The graduates of the Tuskegee School of Nurse-Midwifery

Lucinda Canty

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THE GRADUATES OF THE TUSKEGEE
SCHOOL OF NURSE-MIDWIFERY

Lucinda Canty

1994
THE GRADUATES OF THE TUSKEGEE SCHOOL OF NURSE-MIDWIFERY

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Lucinda Canty

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The research report is accepted in partial fulfillment of the requirements for the degree of Master’s of Science in Nursing.

Helen Vanmay Earnest
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Ruth Ann Weatherly
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Lucille C. Grant

5/17/94
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ABSTRACT

THE GRADUATES OF THE TUSKEGEE SCHOOL OF NURSE-MIDWIFERY

A historical study was conducted to identify the achievements and contributions of the graduates of the Tuskegee School of Nurse-Midwifery to the nurse-midwifery profession and the impact they had on obstetrical and general health care in the United States. The first step of the process was identifying the number and names of the graduates. The sample consisted of the 31 graduates of Tuskegee School of Nurse-Midwifery. The names of 26 of the 31 graduates were identified. Information was obtained on a total of 10 of the 26 graduates whose names are known. All are black women between approximately seventy-five to one hundred years of age. An oral history was obtained on two graduates. Primary and secondary sources were located and analyzed. The results revealed the ten graduates worked as clinical nurse-midwives, general public health practitioners, educators in nursing and nurse-midwifery; instructors and supervisors of granny midwives; and functioned as maternal-child consultants. They were able to overcome racial, economic, and cultural barriers to provide improved health care to women and children. Limitations of the study and implications for future research are presented.
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Chapter I

STATEMENT OF THE PROBLEM

Introduction

Significance of the Problem

The Tuskegee Nurse-Midwifery school opened September 15, 1941 as a demonstration project under the auspices of the Macon County Health Department, the U.S. Children's Bureau, the Julius Rosenwald Fund, Tuskegee University, and the Alabama Department of Health.¹ The project's main goal was to decrease maternal-infant mortality rates in the South, particularly in the black community where infant mortality rates were higher.

The nurse-midwifery program was open only to black graduate nurses who had experience in public health. The premise of the project was that black public health nurses trained as midwives could begin addressing maternal-infant health care issues in the black community.² Training black nurse-midwives made sense as they were recognized as an avenue to reach black women of childbearing age.

Although the program closed in 1946, it graduated 31 black nurse-midwives.³ This thesis will investigate the achievements and the contributions of those graduates to the profession of nurse-midwifery and their impact on health care within the black community.

There is a scarcity of literature about early black nurse-midwives and their education, their practice, and the effectiveness of care they provided. Information about how black nurse-midwives reduced maternal and infant mortality rates and their role in this process is pertinent to nurse-midwifery practice. Moreover, knowing one's history enhances the profession as does having an understanding of one's profession adds to the depth and richness of the practice.

Purpose of the Study

The purpose of this research study is to provide a knowledge and an understanding of the achievements and contributions of the Tuskegee School of Nurse-Midwifery graduates to the
nurse-midwifery profession and identify the impact these black nurse-midwives had on obstetrical and general health care in the United States. The Tuskegee graduates obtained an education in a relatively new and evolving profession and during a time when racial discrimination, poverty, and disease profoundly affected the black community. These women were remarkable and deserve to be recognized and commended for their achievements. This research will also help to foster further historical research about black nurse-midwives.

Research Questions

1. What were the number and names of graduates of the Tuskegee School of Nurse-Midwifery?

2. What are the contributions of the graduates of the Tuskegee School of Nurse-Midwifery to the profession of nurse-midwifery?

3. What was the impact of the graduates of the Tuskegee School of Nurse-Midwifery on obstetrical and general health care in the United States?
Review of the Literature

General Social Context of the Time Period

In the 1940's, Black Americans were approximately 10% of the entire U.S. population. A higher concentration of blacks existed in the South where they were approximately 25% of the population. Blacks confronted racial segregation and discrimination in employment, housing, health care, and education. Although racial discrimination was blatant in the South, it also existed in the North. Northern discrimination was more subtle, but widely practiced. Blacks had the right to vote, but in the South, encountered several restrictions such as literacy clauses and poll taxes, which prevented blacks from voting.

Blacks have been migrating North since 1916, with hopes of finding better economic conditions and escape from segregation of the South. By 1940, there were approximately 4,000,000 Black Americans living in the North. Certain districts and public housing was assigned to Blacks. Some whites made it difficult for blacks to move into white communities by refusing to rent or sell property to them.

In the late 1880's Southern states passed Jim Crow Laws, which basically legalized segregation. Separate but equal facilities were to be created for both blacks and whites, but this was not always the case. Blacks were usually separated or excluded. Facilities for blacks were of poorer quality than those of whites. David Goldfield, a professor of history, describes the extent of segregation, "separate water fountains, restrooms, entrances, seating, eating facilities, schools, and even days to shop."

In 1940, Black Americans made up 10.2% of the labor force in the United States. Out of a population of approximately thirteen million, 5,389,191 were employed; 3,582,005 were male and 1,807,186 were female. Farmers made up the largest profession for black males. Sixty-two percent of black men employed were farmers or farm laborers. Statistics from 1940
showed 174,000 blacks owned farms, 200 were farm managers and "half a million were tenants, sharecroppers, or field laborers."18

The majority of those working, male or female, were often underpaid and overworked.19 In the North, industrial jobs paid blacks half the amount of what white workers received.20 Blacks were usually the last hired and the first fired. As a result of economic inequalities, many blacks found themselves living in poverty or just barely above the poverty line.21

Due to the economic conditions, many black women had to work as they had responsibilities to their family and community.22 They faced both racial discrimination and sexual prejudice in the work environment. Foner notes that "though women in general have been discriminated against, exploited through limitation of their opportunity for employment, through long hours, low wages and harmful working conditions, such hardships have fallen upon Negro women with double harshness." 23 In the 1940's, 70 percent of black women were in service occupations, 16 percent were farmers or farm laborers, and approximately one percent were in clerical and sales work.24 The remaining were employed in various professions such as nursing, midwifery, and professional laundresses to name a few.25

In 1940, 31 percent of the families had a female head of household.26 Economic factors were believed to be the main reason for this. Black males had difficulty in obtaining stable employment which made it difficult for them to support their families.27

Extended families have always been an important part of African American culture as "they served both economic and social functions."28 The extended family consisted of grandparents, aunts, uncles, and cousins.29 They were considered a real part of the family. This kinship also extended to members of the community who were not blood related.30 They assisted with childrearing and household responsibilities.31

Segregation and poverty subjected blacks to poorer living conditions. In The History of the Negro in Medicine, Herbert Morias describes the living conditions of blacks in rural communities of the South, "Negro sharetenants and croppers were housed in overcrowded,
unventilated and unsanitary shacks." 32 A child of a Southern sharecropper described his home as having, "wide cracks on the floor of the two-room cabin, where he lives with his three brothers, two sisters, parents, aunt, three fatherless cousins and grandmother." 33

In the North, where neighborhood segregation also existed, blacks resided in "dilapidated tenements, decrepit houses, basements, cellars and even converted stables." 34 Unsanitary water supplies and inadequate sewage systems were located in black communities and contributed to the higher morbidity and mortality rates among blacks. 35 Many of these living situations were unfit for humans to live in and they contributed to malnutrition, unsanitary and overcrowded conditions. 36

In addition, they had inadequate nutrition and medical care thus increasing their risk for health problems. "Black families relied heavily on diets of pork fat, grits and molasses." 37 These diets were primarily due to inadequate education regarding nutrition as well as poverty. 38 Beardsley noted "the diet of a great proportion of blacks was generally deficient, with the absence of key vitamins." 39

Black Health Care and Health Care Professionals in the 1940's

In addition to economic inequalities, blacks also suffered from discriminatory treatment in medicine and health care services. 40 Many hospitals did not admit blacks while others allocated a limited number of beds. Hospitals which admitted black patients separated them from the white patients. 41 Although these hospitals admitted black patients, they usually did not receive the same medical treatment as white patients. 42 They were placed on medical units with inadequate nursing personnel and medical equipment. 43 If the beds accommodating blacks were full, they were usually denied admission regardless of their medical condition or if "white" beds were available. 44

Racial segregation and discrimination barriers prevented blacks from receiving adequate health care. As these barriers were the most difficult to overcome, Black Americans developed
their own health care establishments. In 1941, there were 110 hospitals in the country which provided care to black patients exclusively with a total of 10,000 beds. However this was far from an adequate number of beds to serve the black population of 13,700,000. Many of these facilities were overcrowded with patients and inadequately staffed with health care providers and medical equipment. Only 22 of these hospitals were approved by the American College of Surgeons. Many black health care facilities served only a small fragment of the black population, because they were usually located in urban areas. For blacks who lived in secluded rural areas, lack of transportation made it difficult for them to access these health care services.

Blacks did not have the same quality or quantity of medical and hospital care available to them as the white population, even though their needs were greater. Poverty, unsanitary and overcrowded housing conditions, inadequate nutrition, and lack of information about hygiene increased their risk of contracting tuberculosis, syphilis, gonorrhea, infectious diseases, prenatal and maternal complications. As a result of their economic situation, many blacks were unable to afford health care services. For those who did have the money, few clinics and hospitals were accessible to them.

In 1940, the mortality rate for blacks was 33 percent higher than for whites, 13.8 per 1000 versus 10.4 per 1000 respectively. More blacks contracted tuberculosis, pneumonia, influenza, typhoid fever, whooping cough, malaria, syphilis and pellagra, which led to higher morbidity and mortality rates than whites. The five leading causes of death among blacks in 1940, were heart disease, tuberculosis, nephritis, intracranial lesions and pneumonia.

