PART TWO

Poor Mothers and the War on Poverty
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Saving Babies in Memphis

The Politics of Race, Health, and Hunger during the War on Poverty

Barbara McKinney, who has worked for the same African American community action organization in South Memphis, Tennessee, for more than forty years, first encountered severe symptoms of malnutrition among infants and children in her neighborhood in 1967, when she began visiting homes as a newly employed neighborhood aide in one of the most poverty-stricken sections of the city—and, indeed, the country. McKinney remembers her shock at entering rundown houses and witnessing children with the swollen bellies, visible rib cages, smaller-than-normal head sizes, and low activity levels that are telltale signs of malnutrition. “In talking with people,” she recalled, “we learned that children were going to school without breakfast. And they were having problems with clothing and shoes for school.” In the block clubs she helped organize, however, the aides and neighborhood women “had conversations with each other about what we could do. Sharing with one another helped.”

A resident of South Memphis, McKinney was in only slightly less dire straits than those she assisted. As a young black parent without a high school diploma, McKinney attended night school and learned from her teacher about the Memphis Area Project—South (MAP-South) and its recent federal funding for antipoverty work. She and the other seventy-five neighborhood aides, most of them poor South Memphis residents, helped make MAP-South—an organization that viewed the antipoverty struggle as a continuation of the black freedom movement—the city’s most vibrant community organization from the mid-1960s to the mid-1970s. Conversely, MAP-South strived to help the community workers become “self-actualizing” by developing confidence and a sense of responsibility in their community.
Their endeavors took an unusual turn when McKinney and other neighborhood aides literally carried the most critically malnourished babies to the recently founded St. Jude Children’s Research Hospital, just north of the MAP-South area. The hospital’s director, Dr. Donald Pinkel, was forming his own conclusions about the dire need to address hunger and malnutrition right in his “own backyard.” The remarkable collaboration that emerged between MAP-South and St. Jude saved the lives of otherwise failing infants and young children and ultimately changed federal policy. Project directors convinced the Office of Economic Opportunity (OEO), the principal agency of the War on Poverty, to fund a nutrition program in Memphis that became a prototype for the Special Supplemental Nutrition Program for Women, Infants, and Children (wic), approved by Congress in 1972. Pinkel recalled, “My perception when leaving St. Jude in 1974 was that the MAP-South/St. Jude program was our most important achievement, rather than our much heralded cure of childhood leukemia.”

This sort of activism by poor black women and their medical collaborators in the 1960s and 1970s challenged decades of cultural thought that blamed black infant mortality in the South on their mothers’ presumed immorality. The MAP-South/St. Jude experience influenced medical approaches to malnutrition, including St. Jude doctors’ decision to recast malnutrition as a catastrophic childhood illness, paralleling leukemia. And it prompted shifts in public health practice, with neighborhood aides such as McKinney, who served as a health coordinator for MAP-South and liaison for the St. Jude project, playing key roles in the health care process. Together, these changes temporarily reversed the top-down, usually racist production of medical knowledge by southern public health officials.

These conflicts over health and hunger have until recently remained in the shadows of civil rights scholarship, which has traditionally focused on desegregation and voting rights battles. Even the 1968 Memphis sanitation strike, hailed as a coalescence of labor and civil rights activism and the site of Dr. Martin Luther King Jr.’s assassination, looks different in light of MAP-South’s work to obtain food donations for strikers’ families. This effort anticipated MAP-South’s later antihunger program. Strikers’ families lived on the same streets and in the same housing projects as did MAP-South participants. Some were members of MAP-South. Welfare recipients and public housing tenants involved with MAP-South supported the strike, stressing the commonalities between their families and those of the sanitation workers.
The story of MAP-South enables us to view the period following the landmark Civil Rights Act of 1964 and Voting Rights Act of 1965 from a fresh perspective. The activism of McKinney and other women in MAP-South strongly suggests that the black freedom movement was deepening and broadening at this historical juncture. Not only veterans but newcomers to the movement—including poor women, many of them struggling mothers forced to rely on public assistance as a consequence of their serious health issues—turned their eyes to aspects of racial and economic justice that were even more challenging than segregation and political disfranchisement and in so doing questioned and complicated the meaning of freedom. Activists in the welfare rights, public health, and public housing movements did not see themselves as separate from the black freedom movement. The crusade against hunger and malnutrition became central to this multilayered activism and provoked extensive controversy about historical and contemporary meanings of race and health in America.

