

# TUFTS MEDICINE

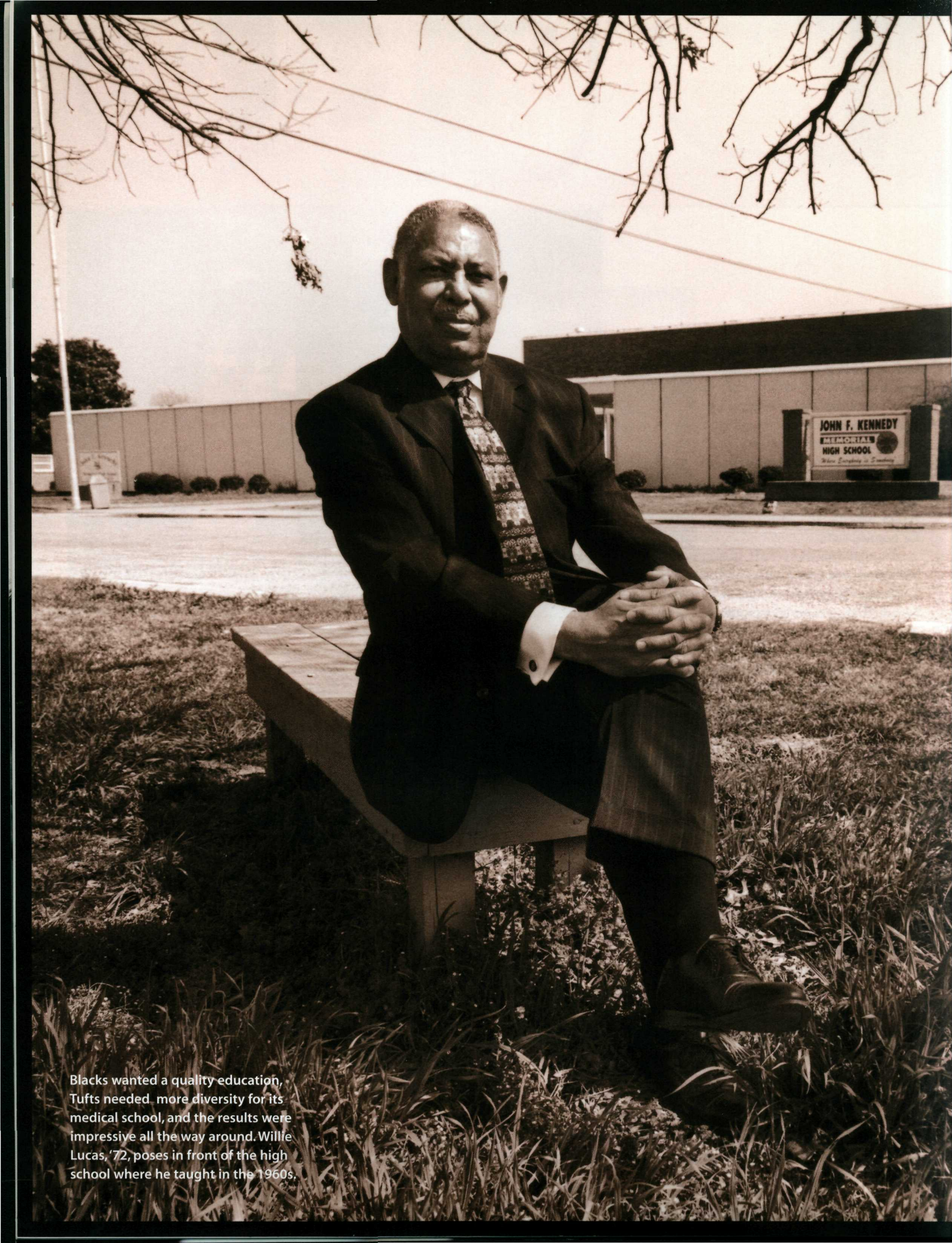
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*up from*  
**MISSISSIPPI**

How Tufts made  
a difference  
in the Deep South

**PLUS**  
Help for Zambia  
Medical Journals  
Under Siege



Blacks wanted a quality education, Tufts needed more diversity for its medical school, and the results were impressive all the way around. Willie Lucas, '72, poses in front of the high school where he taught in the 1960s.



BY BRUCE MORGAN | PHOTOS BY MARK MORELLI

**O**NE DAY 35 YEARS AGO, IN SPRING 1968, A BLACK man named Willie Lucas poked his head inside the Delta Health Center, which had recently opened on the main street of Mound Bayou, Miss. Lucas had a few questions for Dr. H. Jack Geiger, the director of the clinic. He began by telling Geiger that he had always wanted to attend medical school but lacked the means to do so. Right now he was teaching chemistry at the town's high school.

Could Dr. Geiger somehow help him gain a medical education?

