



Dr. Lionel Newsom (center) and wife Mrs. Maxine Newsom (r) are welcomed back to the campus by BSC President McLean.

As Distinguished Scholar

Dr. Newsom Returns To Barber-Scotia

By Melvin Wilton
Special To The Post

Dr. Lionel Newsom, a former president of Barber-Scotia College from 1964 until 1966, has returned to the campus to work, saying he is indebted to the school to return his experience.

Dr. Newsom, who retired from his post as president of Central State University in Wilberforce, Ohio, on January 31, has now been named Distinguished Scholar of the United Negro College Fund at Barber-Scotia College.

In this position, Dr. Newsom will continue to lecture, teach, and do research, while living on the college campus with his wife, Maxine.

At a reception in his honor on campus, Dr. Newsom said, "It's like coming home again...How do you

Gewana Heath

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phoned. This young lady is pretty interesting herself. She says she wants to be a lawyer. "My mother tells me I have the brains and the mouth for it," she laughs. Gewana also admits she wants to be an attorney that makes lots of money. However, she wants the money for a totally unselfish reason. "I'll need it so I can adopt a child from Ethiopia," she explains. "I'm already sponsoring one now and I'd like to continue as I grow up."

Gewana states it makes her glad to be able to contribute \$48.00 per month, out of her allowance, to support a young girl in Ethiopia. "She's seven years old," relates Gewana, "but I can't pronounce her name." Gewana's been corresponding with the girl through letters.

Gewana describes herself as "a nice person who's real kind to people." Yet she also says, "I'm wild and fun. If you're around me you'll never get bored. I can't stand to be alone. I like to do things and go places."

Her mother, Betty Heath, is her favorite person. "We get along fine and we do a lot of things together."

Her younger brother, Freddie, is fun. "I can boss him around and tell him what to do," laughs Gewana. And her older sister, Inga, is special also. "Whenever I have a problem I can go to her." Gewana says being the middle child has its ups and downs. "Sometimes I don't like it because it seems they get more attention because they are the youngest and the oldest," she explains about her brother and sister. "Yet, then again I am sometimes the oldest and the youngest," she reasons.

She attends Steele Creek AME Zion Church and sings in the youth choir. "I like to sing," Gewana states.

She claims there is only one thing that she wants more than anything in the world. "When I die I want to go to heaven," Gewana tells. "So I try to do the right things, I read my bible and I'm nice to people." But the thirteen-year-old admits to one fault. "I kid people too much sometimes."

say a word that's better than happy?"

As he renewed acquaintances with college staff and faculty and dined on an elegant spread of cheeses, finger sandwiches and fruit, he pointed out that many changes had taken place at the school since he had been there. He noted the College Union, built in 1971, and the health and physical education building, built in 1969.

"Of course, these were in my mind, but I was never able to bring them off," Newsom said. Newsom said he would concentrate his research on the financial support for predominately black institutions. "I plan to go back into the '60s and trace that support through the early '80s," Newsom said.

He said the private sector has not accepted its responsibility to support black schools and said, "There isn't a school in the country that's self-sufficient, including Harvard."

Newsom, who grew up in St. Louis, received a bachelor of arts in history from Lincoln University in Jefferson City, Mo., and a master of arts in sociology from the University of Michigan in Ann Arbor. He received a doctorate in sociology and anthropology from Washington University

in St. Louis.

In addition to being president of Barber-Scotia and Central State, Newsom was president of Johnson C. Smith University in Charlotte from 1968 until 1972.

"These colleges are definitely needed," he said. "Those of us, who've been this way and who have the experience should be willing to give of their experience."

State Has Developed Networks Of Early Childhood Services

One of the state's leading experts on infant mortality has suggested a plan to reduce what he says are a large number of preventable infant deaths.

"Too many of our babies are dying," says Dr. Earl Siegel. "In 1983, 1,176 babies died in North Carolina. Our rate was worse than 90 percent of the other states and much higher than the national average. It was almost twice as high as Montana - the state with the lowest rate." To reduce this tragic toll Siegel, Professor of Maternal & Child Health at the University of North Carolina at Chapel Hill, would stress prevention of unwanted pregnancies, better care for indigent mothers-to-be and identification and medical assistance for women determined to be a high risk of premature labor.

"Such preventive medicine is extremely cost effective," said Siegel. "Each pound a premature baby puts on in a hospital setting costs \$5,000. Even with such expensive care many die," he adds.

Siegel says, "The cost of not acting is prohibitive. At least one third of the very low birth weight children who survive are handicapped by problems that could have been prevented. The families face ongoing severe psychological and economic challenges in caring for these children. Society bears the cost of medical care, rehabilitative and educational services as well as the long range, unrealized economic productivity of these children when they become adults."

North Carolina's infant mortality

rate (the number of babies under one year who die per 1,000 live births) was 13.2 in 1983. The rate for nonwhites was 19.1 "That means a nonwhite infant in North Carolina in 1983 was as likely to die as an infant in such less developed countries as Honduras, where the rate is 21," says Siegel.

Infant deaths are not the only tragic consequence of inadequate prenatal health care in North Carolina, says Siegel. "The percentage of babies with low birth weight, which makes them much less likely to survive, is consistently higher

than the national average and is very much higher than other countries such as Norway," the expert adds.

"Babies born too soon or too small not only die in much greater numbers than full term babies," says Siegel. "If they survive," he adds, "they suffer from much more physical, mental and neurologic handicaps. Among very low birth weight babies, whose survival has improved so much recently, 10 percent are severely affected by these problems, with another 25 percent moderately and mildly affected."

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