The maternal and infant mortality rates for blacks were far higher than those of whites. The U. S. Public Health Service published a public health report in 1946 which revealed the infant mortality rates for blacks was 73.8 per 1000 and 43.2 per 1000 for whites in the United States. It also revealed the maternal mortality rates as being 77.3 per 10,000 for blacks and 32.0 per 10,000 for whites in that same year. This was the result of a higher incidence of
puerperal fever, toxemia and hemorrhage among black women.58

Racial segregation and discrimination affected the professional development of the black physicians, nurses and other health care professionals.59 These practices limited educational opportunities and the ability of blacks to practice. As few schools admitted blacks, there was a shortage of health care professionals available to work in the black community.60 Morias notes that:

In 1942 there were approximately 3,810 black physicians in America; one to every 1,377 blacks. By states the ratio ranged from 1 to 1,002 in Missouri to 1 to 18,527 in Mississippi. Fifty-five percent of the total number of black physicians practiced in the South and forty-five percent in the North. There was one black physician to 4,150 Southern blacks and one to every 2,500 in the North.61

Black physicians could only practice in a limited number of hospitals, because few white hospitals allowed black physicians practice privileges.62 They were refused even if these hospitals admitted black patients. Black physicians were limited to black health care facilities.

World War II created a further shortage of health care providers in the black community. Approximately 600 black physicians, 16% of the black physicians practicing in the U. S., served in World War II.63 Approximately 480 black nurses served in the war.64

Public Health and Black Public Health Nurses

Public health was an established field during the 1940's and of growing interest to the medical industry. It seemed a solution to the problems of reaching individuals who did not have medical care available to them. Health promotion and prevention was also emphasized in Public Health. Prevalent epidemics in the black community during the 1940s were tuberculosis, syphilis, and childhood diseases.65 Several programs and clinics, which were developed in the 1920s, continued to work in the black community.66 Some of these programs and clinics were staffed by black physicians and nurses as they were also located in the black community.67

In 1943, there were 1,297 nursing schools in the United States.68 The National Association of Colored Graduate Nurses reported in 1943 that there were 25 black nursing
schools and 15 nursing schools admitting both black and white students. During this time, nursing schools did not teach public health in the basic nursing curriculum. Those nurses wanting to specialize in public health nursing had to take a postgraduate course to receive a certificate in public health nursing.

In the 1940's, only two public health nursing programs existed in the Nation for black registered nurses. The St. Philip Hospital School of nursing in Richmond, Virginia was established in 1936. This program was one year in length, leading to a certificate in public health nursing. The second program, North Carolina Central College in Durham was established in 1946. It also led to a certificate in public health nursing.

The Julius Rosenwald Fund, a philanthropic organization which existed from 1917 to 1948, provided financial contributions to many black schools, universities and hospitals in the South. This fund not only provided fellowships for black nurses to receive public health nursing training but also supported black nursing schools who established public health nursing programs for graduate nurses. The St. Philip Hospital School of Nursing and North Carolina Central College both received contributions from the Rosenwald Fund.

During the 1940s the employment of black public health nurses was increasing among public health agencies, such as Visiting Nurse Associations. According to a study conducted by the National Organization of Public Health Nursing (NOPHN) and the U. S. Public Health Service, there was an "increase from 549 black public health nurses employed in 1931 to 797 in 1940." Although there was a significant increase in the number of black public health nurses employed, there was still not enough to meet the needs of the black community.

This study also revealed that black public health nurses received lower initial salaries and educational stipends than white nurses with similar qualifications. Blacks found it difficult to receive promotions and enter into management positions. Promotions and raises were rarely considered regardless of job performance and education.

By 1942, there were approximately 1,101 black nurses employed in public health
New York employed the largest number of black public health nurses: approximately 282. The Southern states, Alabama, Arkansas, Florida, Georgia, Louisiana, Mississippi, North Carolina, South Carolina, and Texas, employed a total of 294 black public health nurses.

Prior to World War II, black nurses could only work with black families, as they were not allowed to work with white patients. Black public health nurses worked in segregated black communities. This changed during World War II because of the nursing shortage which existed. Black nurses were no longer restricted to only black patients. They began to work with all patients, black and white.

State and local health departments and public health nursing agencies employed black nurses. These nurses worked in clinics which provided care to patients with tuberculosis, venereal diseases, and various other medical disorders. They worked with all family members, providing health, hygiene and nutrition education. Some public health nurses developed educational programs for granny midwives.

The black community highly valued and respected public health nurses. Black public health nurses were the most prominent health care professionals to work within the black community, particularly in the rural areas of the South. Black nurses were believed to be successful in working with black populations because they understood the culture and were able to develop a trusting relationship. Black nurses were able to encourage the black community to participate in white-controlled health care projects.

**Granny Midwives**

Black women received little, if any, obstetrical care in the 1940's. White obstetricians were not likely to care for black women, particularly those in rural communities. Racism, segregation and poverty prevented black women from utilizing their obstetrical services. Many blacks could not afford medical care or hospitalization and depended heavily upon the
granny midwives for care during childbirth. Laura Blackburn of the State Board of Health in Columbia, South Carolina, reported the 1940 statistics on deliveries conducted by granny-midwives:

Midwives attended more than two-thirds of the Negro births in Mississippi, South Carolina, Arkansas, Georgia, Florida, Alabama, and Louisiana. They attend from one-third to two-thirds of Negro births in North Carolina, Virginia, Delaware, Texas, and Oklahoma. In Tennessee and Maryland they attend slightly more than one-fourth and in Kentucky and Missouri, 11 and 8 percent, respectively. In the remainder of the twenty-nine states, 2 percent or less of the Negro live births are attended by midwives.91

The granny midwife has always been part of the black community, even before coming to America from Africa in 1619 as slaves.92 Granny midwives were recognized for their strong religious beliefs and superstitions. Linda Holmes, who interviews granny midwives, states they are "strong personal bearers of spiritual wisdom who may integrate spiritual practices into their birthing practices."93

Granny midwives were essential to the black women to whom they provided care. Black women would not have received any obstetrical care, had it not been for the granny. The granny midwife was their only provider for "obstetrical care, because racism, economic deprivation and rural isolation made access to medical care difficult to obtain."94 The grannies were more affordable and available to black women. Grannies would care for women who lived in deep rural areas, where doctors were unable or unwilling to go.95 They were also willing to accept payment for services in forms other than cash, such as produce or animals.

Granny midwives did not receive any formal training prior to practicing and pretty much learned their trade by apprenticeship through family association.96 Southern black midwives frequently followed their grandmothers, mothers, or other senior midwives in the community as part of their preparation for becoming a midwife.97 Many grannies had no more than a grade school education and many could not read or write.

The granny midwives were all most black women had, but they were not always the
safest. The Tuskegee School of Nurse-Midwifery Bulletin states grannies "performed many dangerous procedures, such as, vaginal examinations done with an unwashed hand greased with lard, deliveries on bare floors, and the use of dirt dauber tea." Examples of superstitions include "from placing an ax under the bed to 'cut' the labor pains to wearing the herb 'asafetida' worn around the neck to ward off illness." Many physicians, nurse-midwives and nurses believed that grannies placed women and babies at serious risk for complications because of their age, lack of education, unsanitary practices and superstitions. They were called ignorant and difficult to teach because of their strong superstitions.

The Sheppard Towner Act, which was passed in 1921, enabled the federal government to provide grants to the states to promote maternal and child programs. Also included in this Act were funds for programs for public health nurses to train granny-midwives. Most midwives participated in these midwifery classes. These programs instructed the granny on the proper way to assist in a normal delivery as well as danger signs to observe for and to seek help if complications occurred.

Granny-midwives also cooperated with state and local public health departments. They encouraged pregnant women to register at prenatal clinics and refused to see women who had not been seen at the clinic. Some granny-midwives worked with the nurse by helping "her find prenatal cases, tuberculosis cases, and sick babies, helped her work up prenatal clinics, well baby clinics and find crippled children."

Nurse-Midwives and Public Health in the South in the 1940's

In 1941, two nurse-midwifery programs existed in the United States. The Maternity Center Association (MCA) in New York City, the first nurse-midwifery school established in 1932, and the Frontier Graduate School of Midwifery in Hyden, Kentucky, established in 1939. Tuskegee School of Nurse-Midwifery based their program and curriculum on the
midwifery school of the Maternity Center Association.\textsuperscript{108} From 1933 to 1943, MCA graduated 67 nurse-midwives.\textsuperscript{109}

In 1940, 14 state health departments employed nurse-midwives as consultants in maternity nursing; instructors and supervisors of granny-midwives; or as generalized public health nurses with midwifery practice.\textsuperscript{110} An example of the latter was the Macon County Health Department's nurse-midwifery delivery service in Tuskegee, Alabama. On staff they had five nurse-midwives who provided public health nursing and midwifery to the black community.\textsuperscript{111}

Nurse-midwives in health departments had several roles and functions. They provided obstetrical care to women: prenatal, intrapartum, postpartum and newborn care. Some nurse-midwives were employed in state health departments as consultants in maternity nursing. Others established clinics to provide health care to families in rural areas. These clinics were responsible for screening patients for complications, such as syphilis and toxemia.

Because there were too few nurse-midwives to replace the granny-midwives, it was more realistic for nurse-midwives to work with the grannies.\textsuperscript{112} Nurse-midwives developed programs to educate and supervise the granny midwives.\textsuperscript{113} These programs were developed under the auspices of public health departments.

In some areas, particularly in rural communities, nurse-midwives were the only health care professionals. To these communities they provided general public health nursing along with midwifery.