Improbably, the answer was yes. "He set up an interview for me at Tufts. He flew me up to Boston, and two or three weeks later, I was in," remembers Lucas, '72. The former high school teacher, 29 years old when he matriculated, was one of the first African Americans to be recruited from Mississippi in what would prove a stream of outstanding black students who left their home state—many for the first time in their lives—and ventured 1,500 miles to enroll at Tufts Medical School throughout the 1970s and '80s.

At first, the connection between Tufts and Mississippi was faint as a watermark. But during the time of his encounter with Lucas, Geiger was a professor in the Department of Community Medicine at Tufts, and Mound Bayou was arguably his boldest, most groundbreaking venture. The Delta Health Center was the first community health center to open in an overwhelmingly black and rural region of the country, hard on the heels of the Columbia Point Health Center that his department had established in a low-income housing project in Boston in 1965.

Mound Bayou was the start of everything. (See Mound Bayou sidebar, page 22). Its opening in summer 1967 rang media bells from coast to coast and put Tufts on the map among educated blacks in Mississippi. Thereafter, one talented student followed the next to the exotic land of Boston, where natives wore heavy overcoats half the year and grumbled about parking their cars. In this story, we will trace the lives of a representative sampling of these first black students who made the trek north.



*up from* **MISSISSIPPI**

Minority students at Tufts were still rare in fall 1968, with a total of five blacks enrolled in Lucas' class. In addition to Mississippi, they came from Ohio, Georgia and New Jersey. But, after Lucas, blacks from Mississippi had certain advantages that set them apart. All of them had attended the same, small undergraduate school—historically black Tougaloo College, an elite private school of about 800 students founded by the American Missionary Association on the outskirts of Jackson in 1869—and knew each other through a medley of campus links before they ever packed up and headed north. Mississippi blacks thus had a small, reliable network of affiliations in place to support them emotionally once they landed in Boston. Apparently it made a difference, because every single one of the students graduated.

A final sweetness attends the northward migration. Because they were so keenly aware of the shortcomings of medical care in this most impoverished of states, the majority of these Mississippi blacks shrugged off the lure of relocating to some other part of the country (“I saw the bright lights,” one of them said, sounding like a man who had risen to the top of a Ferris wheel and gotten dizzy) and returned home to practice medicine, closing the geographic circle and making their professional presence felt in countless ways.

Historically, they were bucking a trend. Because of pervasive racism, few, if any, black doctors managed to get trained in-state. And blacks from Mississippi who departed to study medicine elsewhere rarely returned to hang out their shingles there. Local conditions were just too punishing.

Dr. Robert Smith, a black doctor and native Mississippian who was instrumental in the founding of the Delta Health Center and who received his medical degree from Howard University in 1961, claims that he was one of only two Mississippi-born black doctors who returned to the state from the mid-1950s through the early 1960s—and to confirm this, he names the other man off the top of his head.

Finally, the passage of *Brown v. the Board of Education* in 1954 drove a number of the few remaining black doctors out of the state in anger and frustration. “After Brown was passed, and Mississippi started passing all those segregation laws, many of those physicians picked up their bags and left,” Smith recently remarked. “You know, these guys decided, ‘We’re going to go. We’re not going

to put up with that bullshit. We’re just going to go to greener pastures.’”

The consequence was that by 1968, there were almost no black doctors left in Mississippi.

### A bright beacon

MALCOLM TAYLOR, '73, CAME ALONG A YEAR behind Lucas, but his starting point differed markedly from that of his predecessor. A physics major at Tougaloo, Taylor was intent on going to medical school—he just didn't know where. Looking back, he says he can't remember how he first heard of Tufts, but suggests it may have been because of headlines kicked up by the school's Mound Bayou initiative. By whatever prompting, Taylor put Tufts on his radar.

His senior year in college, he came up to Boston for interviews at two places: Tufts and Harvard. Taylor went first to Chintown and had such a positive impression that he closed the deal then and there. “After my interview at Tufts, I said, ‘I like this place—no need to go to Harvard,’” reports Taylor. Tufts ended up being the sole school to which he applied and, luckily, he got in. He describes his choice of Tufts as “the best decision I ever made.”

As with Lucas, there were a total of five black students in Taylor's class. “Tufts was a very good place to go to school,” he says without hesitation. “We worked hard, and maybe we didn't have all the fancy facilities like they had over at Harvard, but there was a camaraderie among us. Because there were just five of us, we could talk. We worked together; we studied together. We all felt that when you're the first few [blacks at the school], the door closes easily. We needed to do well, and we did.”