This chapter explores the history of MAP-South and the Memphis antipoverty movement in the context of national and international antihunger crusades. It exposes the egregious levels of malnutrition among African Americans that existed at the end of de jure segregation and traces the struggle to save babies and eliminate hunger. It also explores the turbulent politics of race and class that shaped the struggle to end hunger in this era, and vice versa. McKinney and other neighborhood aides’ encounters with hunger and malnutrition in South Memphis homes paralleled other, more official “discoveries” of hunger that provoked an astounding level of national publicity. However, MAP-South’s philosophical and political goal of self-actualization for poor black community workers, block club members, and program participants was distinct and often conflicted with entrenched political, economic, and medical frameworks for fighting hunger and malnutrition.

Hunger-induced malnutrition is a serious physiological condition that can result in permanent physical stunting, neurological impairment, and death if untreated, and it strikes infants and young children especially hard. Yet during this period, malnutrition was never understood as an exclusively physiological problem. Saving babies, as the MAP-South/St. Jude collaboration did, placed the U.S. economy, ethics, and political willpower on trial and challenged core understandings of race, gender, poverty, and liberation that shaped perceptions of the hunger crisis.
THE OFFICIAL "DISCOVERY" OF HUNGER IN AMERICA

The significance of the Memphis crusade against malnutrition can only be fathomed when considered in relation to the outcry over hunger that resounded across the United States—in urban and rural locales, in the mass media, in political debates. The War on Poverty officially began when President Lyndon Baines Johnson signed the Economic Opportunity Act in August 1964, just a month after he signed the 1964 Civil Rights Act. However, hunger and malnutrition did not become burning national issues until 1967, when members of Congress crossed paths with civil rights activists, human rights physicians, and journalists determined to expose the extent of hunger in America.

Systematic state-level efforts to address hunger and malnutrition among the poor began during the Progressive Era; however, national policymakers did not become directly involved until the Great Depression. In addition to its better-known relief and jobs programs, the 1935 Agricultural Adjustment Act contained a section authorizing the U.S. Department of Agriculture (USDA) to support agricultural prices by buying “surplus commodities” from farmers—whatever they might be in a particular season—and then channeling them to needy families and youth through school lunch and other programs. Nevertheless, as critics would point out, three decades later, the USDA remained focused largely on relief for farmers and less on nutritious food for the poor and hungry.5

After World War II, most U.S. attention to the problem of hunger went outside the country’s borders—initially to war-torn Europe through the Marshall Plan and subsequently to the rest of the world through the creation of the United Nations Food and Agricultural Organization (FAO) in 1945, the United Nations International Children’s Emergency Fund (UNICEF) in 1946, and the World Health Organization (WHO) in 1948. The United States also launched nonmilitary foreign aid agencies, most notably the Alliance for Progress, culminating with the 1963 establishment of the U.S. Agency for International Development.6

President John F. Kennedy, influenced by Michael Harrington’s The Other America (1962), sought to address poverty in Appalachia by launching a pilot food stamp program.7 But public discourse and action regarding hunger in the United States really surged in the spring of 1967, when news headlines drew attention to two trips to the Mississippi Delta. At the behest of civil rights activists including physicians, members of the U.S. Senate Subcommittee on Em-
ployment, Manpower, and Poverty held hearings in Jackson in April. A team of six prominent physicians commissioned by the Field Foundation followed in May. Delegates expressed shock at the levels of hunger and malnutrition they observed, identifying such extreme conditions with poor nations.

The dire conditions reflected, in part, economic and social changes in the Delta. Mechanization and other changes in cotton production, a process begun during the New Deal and completed during the 1960s, had left thousands of ex-sharecroppers and tenant farmers landless, impoverished, and unemployed or reliant on seasonal day labor. Many families picked up and moved to Memphis, while others, out of choice or necessity, stayed in the Delta. Hunger and malnutrition activism would emerge at both origin and terminus of this migration.

In a letter to President Johnson the nine Senate subcommittee members who visited Mississippi in spring 1967 reported on hearings they held in Jackson and a tour through the Delta conducted by New York senators Jacob Javits and Robert Kennedy. “They told us that they had had grits and molasses for breakfast, no lunch, and would have beans for supper,” Javits and Kennedy recounted from a visit with a family with thirteen children. “Some of the children could not go to school because they had no shoes, and had distended stomachs, chronic sores of the upper lip, and were extremely lethargic—all of which are the tragic evidence of serious malnutrition.” This story reappeared in national news coverage of the senators’ letter. The members of the Senate subcommittee charged that the current system of distributing food stamps was grossly inadequate, partly because few people could afford to pay the fees required for the stamps. This narrative framework—the coupling of devastating stories of malnutrition, particularly among children, with indictments of the USDA’s surplus commodities and food stamp program—would structure official responses to hunger for the next several years.

