



## Segregation in health care: America's racist - and deadly - legacy

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*911. What's your emergency?*

*America's healthcare system is broken and people are dying.*

Welcome to **Code WACK!**, where we shine a light on America's callous healthcare system, how it hurts us and what we can do about it. I'm your host, **Brenda Gazzar**.

*(music)*

**This time on Code WACK!** What did segregation look like in hospitals and medical facilities in America, and did it only extend to the South? What finally brought an end to the deadly practice that cost countless Black and Brown lives? To break it down, we spoke to **Dr. Barbara Berney**, project creator and producer of the documentary “Power to Heal: Medicare and the Civil Rights Revolution.” She’s also an emeritus professor at City University of New York School of Public Health and a

distinguished scholar in public health, environmental justice, and the U.S. healthcare system. This is the first of two episodes with Dr. Berney.

***Welcome to Code WACK! Dr. Berney.***

**Berney:** I'm really delighted to be here.

***Q: In your film "Power to Heal: Medicare and the Civil Rights Revolution," narrator, Danny Glover, notes that segregated medical care was a brutal reality for Black Americans. What did that look like on the ground, and can you give us some examples?***

**Berney:** It was really important on the ground. There were a lot of hospitals, especially where Black people were simply not admitted. They were just sent away, or they wouldn't even go because they knew that you couldn't go – that was a white hospital and you weren't going to be admitted there. And there are examples of this in the movie. Toni Daniels was not admitted to the first two hospitals that she went to. She had polio. [Hospitals] were just not admitting Black people.

***Right, that took place somewhere in the South.***

**Berney:** And in the third hospital, the doctor had to fight to get her admitted that the nurses were saying, we're not admitting a Black child if we don't know what the problem is. And the doctor said, if we don't admit her, then she'll die. And obviously there wasn't a concern that she would die. And I think that this was what happened in many hospitals there – that people were turned away. People were sent long distances and often died on the way to the hospital because there wasn't a Black hospital close to them, even if they were very sick or had been in really terrible accidents.

**Berney:** One example in the film is that patients who were in Yazoo City, which was a city in Mississippi, were sent to Jackson [Mississippi] because they couldn't be admitted to the hospital in Yazoo City because that was a White hospital and they were simply not admitting Blacks and they had to go to Jackson, and if they couldn't make it to Jackson, then they would die on the way.

And many hospitals in the North had quotas on the number of Black people that they would admit. And if you were beyond the quota, then you would be sent to the city hospital or the “Black hospital,” and that was just the way that it was.

***Q: In the film, a doctor by the name of Brenda Armstrong told a moving story about her mother giving birth to her last child. Can you tell us that story and why you included it in the film?***

**Berney:** Dr. Armstrong grew up in Rocky Mount, North Carolina, and the Black hospital was probably in Raleigh. When her mother was pregnant with her brother, her father, who was a physician, went to the hospital administrator in their town and asked if her mother could please give birth at the hospital because the baby was big. And the hospital administrator told him ‘no, that she couldn’t give birth there. She was Black. He was Black, and absolutely they could not give birth or be admitted to this white hospital.’

So Dr. Armstrong's mother delivered her brother at home and he had a stroke during the birth, the baby did, and he was disabled all of his life because of that. And Dr. Armstrong said that was the reason that she became a doctor. And I think that this is a really powerful story about the importance of equity and the fact that her mother could not give birth in the hospital, she could not have a C-section meant that her brother was impaired for his entire life.

***Such a sad story. And that's just one story that we hear about how many other people suffered similar fates that we don't know about.***

**Berney:** Exactly. And I think that Dr. Armstrong's story is a really powerful example of what segregation meant.

***Yes, You mentioned that segregation extended to the North. We're talking about cities like Boston, Philadelphia, and Chicago. And you mentioned that there were quotas in many of these hospitals. Once they filled their quota, they would no longer accept Black patients. And then they had to find someplace else to go.***

**Berney:** Yes. Either the public hospital, if there happened to be one, a Black hospital in that city...For example, in Chicago, the University of Chicago had a quota. One of the people in the movie was a physician at the University of Chicago, and he pointed out that once they met their quota of 10%, that no matter what was wrong with you, if you were Black, you went to Cook County Hospital and there were lots of examples like that in northern hospitals. In fact, Jack Geiger, who was a physician who worked for equity all of his life points out that he was in Chicago right after World War II, and they were not letting Blacks into medical school, and he and a bunch of other physicians and physicians in training went to the charitable institutions, the Rockefeller Foundation and others, and said, 'you're not going to give money to these schools that discriminate, are you?'

And of course they said no, and so the schools called Geiger and his group up immediately and asked them what they had to do because they were really counting on the money from all these charitable foundations, and they admitted Black students for the first time in a very long time.

I think that one of the things that we should remember about the admission of Blacks into medical school is that over the last 50 years, probably less, much less than 50 years, 50% of the students admitted to medical school have been women and it used to be one or two per class or none but women didn't all of a sudden become qualified and the percentage of people of color admitted to medical school has not changed at all. And this is clearly an indication that this is a question of policy and not a question of qualifications or anything else, that they could double the number of students of color who were admitted to medical school without any problem at all, and they don't because they don't want to. They didn't used to admit women. They didn't used to admit Jews. And that's all changed. But the number of admissions of people of color has not changed.

***Right, and there was a recent court decision having to do with admissions in universities. What can you tell us about that?***

**Berney:** Yes, there was a Supreme Court case about the admission of people of color, and they said that, 'no, you couldn't have preferences for people of color.' Well, I think that the irony of this is that they never objected to having preferences

for legacy students, people whose parents mostly whose fathers had gone to these medical schools or gone to these colleges. They never objected to preferences for white people. They only decided that preferences were a problem when the preferences appeared to be given to people of color.