If one person stands out in Taylor's recollection of those days, it is Dr. Vivian Pinn, then a charismatic assistant dean of students who happened to be black and only slightly older than the students in her care. Pinn, a pathologist, arrived at Tufts from Massachusetts General Hospital in 1970 to take up her new role as director of minority affairs. She was also academic advisor, emotional counselor and all-around mother figure to Tufts medical students, with the scope of her attention by no means limited to black students. (She would hold the job until 1982, when she left to head up the pathology department at Howard University Medical School. In 1991, Pinn became the first full-time director of the

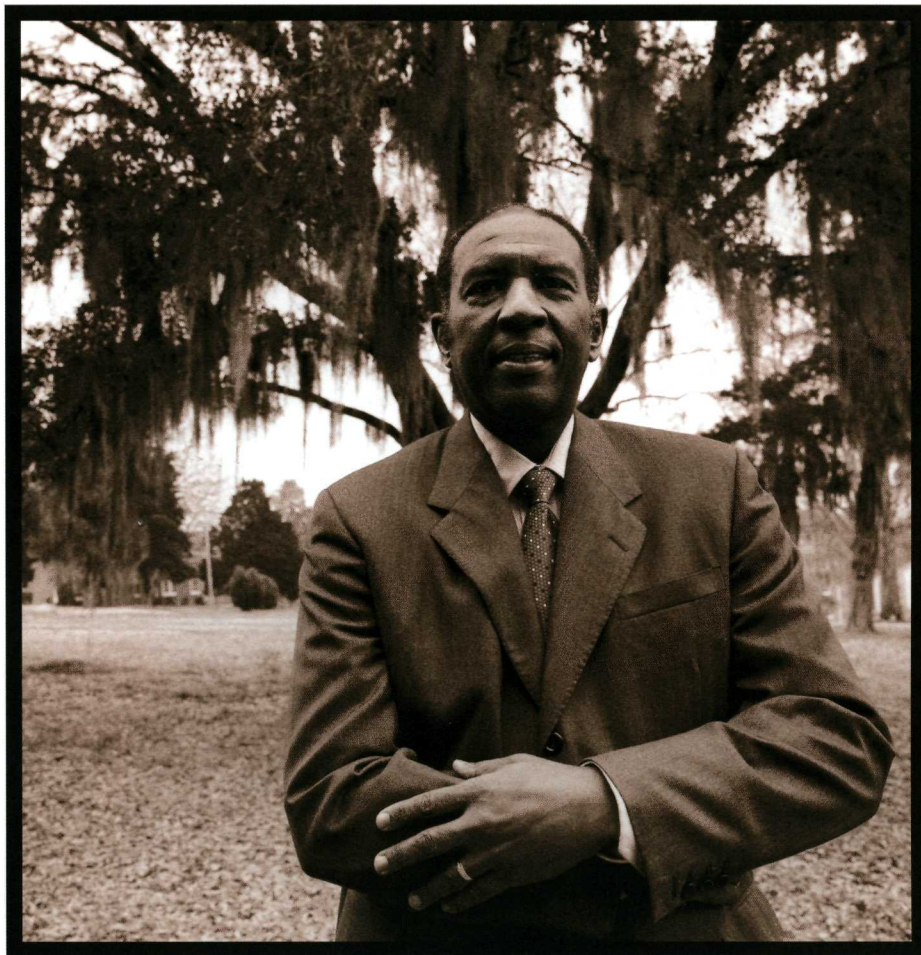


Obie McNair, '81, Dr. Robert Smith and Malcolm Taylor, '73, on the Tougaloo College campus



"TUFTS WAS A VERY GOOD PLACE TO GO TO SCHOOL.

WE WORKED HARD, AND THERE WAS A CAMARADERIE AMONG US." —MALCOLM TAYLOR



Office of Research on Women's Health at NIH, a position she retains.)

Poised, confident and accomplished, Pinn shone as a bright beacon for many of the blacks from Mississippi. "She was where we wanted to be," Taylor says simply.

Looking back on her dozen years at Tufts, Pinn explains that her tight bond with the students—especially minority students—derived from a rocky patch in her own life. As the only woman in her medical school class at the University of Virginia, as well as the sole minority, "I was familiar with isolation," Pinn observes tartly. She saw her role at Tufts as one of offering guidance, of listening. "The students found me," she says, her voice tinged with fondness at the memory. "I may have supported them, but they also supported me. I just wanted to see them do well—and they certainly have done well over the years."

Taylor, for one, has certainly thrived. After graduation, he headed home to Jackson, Miss., and began his practice as a cardiologist. "Of the Mississippi students who went through Tufts, at least 10 came back to practice here," says Taylor. "That's one of the things they looked for in the interviews." What difference did the reverse migration make? For historical context, Taylor notes that there were just 30 African-American doctors in the entire state of Mississippi when he left for Tufts.

Taylor is currently director of a congestive heart failure clinic at a hospital in Jackson—heart disease being the number one cause of death among African Americans, he observes—and an integral part of what he drolly terms "probably the largest African-American cardiology group in the United States—four." He also wields the gavel as president of the Association of

Black Cardiologists, a national organization with 450 members.

Thirty years out, Taylor's feeling for Tufts still runs deep. "The people at Tufts should be commended—they gave us an opportunity before it was fashionable or popular. I credit them for that," he says. "They could see the future."