**Tuskegee School of Nurse-Midwifery**

The plan for the Tuskegee School of Nurse-Midwifery began in 1939. The South had the highest maternal and infant mortality rates in the United States, particularly in the rural communities.\textsuperscript{114} Margaret Murphy, advisor in the Midwifery control program at the Alabama State Department of Health, and Dr. J.N. Baker, State Commissioner of Health, believed that
nurse-midwives could help improve maternal-infant outcomes in the South. ¹¹⁵

The State of Alabama Department of Health, Macon County Health Department, Julius Rosenwald Fund, Tuskegee Institute, and the U. S. Children's Bureau all participated in planning the Tuskegee School of nurse-midwifery. ¹¹⁶ In 1939, the decision was made to establish a demonstration home delivery service and school of nurse-midwifery in Tuskegee, Alabama. ¹¹⁷ According to the 1940 Annual Report of the State Department of Public Health of Alabama the objectives of the nurse-midwifery project were:

1. To reduce maternal and infant morbidity and mortality through an improved and expanded maternity service;
2. To make better provisions for hospitalization of maternity and pediatric cases;
3. To train nurse-midwives;
4. To study the problems of rural maternal and infant care where adequate medical service is not available, and attempt to arrive at a solution. ¹¹⁸

The School of Nurse-Midwifery was to be located on the campus of Tuskegee Institute. Tuskegee Institute was founded by Booker Taliaferro Washington, a former slave, in 1881. ¹¹⁹ Since its development, "Tuskegee Institute's programs have been designed to assist underprivileged people with problems affecting their educational development, economic process, and general welfare." ¹²⁰ Tuskegee Institute and the John A. Andrew Memorial Hospital, a black hospital, were not officially connected with the School of Nurse-Midwifery, other than to lend them their name and provide living accommodations. ¹²¹ When the school opened, several attempts were made to develop a closer relationship with Tuskegee Institute and John A. Andrew Memorial Hospital, but they were unsuccessful. ¹²² It was believed to be unsuccessful because "neither the Institute nor the hospital was prepared to assume responsibility for the school." ¹²³

In August 1939, a nurse-midwifery home delivery service was started to provide care to black women of Macon county. ¹²⁴ It was run by the Macon County Health Department and served as a clinical site for the Tuskegee School of Nurse-Midwifery. To staff the service a total of five black public health nurses were sent to Maternity Center Association in New York
for midwifery training on fellowships from the Julius Rosenwald Fund. The first two nurse-midwives, Beatrice Trammel and Marie Watts, started the service after graduating in 1939. The last three joined the service in 1941. The nurse-midwives provided generalized public health nursing as well as midwifery to the rural areas of Macon County. The maternity service was in existence for two years prior to the opening of the nurse-midwifery school.

Margaret Thomas, a nurse-midwife and staff member of Maternity Center Association (MCA), assisted with the organization of the school and was the first director. She was expected to return to MCA after the program was in operation for six months.

The Tuskegee School of Nurse-Midwifery opened September 15, 1941. Requirements for admission were as follows: Registered Nurse from an accredited nursing program; one year nursing experience, public health and/or obstetrical experience preferred; age 25 - 40 years old; in good health; and eligible for college matriculation. Initially applicants had to apply to the program through the Division of Public Health at Alabama Department of Public Health. After the school was well established, the application process was handled directly by the Tuskegee School of Nurse-Midwifery.

The program was for six months and consisted of "lectures, discussions and demonstrations conducted by the obstetrician, the nurse-midwife instructor, and other specialists." Clinical experience was obtained through "weekly clinics, home visiting and taking prenatal and postnatal call." Each student was expected to deliver twenty to thirty babies under supervision before graduation. Students also participated in teaching mother's classes and refresher courses to granny-midwives.

In June, 1942, F. Carrington Owens, a black nurse-midwife and graduate of Maternity Center Association, replaced Margaret Thomas and became the second director. She remained with the school until resigning June, 1943. Traditional racial attitudes made it difficult to recruit and retain qualified directors. Many who applied did not have the educational or professional qualifications for the position. Those who were qualified were
more interested in larger cities where race was not a big issue and the salaries and living conditions were more desirable.\textsuperscript{141}

The school was without a director from June to September, 1943. Margaret Thomas returned as director on a temporary basis in September, 1943 to August, 1945.\textsuperscript{142} In August, 1945, Claudia Durham, a black nurse-midwife and a 1944 graduate of Tuskegee School of Nurse-Midwifery, became the third director and remained so until the closing of the school in 1946.\textsuperscript{143}

It was also difficult to retain nurse-midwifery instructors. Three of the Maternity Center Association nurse-midwife graduates resigned in 1942.\textsuperscript{144} This was due to the heavy workloads, long hours and inadequate salaries. MCA notes that "the nurse-midwives at the school were deeply interested in the program, but they could not afford to continue working under the unfair employment and living conditions."\textsuperscript{145}

The Tuskegee School of Nurse-Midwifery program closed June 30, 1946, because of difficulty in recruiting qualified black nurses.\textsuperscript{146} During those 5 years in operation a total of 31 black nurse-midwives graduated from the program.\textsuperscript{147} These nurse-midwives worked throughout the states at various public health departments and nurse-midwifery services.

The nurse-midwifery care provided to the community proved that the Tuskegee School of Nurse-Midwifery was able to meet the major goal of decreasing the maternal and infant mortality rates. Maternity Center Association describes the success of the program:

When the school started, the maternal mortality rate in Macon County was 8.5 per 1000 live births; in its second year, the service delivered one-third of all the mothers in the county with a mortality rate of zero. The fetal death rate was 45.9 per 1000 live births before the opening of the school; by the end of the second year of the demonstration, it was 14 per 1000 for women under the care of the nurse midwives.\textsuperscript{148}

**Historiography**

Historiographical findings revealed two books on the history of blacks in nursing:

Carnegie's *The Path We Tread: Blacks in Nursing 1854 - 1990*\textsuperscript{149} and Hine's *Black Women in
These books briefly discuss the Tuskegee School of Nurse-Midwifery. Publications on the history of nurse-midwifery which discuss the Tuskegee School of Nurse-Midwifery are: Maternity Center Association's *Twenty Years of Nurse-Midwifery 1933-1953*; Sister Theophane Shoemaker's Master's thesis *The History of Nurse-Midwifery in the United States*; Chapter 2 in Helen Varney's book, *Nurse-Midwifery*; Sally Tom's article "The Evolution of Nurse-Midwifery: 1900 - 1960;" and Aileen Hogan's article "A Tribute to the Pioneers." All sources provide similar information on the Tuskegee School of Nurse-Midwifery, because they all reference the same source: Maternity Center Association's *Twenty Years of Nurse-Midwifery 1933-1953*. Although Linda Holmes has conducted extensive research on granny-midwives she does not discuss the relationship between grannies and black nurse-midwives.

Darlene Clark Hine, a professor of history at Michigan State University, discusses the history of black nurses and nursing education in *Black Women in White: Racial Conflict and Cooperation in the Nursing Profession, 1890 - 1950*. She discusses the factors leading to the development of black hospitals and nursing programs. She focuses on the issues in the black community that led to the development of the separate health care systems for Black Americans, such as, racism, segregation and poor health status of blacks. Nursing education for blacks in the South as well as the North are discussed. She mentions the major people involved with the financing, organization and supervision of black nursing schools, hospitals, and institutions.

The event leading to the development of nurse-midwifery education for black nurses in Louisiana is discussed. Hine focuses on the Flint-Goodridge Nurse-Midwifery program in New Orleans. This program was open for one year, 1942-1943, graduating two students. Tuskegee School of Nurse-Midwifery is briefly mentioned as a nurse-midwifery program during the 1940's that graduated 25 black nurse-midwives.

Mary Elizabeth Carnegie, professor of nursing, nursing historian and author, discusses the history of blacks in nursing in *The Path We Tread: Blacks in Nursing 1854 - 1990*. 
Carnegie begins with the first black nurses who practiced nursing duties to current black nursing leaders. She also discusses diploma, baccalaureate and master degree nursing programs at black hospitals and institutions. Carnegie also focuses on nursing organizations as well as the black nurses who were active in these organizations.

Carnegie provides some historical information on nurse-midwifery education in the United States. Certain factors leading to the development of these programs, such as high maternal-infant mortality rate is discussed. Midwifery education for black nurses in the 1940s is discussed. Tuskegee School of Nurse-Midwifery is mentioned as being a specialty program for black public health nurses from 1941 - 1946. Also mentioned are the first three graduates as well as Claudia Durham, a graduate from Tuskegee, as the third and final director of the program. 157

Sharon Robinson, a nurse-midwifery educator, investigated the development of midwifery in the black community in her article "A Historical Development of Midwifery in the Black Community: 1600 - 1940." She discusses the role of traditional black midwives and how essential they were to the black community even before coming to America as slaves. Robinson focuses on midwives prior to the development of nurse-midwifery education. Robinson was "struck by the fact that it was racism, segregation, economics, isolation and to some degree custom that was responsible for the important role the midwife played in the black community well into the 1940s." 159

Robinson briefly discusses the development of medical and nurse-midwifery education in the United States and the effects they had on the granny midwife. She mentions the Tuskegee School of Nurse-Midwifery as the first school of nurse-midwifery for black public health nurses. Her research brings up very important issues regarding the present use of nurse-midwives in the black community and raises important questions as to whether the history of granny midwives has an impact on current attitudes the black community has toward midwifery.

Pegge Bell, an assistant professor of nursing at University of Arkansas, presented a paper
about the Tuskegee School of Nurse-Midwifery at the 6th Annual Fall Conference on Nursing History at Johns Hopkins University in 1989. The paper was titled "Birthed in the Shadows: the Influence of the Tuskegee School of Nurse-Midwifery for Colored Nurses on the Health Status of Southern Blacks in the 1940's." She investigated the factors leading to the opening and closing of the school as well as the impact it had on the community. Her research did not provide any specific information on the graduates. Pegge Bell also conducted a historical study that examined the midwife situation in Arkansas during the 1940's and focused on Mamie O. Hale, a nurse-midwife and a graduate of the Tuskegee School of Nurse-Midwifery.