These forays prompted a flurry of investigations, hearings, and proposals by Congress, government agencies, and private nonprofits, some formed for this express purpose. In the fall of 1967, Congress charged the secretary of the Department of Health, Education, and Welfare (HEW) with undertaking a “comprehensive” six-month survey of the extent of malnutrition in the United States and making recommendations. The resulting Ten-State Nutrition Survey took from 1968 to 1970 to complete and included rural and urban areas in California, Kentucky, Louisiana, Massachusetts, Michigan, New York, South Carolina, Texas, Washington, and West Virginia. Hundreds of investigators (many fresh out of college) conducted interviews and medical examinations. The Citi-
zens' Board of Inquiry into Hunger and Malnutrition in the United States, created in July 1967 and cochaired by Benjamin Mays, president emeritus of Morehouse College, and Leslie Dunbar, executive director of the Field Foundation, launched its own investigation and in April 1968 released a stinging report, *Hunger, U.S.A.*, that triggered a new wave of public outrage.10

Shortly thereafter, the airing of *Hunger in America*, a CBS documentary narrated by Charles Kuralt, sparked the widest outcry to date over severe malnutrition in the wealthiest nation in the world. First aired on May 21, 1968, and based on a ten-month investigation, the program, too, combined personal stories of hardship with an indictment of the limitations of USDA food programs. *Hunger in America* brought poignant interviews with poor Latinos, Appalachian residents, Navajos, and African Americans from Texas, Virginia, Arizona, and Alabama directly into living rooms and college dormitories. It powerfully challenged the image many young people had of American society and inspired some to plunge into social activism. Strong public response to *Hunger in America* made the documentary itself into news, especially after secretary of agriculture Orville Freeman condemned the film as "distorted, misleading, and oversimplified," and Mississippi congressman Jamie Whitten, as chair of the House Appropriations Subcommittee on Agriculture, arranged for an FBI investigation to determine the veracity of the film.11

Despite the appearance that hunger and malnutrition had been "discovered" by Congressmen, physicians, journalists, and social scientists, these revelations reflected deepening struggle regarding poverty, welfare, hunger, and health care in the mid-1960s. In the winter of 1965–66, for example, unemployed black workers had occupied a shut-down Air Force base in Greenville, Mississippi, to draw federal attention to the severity of their problems. "We are here," their leaflets stated, "because we are hungry and cold and we have no jobs or land."12 Such actions reflected not only economic restructuring but also a shift in the freedom movement's focus.

In this context, the Tufts-Delta Health Center, one of the first two OEO-funded comprehensive community health centers, opened its doors in the fall of 1967 in Mound Bayou, a historically black town in Bolivar County, Mississippi. Center staff and community board members recognized the impossibility of achieving health while patients went hungry, working with area residents to establish a cooperative farm. Dr. Jack Geiger, founder of the center and its counterpart in Boston, began issuing prescriptions for food to combat malnutrition and related health ailments.
In 1968, shortly after Martin Luther King Jr.'s assassination, activists from poor communities across the United States traveled to the U.S. Capitol for the Poor People's Campaign, initiated by King and the Southern Christian Leadership Conference. Participants from Mississippi, Texas, California, and elsewhere testified before the Senate Subcommittee on Employment, Manpower, and Poverty, offering stories about their families' dire hunger that evidenced the need for the federal government, especially the USDA, to alter its policies. The hearings and the airing of *Hunger in America* just a couple of weeks later fueled support for Senate Resolution 281, which created the Senate Select Committee on Nutrition and Human Needs. George McGovern became the new committee's first chair.¹⁴

In 1969, newly elected president Richard Nixon declared that the United States had the resources, willpower, and democratic system to eradicate malnutrition and hunger. In May, just months into his presidency, he announced the White House Conference on Food, Nutrition, and Health, to be organized by Harvard nutrition expert Dr. Jean Mayer. The December gathering brought together fifteen hundred public officials, health professionals, scientists, educators, food industry executives, and community activists. Representatives of the National Welfare Rights Organization, Southwest Council of La Raza, Appalachian Volunteers, and other groups denounced what they saw as organizers' focus on the food industry and food quality rather than on getting food to hungry people. The battle against hunger had become a crucible in which activists and poor people, public officials and medical professionals struggled over the meaning of American democracy and the future of U.S. society.¹⁵

**HEALTH CARE AS RACIAL JUSTICE IN MEMPHIS**

In the historical literature on Memphis, however, the struggle over race, poverty, and health has revolved largely around the sanitation strike, in which grave issues of health, safety, and overall well-being were bound up with strike demands to end the exclusion of black sanitation workers from the right to organize as municipal employees. Strikers described working in inclement weather and hoisting fifty-five-gallon tubs of garbage onto their shoulders. Because tubs leaked, the workers returned home filthy and covered in maggots. Men suffered from back injuries and other job-related problems, but without worker's compensation, they returned to work before fully healing. Workers ultimately voted to strike after two men were crushed when an electrical malfunction suddenly