***Good point. Going back to segregation in the North, I was surprised to learn from the film that in Chicago, most hospitals weren't even admitting Black patients, which is insane. <Laugh>.***

**Berney:** One of the stories that I've been impressed with is my father was in the hospital in 1955 and he had an emergency appendectomy, and they started to move a bed out of his room and he asked them why. And they said, 'oh, we have to admit a Puerto Rican patient and you probably don't want him in the same room as you.' And my father insisted that they not move the bed. But it's telling that he was in Los Angeles, which is considered in Northern City. And I don't think that his situation was in any way unique and probably what's surprising is just that they didn't expect anyone to object to them segregating the rooms.

***Q: So medical discrimination did largely target Black people, but it sounds like people of Latine origins were also discriminated against.***

**Berney:** Yes. And I'm sure that in places like Los Angeles and Texas where there were lots of people of Latin descent, that they were targeted more and in places where there were people who were Black people, that they were, that Black people were targeted, that it probably just had to do with.

***Q: In 1945, President Harry Truman proposed a national healthcare plan to Congress, but he didn't succeed. Why is that?***

**Berney:** The American Medical Association was totally opposed to any kind of public medical system and certainly a universal healthcare system. And they, the American Medical Association painted universal healthcare as creeping socialism, and they hired Ronald Reagan and he made a film about how the universal healthcare system was creeping socialism. They showed that film in doctor's offices. They were able to defeat Truman's attempt to have national health

insurance, and both Johnson and Kennedy were really constrained by the AMA in proposing any kind of health insurance system.

***Q: So why was the American Medical Association so opposed to it?***

**Berney:** It's ironic because it turns out the doctors made a lot of money out of Medicare, but they were very much afraid that they would make less money if there was a public health insurance system. I think they were very much concerned, and this is probably legitimate, that any kind of national health insurance system would limit the amount of money that they could make.

***But you were saying they actually made a lot of money from Medicare.***

**Berney:** It turned out that once Medicare was passed, Medicare covered the population over 65, which was a population that was mostly retired and so in retiring, they lost their health insurance because health insurance was something that was provided to you by your employer.

***Right, and still is in many cases.***

**Berney:** Yes, that's right and it still is. And so when you retired, in addition to everything else, you lost your health insurance. All of a sudden, Medicare meant that doctors were being paid for all of the patients that they saw and all of the patients that they hospitalized who were over 65, which you know, is the majority of patients who are certainly the majority of patients who are hospitalized, are the patients who are over 65. So it turned out that Medicare was a great big boon for doctors

***Q: But even today, I think the American Medical Association is hesitant to endorse universal health care, right?***

**Berney:** Yes. I think that's probably true... I would guess that they're against it. Yeah. It, at the time when Medicare was passed, that Black doctors and the National Medical Association, the association that basically represented Black doctors and nurses were the, was the only association, medical association. And these were the only doctors by and large who supported Medicare. And they wanted hospitals desegregated in return for their support for the Medicare

legislation. And Lyndon Johnson had a Secretary of Health Education and Welfare, John Gardner, who was also in favor of desegregation, and it was really important both to the National Medical Association and to Gardner and the people that he hired – that hospitals be desegregated as a condition of them getting Medicare money and they managed to set it up so that you have to be certified first.

And one of the conditions of certification was that you be desegregated. So hospitals were able to say that they had to desegregate and they did have to desegregate in order to get Medicare money. And they had to get Medicare money because for many hospitals that was going to be like half of their income was to be Medicare money. If you weren't certified as desegregated and otherwise eligible for Medicare funds, the hospital had to go to court and if you were not desegregated, then you probably were never going to get funds. This was something that was pretty hard to lie about.

***Q: So it was the 1964 Civil Rights Act that prohibited giving federal funding to institutions that discriminated based on race. Right?***

**Berney:** Yes, that's right.

***And then a year later, President Johnson signed Medicare into law.***

**Berney:** That's right.

***Which treated the National Health Insurance program for seniors and those with severe disabilities. So hospitals wanted to be able to get reimbursement for treating seniors who had Medicare so they had to desegregate or else they would not get that funding and probably go under. And that's a brilliant strategy.***

**Berney:** Yes. It was brilliant, it was a very brilliant strategy. There were many hospitals that had desegregated before it was required by Medicare and white people wouldn't go to them, but the new rules made it so that the hospitals that didn't desegregate couldn't get certified and couldn't get Medicare money, and nobody over 65 was going to go to them because you couldn't get your stay paid for.

***Q: I see. And so how quickly did desegregation happen in hospitals and medical institutions?***

**Berney:** So the desegregation of hospitals happened actually quite quickly, happened over a matter of months because hospitals were being certified for Medicare. This was going to come into effect in July of 66 and so hospitals were desegregated and in a few months were certified and therefore desegregated in the few months just before that, Gardner called for hospital inspectors several months before Medicare was going to come into effect. And he hired all kinds of people. He had all of the people who were working for Social Security become hospital inspectors, plus a lot of other people became hospital inspectors. Medical students became hospital inspectors. People at the National Institutes of Health became hospital inspectors – all kinds of people, nurses, doctors, veterinarians, all kinds of people who worked for the federal government and if you weren't certified as desegregated plus a bunch of other things, you simply didn't get Medicare money. And the hospitals were determined that they were going to get Medicare money, and they had to because people over 65 were the people who were being hospitalized and if Medicare was going to pay half of their expenses.

***Thank you, Dr. Barbara Berney, creator of the film “Power to Heal.” Stay tuned for next time when we continue our discussion about how medical institutions were segregated until the 1960s and how racism in medicine manifests today.***

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