There is a scarcity of information on black nurse-midwives as well as information on the graduates of the Tuskegee School of Nurse-Midwifery. Very little historical research has been conducted on black nurse-midwives. This study will greatly increase the knowledge of early black nurse-midwives. It will focus on the graduates of the Tuskegee School of Nurse-Midwifery.
Chapter II

METHODOLOGY

Study Design

The study design is social history research of black nurse-midwives, which focuses on the graduates of the Tuskegee School of Nurse-Midwifery from 1941-1946. It consisted of locating and analyzing primary and secondary sources on the graduates of the Tuskegee School of Nurse-Midwifery.

Setting

The social context under study is the 1940’s in the United States, particularly focusing on Black Americans in the South. World War Two was a major event occurring at this time. Black Americans faced racial segregation in health care, housing, education and employment. During this time period many Black Americans migrated North with hopes to have a better financial situation and escape the segregation and racism of the South. This period occurred before the Civil Rights Movement of the late 1950s and 1960s.

Sample

The sample consisted of 31 graduates of the Tuskegee School of Nurse-Midwifery. These women are Black-American and approximately between seventy-five to one hundred years of age. The living status is not known for many of the graduates. The names of 26 of the 31 graduates were identified. Further information could be obtained for 10 of the 26 graduates identified.

Data Collection

Data collection procedures began by searching for secondary sources and archival materials. An Orbis computer search was completed to locate literature on nurse-midwifery, Tuskegee School of Nurse-Midwifery, black nurse-midwives and black nurses. Hinding and RLIN search was completed to locate archival information. Hinding search did not reveal any
information. RLIN search located "Edwin Rogers Embree papers" at the Yale University's Manuscripts and Archives Library, which contained information on the Julius Rosenwald Fund. It also located a Tuskegee University file at the Alabama Department of Archives and History in Montgomery, Alabama.

The researcher contacted all of the organizations involved in the development of the program: Tuskegee University, Tuskegee School of Nursing, Alabama Department of Public Health, Macon County Health Department, U. S. Children's Bureau (Division Maternal-Child Health), and Maternity Center Association. A list containing the names of twenty-five graduates was obtained from Elizabeth Bear, C.N.M.162

The researcher also contacted Mary Elizabeth Carnegie, Darlene Clark Hine, Vanessa Gamble, and Jacqueline Jones. These women have conducted historical research on black women, black nurses, and black medicine and health care. The researcher contacted these historians to see if they had run across information on the women who graduated from the Tuskegee School of Nurse-Midwifery through their research. Mary Elizabeth Carnegie referred me to a presentation by Pegge Bell on the Tuskegee School of Nurse-Midwifery. Darlene Clark Hine, Vanessa Gamble, and Jacqueline Jones did not have information on the Tuskegee graduates.

The data collection procedures also consisted of two trips to Alabama. The researcher visited the Booker T. Washington Collections at Tuskegee University in Tuskegee, Alabama and the Alabama Department of Archives and History located in Montgomery, Alabama. The researcher also met with Sonja Moffett, R.N. of the Alabama Department of Public Health, Division of Nursing Licensure in Montgomery, Alabama. An oral history was obtained from Nettie B. Jones of Tuskegee, Alabama, a graduate of the class of 1945.

The researcher also contacted Dorothea Lang, CNM, MPH, Director of Midwifery Service Maternal, Infant Care and Family Planning Project in New York. She assisted the researcher with locating Constance Derrel of New York, a graduate of the class of 1946. An oral history was obtained from Constance Derrell in New York City.
Oral Histories

"Oral history is a method of gathering and preserving historical information through recorded interviews with individuals involved in past events and ways of life." 163 Oral histories are essential in obtaining historical information about Black Americans during this period, because a large number of Black Americans were denied access, often punitively, to the education and resources necessary to record important historical events.

An oral history was conducted on two of the graduates, Nettie B. Jones and Constance Derrel, who were mentally alert, physically able, and agreed to participate. The oral history focused on their education at Tuskegee and their careers after graduating from this program. (See Appendix A - Interview Schedule.) The subjects were informed of the type and purpose of the research, what the oral history would consist of and how the information would be utilized. Informed consent was signed before the interview was conducted. (See Appendix B - Oral History Informed Consent Form.)
Chapter III

FINDINGS

Research Questions

1. What were the number and names of the graduates of the Tuskegee School of Nurse-Midwifery?

2. What are the contributions of the graduates of the Tuskegee School of Nurse-Midwifery to the profession of nurse-midwifery?

3. What was the impact of the graduates of the Tuskegee School of Nurse-Midwifery on obstetrical and general health care in the United States?

Records

Hindig and RLIN computer searches did not reveal any primary sources. Tuskegee University School of Nursing states they do not have any information on the graduates of the Tuskegee School of Nurse-Midwifery, because the School of Nurse-Midwifery was not part of the University. The Tuskegee Institute Archives provided two bulletins of the Tuskegee School of Nurse-Midwifery, but did not have specific information on the graduates. The Macon County Health Department also stated they do not have any information on the graduates, because records from the 1940's were destroyed. The Alabama Department of Public Health did not have records on Tuskegee School of Nurse-Midwifery nor the students in the program.

The researcher spoke with Jim Papai of the U. S. Children Bureau who stated that information from the 1940's was lost or destroyed over the years. The researcher was able to locate Edwin Roger Embree papers which contained records from the Julius Rosenwald fund at the Yale University Manuscripts and Archives, but there was no information on the Tuskegee School of Nurse-Midwifery. The researcher spoke with a librarian from the National Library of Medicine, who did a computer search and was unable to locate information on the graduates of the Tuskegee School of Nurse-Midwifery. The researcher spoke with the librarian at Maternity
Center Association, who was unable to locate information.

Information on the Tuskegee School of Nurse-Midwifery was obtained from the Annual Reports of the State Department of Alabama. Records from 1939 to 1946 were utilized. These records are located at the Alabama Department of Archives and History in Montgomery, Alabama. These records discuss the preparation and progress of the school. The number of students which graduated each year is provided. Only the names of the graduates of the class of March 1942 are mentioned. Little information is provided on where the nurse-midwives went after graduating. Sonja Moffet of the Alabama Public Health Department's Division of Nursing Licensure was able to locate information on six of the graduates. She provided the researcher with copies of their applications for nursing licensure in the State of Alabama.

Number of Graduates

The 1946 Annual Report of the State Department of Public Health of Alabama states the Tuskegee School of Nurse-Midwifery had graduated 31 nurse-midwives when it closed (see Table 1). The first class of 3 students nurse-midwives graduated March 15, 1942. One graduate, Helen Sullivan Miller, returned to Georgia to work at the Public Health Department. The second remained in Alabama to staff a nurse-midwifery service in Marengo County. The third graduate joined the staff of the Macon County Health Department's nurse-midwifery delivery service.

The second class of four students graduated August 1942. Three of the four graduates returned to Florida. One remained in Alabama and was employed at the Macon County Health Department's Nurse-Midwifery delivery service. In July of 1942, five students were admitted and graduated in January 1943. Two graduates returned to Arkansas, two remained in Macon County to staff the nurse-midwifery service and one went to Louisiana to join the staff of the school of nurse-midwifery at the Flint-Goodridge Hospital in New Orleans. Two more students graduated in 1943 and brought the total to 7 for that year.

In 1944, seven of the nine students admitted graduated. Only two of the graduates
Table 1

GRADUATES OF THE TUSKEGEE SCHOOL OF NURSE-MIDWIFERY

(N=31)

<table>
<thead>
<tr>
<th>Year of Graduation</th>
<th>Number of Graduates</th>
<th>Names of Graduates</th>
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<tbody>
<tr>
<td>March 1942</td>
<td>3</td>
<td>1) Salina Lestrice Johnson</td>
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<tr>
<td></td>
<td></td>
<td>2) Helen Sullivan Miller</td>
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<tr>
<td></td>
<td></td>
<td>3) Fannie Mamie Prentice-Dubois</td>
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<tr>
<td>September 1942</td>
<td>4</td>
<td>4) Mary Louise Miller</td>
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<tr>
<td></td>
<td></td>
<td>5) Evelyn Helen Thomas</td>
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<tr>
<td></td>
<td></td>
<td>6) Lillie Charvis</td>
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<tr>
<td></td>
<td></td>
<td>7) Flossie Elizabeth Jones</td>
</tr>
<tr>
<td>1943</td>
<td>7</td>
<td>8) Winifred Lucille Ellis-Pittman</td>
</tr>
<tr>
<td></td>
<td></td>
<td>9) Susie L Davis</td>
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<tr>
<td></td>
<td></td>
<td>10) Johnnie Mae Picket-Baskin</td>
</tr>
<tr>
<td></td>
<td></td>
<td>11) Marie Cecelia McKnight</td>
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<tr>
<td></td>
<td></td>
<td>12) Maude Callen</td>
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<tr>
<td></td>
<td></td>
<td>13) Mamie O. Hale</td>
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<tr>
<td></td>
<td></td>
<td>14) Girtha Ree Wilkerson</td>
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<tr>
<td>1944</td>
<td>7</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>15) Claudia Marie Durham</td>
</tr>
<tr>
<td></td>
<td></td>
<td>16) Bessie D. Johnson</td>
</tr>
<tr>
<td></td>
<td></td>
<td>17) Majorie A. Hawkins</td>
</tr>
<tr>
<td></td>
<td></td>
<td>18) Frances Mosely</td>
</tr>
<tr>
<td></td>
<td></td>
<td>19) Nettie B. Jones</td>
</tr>
<tr>
<td></td>
<td></td>
<td>20) Alice Matthews</td>
</tr>
<tr>
<td></td>
<td></td>
<td>21) Marie Jackson</td>
</tr>
<tr>
<td>1945</td>
<td>8</td>
<td></td>
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<tr>
<td></td>
<td></td>
<td>22) Susie D. Thomas</td>
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<tr>
<td></td>
<td></td>
<td>23) Viney Ford</td>
</tr>
<tr>
<td></td>
<td></td>
<td>24) Eleanor D. Brown</td>
</tr>
<tr>
<td></td>
<td></td>
<td>25) Unknown</td>
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<td>28) Unknown</td>
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<td>29) Unknown</td>
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<tr>
<td>March 1946</td>
<td>2</td>
<td></td>
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<tr>
<td></td>
<td></td>
<td>30) Constance Manning Derrell</td>
</tr>
<tr>
<td></td>
<td></td>
<td>31) ? Thornton</td>
</tr>
</tbody>
</table>
remained in Alabama. Claudia Durham, a nurse from Illinois, became an instructor at the school. The other graduate who remained went to Montgomery County to supervise granny midwives and promote maternity clinics. Information was not provided on where the remaining five students went after graduation. In 1945, eight students graduated. No information on where the nurse-midwives went after graduation was given. The school closed on June 30, 1946, graduating a total of 31 nurse-midwives, including two in 1946.

