

October 2015

Lessons from African American History

Lois E. Horton

Follow this and additional works at: <https://via.library.depaul.edu/jhcl>

Recommended Citation

Lois E. Horton, *Lessons from African American History*, 10 DePaul J. Health Care L. 89 (2006)
Available at: <https://via.library.depaul.edu/jhcl/vol10/iss1/6>

This Article is brought to you for free and open access by the College of Law at Via Sapientiae. It has been accepted for inclusion in DePaul Journal of Health Care Law by an authorized editor of Via Sapientiae. For more information, please contact digitalservices@depaul.edu.

LESSONS FROM AFRICAN AMERICAN HISTORY¹

Lois E. Horton

Effective educational strategies for promoting better health among people of color can draw on the lessons of African American history and culture. Black communities faced centuries of displacement, oppression, and discrimination. These hardships often took a physical as well as an emotional toll, and African Americans developed ways of coping with them. In order to survive, African Americans also developed institutions and practices that became cultural strengths. Understanding the historical role of such institutions as black churches and mutual aid societies and such practices as informal adoption and the reconstitution of extended families may suggest educational strategies that draw on the strengths of these communities.

Uless Carter was the son of a sharecropper in America's Mississippi delta in the 1920s. At the end of each year, the landowner charged the family for seeds and other supplies and deducted it from their share of the proceeds from the crop. Like a great many sharecropping families, they often found themselves having earned nothing or going deeper into debt, according to the landowner's accounting. One year, Carter's mother had kept meticulous records, and when the landowner informed his father that the family had earned nothing that year, he boldly disagreed. Faced with the evidence of the family's earnings, the landowner admitted the truth, but declared that he could not pay what he owed them that year because he needed the money to send his son to college. This so angered Carter's father that he packed up his family and left the plantation.²

The story of Uless Carter's family illustrates one continuing theme in African American history – the injustice of arbitrary authority, anger at that injustice, and the suppressed rage that was often necessary to black survival. It also illustrates one of the ways in which the life circumstances of African American people have had an impact on black emotional and physical health – the necessarily suppressed rage at such injustice undoubtedly contribute to hypertension and depression.

¹Paper presented at the First Annual Winter Institute for Black Studies, Lifestyle Changes: Keys to Reducing Health Disparities among People of Color, East-West Center, University of Hawaii at Manoa, January 18-19, 2005.

²Nicholas Lemann, *The Promised Land: The Great Black Migration and How It Changed America* (NY: Vintage Books, 1992).

There have been many efforts in the past twenty or thirty years to improve the delivery of health care to minorities. While recognizing that poverty and a lack of health insurance necessarily lead to a crisis among minorities, many of these efforts have concentrated on devising ways to educate African Americans to take advantage of medical services, particularly with regard to preventive care. More recently the creation of the National Center on Minority Health and Health Disparities within the National Institutes of Health and the designation of Healthy People 2010 goals for the nation again have focused renewed attention on these problems. Winston Price, the president of the National Medical Association of black physicians, has advocated outreach efforts to educate people about available health care and help them learn to take care of themselves. He has suggested that doctors take their educational efforts into barber shops, beauty parlors, churches, and community centers.³

Price's suggestions demonstrate an awareness of the importance of community institutions and the role they might play in bringing information to African Americans. This paper will extend this idea and explore the ways in which knowledge of African American history and an understanding of the culture that history developed could contribute to the delivery of health services and help reduce health disparities for minorities. It is important to understand that African Americans have a very long history in America, so long that they were responsible for shaping much of what we consider American culture. In the 340 years after the arrival of Christopher Columbus in the western hemisphere, approximately 10 of the 12 million people who came to the Americas came from Africa.⁴ The first forced migrants from Africa to what became the United States were brought to Virginia in 1619. They were the first of at least twelve generations in slavery in British North America. They experienced over 150 years of slavery before the American Revolution and nearly another 100 years of slavery before it was abolished after the Civil War. After slavery, African Americans suffered another century of discrimination, violence, and segregation before the passage of the modern civil rights legislation.⁵

The story of African Americans is complex. In their history, blacks had a great variety of experiences, and the population was

³"Dying for Basic Care," *Washington Post*, December 21, 2004, F1, c. 1.

