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Ella B. Brown Oral History

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Washington University in St. Louis

SCHOOL OF MEDICINE

Oral History Series

Washington University Medical Center Desegregation
History Project

Ella B. Brown, R.N., M.S.N.

Interviewed July 27, 1990 by James Carter and William M. Geideman

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Biography

Ella Bolden Brown was born in Fort Worth, Texas. She graduated from the Homer G. Phillips School of Nursing in 1947. She received her BSN from St. Louis University, and in 1959 received a Master's Degree in Nursing from Washington University School of Nursing. Later, she received a Master's Degree in Nursing and Administration from Webster University and a Certificate in Pediatric Nursing from the University of Chicago.

Brown began working at Homer G. Phillips Hospital in 1947 and held a variety of positions, including staff nurse, supervisor, instructor, and assistant director of education in the nursing school. She was on the faculty of Homer G. Phillips School of Nursing when it merged to become the St. Louis Municipal School of Nursing. She was Director of Nursing Services at Homer G. Phillips Hospital when it closed 1979. She transferred her position as director of nursing to St. Louis City Hospital No. 1 and remained there until her retirement in 1984 when City Hospital closed. She was the first Black person to be inducted into the Missouri Nurses Association Hall of Fame.

Please note that edits made by Brown have been incorporated into the interview transcript so there is some discrepancy between the audio recording and the final transcript.

Mrs. Brown, we'd first like to ask you about your involvement with Homer G. Phillips.

I'm a graduate of HGP School of Nursing. I graduated in September 1947. And served there from 1947 until the hospital was closed in 1979. I held a variety of positions. I was staff nurse, a supervisor, instructor, assistant director of education in the school, assistant director of nursing service, and my last position was a director of nursing service at Homer G. Phillips.

What do you remember about the closing of Homer G. Phillips. What were the political reasons behind it or your opinions about it?

A lot of pain. The political reasons seem to have stemmed from the economy. We assumed that Homer G. Phillips was closed because there wasn't enough funds to keep two city hospitals open, and of course St. Louis being right on the Mason-Dixon Line and considered half southern and half northern, there was a lot of separation of services as far as health goes in the city of St. Louis. Homer G. Phillips was established after Homer G. Phillips, who was an attorney, insisted that the city of St. Louis provide decent health care for the Black community. He led the Black community in a drive that resulted in city government floating a bond issue for funds, and subsequently, Homer G. Phillips was built. It was opened in 1937. Of course there was always the two city hospitals, white and Black. And of course, being a Black institution, we

had very few whites until the Title XIX activity came and dictated that you had to have some whites in your institution if you were Black, and the white ones had to have some Blacks. [St. Louis] City Hospital [No. 1] always had Black patients, but Homer Phillips did not have white patients, until Title XIX became the law. We assumed that because of the economy, the city could not afford two city hospitals, and of course we all know that it was a choice between Blacks and whites, you know who was going to go—the Blacks were going to go. Our hospital was the more modern, the more recently built, and was better equipped, which we found out after we transferred to City Hospital. We were surprised. We thought that we were really the low man on the totem pole. But I can tell you from experience that Homer G. Phillips had what City didn't have. The community did fight to try to keep Homer G. Phillips open, but I'm assuming when the Black community really became aware of the fact that the city administration really and truly planned to close Homer G. Phillips everything was already in place. Even though the community did fight hard, we did not win the battle. In August of 1979 Homer G. Phillips closed.

How do you think that closure has affected Black health care?

