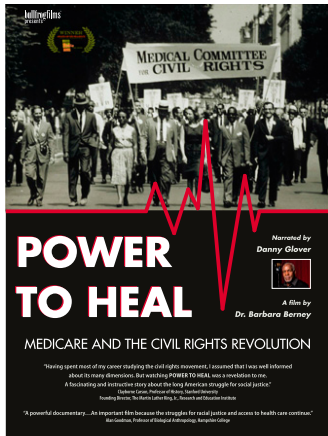


# The Epic Conquest of Medicare and Hospital Desegregation



**Power to Heal: Medicare and the Civil Rights Revolution**  
A film by Barbara Berney  
Narrated by Danny Glover

*Power to Heal: Medicare and the Civil Rights Revolution* tells the untold story about the relationship between Medicare and desegregation. Narrated by Danny Glover, this documentary prompted us to take another look at Theodore Marmor's classic, *The Politics of Medicare*. Marmor makes only two brief references to the topic. In one section, he asserts "that little attention was paid to the issue of segregation."<sup>1(p61)</sup> Later in the book, he contends that the "nondiscriminatory requirement was embroiling the government in a well-publicized confrontation with southern hospitals that were willing to risk exclusion from the Medicare program before desegregating their hospitals. Civil rights lawyers said Medicare was a powerful instrument for change."<sup>1(p61)</sup> It may have been "well-publicized" at the time, but it has been neglected since.

Marmor's comments were prescient. Since then, on the heels of the 50th anniversary of Medicare (2015), David Barton Smith researched and wrote a thorough book, *Power to Heal: Civil Rights, Medicare, and the Struggle to Transform America's Health Care System* (2016).<sup>2</sup> This important new film is partly based on this book.

*Power to Heal*, the film, adds the richness of carefully researched archival footage and compelling personal testimonials. The subjects featured in the film highlight the tensions of the era (circa 1945–1965) as public health workers, Black doctors and nurses, and thousands of volunteers and activists worked under the pressures of time, tremendous personal risk, and

racism to desegregate hospitals as required by new legislation.

The film adds to the scholarly and public policy body of knowledge on the subject of Medicare and desegregation. However, the film will no doubt trigger strong emotional responses from progressive viewers as they gain deeper insight into the pathologies of institutional racism, bigotry, and medicinal apartheid against African Americans. *Power to Heal* has the potential to redirect and recharge viewers who might otherwise be asleep at the wheel about health care bias and the critical legislation that might someday be at risk for repeal if the US government continues on its current retrogressive path.

## THE LONG HISTORY OF HEALTH CARE SEGREGATION

*Power to Heal* begins by unfolding the long history of segregated hospitals amid the overall lack of access to Blacks, mostly in the American South. Gripping and sad stories from some who were children at the time demonstrate the tragic health impacts of segregation.

Brenda Armstrong, MD, recounts her baby brother's stroke because the Whites-only hospital

refused to care for her mother during a difficult delivery. This gendered racism was a defining moment for Armstrong that contributed to her understanding of health disparities. It fueled her desire to become a doctor.

Other brief personal narratives by Alvin P. Toussant, MD, Jack Geiger, MD, Helen Barnes, MD, nurse Rawlani Branch, and many others add significant testimonial veracity to the unequal treatment that existed during segregation—and that still persists today in many forms. Dozens of brief, poignant interviews establish the types of racist tension that existed in the pre- and post-World War II eras.

*Power to Heal* highlights the work of many activists, some unfortunately not well known enough, who heroically struggled through personal and institutional barriers to fight health and medical segregation. For example, George Simkins, MD, is a dentist who doggedly fought for hospital privileges in North Carolina and then focused on the "separate but equal" clause included in the Hill-Burton legislation, the only federal legislation that formalized that phrase into law. Simkins suffered a devastating loss to make that portion of the law unconstitutional at the district court level, only to experience the joy when his appeal overturned the law.

