they needed to succeed if they wanted to be doctors, nurses, physical therapists, and so on.

A lot of them had no idea that they needed so much chemistry, or so much science, or so much math, on that. And some of the schools I went to didn't offer those courses and so some of those students simply transferred. Life got a lot simpler when the Bridge to Medicine program was established.

Andrea: What was that like?

Stella: There were two people in charge of those, there was one in Manhattan and one in the Bronx, and then there was one in Queens. And there they got high school seniors to spend their half-days, five days a week in the Bridge to Medicine program. We could get through the basics that they needed to get through the Regents exams, get through their chemistry exams, get through their math...

Andrea: In high school.

Stella: In high school, so that they would finish that. And the program still goes on, I think there's dean number three or four. It was interesting, we had a reunion after thirty years of the first three years and it was amazing seeing those young people become middle-aged, many of them unrecognizable. You're very different when you're forty-five.

But their love of the school, their feeling that the Biomedical program really helped launch their careers, that many of them would not be doctors today if it weren't for the Biomedical program, that they would not have gotten through, that they felt that there was a support system that got them through. Support systems can always be stronger, my thought was that we could always make something better. Let's do that rather than be satisfied with what would you change now. I think what I would do is I would still offer the six-year, seven-year option; if you want to do it in six, it's possible, if you want to do it in seven. I loved the original model, I'd think I'd like to see it go back to that, where the kids got their introduction to medicine the way the rest of the world does it so that we're not so, but that's the way it is.

Andrea: So it sounds like the goal was not just for them to become doctors, but who would they care for, and what their approach would be towards...

Stella: The approach was, the focus was on primary care. So we wanted to produce internists, family practice doctors, and OBGYN as a primary piece. We had too many surgeons, but we had kids who wanted to be surgeons, and they had to pay the program back, a lot of them are writing the checks on that. And psychiatry. That was the focus. I could be wrong about psychiatry...

Andrea : Was there ever a time when students organized themselves around any issue, or were there any student struggles the way there were in the other campuses...

Stella: Yeah. The students set up, a minority students set up...

[Tape cuts off.]

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