There was some concern expressed from the then hospital commissioner, Dr. [Raymond Dean] Wochner, about the effect closure would have on Black health care. We assumed since there was only one hospital available that naturally Black people would go to that hospital, but it really did not work out that way. The occupancy rate at City Hospital did not rise that much and neither did the occupancy rates, as far as Blacks go, rise in the other hospitals. Therefore we felt that there were Blacks who were suffering from lack of health care, that somehow they had fallen through the cracks and were lost to the system, the entire system, private and public. I

think there was a study done that showed people just didn't seek health care once Homer G. Phillips was closed. Homer G. Phillips had a tremendous clinic, and there was some misunderstanding among the population. Patients thought that the entire system had shut down, both the hospital and the clinic, but that was not so. The clinic remained open and we had to really publicize that "Hey, the clinic is still open, come on and get your health care." Gradually the clinic patients came back. We had a great big sign in front of the building—"The Clinic Is Open!" People just didn't realize that the whole system hadn't shut down. We kept the emergency room open for a few years, but it was really like a first aid station. Because we did not have the backup services needed to really do any type of definitive emergency care, it was little more than first aid. We were unable to take care of a terrible gunshot wound or a heart attack, for example. We felt that there were persons who needed health care but just weren't getting it because for some reason they would not go all the way down to City Hospital, which was in South St. Louis.

Do you think things are better now with [St. Louis] Regional [Hospital]?

I really can't say, I don't know. I do volunteer work at Regional in the Emergency Room. They are really trying hard to provide a service. But here again, this one establishment covers the entire city of St. Louis as well as the county. There is a problem of transportation even though Regional is on a very good bus line. But if you've got to come from Lemay or from Valley Park (we have people from these areas), trying to seek care, that's a tremendous transportation burden for them. I receive calls from patients who say, "Well I need to come, but I don't have a way to get there." I think as people get adjusted to the fact that Regional is it, then they are going to

have to seek care at this institution. They'll just have to make it some way, and I know that's a kind of tough thing to say, but that's just reality.

What was the interaction between Homer Phillips and Wash U?

If I can remember correctly, WashU used to have a very good medical education program at Homer G. Phillips. They provided visiting physicians in some of the major services for us, and in turn that taught our doctors, who were on staff, the things that they needed to know for these particular specialty areas. I can remember when I was a student and a young graduate that there was a very good relationship between Washington University and Homer G. Phillips medical staffs.

Was there ever a point where WashU dropped out?

When I knew you were coming, I tried to pinpoint a particular time frame but I can't because I left nursing service and returned to the school of nursing. So that left kind of [a] void in my knowledge of what was going on as far as the hospital administration and the medical administration in the hospital. Even though I'm right there next door, if you're centering on one thing, you can't center on two. It was in the late 50s and the early 60s that change began to occur. When I did get back to nursing service, the medical staff was really struggling because at that time WashU had pulled out most of its services. Some of the local Black doctors were still there, but others had pulled out. All I know is that there were services that had been covered by the medical staff from the medical school that were no longer covered. That almost created

problems in getting joint commission accreditation, but fortunately we were able to get some assistance and that never happened at Homer Phillips, we were never put on probation by joint commission. We always were able to get accredited each time we were examined by joint commission.

I was curious about the nursing school. We have heard that they combined City Hospital No. 1 nursing school with Homer Phillips nursing school.

Yes, that occurred in 1966, and I happened to have been on the faculty at that time. In order to qualify for Title XIX requirements, i.e., in order to get federal monies, you had to have an integrated situation. According to the feds, neither City nor Homer Phillips qualified for integration because Homer Phillips had an all-Black staff, particularly, medical and nursing. City No. 1 was integrated as far as RNs and other workers, but not medical staff. City was also integrated as far as patients and the lower level type of worker. The upper level type worker, no. So the feds said well you've got to integrate. They tried to integrate the medical staff, but City No. 1 would not. I've forgotten whether it was St. Louis U or WashU in control at City, but they said no. So then, in order to qualify, city government selected the schools of nursing for integration. The schools had no choice because we were being funded by the city. In the spring of 1966 the faculties were notified that they must prepare to integrate. We had a series of meetings. We organized an entirely new school, and believe or not, in September, we admitted the first integrated class, just that quick. The two schools of nursing still had students that in their respective programs that had to be graduated. We were running two schools of nursing at the same time. In 1968 City Hospital No. 1 and Homer G. Phillips schools of nursing officially

closed. The new school was named the St. Louis Municipal School of Nursing. We used both facilities, both schools of nursing buildings, both hospitals for clinical experiences, both faculties were fully integrated. Later on the Homer Phillips nursing school building was closed and the building at City No. 1 became the school site. The students still came to Homer Phillips for experience. The city government closed the Municipal School in '81. I was on staff at the closings of Homer G. Phillips and the School of Nursing. I was not on board when City Hospital was closed. I had retired.