⁴George M. Fredrickson, "America's Original Sin," *New York Review of Books*, (March 25, 2004) 34.

⁵James Oliver Horton and Lois E. Horton, *Hard Road to Freedom: The Story of African America* (New Brunswick, New Jersey: Rutgers University Press, 2001).

composed of many different African ethnicities. There were many changes over time, even in the institution of slavery, and the conditions of their lives were subject to regional and class variations. Despite such differences, there are some themes that we can identify to help us understand black history and culture. These themes, along with the strategies that black people developed to cope with hardship, can illuminate how African Americans not only survived, but also how they developed a rich culture, frequently under conditions of extreme deprivation and ruthless oppression. Some of the themes in black history that can help us understand minority health disparities and suggest strategies for care include: threats to cultural survival and uncertainty about the future, threats to the survival of the family, the long history of hard labor, and the subjection to arbitrary authority and arbitrary punishment.

The threat that enslavement posed to the survival of African cultures and the uncertainty about the future that it caused seem obvious. This was especially true of the disruption and hardships caused by the Middle Passage, or the transportation from African to the Americas that characterized the Atlantic slave trade. This trade lasted from the early sixteenth century to the early nineteenth century, when, in 1808, it became illegal, though it was not entirely ended. An estimated 15 million Africans were captured, chained, and tightly packed into cargo holds for the journey. They were packed two deep and, in the most humane calculations, allotted a space one-foot wide by six-feet long for a man, five feet ten inches for a woman, five feet two inches for a boy, and four feet six inches for a girl. These Africans suffered deaths from disease, mistreatment, malnutrition, and suicide. The average death rate on the Middle Passage over the centuries of its existence was 15 percent and sometimes rose to as much as one-third of the cargo.⁶ The psychological suffering caused by the process of enslavement was also great. People were torn from their villages, their families, and their cultural institutions. Often they could not speak the languages of their fellows and suffered fears about the intentions of their captors. Olaudah Equiano was 11 years old when he was captured in West Africa in 1756. He had never seen white people, the ocean, or ships, and could not speak the language of his captors. Observing the "brutally cruel" ways in which these Europeans

⁶James Oliver Horton and Lois E. Horton, *In Hope of Liberty: Culture, Community, and Protest Among Northern Free Blacks, 1700-1860* (NY: Oxford University Press, 1997), 18.

treated each other he was certain he would be mistreated and feared he would be eaten.⁷

In the nineteenth century, after the Atlantic slave trade ended, there was a similar threat to the survival of African American culture. As the Cotton Kingdom expanded into the lower and western South enslaved African Americans were uprooted from long standing coastal communities and shipped or marched to the newly developed plantations. About one million people, often the young and the most able-bodied, were forced into what historian Ira Berlin has called the Second Middle Passage.⁸ Despite these threats to cultural continuity and the hardships of slavery itself African Americans found ways to resist and to preserve important aspects of their cultures. We have evidence that many African languages were in use for at least 200 years, including reports of people speaking their native languages at colonial gatherings at a Philadelphia burial ground and at Congo Square in New Orleans in the early nineteenth century. African religions and tribal practices also survived well into the nineteenth century, as slaves engaged in the ring shout, a form of worship incorporating dance. Some African Muslims also maintained their prayer and burial practices, and some in the nineteenth century could still recite and write passages from the Koran. African Americans also preserved aspects of their cultures by synthesizing African and European languages. For example, the hybrid Gullah still exists today in the Sea Islands of Georgia and South Carolina, and other syncretic forms of Christianity were developed in African American communities.⁹

African Americans managed to preserve aspects of their cultures partly through the networks of communication they developed. These networks relied on slaves and free blacks that had positions that allowed some mobility, such as sailors, river boat workers, and personal servants. These people were among those who carried news and maintained connections between those separated by slavery and the slave trade. Cultures were also preserved in music, through the singing and dancing of worship, through work songs, and the music that formed the basis for the uniquely American blues and jazz. Many cultural values were also preserved in the tradition of storytelling, as in the Brer Rabbit stories that are still a part of American folklore. Africans also preserved parts of their

⁷*The Interesting Narrative of the Life of Olaudah Equiano, or Gustavus Vassa, the African* (1789), reprinted in Arna Bontemps, *Great Slave Narratives* (Boston: Beacon Press, 1969), 28-29.