One of the goals of the program was to increase the number of nurse-midwives in Alabama. Most of the graduates returned to their respective states to practice. Many received stipends from their state public health departments and were required to work there after graduating. Others left Alabama because the living conditions and salaries were not as desirable as they would have liked. The fact that many did not stay in Alabama was believed to be a factor that hurt the school. The nurse-midwives which stayed worked at the school as instructors and staffed the Macon County Delivery service or staffed nurse-midwifery delivery services in other counties in Alabama.

Names of the Graduates

Out of 31 graduates of the Tuskegee School Nurse-Midwifery, the names of 26 were identified. The list obtained from Elizabeth Bear contained 25 names. One of the names found on the list, Johnnie Dent, was contacted by the researcher to schedule an oral history. Johnnie Dent stated she did not attend Tuskegee School of Nurse-Midwifery, but the Tuskegee Institute's John A. Andrew School of Nursing, so her name was removed from the list. Nettie B. Jones provided the names of two nurse-midwives who were in her class, Alice Matthews and Marie Jackson, who were added to the list. The year of graduation was corrected for 7 of the graduates. (See Table 1 on page 24).

Graduates of the Tuskegee School of Nurse-Midwifery

Information was obtained on a total of 10 of the 31 graduates. Information on 6 graduates was obtained from records of the Alabama Public Health Department, Division of
Nursing Licensure: Marie Cochlea McKnight, Nettie B. Jones, Fannie M. Prentice, Girtha Ree Wilkerson, Winifred L. Ellis-Pittman, and Claudia Durham. The information in these records is very limited. Most information dates to prior to them attending the Tuskegee School of Nurse-Midwifery. Information was obtained on three of the graduates from secondary sources: Maude Callen, Mamie O. Hale, and Helen Sullivan Miller. Information on Constance Derrell was obtained through personal communication. An oral history was done with Nettie B. Jones in her home.

The graduates are listed in order by year of graduation.

Helen Sullivan Miller

Information was obtained from a biographical piece on Helen Sullivan Miller in "Contemporary Minority Leaders in Nursing."\textsuperscript{176} The researcher contacted Helen Sullivan Miller at her home in North Carolina.\textsuperscript{177}

Helen Sullivan Miller, then Helen Sullivan Pennington, graduated in the first class from Tuskegee School of Nurse-Midwifery in March 1942. She received her nursing degree from University Hospital in Augusta, Georgia.\textsuperscript{178} Her first nursing position was as a staff nurse at the Georgia Department of Public Health in Atlanta, Georgia from 1937 to 1940.\textsuperscript{179}

Ms. Miller attended Tuskegee School of Nurse-Midwifery from September 1941 to March of 1942 when she graduated. She then returned to the Georgia Department of Public Health to work as an area supervisor in the Maternal Child Health Division, which included work in a midwife control program.

She later worked as a administrative nurse in the Army Nurse Corps at Camp McCoy, Wisconsin, 1944 to 1946.\textsuperscript{180} She attended the Medical College of Virginia from 1946 to 1948 receiving her Bachelor's of science in nursing, specializing in Public Health Nursing. After graduating she worked as a school nurse at the Virginia Department of Public Health from 1948 to 1950.\textsuperscript{181} She later became a supervising nurse at the City of Philadelphia, Department of Health from 1950-1952. From 1952-1955, she became a public health nursing instructor and coordinator at Florida A&M University.
In 1955, Ms. Miller attended Yale University School of Nursing. She graduated in 1957 with a Master's Degree in Nursing, specializing in Psychiatric Nursing. She later became the chairman of the Department of Nursing Program at North Carolina Central University as well as an associate professor of nursing research from which she retired in 1982.

Ms. Miller is the author of several publications including three books: The History of Chi Eta Phi Sorority, Inc.; the Biography of Mary Eliza Mahoney, R. N.; The First Black Professional Nurse in the United States; and the American Nurses Association's Contemporary Minority Leaders in Nursing, of which she was co-editor and also featured.  

In 1968, Ms. Miller received the Mary E. Mahoney Award from the American Nurses' Association. In 1978, Ms. Miller received the Distinguished Alumnae Award from Yale University School of Nursing.

Ms. Miller currently resides in North Carolina.

Fannie Mamie Prentice-Dubois

Information on Fannie M. Prentice-Dubois was obtained from the Alabama State Department of Public Health, Division of Nursing Licensure. Her application for licensure provides very little information on her and none after graduating from Tuskegee.

Fannie M. Prentice-Dubois also graduated in 1942 with Mrs. Miller. She was born April 21, 1909 in Montevallo, Alabama. She received her nursing degree from Millie E. Hale School of Nursing in Nashville, Tennessee in 1930. After graduating from Tuskegee School of Nurse-Midwifery in 1943, she remained in Alabama to work as a nurse-midwife. The researcher received her telephone number and address from Nettie B. Jones. Her telephone was changed to an unpublished number. The researcher sent a letter explaining the research, but it was returned by the post office. The post office was unable to locate Ms. Prentice-Dubois' address. She was last known to be living in Birmingham, Alabama.

Winifred Lucille Ellis-Pittman

Information on Winifred L. Ellis-Pittman was obtained from the Alabama State Department of Public Health, Division of Nursing Licensure. Her application for licensure
provides some information of her after graduating from Tuskegee School of Nurse-Midwifery, but very little.

Winifred L. Ellis-Pittman was a 1943 graduate of the Tuskegee School of Nurse-Midwifery. She was born January 1, 1903 in Americus, Georgia. She received her nursing education from Lincoln School for Nurses in Bronx, New York in 1929. After receiving her nursing education she went to New Jersey for special training in obstetrical nursing.

In 1952, she graduated from Teacher's College of Columbia University in New York. The information on the type of degree she received was not provided. Prior to returning to Tuskegee in 1955, Mrs. Ellis-Pittman was an instructor at Meharry Medical School of Nursing in Nashville, Tennessee.

Her current living status is unknown.

Marie Cecelia McKnight

Information was obtained from records from the Alabama Public Health Department, Division of Nursing Licensure. Little information is provided on her. There is no information on what she did prior to or after attending Tuskegee School of Nurse-Midwifery.

Marie C. McKnight was a 1943 graduate of Tuskegee School of Nurse-Midwifery. She was born August 23, 1916 in Alto, Texas. Her college education began at Sumner Junior College in Kansas from 1931 to 1932. She later attended St. Mary's Infirmary in St. Louis, Missouri from 1934 to 1937, where she received her nursing diploma. She later went to Southern University in Louisiana where she received a Bachelor's Degree in 1941. Post graduation she took an additional 3 month course in Obstetrical Nursing at Cook County Hospital in Chicago, Illinois. Ms. McKnight was a member of the National Organization of Colored Graduate Nurses.

Her current living status is unknown.

Maude E. Callen

Information on Maude Callen was obtained from two articles; Life magazine's "Nurse-Midwife Eases Pain of Birth, Life and Death," which was published in 1951, and "Maude
Callen Receives Public Health Award," in the *Journal of Nurse-Midwifery*, which was published in 1973.184 Maude Callen is also discussed in Edward Beardsley's book *A History of Neglect: Health Care for Blacks and Mill Workers in the Twentieth-Century South*, in which her work with granny-midwives is described.185

Maude E. Callen was a 1943 graduate of the Tuskegee School of Nurse-Midwifery. She received a certificate from Florida A&M College and a nursing diploma from Georgia Infirmary and Hospital Training School in Savannah.186 She became a nurse at age 25.187

Prior to attending Tuskegee School of Nurse-Midwifery, she worked in several nursing positions. After receiving her nursing education in 1923, she became a missionary nurse for the Episcopal Diocese in Pineville, South Carolina.188 In 1936, she worked at Berkeley County Tuberculosis Association, after attending a tuberculosis control program in St. Louis, Missouri.189 Berkeley County is located in Pineville, South Carolina. In 1938 she was employed at the Berkeley County Health Department as a generalized public health nurse.190

After graduating from Tuskegee School of Nurse-Midwifery, Mrs. Callen returned to Berkeley County to organize a health care program for adults and children.191 She was employed by the South Carolina State Board of Health and worked under the supervision of Dr. William K. Fishburne.192 The most common problems which existed in the county were high "maternal-infant mortality and morbidity, tuberculosis and other infectious diseases."193

*Life* magazine did a feature article on Maude Callen in their December 3, 1951 issue, titled "Nurse-Midwife: Maude Callen Eases Pain of Birth, Life and Death." It consisted of photographs and description of the work of Maude Callen, in Pineville, South Carolina. She was 1 of 9 nurse-midwives in South Carolina practicing then. Mrs. Callen, employed by the South Carolina State Board of Health, served a rural black community with a population of 10,000.

