INSTITUTE OF CURRENT WORLD AFFAIRS

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A Prelude to Africa

Nairobi Hilton P.O. Box 30624 Nairobi, Kenya 18 January 1970

Dear Mr. Nolte:

The name of the game in Mound Bayou, Mississippi, is opportunity. That is, real opportunity which allows everyone and not just a privileged few to participate in the full range of community activities.

Upon reading the following passage written by Salvador de Madariaga I was immediately reminded of the Tufts-Delta Project:

He is free who knows how to keep in his own hands the power to decide at each step, the course of his life and who lives in a society which does not block the exercise of that power.

The Health Center, abandoning the traditional medical model, is slowly shaping an ideal-type society described by Mr. Madariaga. Self-help programs, community education, technical assistance, home management, food, as well as the stethoscope and thermometer are the implements being used in behalf of the target population, a community of 15,000 living in the Northern Delta Region of the State. The project has become a positive catalyst for thousands of impoverished people, black as well as white.

Operating with grant monies from the Office of Economic Opportunity, the project began functioning early in 1965, a period when comprehensive planning in many areas of health was given impetus by the federal government. In every sense of the word, the project is still in its infancy with its full share of growing pains. The Tufts Medical School has been guiding it through this difficult period under the leadership of Dr. Jack Geiger. Dr. Geiger along with John Hatch, Director of the Community Health Sector of

the Tufts-Delta Project, is recognized by the citizenry of the Delta as the generating force motivating the Delta poor for the first time to begin exploiting their environment.

While the actual program did not begin until 1967, much hard work has been accomplished during the past two years. "All these years of being on our own without a glimmer of interest from outside sources," reported Mrs. Robinson, a community worker, "made us extremely suspicious of the Tufts delegation who suddenly began frequenting our churches. It was only after they broke ground that we realized these were not the usual do-gooders who would do their thing and leave us to face the aftermath, an event which has not always been pleasant."

But the concrete and steel of the 24,000 square foot health center, which would serve as headquarters, was evidence enough that this group had serious intentions of becoming a bona fide part of the community.

The 110 mile journey to the project from Memphis, Tennessee was most uneventful, that is, with the exception of my unchanneled fantasy. I began to think about the many pioneers of the freedom movement, perhaps moving along this same route, who had been murdered. Although my trip to the project was one of self-enlightenment, I knew full well that those persons who violently opposed the newly inspired move toward total autonomy by the blacks in the Bayou region might not be aware that my mission was purely for self-enrichment.

After my long emotional journey, the sight of the Tufts-Delta Health Center, which was architecturally a radical departure from local designs, was a welcomed relief. A feeling shared by many others who had visited the project for the first time.

My first contact at the Health Center became a preview of what I would find in general throughout the Mound Bayou area. I was greeted at the door by a somewhat stocky, football guard-type dressed in a delivery man's uniform. This man, although extremely busy guiding people to their destinations, spent considerable time conversing with each person who meandered through the door. The pace, the concern, and the responsiveness gave the impression that for the moment, you were the most important person in his life. I believe if more bureaucratic services were to develop ombudsman-type persons such as this official, fewer potential clients would be so quickly turned off. Because this man talked their language and had great sensitivity to their needs, most of the center's patrons felt at ease in this strange setting.

Instead of sending me to my destination as I expected, the greeter had me conducted down a long corridor of desks to the door of Dr. Weeks, the Assistant Director of the project. After taking ample time to find out what I wanted to accomplish during my visit to the Bayou region, the doctor quickly directed me to Mr. John Hatch. He felt Mr. Hatch would be the best person to offer suggestions for an itinerary in light of my background and area of interest.

Dr. Weeks during our brief but informative encounter pointed out that their caseload is growing at a fantastic pace. Each new worker has made contact with at least ten new clients in the surrounding communities. So, as jobs increased, the center found itself faced with growing patient loads.

In response to a statement that the center reminded me of a quarterback directing its team toward the eventual goal of health, Dr. Weeks, in a jocular fashion, said it was more like being a cheerleader on the 50 yard line watching the traffic go by. It was only after traveling widely throughout the area seeing the destitution for myself that I came to appreciate the force of his remark.

In addition to the rapid growth of the caseload, out-migration of young people between the ages of 17 and 35 is another of the more pressing problems. Although the project has had some impact towards lessening the flow through the many training programs and job openings, the problem remains acute.

The population as a whole, in relation to most rural migration trends, shows a moderate movement toward the big city. Although individual family members make this move, the family is never wholly dissolved as a functioning unit. Frequent contact is maintained through all forms of communication as well as through regularly scheduled visitations. The officials of the Center report that the family and the church are by far the two most important institutions they could possibly have available to them throughout their project.

