Sickle Cell Anemia Predominant In Blacks

First In A Series

Sickle cell anemia is an inherited abnormal blood condition which occurs predominantly in black people.

In recent legislation, Congress appropriated money for a comprehensive research program to study the disease and its cure.

Meanwhile, it is estimated that one in every 400 to 500 black Americans has sickle cell anemia.

Anemia is lack of hemoglobin, the red coloring matter in the blood. Hemoglobin supplies all of the body tissues with oxygen.

There are two forms of the sickle cell disorder. When the red blood cells contain an abnormal substance called Hemoglobin S, the cells take on an irregular shape resembling a sickle.

These "sickled" cells have a much shorter life span than normal cells because they are destroyed. The rate of destruction exceeds the rate of production and thus anemia results.

Symptoms of the disorder are frequent pains and chronic fatigue.

Sickle cell anemia, which is not contagious, can be treated. Tests to determine whether a child or an adult is a carrier or a victim can be made.

"What's Happening" will carry a short series on sickle cell disorders for the next few issues.

Meanwhile, Model Neighborhood residents who believe they might have this anemic disorder can be examined and treated free of charge at the Consolidated Health clinic, 508 Elizabeth Street. All patients who come to the clinic may receive this examination upon request.

Drug Council Formed

(Continued from Page 1)

tional Rehabilitation.

Civic organizations such as Junior Women, Junior League, Council of Jewish Women and Jaycees, are also supporting the further development of the council.

DETOXIFICATION

One program which will be undertaken within the next month is a detoxification cycle for addicts of heroin and other opiates. Dispensed at High Point Memorial Hospital, the program is funded by the state Department of Mental Health and coordinated by the Drug Action Council.

The Drug Action Council is working with other organizations in developing and carrying out an addictive drug abuse program.

As the addictive drug abuse program (ADAP) expands, the Drug Action Council office hopes to reach the entire community with education, prevention, treatment, and rehabilitation

through out-patient clinics, rap houses and other means.

This week a seminar for High Point parents on the legal, medical, and social factors of drug abuse was conducted by a consultant firm, United Health Services of North Carolina. The seminar was sponsored by the Drug Action Council.

Nunez, who is in charge of staffing the administrative office, said that exaddicts are needed to work with the ADAP. He can be reached at the United Community Services office, 113 Gatewood Avenue.

When the Drug Action Council office is in full swing, Ralph Nunez hopes it can change the direction of drug abuse in High Point.

"We hope to add an element of planning and community input into the shaping of drug programs," he said. "Something must be done, and we're just fitting all the pieces together."

Only Ten Of Its Kind In U.S.

Central Office Helps Displaced Families

High Point's Central Relocation Agency is the only one of its kind in the Southeast.

Other cities have relocation services. High Point's centralized office, however, is the only one set up by Housing and Urban Development guidelines within the city government.

Instigated by the Model Cities Commission, the Central Relocation Agency (CRA) handles the relocation of any person or family who is displaced because of government action.

This service means that if a house is found substandard, is condemned, or is bought to make way for another building or redevelopment project, the family in it is entitled to help in finding another home.

For the city government in a community to take on a social service such as relocation is a relatively new concept, according to Grace T. Hodges, the city's human resources administrator. Only ten such centralized relocation offices exist throughout the country.

Usually, relocation is handled through a city's redevelopment commission. Until the inception of the CRA in March, the local redevelopment commission did indeed provide aid to families displaced because of their projects.

Likewise, the Housing Authority made its own relocation arrangements when buildings were to be torn down to make way for new housing projects.

REFERRED TO CRA

Now all cases are referred to CRA,
who contracts with both those agencies
as well as Model Cities to relocate
families in suitable homes. The City
of High Point bears the administrative
cost of the office, located in City Hall.

Grace Hodges and her staff of three work particularly with families within the Model Neighborhood who are required to move because of code enforcement regulations, and those whose homes are acquired to make way for the new Multi-Purpose Service Center and open-space project in Southside.

Currently, their work load has exceeded 200 cases. Some of these families were living in substandard housing which the owner has agreed to rehabilitate. In many instances, the family is required to move during the remodeling, and temporary housing was needed.

Problems arise in situations like this, because the realtor may raise the rent to include the cost of upgrading the house—and price the family right out of a home.

In other cases, the realtor may choose not to rehabilitate (repair) the house, leaving the family homeless. It is these people that CRA helps.

As soon as the city building inspector finds a structure substandard, he contacts the CRA office. Within the next day or so, a CRA representative calls on the family, gets information about size, income, social problems, preferences, etc., and informs them of their benefits.

These benefits range from actual moving expenses to rent subsidy up to two years. In cases where home owners are required to move, CRA will help pay the difference between the cost of his old property and the average cost of new property.

Finding new homes for displaced families is one of the most difficult tasks facing Mrs. Hodges and her staff. Because of HUD standards, the CRA may not place a family into a new building that has inadequate bedroom space. Many times the family's income will not permit them to move into a home the size they need.

RENT ASSISTANCE

About 25 percent of a family's income is used as a base for determining the price of housing it can afford. If more than 25 percent is needed, CRA can help in rent assistance to make up the difference. Or, a family can take smaller, less expensive housing at its own discretion.

Twenty units in the new High Point

Housing Association project, London Woods, are reserved for displaced persons. Even with these homes, CRA is still swamped with families with no place to go.

Public housing provides room for fewer than five new families a month. Although displacees within the Model Neighborhood have top priority for relocated housing, Mrs. Hodges said that all the CRA resources still cannot provide decent, safe, sanitary housing at this point for all their clients.

It is important, however, that a family wait until they have been notified by the CRA to move.

"Anyone in a Model Neighborhood house that has either been condemned or declared substandard, or told they have to move should not move until we contact them," said Yvonne McCall, relocation director. "If they move without our referral, they won't be entitled to our benefits."

CRA's clients so far, she said, have been very receptive. Despite the shortage of housing in High Point, a number of displaced families have been moved into homes meeting their size, needs, and income. And the CRA is working constantly to see that that number grows.

Coronary Care Unit Gets Commission Nod

The Model Cities Commission has taken a coronary care unit under its wing.

Approval for the sponsorship of a heart unit at High Point Memorial Hospital came at the December meeting of the commission.

With Model Cities endorsement, federal funds to finance \$150,000 worth of sophisticated equipment are considered more likely. Model Cities approval will give the hospital higher priority for the money.

Dr. Ronald L. Cox, local cardiologist who represented the hospital at the meeting, said that the new equipment would vastly increase the lifesaving capabilities of the hospital in the treatment of heart attacks.

The entire expansion is expected to cost nearly \$350,000. The hospital received an earlier allocation of \$100,000, to match \$100,000 raised locally.

Model Cities will give no funds directly to the new eight-room coronary unit. Last year the commission allocated \$179,000 to the establishment of a catherization laboratory at the hospital.

The next step in setting up the expanded heart care facilities is applying to the Department of Health, Education and Welfare. No indication has been given as to the availability of such funds at this time.

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Editor Emily Hedrick