

Professor details black experience in the 20th century

BY COURTNEY GAILLARD
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Dr. Frank Woods, professor and director of the African American studies program at the University of North Carolina at Greensboro, has chronicled the contributions of African Americans in the 20th century in a book titled "Lose Not Courage, Lose Not Faith, Go Forward: Selected Topics from the African-American Experience 1900-2000."

Woods' book examines the achievements of various African Americans, famous and unknown, over the course of 100 years. Spanning life experiences of struggles, tragedies and triumphs of peo-

ple of color, Woods wanted to provide for readers an accurate and in-depth time line of black history that was not otherwise being taught in school.

"I was looking for the perfect book to use in one of my classes so I decided to write one that I needed, one that would be best suited for the way that I teach," said Woods, who discovered in his teaching that most of his students, both black and white, were not being exposed to black history between their high school education and college education.

The book highlights achievements by well-known African Americans such as W.E.B. Du Bois, Zora Neale Hurston, Louis Armstrong,

Lena Horne, Marvin Gaye and Colin Powell.

Woods not only wanted to fill in the missing pieces of his students' history, but he also wanted to recognize the lives and accomplishments of blacks, past and present, who helped pave the way for the generation of today.

"People of African-American descent do have a history, and it's a remarkable history," Woods said.

A painter by degree and passion, Woods became a history connoisseur while studying African-American artists from the 20th century. Woods quickly determined that in order to understand the craft of these early black painters, he must also understand their



Woods

calling (to teach black history)," Woods said.

Sit in on one of Woods' African-American history classes and you will notice his students busy jotting down lots of notes, filling pages of notebook paper to be later memorized. Although he provides his students with lots of

information, Woods says it's important because some people, possibly from their own families, actually lived the experiences that he is relaying to them in the classroom.

Woods hopes that his students and readers of his book will develop a greater sense of self-awareness, much as he did when he researched his own family history and determined that some of his ancestors were sold into slavery. To learn and know that family members made the middle passage, endured the hardships and survived as slaves, tells Woods that you come from "strong people."

Woods suggests that people who are interested in tracing their own family histories

begin with any paper trail that is available, from a letter to a record of transaction of a family member who was a slave or documentation about a plantation where the family member may have worked. According to Woods, local courthouses are good places to research because most slave masters kept good records of their properties and that may lead to finding names and more information. And a little luck always helps too, Woods said.

"Lose Not Courage, Lose Not Faith, Go Forward" is available only in the UNCG Bookstore. To purchase a copy of the book, call the bookstore at 334-5563.

Ross-Lee

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all of the fragments that we have now; to be able to incorporate adult learning strategies as opposed to the old memorize-and-regurgitate methodology; and to train a physician who is just not technically skilled but who is also capable of being responsible and accountable for the health status of the person he or she treats."

"Hospitals and medical schools need to work much more closely together," she stressed, "to collaborate on the outcomes of the education enterprise. Medical schools need to change their curricula aggressively to include a broader perspective on culture and the role of psychosocial and social economic issues in health and disease. And the health care delivery system needs to figure out a way to make all health providers — not just physicians — accountable for improvements in health status (not just do it but also make people better because they did it). And we need to be able to do a lot more research on what works, not just another artificial heart transplant or something, but what works in health care delivery for everyone. And we need to include all kinds of cultural perspective into everything that we do — into the research, into the scholarship, into the education — because without it we are never going to reach our full potential."

As a girl growing up in inner-city Detroit, she was always drawn to the sciences, though she briefly toyed with the idea of a show business career as a dancer, much like the career that has brought her younger sister, Diana Ross, international superstardom.

"Children, or at least children in my family, we were always in the choir; we were always performing at church; it was part of our traditions. But I was always interested in science, always

liked teaching, so I feel now that I have the best of all worlds."

She started pre-med at Wayne State University in 1960, just at the beginning of the Civil Rights Movement, but by her third year realized there were realities to face.

"Being black and female, I could never compete successfully for admission to medical school. Medicine was not an option for most minorities. It didn't start to open up until the late '60s. As youngsters, you grow up dreaming you can be president one day. Well, the reality hit: There was no way I was going to get into medical school, because there were significant quotas at all of the medical schools, if indeed they were willing to accept minorities at all."

The other option, of course, was to go to one of the historically black medical colleges, but that required money.