### The network of support

BY THE TIME THAT CHARLES COOK, '75, enrolled at Tufts a few years later, the Mississippi connection had been forged. "I followed several people there," is how he explains his choice of Tufts Medical School, naming Taylor among his predecessors. Mound Bayou "had developed some notoriety as well," he adds.

Then there was the Tougaloo link. Cook, like Taylor, was a student at Tougaloo when Dr. James Morehead, a white professor of anatomy at Tufts, came south on a recruiting trip. With him he brought three students from the medical school, two white and one black, who talked about the welcoming atmosphere on the Boston campus. "That was quite impressive," says Cook. "The interest shown by Dr. Morehead and those students set the high-water mark for me. That was pivotal. They were engaging me, rather than giving me some kind of show and tell. It was authentic."

Cook had tried to enroll at the University of Mississippi, the sole medical school in the state, but was rebuffed. (During this time, few, if any, black students were admitted to the state's medical school.) "They told me I was not medical school material," Cook relates. "Two days later, I got the acceptance letter from Tufts."

Up in Boston, the young man found a network of supporters, both white and black. Cook singles out Pinn as "the glue that held all the students together. We looked to her for many different things—including mothering, I should say. She gave us advice and insight and insisted that we be model students. She had an expectation for us. If anybody faltered, she was the first to know. If it were not for Vivian, we would not have done as well as we did."

Cook's life was unusually stressful his first year on campus. He had a wife and two children back in Mississippi. Pinn exerted "a calming effect" and kept him on the straight and narrow, he says. At one point, he was struggling to pass one of his courses after the death of his father; the school administration wanted him to repeat the entire year. He went to see Pinn, who advised him to write a "very forceful" letter to the dean, explaining the extenuating circumstances in his case. Pinn told him, "This is just another bump in the road." Cook wrote the letter and won a second chance to prove himself. "That strengthened me for the whole rest of my medical career," he says. Cook retook the course—adding it to his academic load the following year—and aced it.

Mildred Pruitt, a white woman in charge of financial aid at the medical school, proved herself another sympathetic figure. Cook remembers going to see her many times to plead his case when money was running tight. Pruitt would tell him not to worry about the money, saying, "No, school is more important. We'll work it out." Thirty years later, Cook marvels at her attitude. "It was not, 'Oh, no, here comes this guy again,'" he says. "Instead, it was a proactive, very positive approach."

After graduation and one year spent at Harvard acquiring a master's degree in public health, Cook returned to Mississippi to fulfill a personal commitment. "It was home," he says. It was also, of course, a state that perennially ranked near the bottom of the list when it came to public health and quality-of-medical-care rankings. Cook became the assistant chief for disease control in the state, where he ran a statewide hypertension screening program on a three-year, \$4.5 million federal grant. He was then "recruited heavily, because it was a model hypertension program for the nation. The state had not seen these kinds of monies at all."

Cook, a nephrologist, now lives and practices medicine in Raleigh, N.C. He has taught as an adjunct faculty member at a number of area medical schools, including the University of North Carolina and

Duke. Recently, he was invited to present Grand Rounds at the University of Mississippi, where, he notes with some satisfaction, "I was turned down more than once."

### An open door

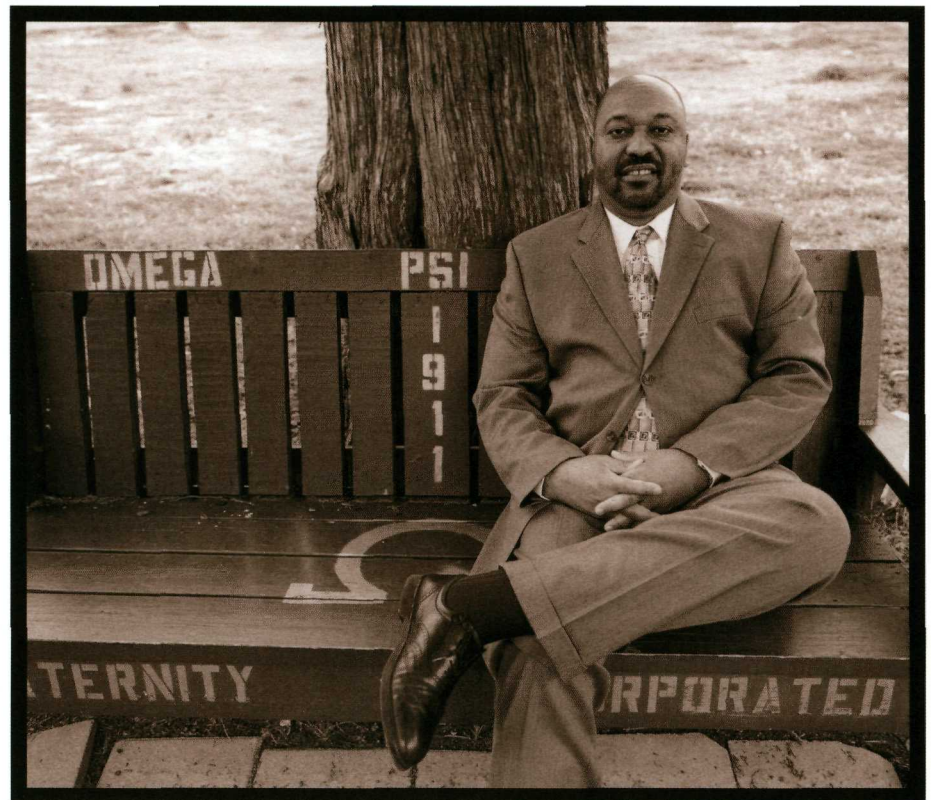
REPORTS OF COOK'S POSITIVE EXPERIENCE at Tufts echoed through the halls of Tougaloo College, where Maude Wright, '79, heard them as an undergraduate. "I went because several other students ahead of me had gone there," she confirms. "I knew of Charles Cook, although I didn't actually meet him until I got to Tufts." By the mid-1970s, Tufts had earned an honored place on a short list of about five medical schools that Tougaloo students considered after graduation, according to Wright. Others on the list included Harvard and Columbia.