The unexpected but welcome support of the US government in the form of Robert F. Kennedy's Department of Justice helped

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This book review was accepted March 15, 2019.

doi: 10.2105/AJPH.2019.305100

crack the separate-but-equal hold on hospital funding. Nonetheless, progress was very slow. With no enforcement and limited attention, Black doctors and their allies continued to activate at any level they could access.

The all-White American Medical Association, which refused to allow local chapters to accept Black doctors, prompted W. Montague Cobb, MD, and others to form the National Medical Association. Cobb's relentless writing and speaking out about segregated hospitals established the basis for the next phase of the film, the passage and enforcement of Medicare and Medicaid.

## CIVIL RIGHTS AND MEDICARE

The last third of *Power to Heal* unfolds as a civil rights thriller. The passage of the Civil Rights Act precluded arguments surrounding Medicare and Medicaid (the film focuses on the Medicare portion). Although the film goes into less detail of many crucial parts of the legislation such as the political wrangling by President Johnson, *Power to Heal* renders an argument for Johnson's essential leadership.

Once Medicare was passed and the celebrations waned, the government was faced with the reality of implementation. A game-changing decision in the Department of Health, Education, and Welfare established an administrative rule requiring hospital desegregation in order for hospitals to receive payment for Medicare patients. To the dismay of civil rights activists, too little was being done to desegregate hospitals across the country, particularly in the South. At the urging of activists,

the secretary of the Department of Health, Education, and Welfare created the Office of Civil Rights, an unprecedented action. This office was charged with the role of managing the desegregation of every hospital in the country not compliant with the legislation, including 70% of hospitals in the South.

## THE IMPOSSIBLE TASK

This set the stage for a race to desegregate thousands of hospitals within three months. Inspecting 2000 hospitals in such a short period necessitated a monumental effort to reduce segregation. It required more than 700 Department of Health, Education, and Welfare volunteers, community activists, hospital workers acting as informants, and even maids who spied on their doctor employers.

This impossible task, as the film calls it, relied on inspectors to rally on into the night and to deal with local police, threats by the Ku Klux Klan, and misdirection and lies by racist hospital administrators and doctors. Hospital segregation signage was covered up, patients were temporarily shuffled, and charts were forged as part of a cover-up to mislead inspectors. Geiger recounts an episode at the University of Mississippi Medical Center where the first desegregated ward consisted of two Black men, one Native American man, and one White man, each of whom was in a coma.

After limited results, President Johnson called southern hospital administrators to the White House, where he pointedly apprised them that the federal government would not back down. By the deadline, 90% of the nation's hospitals and 70% of southern hospitals had met the

standards for desegregation. Although their efforts did not end, the outcome was widely celebrated. The formidable message of *Power to Heal* is directly linked to all the stakeholders who acted to break through one of the most important barriers to improving health care and health outcomes for Black Americans.

We all need to be reminded of these events. What happened before Medicare, during its implementation, and in its continuing aftermath are part of the fabric of racial justice history and health in the United States. *Power to Heal*, the film, provides us with an essential historical reference that also informs us of how far we have come and encourages us toward the direction we should be headed.

Every scholar, student, professional, and patient of public health and medical care should see this film—and discuss it. It stands as an extraordinary correction to the collective amnesia about race and health and a deeply considered tribute to the struggles for racial justice forged by so many during the implementation of Medicare. The testimonies, archival footage, and historical argument this documentary marshals in such a compelling manner is essential to our education as health care professionals and scholars. It is not an overstatement to say that *Power to Heal* is a key corrective to a lesser known, but necessary historical reclamation of the relationships between health and race in America. **AJPH**

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Both authors contributed equally to this article.

## CONFLICTS OF INTEREST

The authors declare no conflicts of interest.

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2. Smith DB. *Power to Heal: Civil Rights, Medicare, and the Struggle to Transform America's Health Care System*. Nashville, TN: Vanderbilt University Press; 2016.