Nurse-midwifery was one aspect of care she provided to this community.194 She also provided generalized public health nursing. She provided care to patients with tuberculosis, venereal diseases and other illnesses.195 She examined patients in her home as well as in clinics she opened in schools and churches.196 She provided immunizations, newborn and well child
care as well as established classes for granny midwives and pregnant patients. Maude Callen also donated clothing and food to the families in this community as well as cashed checks for the elderly and assisted the disabled with their shopping. She was highly respected by the people of Berkeley County. After appearing in Life magazine in December of 1951, Ms. Callen received donations which enabled her to open the Maude Callen Clinic in Pineville, South Carolina.

Mrs. Callen taught granny-midwives at various midwife institutes in South Carolina. She also supervised them at deliveries. The midwives were instructed to contact her if any complications occurred. These women highly respected Mrs. Callen and did not hesitate to contact her if needed. Mrs. Callen also encouraged these women to record their deliveries.

Maude Callen retired in 1972. She dedicated 49 years of her life to caring for people; twenty-nine years in nurse-midwifery. Mrs. Callen received a number of awards for her work including: J. Marion Sims Award for 1973, presented by the South Carolina Public Health Association; an award for volunteer work, presented 1984 by the United Way of America; and a Honorary Doctorate Degree from Medical University of South Carolina in 1989. Mrs. Callen died January 14, 1990.

Mamie Olessa Hale

Information on Mamie O. Hale was obtained from Pegge Bell's "Making Do with the Midwife: Arkansas's Mamie O. Hale in the 1940's" in Nursing History Review. Some information was obtained from an article written by Mamie O. Hale and published in 1948 describing her work in Arkansas with granny midwives.

Mamie O. Hale is a 1943 graduate of the Tuskegee School of Nurse-Midwifery. Prior to attending Tuskegee, she was employed by the Crittendon County Health Department in Arkansas, where she worked with granny midwives. After graduating from Tuskegee, she returned to Arkansas and worked as a midwife consultant for the Maternal and Child Health Division of the Arkansas Health Department. In this position she was able to "promote educational programs for midwives, provide supervision of them at the time of delivery,
improve birth registration, and register all practicing midwives.208 Mamie O. Hale, midwife consultant for the Maternal and Child Health Division of the Arkansas Health Department, established several training and licensing programs for granny midwives. She was on loan to county health departments to conduct midwifery classes for them.209 These courses lasted between 8 to 12 weeks.210 By 1946, she conducted midwifery programs in 4 counties: Conway, Faulkner, Lonoke and St. Francis.211 The average age of the granny midwives who participated in the training programs was between sixty and eighty and "75 percent could not read or write."212 Despite these factors Mamie O. Hale was able to teach them by "using songs, movies, pictures, and demonstration."213 The midwives who enrolled were required to attend all lectures to meet the state requirements in order to receive permits.214 Mamie O. Hale convinced granny midwives to utilize the classes.215 The midwifery programs proved to be successful. The maternal-infant mortality rates in Arkansas decreased.216 Mamie O. Hale's programs enabled the granny midwives she taught to provide safer care to pregnant women.

The living status of Mamie O. Hale is unknown.

Girtha Ree Wilkerson

Information on Girtha R. Wilkerson was obtained from the Alabama State Department of Public Health, Division of Nursing Licensure. Her application for licensure provides little information on her and none regarding the Tuskegee School of Nurse-Midwifery. Some information was provided by Nettie B. Jones.

Girtha R. Wilkerson is a 1943 graduate of the Tuskegee School of Nurse-Midwifery. She was born November 14, 1911 in Greenville, Alabama. In 1935, she received her nursing education from John A. Andrew Memorial Hospital in Tuskegee, Alabama. After receiving her nursing education, she worked as a school nurse at Calhoun Colored School in Calhoun, Alabama. Nettie B. Jones states Ms. Wilkerson was an instructor at the Tuskegee School of Nurse-Midwifery when she was a student and worked as a nurse-midwife in Tuskegee, Alabama. Ms. Jones also stated Ms. Wilkerson resided in Tuskegee until she passed away. The year Ms.
Wilkerson died is unknown.

Claudia Marie Durham

Information on Claudia M. Durham was obtained from the Alabama State Department of Public Health, Division of Nursing Licensure. Her application for licensure provided little information on her. Information was also obtained from: "The 1944-45 Annual report of the State Department of Public Health of Alabama,"217 Carnegie's The Path We Tread: Blacks in Nursing 1854 - 1990; The 1945 Bulletin of the Tuskegee School of Nurse-Midwifery;218 and Maternity Center Association's Twenty Years of Nurse-Midwifery 1933 - 1953.219

Claudia M. Durham is a 1944 graduate of the Tuskegee School of Nurse-Midwifery. She was born September 21, 1910 in Bristol, Florida. Her pre-nursing education includes: St. Petersburg Junior College in St. Petersburg, Florida from 1929 to 1930; and Southern College, Summer Session, Labeland, Florida. Ms. Durham received her nursing diploma from Edge Hospital and Training School in Troy, Alabama in May, 1934. According to the 1945 Bulletin of Tuskegee School of Nurse-Midwifery, she received her R. N. from Provident Hospital in Chicago, Illinois and her B.S. from Loyola University in Chicago, Illinois.220

In January, 1945, she became an instructor of Nurse-Midwifery at Tuskegee School of Nurse-Midwifery.221 She later became the director of the school September, 1945, when Margaret Thomas resigned.222 She remained the director until the school closed in 1946. 223 Ms. Durham's current living status is unknown.

Nettie B. Jones

Information on Nettie B. Jones was obtained through an oral history conducted by the researcher in her home in Tuskegee, Alabama. Some information was received from the Alabama Department of Public Health, Division of Nursing Licensure, which only provided information on where she obtained her nursing education.

Nettie B. Jones was a 1944 graduate of the Tuskegee School of Nurse-Midwifery. She was born November 30, 1904 in Pleasant Hills, Alabama and raised in Pensicola, Florida. She came to Tuskegee after graduating from Pensicola High School to study home economics at
Tuskegee Institute at her mothers request. Ms. Jones always had the desire to become a nurse. While growing up she used to see public health nurses in their uniform going to their patients' home. She wanted to help people.

At Tuskegee Institute, students had to be 17 years old to attend the nursing school. As soon as she turned 17 years old, she changed her major from home economics to nursing. She received her nursing diploma from John A. Andrew Memorial Hospital in 1925. Postgraduation she received a scholarship for additional training in obstetrical nursing at Harlem Hospital in New York City. The course was six weeks in length.

After she completed the program, she returned to Alabama to work. Her first nursing position was at Hale Infirmary for Colored People in Montgomery. Ms. Jones was the superintendent of nurses. Her position entailed several duties in addition to providing patient care, such as, pharmacologist, dietitian, in charge of laundry, and teaching surgical nursing to nursing students. Her mother came to visit her one day and found the job to be a little too much for her daughter and encouraged her daughter to seek other employment.

Ms. Jones then went to Tuskegee's V. A. Hospital, formerly Veterans Hospital 91, where she worked until she went to Tuskegee School of Nurse-Midwifery. She had the desire to further her nursing education. Since she always had an interest in obstetrics and gynecology, she decided to pursue a career in nurse-midwifery. She received a stipend from the Macon County Public Health Department.

Ms. Jones' clinical instructors were Dr. Mitchell, Beatrice Trammell and Girtha Wilkerson. They worked in close supervision with the instructors. While Ms. Jones enjoyed her education at Tuskegee School of Nurse-Midwifery, it was a heavy work load. The classes were Monday to Friday with call on weekends (including nights) if a patient called that was in her assigned area. The students had their training in several community clinics which were held in schools and churches.

After graduating from Tuskegee, she worked at the Macon County Health Department to pay back the stipend she had received. She worked as a generalized public health nurse who
provided nurse-midwifery care. She did home visits, prenatal care, intrapartum care, postpartum care, treated communicable diseases, immunizations, well child care and instructed and supervised granny midwives. She loved her job, but she felt the salary did not pay enough to meet her needs at that time. The black nurses received less pay than the white nurses. She worked there for two and a half years before handing in her resignation.

Ms. Jones returned to the V. A. Medical Center in Tuskegee as a staff nurse and worked her way up to assistant head nurse. While employed at the medical center, she returned to Tuskegee School of Nursing to receive her Bachelor’s of Science in Nursing in 1948. She worked at the V.A. Medical Center for 34 years before retiring in 1967.

Ms. Jones is 89 years old and currently resides in Tuskegee, Alabama.

Constance Derrell

Information on Constance Derrell was obtained through a oral history conducted in New York City. The researcher also obtained information from a presentation by Dorothea Lang, CNM, MPH, Director of the Maternal Infant Care project in New York City. Constance Derrell is a 1946 graduate of the Tuskegee School of Nurse-Midwifery.

Mrs. Derrell is a native of the West Indies and came to New York with her mother at age seventeen. In 1935, she graduated from Mt. Vernon High School in New York. Mrs. Derrell was raised in a family which believed education was important. She received a scholarship to attend Lincoln School for Nurses in Bronx, New York and received her nursing diploma in 1938. She worked as a staff nurse at Seaview Hospital for Tuberculosis in Staten Island and Lincoln Hospital in Bronx, New York.

Mrs. Derrell received her Bachelor’s of Science at New York University in June, 1945. While employed as a labor and delivery nurse at Queens General Hospital, she developed a special interest in obstetrics. In the West Indies, Mrs. Derrell saw how midwives were highly respected by the community. Constance Derrell decided to pursue a nurse-midwifery education. She went to Tuskegee School of Nurse-Midwifery because it was the only place black nurses could go at that time. She received a scholarship from the government to attend Tuskegee
School of Nurse-Midwifery. In 1946, she was one of the two last students to graduate from the school before it closed.