How significant was it, knowing that Cook had preceded her on the road to Boston? Wright calls it "an influencing factor" in her decision-making process. "Just knowing that another student from Missis-

issippi had been there at Tufts was enough tangible support to get me to go there," she says.

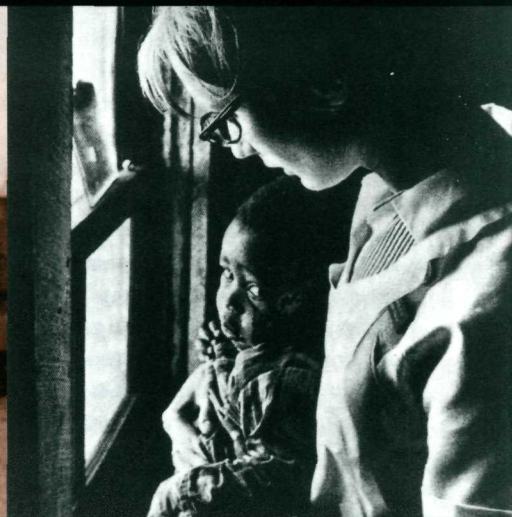
Wright enrolled as one of 16 minorities in that year's class—a large enough number to enable its members to provide a sympathetic resource for each other. Having Vivian Pinn and Colleen Romain, then assistant director for minority affairs, available to them on campus also helped. Wright cites Romain's informal, open-door policy as especially beneficial to African-American students, saying, "She was a great source of support for us. We could always go and see her when issues came up."

Although she lived and practiced for four years in California at the start of her medical career, Wright says she always knew that she would some day return home. Her mother's illness prompted her return. At the time of her return to Mississippi, she learned that she was the first black child and adolescent psychiatrist in the state and one of only two doctors qualified to practice in her sub-specialty.



**"I HAD ALWAYS BEEN RAISED UP TO BELIEVE THAT EVERYTHING WAS BLACK AND WHITE.**

**THE CULTURAL THING IN BOSTON WAS MIND-BLOWING." —OBIE MCNAIR**



## MOUND BAYOU GREW OUT OF THE CIVIL RIGHTS STRUGGLE—AND A

**IT ALL BEGAN IN A ROOM IN GREENVILLE, MISS., IN DECEMBER 1964.**

A handful of men and women—members of the Medical Committee for Human Rights (MCHR), an organization that functioned as the medical arm of the civil rights movement—were there to talk about things that sickened them. Although the nurses and physicians in the room at first had come to Mississippi to protect civil rights workers during 1964's Freedom Summer, the massive voter registration drive then in motion all across the South, their eyes had been opened to the deplorable health conditions that touched every hut and cabin in this blackest and poorest of states.

Dr. Robert Smith knew these conditions firsthand. A young black doctor who was in charge of the southern branch of the MCHR, he told an interviewer recently what he had seen and felt while treating his own patients in the early 1960s. "I understood for the first time what it truly meant to be black in Mississippi, and underprivileged, and poor and without medical care, and saw people by the hundreds and really thousands go without medical care," he said. "Saw what I call a Third-World country."