The constant ringing of the telephone and the long lineup of personnel at Dr. Weeks' door was enough of an indication to me that I should conclude our talk. After thanking him for his valuable time and extending best wishes for continued success. I moved on to see John Hatch. Mr. Hatch, the Community Health Director, has become a very important man to most of the population of Mound Bayou. To mention the name of this person with some degree of familiarity is to gain entrance. In every place I visited such as the church school, restaurants, community parties, and evening health council meetings, the conversation would almost invariably touch on the good fortune of the area to have the great man from Boston.

Mr. Hatch during our first visit asserted that one of the key supportive forces of the project lies in the natural unfrocked leadership emerging in the Mound Bayou community. The professionals were being utilized mainly to stimulate and interject concepts whereas the locals were mostly responsible for direct planning and implementation. Once the roles of each of these two groups became clear to the local people the project began to prosper. It was necessary for the people to be aware of and feel the importance of their contribution to the project as a whole.

At the close of our discussion, Mr. Hatch mentioned three components of the program which serve as the skeletal structure for operation: the cooperative farm, the environmental health unit, and the physical health team. In order to get a first hand view of the program, I was given a list of center personnel with whom I should make contact during my visit. Noteworthy, most of them turned out to be local people who had weathered the storm of the old days and who were now looked upon as the key preprofessionals in their areas of specialty.

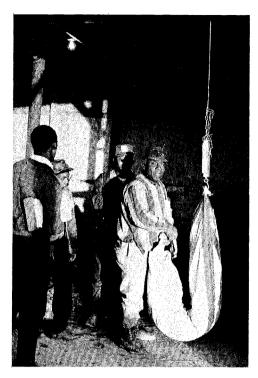
My first contact with the cooperative farm began at the center proper through conversation with a young, attractive housewife who had been among the list of local persons who had remained to help the project. As was the case with many others, her desire to leave had been based mainly on an unwillingness to continue to work on a plantation where achievement was measured in units of output and concern for the individual was cancelled out by the quest for profit.

Essentially, the cooperative farm belongs to the people. It serves to bridge the gap between employer and employee since every farm worker is both. Decisions affecting critical areas of the farm are made at open public meetings. Usually, much time is spent in lively discussion, concluding only with the attempt at reaching a consensus. Because of their general interest in farming and their familiarity with the different techniques involved, meetings are looked forward to and are well attended.

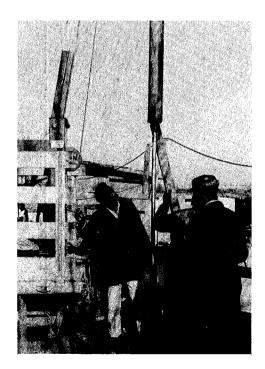
On the average, the farm employs 12 full-time workers. This includes 6 persons like the housewife who work in an

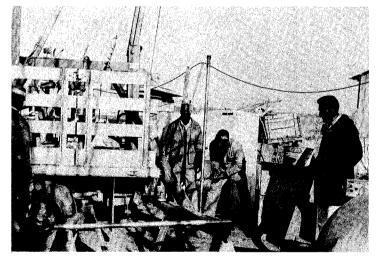


Washing turnip-greens.



Produce being weighed for market.





Lengthening the pipe for greater depth.

The replacement for the "man-killer"

administrative capacity and 6 others classified as field workers. The farm, ranging about 447 acres in size, engages up to 300 part-time workers when vegetables such as cucumbers ripen and have to be removed immediately. An informal communication system keeps everyone informed of the fluctuating manpower need — there is seldom a lack of help when work is available.

The main crops each year include: beans, cabbage, corn, tomatoes, watermelon, okra, squash, turnips, cucumbers, peas, cotton and greens.

In addition to earning an hourly wage, most of the workers received food products for their own consumption in amounts proportionate to the amount of time spent working. This practice becomes an incentive for workers to spend longer hours in the field.

Excess food from the farm is transported to a little township, Cleveland, where it is frozen and stored to feed members of the Coop during the winter months. Persons in the area with young children may also collect food-stuffs such as milk, cereals, beans and vegetables free of charge from a government sponsored food supplemental store. The monthly allotment of food received is based on the size of the family.

During my orientation on the farm, I was allowed to participate in some of its activities. Along with the manual activities, it was interesting to see cotton in its original state. My final activity before departing the farm entailed washing some turnip greens for market.

During my visit on the farm, I was quite pleased to find two obviously retarded people working in the fields, one with no speech. Because they were good workers, their handicap had become unimportant, and accordingly, they were accepted by the group. As the many workers gathered after a long and arduous day in the field, the teasing, the laughter, and general chatter gave the impression that this was a fulfilled group of people.