"I was black, female and poor. There was no Negro College Fund and there was no federal funding to support medical training at the time," she said sadly.

Her hopes of a medical career also were thwarted by a kind of sexism that was common before the women's rights movement emerged. At Wayne State, the pre-med adviser was a female. She did not believe that women should be physicians and one needed to have her signature to take human anatomy as a pre-med major. She refused to sign the permission slip.

"It's not a requirement for medical school but certainly one of those desirable courses," Ross-Lee recalled. "She wouldn't sign it for women and she was the pre-med adviser."

The irony of the situation still resonates today.

So it's been interesting to see how society has changed. "In my junior year I changed my major to chemistry and biology. (I also got married that year and so it took me an extra year to gradu-

ate, and when I did, I graduated with a bachelor of science in chemistry and biology.) I realized that there is very little you can do with a bachelor's degree in science. You can go on and get a master's or doctorate, but there were few jobs out there advertising for a bachelor's. So I had given up on the dream or even the potential of becoming a physician and with my degree there weren't that many places I could find work."

She did, however, get a job at a hospital in a suburb of Detroit. She was hired as a biochemist at what turned out to be an osteopathic hospital, working in the laboratory trouble-shooting newly installed mechanized chemistry machinery.

"Nowadays laboratories are very mechanized but back then they were just beginning," she remembered. "The hospital was in the process of purchasing a lot of this equipment, wanted to upgrade their laboratory, and they needed somebody who was science-based to trouble-shoot the machinery." It was also the time when medical technology was something that did not require certification or state licensing. Most of the medical technologists working in the hospitals were either trained in the facility or trained in the military.

"But eventually I left the laboratory," she continued, "because that isn't even a glass ceiling; that's a low roof." She went into a federal program, the National Teacher Corps, where one could earn a master's degree and teach at the same time. "I did that for a couple of years and I found that I loved teaching." Her first teaching job was in an inner-city Detroit middle school. Ironically, it was right down the street from the projects where she grew up. One of the requirements of the program, interestingly enough, was that they wanted the trainees to live in the community in which they were teaching.

"Get out of here!" laughed Ross-Lee. "I'd just spent 10 years getting out of this place. I'm not moving back!"

After getting her master's degree, she taught for about a year at Hutchins Middle School on the West Side of Detroit and then found herself divorcing her first husband.

The breakup caused her to step back and examine the direction she wanted her life to take. "I needed to figure out what I was going to do with the rest of my life."

Her dream of going to medical school kicked back in.

An opportunity came up for her to apply to a new osteopathic school of medicine that was opening in Pontiac, Mich., a Detroit suburb. It was within commuting distance, so she applied, went out for the interview and was admitted. "I was going to be in their second class but I wasn't sure," she recalled. "I really liked teaching, so I went down to the Detroit Board of Education and told them that I'd been admitted to medical school." She told them she wouldn't go to medical school if they would transfer her into a high school science teaching position. "They told me no, so I resigned that very day, left the building and got to medical school a little bit late for my first day of classes."

To go to medical school, she sold her home and moved into a family house. Her mother lived downstairs, so Ross-Lee had family support in caring for her children.

She did substitute teaching whenever she had a free day and on the weekends worked 12-hour midnight shifts in a hospital laboratory.

"I was old by medical school student standards," she said. "I was 28."

The medical school that accepted her took the osteopathic approach to medicine. The method was starting to gain

wider acceptance in the late 1960s. Developed a little over a hundred years ago in the Midwest, this medical theory started as a concept by a medical doctor who did not agree with the way traditional medicine was being practiced at the time. It was Dr. Andrew Taylor Still's feeling that some treatments for disease were often more dangerous than the disease being treated. His theory, which was considered revolutionary, was that medicine should be trying to support the body's own healing mechanisms, that the body had the ability to heal itself.

"That was heresy at the time," noted Ross-Lee. "We were still an agrarian society in the late 1800s and most injuries were either infections or musculoskeletal. Dr. Still felt that he could manipulate the body and structurally keep it in line, and that would help promote healing. He was absolutely right, but he was way ahead of his time."

Initially, doctors of osteopathy (D.O.s) were considered quacks and did not qualify for many of the resources that were available to medical doctors. Osteopathic physicians couldn't get hospital privileges because all hospitals were M.D. controlled.

"It's a minority profession and everything the profession has and all of its achievements over the past 50 years have been by virtue of what they had to build for themselves," Ross-Lee pointed out. "They were kind of isolated, which I can relate to being a minority female."