After graduating, Mrs. Derrell worked as a nurse-midwife at the John A. Andrew Memorial Hospital. She conducted deliveries in the home and hospital. She also supervised granny midwives. While employed at John A. Andrew Memorial Hospital, she received a scholarship from the National Foundation for Infantile Paralysis to attend Teacher's College of Columbia University in New York.\textsuperscript{225} She received a Master's of Art in 1948. Instead of returning to John A. Andrew Memorial Hospital like she planned, Mrs. Derrell decided to stay in New York and work at New York Cornell Medical Center's Lying-In Hospital.

In 1949, there were no positions for nurse-midwives at New York hospital, so Mrs. Derrell worked as a general duty nurse. She was the second black nurse on staff there. Within ten months she was promoted from general duty nurse to Head nurse.\textsuperscript{226} After two years, she received a dual appointment as Supervisor and Clinical Instructor between the hospital and Cornell University.\textsuperscript{227}

In 1970, New York Hospital received a grant from Josiah Macy Foundation to staff two nurse-midwives at the Lying-In Hospital.\textsuperscript{228} Constance Derrell accepted one of the nurse-midwife positions. To prepare for this position, she attended a four month refresher course at State University of New York in Brooklyn and received a refresher certificate in nurse-midwifery in June, 1971. Mrs. Derrell was the first nurse-midwife on staff at New York Hospital. She worked at New York Hospital as a nurse-midwife until retiring in 1977.

Within weeks of retiring, Mrs. Derrell returned to work as a full-time nurse-midwife. She was employed at Cumberland Hospital Medical Center. In 1979, she accepted a part-time nurse-midwifery position at the Maternal, Infant Care and Family Planning Project in New York City. At the age 80 she retired permanently.

Mrs. Derrell was active in the American College of Nurse-Midwives (ACNM), American Nurses' Association, and the National Association of Negro Business and Professional Women/North Shore Club. Mrs. Derrell served as the Chairperson of the ACNM Archives
Committee for over two years. 229

Mrs. Derrell received several honors for her work as a nurse-midwife. In September, 1988, she was honored by the American College of Nurse-Midwives, New York State Chapter; and the New York Fund for Midwifery for her outstanding achievements as a nurse-midwife. In 1990 she was also honored by the North Shore Women's Club for her professional achievements and contribution to health care. Mrs. Derrell has dedicated over 50 years to maternal-child health.

Mrs. Derrell is 82 years old and currently resides in New York.
CHAPTER IV

Discussion

The purpose of this research study was to provide information of the achievements and contributions of the Tuskegee School of Nurse-Midwifery graduates to the nurse-midwifery profession and to identify the impact these black nurse-midwives had on obstetrical and general health care in the United States. The sample consisted of the thirty-one graduates of the Tuskegee School of Nurse-Midwifery.

Research Question 1

What were the number and names of the graduates of the Tuskegee School of Nurse-Midwifery?

Most secondary sources state there were 25 graduates of the Tuskegee School of Nurse-Midwifery. According to "The 1946 Annual Report of the State Department of Public Health of Alabama," there were 31 graduates from this program when it closed in 1946. The Annual Reports of the State Department of Alabama, from 1942 to 1946, provides the number of students graduating each year and also mentions the number of students who did not successfully complete the program. Pegge Bell's presentation "Birthed in the Shadows: The Influence of the Tuskegee School for Colored Nurses on the Health Status of Southern Blacks in the 1940," is the only secondary source which provides the correct number of graduates. The researcher identified the names of 26 of the 31 graduates. (See Table 1 on page 24.) The names of five graduates remain unknown.

Research Question 2

What are the contributions of the graduates of the Tuskegee School of Nurse-Midwifery to the profession of nurse-midwifery?
The contributions of the graduates of the Tuskegee School of Nurse-Midwifery can be inferred from the findings which showed they had an active role in the health care of women and babies. The ten graduates of the Tuskegee School of Nurse-Midwifery that the researcher was able to obtain information about worked in various positions in health care. Six of these ten graduates: Maude Callen, Ginternational Wilkerson, Nettie B. Jones, Constance Derrell, Claudia Marie Durham, and Fannie M. Prentice-Dubois worked as clinical nurse-midwives. All of these nurse-midwives worked in rural communities of the South. Constance Derrell also worked in urban communities of New York City.

Nettie B. Jones and Maude Callen worked as public health practitioners which included nurse-midwifery under the auspices of a public health department. Four other graduates also worked at public health departments. These were Helen Sullivan Miller, Ginternational Wilkerson, Constance Derrell and Mamie O. Hale.

During the 1940s, most babies in the black community were delivered by granny midwives. The granny midwives were essential to the women they served because they were the only persons available to provide care during childbirth. Black women depended heavily upon granny midwives. Seven of the 10 graduates about whom there is information in this study, trained and supervised grannies: Maude Callen, Helen Sullivan Miller, Nettie B. Jones, Claudia M. Durham, Ginternational Wilkerson, Mamie O. Hale and Constance Derrell. Together they worked to improve conditions for prenatal care and provide safer care to women and children.

Four of the 10 graduates furthered their education after graduating from Tuskegee School of Nurse-Midwifery. Helen Sullivan Miller received her B.S. from Medical College of Virginia and her M.S.N. from Yale University. Winifred L. Ellis-Pittman received a degree from Teacher's College of Columbia University. Nettie B. Jones received her B.S.N. from Tuskegee University. Constance Derrell received her M.A. from Teacher's College of Columbia University.

Constance Derrell, Helen Sullivan Miller and Winifred Pittman were nursing educators. Helen Sullivan Miller was a public health nursing instructor at Florida A&M University and an
associate professor of research at North Carolina Central University. Constance Derrell was an instructor of nursing at Cornell University. Winifred L. Ellis-Pittman was an instructor of nursing at Meharry Medical School of Nursing. Girtha Wilkerson and Claudia Durham were nurse-midwifery instructors at Tuskegee School of Nurse-Midwifery.

Helen Sullivan Miller and Claudia Durham held administrative positions. Helen Sullivan Miller was Chairman of the Department of Nursing Program at North Carolina Central University. Claudia Durham was the final director of the Tuskegee School of Nurse-Midwifery.

Maude Callen increased the visibility of nurse-midwives when she appeared in Life magazine. Not only did she allow America to see the role of the nurse-midwife in the community, she also enabled them to see the need for nurse-midwifery care. After this article was published, Ms. Callen received donations which helped her to open a clinic in Pineville, South Carolina.

Constance Derrell broke down barriers by becoming the first nurse-midwife at New York Cornell Medical Center's Lying In Hospital. Through her work as a nurse-midwife she encouraged women to pursue a career in nurse-midwifery and made it easier for other nurse-midwives to gain employment there.

These nurse-midwives dedicated their lives to ensure the well being of women and children. Some worked in segregated black communities at a time when the health status of blacks were poor and the need for health care was great. These women helped to spread nurse-midwifery care to populations which had a great need for it.

Research Question 3

What was the impact of the graduates of the Tuskegee School of Nurse-Midwifery on obstetrical and general health care in the United States?

The impact of the graduates of the Tuskegee School of Nurse-Midwifery on obstetrical and general health care can be inferred from their work. The ten graduates of the Tuskegee School of Nurse-Midwifery that the researcher was able to obtain information about worked as clinical nurse-midwives, general public health practitioners, educators in nursing and nurse-
midwifery; instructors and supervisors of granny midwives, and functioned as maternal-child consultants. Many worked under the auspices of state and local public health departments. These nurse-midwives were able to overcome racial, economic, and cultural barriers which prevented black women from receiving adequate health care. Although they worked within a segregated health care system, they were able to improved the health care provided to women and children.

During the 1940's, black women received little obstetrical care and had higher maternal and infant mortality rates. The graduates from Tuskegee School of Nurse-Midwifery brought nurse-midwifery care to these communities. They encouraged women to seek prenatal care and preventative care for newborns and infants. Health teaching was an important aspect of the care they provided. The Macon County's nurse-midwifery delivery service, which was staffed by some graduates, successfully decreased the maternal and infant mortality rates in Macon County.

While some graduates focused on the maternal-child health, others focused on the general health care of the entire community. They provided care to men, women, and children. They integrated their experience as a public health nurse with their nurse-midwifery education. They worked with various illnesses, including tuberculosis and venereal diseases. They encouraged people to seek medical care or hospitalization if needed. These nurse-midwives were early providers of primary care.

Limitations of the Study

The major limitation of this study was the lack of information to be found on the graduates of the Tuskegee School of Nurse-Midwifery. Out of the sample of thirty-one, the names of twenty-six of the graduates were identified. A complete list of graduates could not be created. The location and living status of most the graduates are unknown. Information was obtained only on ten graduates. Some of this information was very limited and did not include information on their careers after graduating from Tuskegee School of Nurse-Midwifery.

The records on the students who attended and graduated from the Tuskegee School of Nurse-Midwifery were apparently lost or destroyed with the closing of the school. No records
were able to be located from the organizations which were involved with the development or operation of the school. There is also a scarcity of secondary sources with information on the graduates of the Tuskegee School of Nurse-Midwifery. The information obtained on the ten graduates can not be applied to the other twenty-one nurse-midwives. The contributions of most of the graduates continues to remain unknown.

Oral histories were used for data collection. Of the ten graduates about which the researcher had information, three were alive and could potentially be interviewed. The researcher contacted all three graduates, but only two agreed to an oral history.

The school closed 68 years ago. The people involved with the planning of the school and its operation are no longer living. The graduates that are known to be living are in their eighties and have little recollection of events which occurred during the time they were at the Tuskegee School of Nurse-Midwifery. It would have been more desirable to have had oral histories conducted earlier, when the information was clear in their minds.