⁸Ira Berlin, *Generations of Captivity* (Cambridge, Mass.: Harvard University Press, 2003), 162.

⁹Horton and Horton, *In Hope of Liberty*.

medical traditions in America, demonstrating the efficacy of inoculation for smallpox, using herbal remedies, and providing psychological interventions traditionally performed by conjurers. It was common for even whites on large plantations in the South to rely on slave doctors to treat their ailments, and slave midwives delivered the babies of the plantation.¹⁰

Another important theme for understanding both the physical and psychological health of African Americans during the centuries of slavery and beyond to the sharecropping times of Uless Carter is the pervasiveness of hard labor, often coupled with inadequate diet. The coerced hard labor applied equally to men and women in slavery and to children as soon as they were deemed physically able to work. Evidence from the African burial ground used in New York City in the 1700s indicates some of the consequences of physical conditions under which the slaves worked. Archeological analysis of the remains indicates a high mortality for infants and for teenagers. Many of these African slaves suffered from malnutrition that made them vulnerable to anemia and infectious disease. They had broken bones from beatings they suffered and hairline fractures of the neck and shoulders, a consequence of carrying very heavy loads on their heads. Some of the children's remains even had backbones jammed into the braincase, probably as a result of their falling while carrying heavy loads on their heads.¹¹ Hard labor and inadequate diet were the hallmarks of much of black labor from the 1600s until well into the 20th century, causing a long history of the resulting vulnerability to life-threatening diseases.

In the face of such hardships, free black communities from the late eighteenth century on created cooperative organizations. Burial societies maintained African cultural traditions and offered financial resources to continue traditional practices. Mutual aid organizations created pooled resources to pay for funerals; to carry members through periods of sickness, disability, and unemployment; and to care for widows and orphans. These community organizations were especially important because black people were generally excluded from the aid provided by white philanthropic societies and often from government aid as well.¹²

¹⁰Eugene D. Genovese, *Roll, Jordan, Roll: The World the Slaves Made* (NY: Pantheon Books, 1974).

¹¹Steven Mintz, *Huck's Raft: A History of American Childhood* (Cambridge, Mass: Harvard University Press, 2004), 42.

¹²Horton and Horton, *In Hope of Liberty*; James Oliver Horton and Lois E. Horton, *Black Bostonians: Family Life and Community Struggle in the Antebellum North* (NY: Holmes and Meier, 1979, revised edition, 2000).

Through their long history, African Americans have frequently been subject to arbitrary authority often accompanied by arbitrary punishments. They operated from a position of relative powerlessness, as did Uless Carter's sharecropping family, both during slavery and the long post-slavery period. Slaveholders used whippings, maiming, and other tortures and humiliations to enforce their labor demands and maintain control over the slave population. After slavery, southern whites used lynching and other attacks to keep black people from "rising above their station." People could suffer acts of violence for such things as dressing too well, being too successful in business, or even, in the case of black men, being too polite to white women. Small humiliations were an everyday reality, and life-threatening situations a common occurrence. The twentieth century poet, lawyer, and priest Pauli Murray reported that when she was six years old, she saw the body of a man who had been murdered for walking across a white man's watermelon patch.¹³ After the Civil War and through much of the twentieth century, African Americans in the South were forced to the back seats in buses and streetcars; required to attend separate and inferior schools and to use separate water fountains and other public facilities; and denied admission to restaurants, restrooms, and hospital facilities.

Partly as a way to cope with the dangers and humiliations of arbitrary authority, many African Americans found strength in religion. Some were able to deal with their anger through a belief in biblical promises of divine retribution for injustice. The black church provided a refuge from white oversight and control where pride and dignity could be preserved. The church became the crucial center of the black community. When in the 1950s civil rights activists in Montgomery, Alabama organized a boycott to protest the segregation of the buses, they turned to a young minister at the Dexter Avenue Baptist Church. The church became the heart of civil rights organization, and the Reverend Martin Luther King, Jr. was catapulted into national prominence.