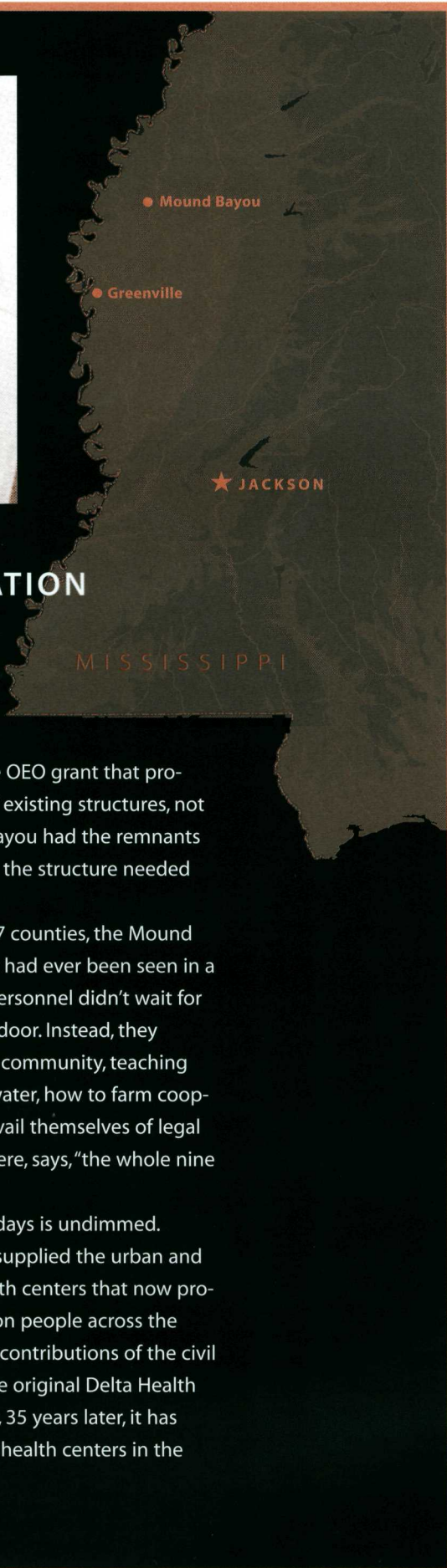
A minute later he elaborated: "People had been denied benefits under Social Security. People had been denied benefits for welfare. They needed food stamps, clean water, food... Thirty to 40 percent of children had intestinal parasites. The infant mortality rate was around 60 percent. Maternal mortality rate was out of this world."

Smith told the group that something completely new was needed, a facility that would address the health needs of the community from top to bottom. At this, Dr. H. Jack Geiger, then a Harvard professor and soon to be a Tufts faculty member working side by side with Dr. Count Gibson—a lanky, soft-spoken Southerner also present in the room that day—in the Department of Preventive Medicine at Tufts, mentioned that he had encountered such a model in, of all places, South Africa. *Maybe, he suggested, something like that could work in Mississippi.*

Gibson and Geiger wanted to test the idea first in a northern setting. They approached the Office of Economic Opportunity, a federal agency that had recently sprung up as part of President Lyndon Johnson's far-reaching War on Poverty, for initial funding. Their grant of \$1.25 million was promptly approved. In 1965, under Tufts sponsorship, the Columbia Point Health Center began serving the diverse needs of a mixed-race public housing project located in Boston, just four miles from Tufts Medical School.

*The experiment was a success. But overcoming fierce political resistance to creating its counterpart down south took the better part of two years. Field operations began in Mississippi in 1966. Finally, in July 1967, the Delta Health Center officially opened its doors in Mound Bayou, a tiny, all-black town founded by an ex-slave in the heart of the Mississippi Delta a century before. According to Smith, what led the doc-*





## MOMENT OF INSPIRATION

tors to this locale was a detail in the OEO grant that provided funds solely for renovation of existing structures, not for any new construction. Mound Bayou had the remnants of a defunct college still in place; all the structure needed was some minor work.

Initially serving residents from 17 counties, the Mound Bayou project was like nothing that had ever been seen in a rural setting. The center's medical personnel didn't wait for ailing patients to walk through the door. Instead, they reached out to the members of the community, teaching them how to obtain safe drinking water, how to farm cooperatively, how to eat right, how to avail themselves of legal advice. Or, as Smith, who worked there, says, "the whole nine yards."

The legacy of those brave, early days is undimmed. Mound Bayou and Columbia Point supplied the urban and rural templates for community health centers that now provide medical care for some 11 million people across the country. "This was one of the major contributions of the civil rights struggle," Smith contends. The original Delta Health Center is still going strong. But now, 35 years later, it has been joined by more than 20 other health centers in the state of Mississippi.