**Implications for Future Research**

The study of the achievements and contributions of black nurse-midwives is informative and necessary. Currently there is only a small amount of information available on black nurse-midwives. Many publications on the history of nurse-midwifery either briefly mentions black nurse-midwives or excludes them all together. Many people are not aware of the contributions black nurse-midwives have made to the profession of nurse-midwifery nor are they aware of the struggle black nurse-midwives had to establish themselves and provide the care they felt was needed.

As more historical research is conducted on black nurse-midwives, the information could be integrated into nurse-midwifery curriculum. Increased awareness of black nurse-midwives could assist with the recruitment and retention of black nurses into midwifery. It could also have an impact on how the black community views nurse-midwives.

Further research on black nurse-midwives, their education, their practice, and the effectiveness of the care they provide needs to be implemented. Historical research could be
conducted on the other nurse-midwifery program which was designed for black nurses in the 1940s: the Flint Goodridge Nurse-Midwifery Program, which graduated two nurse-midwives.

While this study focuses on only one view of black nurse-midwives it raises interesting questions for further research. What were the contributions of the graduates of the Flint-Goodridge program? Why were programs opened exclusively for black nurse-midwives? Why were these programs discontinued shortly after opening? During the 1940's were black nurses allowed to attend nurse-midwifery programs that were predominately white? If so, how many black nurses attended these institutions? Were black nurse-midwives allowed to teach at these institutions? How many black nurses were turned away from midwifery because of racial barriers? How did granny midwives feel about nurse-midwives? How did granny midwives feel about black nurse-midwives? How did black nurse-midwives feel about granny midwives?
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5Ibid.


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9Embree, Brown Americans, 34.


12Embree, Brown Americans, 163.

13Ibid.


16Ibid, 97.


18Embree, Brown Americans, 111.

20 Ibid.

21 Ibid.


26 Ibid, 226.

27 Ibid, 186.

28 Ibid, 189.


31 Ibid.


34 Ibid.


38 Ibid.

40 Ibid, 141.

41 Ibid, 37.

42 Ibid, 247.


44 Ibid, 122.


48 Ibid, 126.


52 Ibid, 122.

53 Ibid.


57 Ibid.


60 Ibid.
61 Ibid.
62 Ibid, 96.
63 Ibid, 128.
65 McBride, From TB to AIDS, 63.
66 Ibid.
67 Ibid, 71.
68 Hine, Black Women in White, 197.
70 Carnegie, The Path We Tread, 38.
71 Ibid.
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74 Hine, Black Women in White, 189.
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79 Hine, Black Women in White, 189.
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84McBride, From TB to AIDS, 79.

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90Thomas, "Social Priority 1," 443.


94Ibid.


97Ibid.

98Tuskegee School of Midwifery for Colored Nurses Bulletin, 1944, Washington Collections, Tuskegee Institute, Alabama.


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Ibid, 108.


Ibid.


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Maternity Center Association, *Twenty Years of Nurse-Midwifery*, 57.

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121 Maternity Center Association, *Twenty Years of Nurse-Midwifery*, 58.

122 Ibid, 59.

123 Ibid, 59.


126 Maternity Center Association, *Twenty Years of Nurse-Midwifery*, 59.


129 Maternity Center Association, *Twenty Years of Nurse-Midwifery*, 59.

130 Ibid.

131 *Bulletin of Tuskegee School of Nurse-Midwifery*, 1945, Washington Collections, Tuskegee Institute, Alabama, 5.

132 Ibid.

133 Thomas, "Social Priority 1," 444.


137 Maternity Center Association, *Twenty Years of Nurse-Midwifery*, 59.

138 Ibid.

139 Ibid.

140 Maternity Center Association, *Twenty Years of Nurse-Midwifery*, 61.

141 Ibid.
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Maternity Center Association, *Twenty Years of Nurse-Midwifery*, 61.


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Maternity Center Association, *Twenty Years of Nurse-Midwifery*, 61.

Carnegie, *The Path We Tread*, 40 - 42.


Maternity Center Association, *Twenty Years of Nurse-Midwifery*, 57 - 61.


Carnegie, *The Path We Tread*, 41.

Robinson, "A Historical Development of Midwifery in the Black Community."

Ibid, 250.

Bell, "Birthed in the Shadows."

162 Elizabeth Bear, C.N.M., Ph.D., F.A.A.N., F.A.C.N.M., an Associate Professor and Coordinator of Nurse-Midwifery Education at the Medical University of South Carolina, received the list of 25 graduates from Constance Derrell, a graduate of Tuskegee School of Nurse-Midwifery several years ago. Further investigation revealed that Constance Derrell had received the list from Nettie B. Jones, also a graduate, who had obtained the information from the Macon County Health Department.


165 Ibid.

166 Ibid.

167 Ibid.

168 Ibid, 129.


172 Ibid, 108.

173 Ibid.

174 Ibid, 117.


177 Two letters were sent to Ms. Helen Sullivan Miller explaining the research. A telephone interview was declined secondary to Ms. Sullivan Miller feeling that she would not be able to tolerate the interview due to health reasons. She preferred to have the interview schedule mailed to her home. No reply was received at the time the study was completed.
178 Miller and Mason, eds. *Contemporary Minority Leaders in Nursing*, 83.

179 Ibid, 84.

180 Ibid.

181 Ibid.

182 Ibid.


185 Beardsley, *A History of Neglect*.

186 "Maude Callen Receives Public Health Award," 30.


188 Ibid.

189 Ibid.

190 Ibid.

191 Ibid.


193 "Maude Callen Receives Public Health Award," 31.


196 Ibid.

197 Ibid, 142.

198 Ibid, 141.

199 "Maude Callen Receives Public Health Award," 32.

201Ibid.

202Ibid, 30.

203Beardsley, A History of Neglect. 278.

204Bell, "Making Do With the Midwife," 155-169.


206Bell, "Making Do with the Midwife," 159.

207Ibid.

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209Hale, "Arkansas Midwives Have All-Day Graduation Exercises," 53.

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215Ibid, 166.

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218"Bulletin of Tuskegee School of Nurse-Midwifery," 1945, 1.

219Maternity Center Association, Twenty Years of Nurse-Midwifery. 59.

220"Bulletin of Tuskegee School of Nurse-Midwifery, 1.


223 Carnegie, *The Path We Tread*, 41.


225 Ibid, 2.

226 Ibid.

227 Ibid.

228 Ibid, 3.

229 Ibid.
Appendix A

INTERVIEW SCHEDULE

1) What year did you attend Tuskegee School of Nurse-Midwifery? What year did you graduate? What made you decide to become a nurse-midwife? Why did you choose the Tuskegee School of Nurse-Midwifery? (As opposed to MCA).

2) How many students were in your class? How many graduated?

3) Where were you born and raised?

4) When and where did you obtain your nursing education? Where did you work before attending Tuskegee School of Nurse-Midwifery? In what area of nursing? Did you have a certificate in public health nursing?

5) How did you learn about the Tuskegee School of Nurse-Midwifery?

6) What did your nurse-midwifery education consist of? Courses and clinical experience?

7) How did you feel about the Tuskegee School of Nurse-Midwifery? What was happening with the school at that time? Did any social events have an impact on the school at that time?

8) It was my understanding that Tuskegee Institute was not officially connected with the nurse-midwifery school, other than to lend its name and provide living accommodations. Did you have any contact with Tuskegee itself? Did you have any contact with students from the school of nursing?

9) John Andrew Memorial Hospital was developing a maternity ward at the same time the school was in operation. Did you conduct any deliveries there? How did the medical and nursing staff there feel about nurse-midwives?

10) What were the economic conditions of the blacks in the 1940's in the South? Access to health care? Barriers in society?
11) Where did you work after graduating? What type of positions did you hold? What did your position consist of? (Job Title and description).

12) If you did not function as a nurse-midwife, why not?

13) What type of communities did you work with? What service did you provide to them? How receptive were they to nurse-midwives?

14) Did you work with granny midwives? If yes, what did you do with them? How did they feel about nurse-midwives? Did any conflicts evolve?

15) What other positions did you obtain throughout your career? Did you participate in any programs (e.g. maternal-child/public health, nurse-midwifery programs, nursing programs)? Did you initiate any programs?

16) Were you involved in any professional organizations (e.g. ANA, NOPHN)? Did you join the ACNM? If not, why?

17) Did you keep in contact with any other graduates? If yes, who? What did they do? Do you have their current address? Do you have any information on them?

18) What was your understanding of why the school closed? How did you feel about this?

19) What are your feeling about nurse-midwifery in the 1940s compared to now?

20) Being a black woman in nurse-midwifery, what type of barriers did you face? How did you overcome these barriers?
Appendix B

ORAL HISTORY CONSENT FORM*

I, the undersigned, agree to be interviewed by Lucinda Canty for the purpose of obtaining an oral history from me. I further agree that this oral history interview may be taped and notes taken during the interview. I also agree that Lucinda Canty may:

1. transcribe the tape and use any material on the tape or in her notes and any other materials I supply her for study and publication in any article or book she may write, or for any oral presentation she may make;
2. share the tape, her notes, and any other materials supply her with other scholars for their use in study, publication or oral presentation; and
3. deposit the tape, her notes, and any other materials I supply her in an archival collection of her choice.

It is my understanding that Lucinda Canty will turn off the tape recorder at any time during the interview upon my request. It is also my understanding that I can request to have the interview discontinued at any time. It is my further understanding that Lucinda Canty will honor any request I make of her regarding any information or material I think should remain confidential.

__________________________________________  ______________________________
Date                                             Interviewee

__________________________________________  ______________________________
Date                                             Witness

*Adapted from form developed by Helen Varney Burst, 1992
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