Did that go as smoothly as you just sort of made it sound or was there a lot of strife between people in the city or people at Homer Phillips really not wanting to give up what they already have?

No, we got along very well considering the circumstances. The faculty got along well. The students had a lot of difficulty. We were told by city administration not to inform the incoming students that they were coming into an integrated situation because the feeling was that they would not come and we would not have students. We told them that they would be admitted to the St. Louis Municipal School of Nursing. They did not know all of the physical ramifications, but things went along fairly well. There were a lot of interpersonal type situations among the students themselves. A few white students left, but there was not a mass exit. At that time schools of nursing were being filled, the students were just flocking in; we had no vacancies and admitted as many students as we could. Most of the schools at that time were flourishing and classes were filled. So if you really wanted to be nurse and had been accepted, hey, you'd better go on. Most of the students stayed, some few just could not cope with the integrated situation

and they left. The students did have some problems, but they were counselled and worked them out. Most of the students completed the program. One difficulty was the large number of students that might have to be on any given service because of the increased enrollment and the method of assignment for clinical experience. I was a pediatrics nursing instructor and we had 25 students on the floor at one time with three instructors. Fortunately the classes were held at Homer Phillips because we had the largest pediatrics service with a capacity of 80 beds. Since each of the hospitals had certain services, whichever one had the greatest amount of clinical experiences that hospital was chosen. The OB and pediatrics was at Homer G, and medical and surgical specialties were at either site. Surprisingly it really worked well when you consider the short period of time we had to reorganize a new program. I think if there had been a longer time period it might have been a complete mess. Since we were working under a short time frame, we just worked very cooperatively.

What was the state of segregation in St. Louis at that time in general?

North against the South. That's it. It's North against the South. South St. Louis and North St. Louis, and that's it. Historically, that's the picture. I'm not saying that there aren't Blacks in the South, there are Blacks in South St. Louis. There's a whole community of Blacks down around Carondelet and they have been there for years. In North St. Louis there are pockets of whites, but on the whole, the Blacks have been north of Delmar and whites, south. And it's been kind of like that. When we were fighting to try to keep Homer Phillips, it was North against the South again.

Is there anything that we might have missed along these same lines that you'd like to add?

The closing itself, of Homer Phillips, was pretty well planned. It went rather smoothly even though we had a lot of interference from the community. The activists like they set up all kinds of blocks. They tried to block the movement of the patients as well as equipment and materials. The day that we actually moved the last patients, things went rather smoothly. It was planned so that when we actually moved the last patients I think we had only about 20 patients. We had a few premature babies, who were taken in nurses' arms by cabs. There were only a few patients that had to be moved by ambulance, the rest were ambulatory. These were patients we actually could not discharge and send home. Every patient that could possibly go home was discharged. At a certain point and time we had stopped admissions. No plans or specific activities were announced to the public, the patients, nor the staff. The administrators at City and the administrators at Homer Phillips were the only ones who knew exactly the day and time. We didn't tell the staff because there were quite a few staff members who were involved in the prevention of closing the hospital. Many staff members were very, very aggressive and were strong activists. Therefore we couldn't tell the staff because it would have just wrecked the entire plan.

Everybody came to and went about their jobs as usual. I remember that the dietary department prepared breakfast and sent the food to the floors as usual. We couldn't tell them not to prepare the food because that would have been a big clue that something major was happening. The welfare and the security of the patients was our first concern. When the public became aware of what was happening, the patients had been quietly and successfully moved. The

activists came out in full force but the deed had been done. Personal feelings had to be tempered because nobody felt any worse than those of us who were in administration. Moving the patients went very smoothly. I arrived at work quite early as I was the only administrator on duty and was responsible for guiding and directing the movement of the patients. Later in the day, two of the assistant administrators returned to the hospital.

This day shall forever be in my memory. Our hospital was gone.