## Hitting some snags

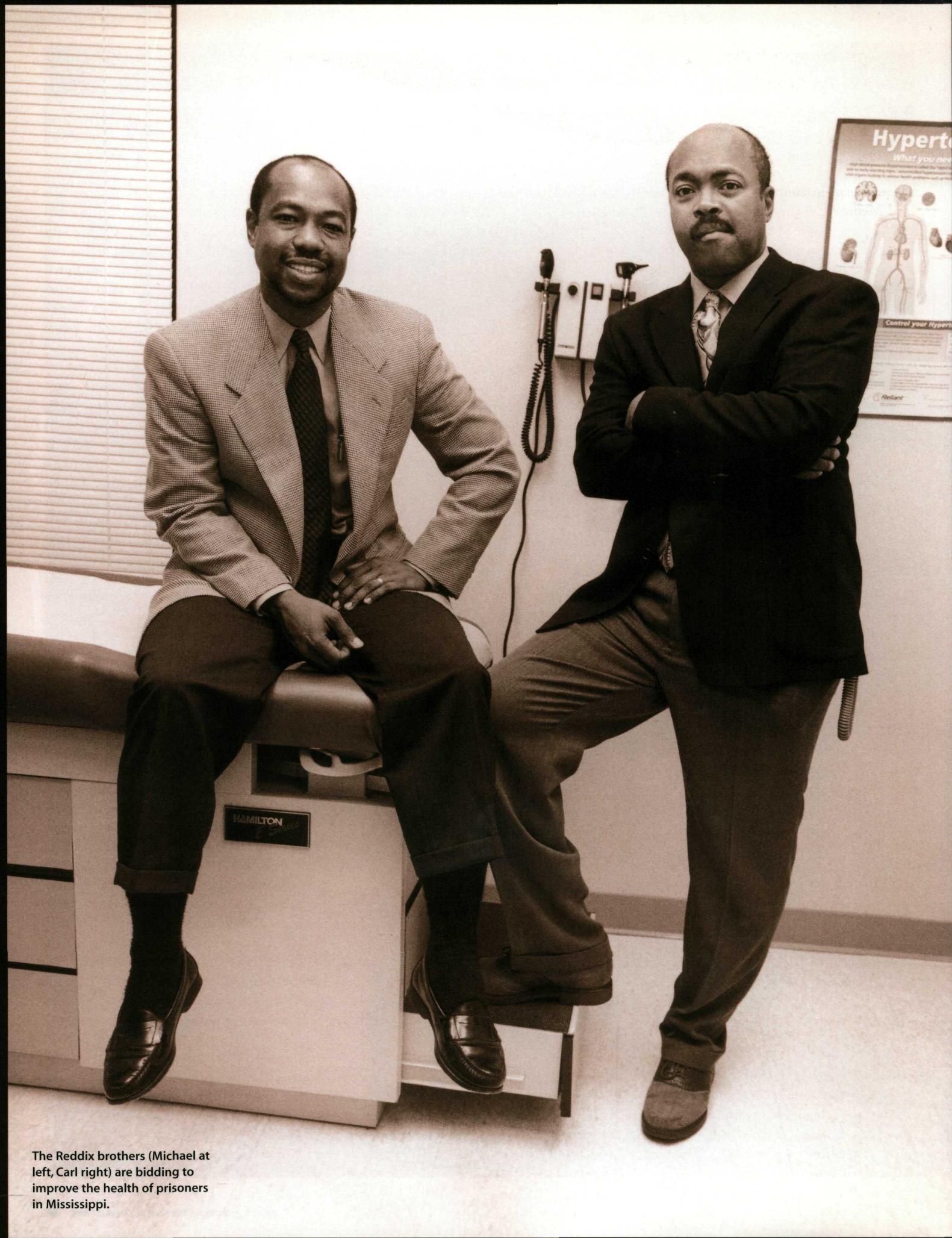
THE VARIETY OF INTERCONNECTIONS among black grads of Tufts Medical School from Mississippi seems endless. Before they set out for Boston, most of the black Mississippians either knew one another personally—by being classmates, or schoolmates, or fraternity brothers—or else knew each other's names through some secondary but still intimate link. To a reporter delving into these relationships, Mississippi comes across as a dusty hamlet with a lone church spire at its core, rather than what it is in fact: a sizeable, modern southern state boasting two-and-a-half million residents.

Take the case of Obie McNair, '81. Maude Wright recruited him to Tougaloo College when he was a high school student. A college professor of chemistry recommended he attend Tufts, telling him that some others from Tougaloo had gone there and had a good experience. McNair came up to Boston to interview with Vivian Pinn, who mentioned that her father had been a member of the same fraternity that McNair had pledged back at Tougaloo. It all felt familiar and right. He applied to Tufts and was accepted.

Once enrolled, McNair found Pinn's guidance and support invaluable. "Oh, no question," McNair says. "She was the lone voice in the wilderness. She seemed to take everything personally. She would plan meetings with us students and ask, 'How's it going? Any problems?' Then she'd say, 'Look, if you have any problems, my office is open to you.'"

It wasn't long before McNair hit a snag in his course work. He encountered a new type of multiple-choice question in which the correct answer might not be a single choice but combinations of choices, such as "A and C" or "All of the above." He hadn't seen that format before, and it threw him and a number of his friends. Pinn took charge of the situation. She told the students, "Hey, it's not a problem. It's not that you guys don't understand the material. It's your test-taking skills that are problematic." She brought in a tutor who worked with the students until they had cleared the hurdle.

Other problems arose. When McNair had a personality conflict with a professor ("He and I didn't click," says McNair) and subsequently received a poor evaluation in that course, he approached Pinn to complain he'd been treated unfairly. She referred him to Dr. Jerome Kassirer, then vice chair of the Department of Medicine and associ-



The Reddix brothers (Michael at left, Carl right) are bidding to improve the health of prisoners in Mississippi.