Perhaps the most difficult situations that African Americans faced in slavery were threats to the family. The famous black abolitionist Frederick Douglass remembered seeing his mother only a few times when he was an enslaved child. He couldn't remember what she looked like, since he was very young and had seen her only at night. She worked on a different plantation and had to walk the long distance after sundown after she finished her work there and returned early the next morning. Douglass was more fortunate than most slave children because he was cared for by

¹³Mintz, *Huck's Raft*, 116.

his grandmother.¹⁴ Sojourner Truth, black abolitionist and women's rights advocate, was enslaved in New York State when her owner took her five-year-old son Peter from her and gave him as a wedding gift to his daughter. Peter's new owners illegally took him to the South. At his new home, he suffered regular beatings and slept under the front porch every night where his mistress sometimes came to minister to his wounds. When he was finally recovered and returned to New York, he so feared his master's retribution that he refused to recognize his own mother. It was some time before she could reassure him that it was safe for him to be reunited with the broken-hearted and angry Truth.¹⁵

Under such threats, families remained very important to African Americans. As a consequence, one of the most important reasons that enslaved people undertook the arduous and dangerous measure of running away was their desire to see family members from whom they had been separated. Harriet Jacobs, an enslaved woman in nineteenth century North Carolina, was continually harassed by her owner. She took refuge with her grandmother, a free black woman, and spent seven years hiding in an attic garret so that she could remain close to her children before she managed to escape to the North.¹⁶ For many years after the Civil War and the end of slavery, newspapers ran advertisements from people searching for family members lost in slavery.

So many families were broken by slavery that African Americans developed ways of maintaining the emotional resources provided by families. Strong extended family ties helped care for children who lost their parents, as did recreated families where children would be cared for by other unrelated adults who served as "aunts" and "uncles." This phenomenon continued in black communities in the twentieth century with informal adoptions. Such cooperative solutions resulted in the sharing of resources and the networks of rights and obligations that extended from the family to the community. These measures helped people survive in slavery and formed the basis of the underground railroad that allowed some to escape to freedom. In the mid-twentieth century, anthropologist Carol Stack found that such networks among single mothers on welfare helped the women survive with very few individual resources.¹⁷

¹⁴Frederick Douglass, *Narrative of the Life of Frederick Douglass*, edited by David W. Blight (Boston: Bedford Books of St. Martin's Press, 1993).

¹⁵James Oliver Horton and Lois E. Horton, *Slavery and the Making of America* (NY: Oxford University Press, 2005), 76.

¹⁶Harriet Jacobs, *Incidents in the Life of a Slave Girl Written by Herself*, edited by Jean Fagan Yellin (Cambridge, Mass.: Harvard University Press, 1987).

¹⁷Carol B. Stack, *All Our Kin: Strategies for Survival in a Black Community* (NY: Harper & Row, 1975).

What lessons can we learn from this history that might guide us in health education and the provision of health care to African Americans? The themes discussed above suggest some fruitful approaches. African Americans' history of being subjected to arbitrary authority, discrimination, humiliation, and exclusion from facilities indicate the importance of personal contacts and personal testimony in convincing people to use health services and making them amenable to specific treatments. It is not only a matter of making services available, but also a matter of establishing trust in the professionals and the services that are available.

Cooperative or communal approaches to health care provision, rather than individualist approaches, also seem more compatible with the ways that African Americans have historically met individual, family, and community needs. The necessity for poor people to pool resources and the high value placed on commitment to the good of the group suggest enlisting business people, educators, and medical professionals to provide services at least partly as a matter of responsibility to the community. Communal values also suggest that enlisting kinship and community groups would be an effective strategy. Health care providers could work through fraternities, sororities, fraternal organizations, and family reunions to bring information and services to people.

Probably the most important lesson we can learn from African American history concerns the centrality of the church in black communities. In churches, community members of all stations in life maintain personal ties and work under a structure of authority that is democratically organized and highly respected. Knowing this history would indicate that the most effective efforts would take education, health screening and preventive care to the people through the churches. Cooperative efforts by health care professionals, community businesses, and churches may be able to provide clinics for routine care and screening in the churches themselves, addressing many of the problems of accessibility, particularly for poor people who cannot take time off from work and have difficulty getting to doctors' offices. Such efforts would recognize the church as an institution with a very long history of importance to the lives of African American people. Thus, by understanding the long history of blacks in America and the culture that history developed, we can identify the ways that African Americans coped with hardships, survived, and sometimes prospered. Health care providers might use cultural strengths such as strong family ties and active black churches to combat health disparities among people of color.