In response to a question about the future of the farm, I was informed by its director as he began weighing produce from the field that the people of the coop had ambitions of building houses for its membership. As a replacement, new homes would be erected, homes equipped with all the modern conveniences and all the comforts now enjoyed by the privileged few. The houses being occupied now would be ceremoniously vacated.

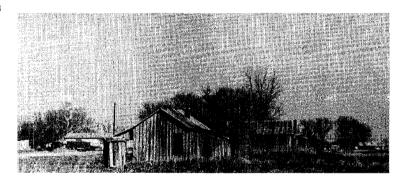
For the present, however, because the majority of the houses are substandard and not fit for human habitation, the

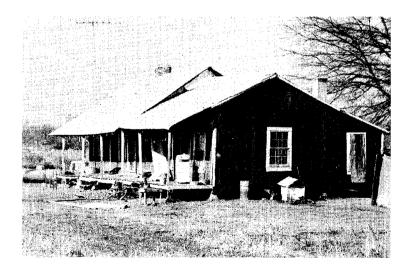


The professional taking time to explain the process



Community Development Worker





Eligible homes for rehabilitation programs.

environmental teams are working around the clock rehabilitating those in the target area. Rehabilitation becomes a never ending activity.

The environmental teams also, in dealing with other units, compiled an extensive community survey of physical needs. It became evident that the most pressing needs were clean water, toilet facilities, weather-proof shelter, and rodent control.

I saw the dismal conditions documented by the team thanks to a Field Sanitation Worker, Mr. Nelson. His knowledge was impressive and even more so the respect paid him by all the center's clientele. To them, I soon learned, he was someone who would not only bring a degree of comfort through physical means, but was also a person who "gave a damn".

Mr. Nelson, as the story repeats itself over and over, began his career as a plantation worker. His specialty was picking cotton. He, like many others throughout Mississippi, was eventually upstaged by automation. One machine alone could do the work of 70 men.

Reflecting on the long career of sharecropping he was born into, Mr. Nelson repeated incessantly how much he despised it. All his energies had been concentrated on the farm but there were never any improvements — for himself or his family. "Now that I'm working for the center," he proudly announced, "I feel like a man. The first thing I did after getting settled in my new job was to make my wife quit her job as a maid; then I got all my kids back in school and, to top it all off, I bought a new home. Now you know what the project has meant to me, to all of us." The project has become a source of food, clothing, shelter and a chance to become a participating part of that thing called society. It has also meant a developing of talent which "the man" never recognized. "We're finally alive," he concluded. This expression of "soul" was worth every anxious moment I spent traveling to Mound Bayou.

At most of the homesteads we visited the activity of the environmental team included: digging a well, constructing a pre-fabricated privy, or screening windows against insects.

While watching a well being excavated at one of the homes, I casually asked one of the workers if it would be better to use a high-speed drill rather than the power press which was laboriously pounding the piping into the ground. With a big grin he answered, "Baby, for many months all we had was a manual press called the man-killer which took three of us 'able bodied' men to manipulate. The answer to your question is yes, but at the same time, we're pretty happy with this present scene."

Because of the great size of the workload, the 500 square mile target area has been broken down into regions. Each region has been assigned a team of workers who are responsible for a total rehabilitation package. This procedure gives everyone the feeling that something is being done in his own neighborhood. It also gives the program greater visibility.

During the latter part of my travels, I was accompanied by two community development workers. Their comments together with my own observations during our trip through most of the target area revealed a gap between center efforts and actual delivery despite the grand efforts being made. Mile after mile of visits in at least 6 townships disclosed poverty at a level which the average citizen of our country would deem impossible. I was tempted to say the obvious, that there was much to be done, but better judgment kept me silent.

If one were to single out the most effective leadership in the project, he would certainly point to the community development workers. They are the people who work with the underprivileged, resistive and apathetic, the ones who have never had anything and who feel the idea of this Tufts thing to be one big hoax. Until the project catalogued a series of accomplishments, the reluctance to participate was overwhelming.

The first worker I traveled with, referred to as "big momma" by most of her clients, was a very beautiful woman in her fifties. She, like Mr. Nelson, had lived in the Bayou area most of her life. We talked mostly about how black people here used to live in the pre-Tufts days.

After many anecdotes concerning others, she began telling me about herself. Prior to 1965 there had been very few windows in her own home; in order to get warm during the cold spells in the Delta, she and her family had to huddle in one room — the one with the least amount of cracks and window spaces. There were many days when their diet consisted of corn bread and molasses; there were other days when she and her husband would deny themselves food so that there would be enough for their kids. From sun up to darkness they would toil in the fields for almost nothing. "Today", she proudly announced, "I've remodeled my house, got food in the refrigerator, and at the last check, have approximately \$\frac{1}{2}\$ in the bank give or take a few pennies. You don't know what a great feeling it is to have this type of security; it's one I didn't think possible."