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ate physician-in-chief at Tufts-New England Medical Center.

"I walked in, and he had this very stern look on his face," McNair remembers. McNair explained that there was a mitigating factor in the case: His grandmother in Mississippi had died, and he had been distressed that he lacked the money to go home and attend the funeral service and be with his family. "When I told him about my grandmother, his whole demeanor changed," McNair says of Kassirer, who proceeded to question the young man sympathetically and reassure him about the handling of the course grade.

McNair had never been outside of Mississippi for any extended length of time, and the northern world of ethnic enclaves and religious distinctions came as a shock. "I had always been raised up [to believe] that everything was black and white," he says. "The cultural thing in Boston was mind-blowing." McNair made friends with a white Irish-Catholic classmate who taught him the lay of the land almost like a bird-watcher pointing out the robins and cardinals to someone who had never much noticed birds before. Suddenly there were colorful Irish and Italian, Protestant and Catholic stripings to consider. "My friend would say, 'That person over there is Jewish.' I'd say, 'How can you tell? He looks just like other people.' That was all new to me."

Now a pulmonologist in Jackson, Miss., working as one of four doctors in a multi-specialty practice, McNair gives a positive grade to his medical school career. "I had a good experience there. Tufts had a reputation for openness and fairness and accepting people who were different," he says, before adding, "I give it that."

### Intent on going back

MICHAEL REDDIX, '84, HAD WORKED WITH Charles Cook, '75, as a Tougaloo College student when the latter man was running his hypertension-screening program in Mississippi at the start of his medical career. One day, when Reddix broached his idea of a career in medicine, Cook told him bluntly, "Tufts is where you want to go." Coinciden-

tally, Cook had been taught by Reddix's parents—they were grade school teachers in Columbia, Miss.—and they both had a high opinion of his intelligence, so Reddix lent the opinion extra weight.

Cook went further, encouraging Reddix to follow his example and earn a public health degree after he got his M.D., explaining that the second degree would enable him to orchestrate his career better by going wherever the medicine was most needed. Reddix took the advice, pausing to acquire an M.P.H. from Harvard after his graduation from Tufts.

Heading off to medical school wasn't all smooth gliding. Reddix admits to harboring doubts about his ability to survive the academic rigors he would face at Tufts. As he puts it, "I was worried not about getting in, but getting out. Some schools would take you in, and then they wouldn't graduate anybody." Reddix says the support available to him at Tufts "was probably the biggest reason why I picked it over any other school. I mean, why in the world would anyone go from Mississippi all the way up to Boston?"

The answer for Reddix came most resoundingly in the form of Dr. Vivian Pinn, Colleen Romain and the agreeable mix of students that by this time had been assembled at Tufts from all over the country, including a fair number of southern blacks whose collective strength eased the transition for him. There were enough blacks that they could laugh and work and party together. Plus, as a bonus, some of those faces were already familiar from undergraduate days. "At one point," notes Reddix, "there were more black students at Tufts from Tougaloo than any other black college—six of us from that little bitty college."

Carl Reddix, '85, Michael's younger brother, was among them. Regarding his choice of medical schools, says Carl, "I just followed my brother." How much difference did it make that a stream of Mississippi students had already blazed the trail to Tufts? "Other folks had had academic success there," he responds. "You want to go where other people have had success in the past."

Echoing his brother, Carl cites Pinn and

Romain as key figures in ensuring that his life as a student remained positive. Pinn was always "fiery, magnanimous and fair," he says, pointing out that it "was not just minority students or the women who gravitated toward her." White male students and even other medical school faculty would seek her out. As for Romain, "we'd camp out with Colleen on a regular basis."

After graduation, Carl and his brother, Michael, were determined to return south and make a difference in their home state. "Without question," declares Carl, who works with wife Natalie Brookins-Reddix, '85 (who met Pinn at Tougaloo and came away impressed, saying that "she seemed genuinely concerned that other doctors would go out and support the community") and his brother in a four-member internal medicine practice in Jackson. "We were intent on coming back." With an M.P.H. from Harvard and advanced training at Johns Hopkins, he could have gone anywhere in the country.

Over the past few years, as an offshoot to its regular duties, the Reddix Medical Group has teamed up with the Mississippi Department of Corrections to bring a community standard of medical care to a portion of the 15,000 inmates held in the state's prisons and jails. "Right now we are bidding for a statewide contract," says Carl, "and if we get that, our involvement will go from sideline to front and center." Again the circle closes, with benefits radiating in all directions.

Remember Willie Lucas, the Mound Bayou high school teacher? After earning his medical degree, he went home and spent a decade working as a director at the Delta Health Center. Then he moved a few miles down the road and opened a private practice in family medicine in Greenville, Miss., where he has been serving the community for most of the past 20 years. "I enjoy my work; I work hard; it's been a great life," says Lucas. "And I likely wouldn't have gone to medical school," he notes, "if that opportunity [of meeting Geiger and attending Tufts] hadn't come along." TM

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