Ross-Lee has achieved many firsts, has an impressive list of credentials and a résumé full of positions she has held in the medical profession. Highlights include being the first osteopathic physician to participate in the Robert Wood Johnson Health Policy Fellowship and being a captain in the U.S. Naval Reserve Medical Corps. She also has received a number of awards

and an honorary doctorate of science degree. Through all of her professional commitment, Ross-Lee and her current husband, Dr. Edmond Beverly, a superintendent of schools in Michigan, have managed to raise five children, three sons and two daughters, all of whom have gone on to enjoy impressive professional careers (not to mention that she has four grandchildren).

Reflecting on the changing times, she observed, "I had the luxury that I don't think we fully appreciate today. I grew up in the generation where minorities knew that your success, your ability, but more than that, education was a sanctuary. We felt safe in school. I always liked going to school. I can't imagine what it must be like for the kids of today not to have any place where they can feel safe."

Ross-Lee is delighted to be living and working in the New York region. "New York offers opportunities and advantages that aren't available for other schools: a large patient base for training, a wide range of pathologies, and of course, diversity. Global possibilities are present here," she said.

And with regard to recent events, she added, "I think the incidents of September 11 did more to meld New York with the rest of the country than anything else I've ever seen. Besides the fact that that the rest of the country started to feel closer to the city, I think New York started to appreciate the fact that there is a whole country out there and that it is a kind and empathetic country; it was a world they could connect to."

Her late father used to say to his children, "If you're a Ross, then you're bossy!" — a truism that both Ross-Lee and her illustrious little sister Diana have obviously taken to heart, because both women have proven themselves undisputed leaders in their chosen professions.

Slave museum

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commodity.

The museum board has already decided that it will not "create a market" for slave items by purchasing artifacts to display. "Don't expect us to go to eBay to buy something," Neiditch said.

Silver has increased the size of its land donation to provide a larger buffer zone around the museum. Neiditch has been assured that visitors will not see the commercial development that surrounds them.

"We've thought a great deal

about the visitor family who will leave the museum and the possibility of their desire to talk about what they've just seen, to be somewhere in a space where they can think through what they've just experienced," Neiditch said.

But Sloan, at Mary Washington, wonders whether any number of trees or shrubs would be enough to insulate the museum.

"That sounds good," she said. "But we're still talking about the fact that the slavery museum is going to be in a commercial amusement complex. ... There was nothing amusing about slavery."

Having the museum in

Fredericksburg could be an economic boon to the area. Silver estimates Celebrate Virginia will generate an estimated \$22.6 million annually in state tax revenues and \$171.3 million in annual wages.

Wilder has said he expects up to 2 million people to visit the museum annually.

In Charleston, too, tourist dollars are one consideration in planning.

"The Museum of the Passage extends the duration of family visits to Charleston," a proposal reads. "If such a thing can be quantified, the visitors' enjoyment of the city is multiplied by the impact of the museum."

Karen Chandler, director of the Avery Institute for African-American History at the College of Charleston, said any museum about slavery is "a very interesting marketing challenge."

"These days you have to think about a market," Chandler said from her office in a restored Freedman's school. "You'd be foolish not to. ... At the same time, I think it represents an opportunity to have people who would normally come just to have fun have the possibility of being educated at the same time."

Lawrence Davies, a former Fredericksburg mayor and supporter of Wilder's effort, says the museum would make the city a

destination for tourists.

"History is a part of what this area's all about," said Davies, who is black and a minister.

But not all history is equivalent, especially when linked to entertainment and commerce.

When Disney asked Howard University's Russell Adams for advice on whether its proposed history park should include a slavery component, he concluded it would be "too close to the hamburgers."

Adams, chairman of the university's African-American studies department, said, "You don't have somebody eating cotton candy, watch an auction, have a Coke and then watch another auc-

tion or whipping."

Fath Davis Ruffins, a Smithsonian Institution historian who is collecting artifacts for Cincinnati's proposed Underground Railroad Museum, says people are extra sensitive when it comes to remembering slavery.

Still, in these days of uncertain government support, Ruffins says anyone who thinks a museum about slavery or anything else can be opened and maintained without corporate involvement is deluded.

"Cultural institutions aren't free," she said. "Somebody has to pay for them — one way or the other."

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