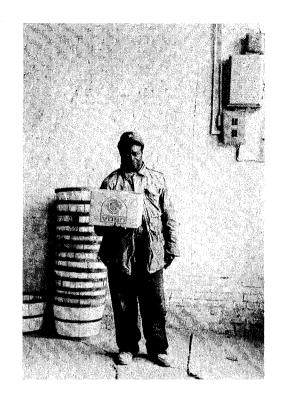
The one big change that has been most meaningful to most of the residents of the area, reported this worker, is the reliability and accessibility of medical services. She recalled those days when you were sick only when the "bossman" felt there

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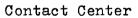
Food Supplemental Center





Above: Grateful Recipient

Left: Coordinator of the Supplemental Program.





was some observable justification. Otherwise, you were not allowed to deviate from the daily routine, with severe penalties for slacking.

She had suffered harassment not only from the plantation owner, but also on many occasions from the "professional". She and other patients would sit and wait for the local doctor sometimes as Tong as four hours. He would then stroll in and ask to see the note from the plantation owner and prescribe medication without the benefit of a diagnosis or history. Too often, whether it was the head, the stomach, or the toe, medicine proved to be identical. "What a wonderful feeling it is to walk in the center," beamed big momma, "and know that when it's your turn, the best possible medical assistance will be offered. I can remember spending my last penny going to the drugstore and buying "Black-Draught," (a patent cureall solution), "to keep from going to the doctor."

Although I did not get an opportunity to visit with the 12 doctors now on the staff, their presence was always indicated by a steady stream of patients willingly moving in and out of the medical cubicles.

On many occasions during the early days of the center, many residents of the area would show up at the doctor's office simply to see for themselves if medical benefits would actually be given. When the benefits were seen to be real, and that patients were treated with dignity besides, people were elated. This good feeling was echoed many times during meetings I attended.

I shall never forget the evening Community Health Council meetings — especially the ones held in Shelby and Roundtree, two smaller regions of the Bayou. Although the committees of their respective health councils were identical in structure, the differing personalities made each meeting unique.

At a briefing by Mr. Hatch I learned that meetings were conducted in a fashion similar to the process and style of the black Baptist Church because of its familiarity to the people. Meetings were conducted in an efficient and productive manner with the majority of the membership participating in one form or another. Reports for the evening included: Mother and Child, Sick Committee, Home Improvements, and the Aging.

There was much talk and excitement over the successful cleanup campaign. The efforts spent cleaning yards, getting rid of abandoned junk and exterminating pests - an endless chore-were challenging and taxing, but at the same time a great satisfaction.

Discussion about the future of the project was lively and filled with much expectation (quite a departure from earlier periods in their life when concentration on daily survival took precedence over everything else). One plan in particular which gained much support centered around offering hot lunches to the old people of the community — the idea being to at least allow these community members to receive one hot, balanced meal each day. With this arrangement, that these meals should be prepared and served at the contact centers, it was also suggested that a car pool be formed in order to transport to the center those persons without cars.

The plan after a lengthy discussion was put in the form of a motion by one of the council members, seconded immediately, and unanimously approved by the group.

At the conclusion of the meeting at Roundtree, it was announced that there were two very distinguished visitors in the audience who no doubt had some comments to offer, and accordingly, it would be most appreciated if they would come forward. A poke from my companion, a professor from Boston College, gave me a rude awakening: we were on stage. The testimony from both of us received much applause and many "amens" — my earlier Baptist training had come in handy.

In response to our visit which the group had anticipated thanks to their unerring grapevine, a small banquet was prepared. After a few minutes of scurry in the kitchen and a short ceremony relating how wonderful it was to have Mr. Howe, my companion, back in the community and how much success they wished Mr. Jones on his new assignment in Africa, we settled down to frankfurters, ice-cream and cookies. The atmosphere made our menu most appetizing, but after learning of the sacrifice which was made to extend this repast, I found the food even more tasty.

By way of summing it all up, I quote from a talk given by one of the community development workers, Mrs. Pearlia Robinson, at a workshop in Philadelphia. It was her first big trip away from the Bayou: ". . All these things got started because of the Tufts-Delta Center. We are moving now. We are healthier and living a little better, and ain't nobody going to turn us around." Upon completion of her talk, Mrs. Robinson was given a standing ovation.

Sincerely

Jeorge Jones

George Jones

Received in New York on March 27, 1970.