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triggered the mashing mechanism as they waited out a storm in the back of their truck.\textsuperscript{16}

The sanitation strike represented but the most visible marker of the deep poverty and poor health care that existed in majority-black neighborhoods. Low-income people encountered severe obstacles, including long bus rides and the lack of evening hours, when attempting to obtain medical care from public health clinics. At the Thomas Gailor Outpatient Clinic, McKinney recalled, "there were long lines and long hours of waiting to see student doctors at the University of Tennessee." Many poor black Memphians simply passed on medical care. McKinney believed that Gailor, for years the only public health clinic available to African Americans, saved lives, but it was staffed by the University of Tennessee Medical School, which had historically excluded black medical students. White student doctors therefore "practiced on poor, indigent, predominantly black people."\textsuperscript{17} Years of frustration with the racism embedded in the public health system added to the discontent that festered in neighborhoods such as South Memphis.

In June 1962, well before either the sanitation strike or the advent of the MAP-South/St. Jude program, U.S. Civil Rights Commission hearings held in Memphis (part of a series of inquiries nationwide) established the city's significance to national debate about inequality in medical facilities. Chair John A. Hannah commented that the choice of Memphis partly reflected local complaints. Testimony by high-level administrators about Memphis hospitals exposed a web of racist practices that shaped nearly every aspect of health care for black Memphians. The commission zeroed in on an issue capturing national attention among black attorneys and physicians with the National Association for the Advancement of Colored People's Legal Defense Fund and the National Medical Association, the black medical society paralleling the American Medical Association. These activists were shifting focus from establishing black hospitals to pressuring the federal government to desegregate all-white facilities.\textsuperscript{18}

The hearings revealed that every major private hospital in Memphis, all with church affiliations, excluded blacks. Moreover, in the 1950s, the federal government had granted funds for the building of two all-black hospitals—E. H. Crump Memorial, a public hospital that offered private care on a paying basis, and Collins Chapel, a tiny unaccredited facility—through the 1946 Hill-Burton Act (Hospital Survey and Construction Act). A 1949 amendment had prioritized projects for populations underserved as a consequence of "race, color or creed" but permitted southern states to fulfill the requirement with "separate
but equal” facilities. An influential 1963 report on exclusionary policies in Hill-Burton hospitals issued by the Civil Rights Commission used evidence from these Memphis hearings to persuade H.W. to issue new rules banning the use of federal funds to further rather than relieve racial equality. This report and a 1964 Supreme Court ruling, Simkins v. Moses H. Cone Memorial Hospital, which reversed the exclusion of a black doctor from practicing in a private hospital built with Hill-Burton funds, formed the basis for Title VI of the Civil Rights Act, which barred federally funded programs from excluding individuals on the basis of “race, color, or national origin.”

The commission also explored the sharp differential between white and black infant mortality rates. In 1961, Memphis’s black infant mortality rate had reached 36.6 deaths per thousand babies, far higher than the rate of 24.4 per thousand among whites. Dr. Nobel Guthrie, assistant director of the city’s health department, blamed the gap on out-of-wedlock births: “The illegitimately born children have a higher infant death rate than those born legitimately.” Guthrie submitted tables and graphs charting rates of illegitimacy and infant mortality but never considered that, although both numbers might be higher among blacks, the rates might not be causally linked.

The report submitted by Guthrie and the health department’s director, Dr. L. M. Graves, did not discuss malnutrition resulting from deprivation as an explanation for infant mortality. Instead, Guthrie and Graves claimed that only quelling immoral behavior would prevent infant deaths. “Though this is a primarily social or moral problem it has strong health effects,” the report concluded. “Some of the Negro’s most severe health problems, such as venereal disease and infant mortality, are directly related to behavior patterns which lead to illegitimacy of more than one-third of all babies born in recent years.” These officials publicly articulated an otherwise tacit racial logic of health care. That their assumptions were greeted with sharp public questioning by a federal commission indicates the impact of the black freedom struggle. More than desegregation was at stake for poor black southerners.

MAP-SOUTH AND THE ANTIPOVERTY MOVEMENT

MAP-South epitomizes the broadening of the freedom struggle with the goal of addressing black poverty through self-determination. The project’s target area included some of the poorest census tracts in the nation. From the mid-1960s forward, MAP-South stood as the city’s most important community action...
organization, with hundreds of members and numerous programs. With the beginning of operations in January 1967, block clubs and staff identified and addressed a phenomenal array of problems. Health and the urgent need for emergency food provisions surfaced as two of the most pressing issues, along with substandard housing, incomes below the poverty line, environmental problems such as open drainage ditches, nearly insurmountable obstacles to welfare eligibility, and the lack of recreational facilities for youth.22

Although the women and men who founded MAP-South had previous experience in civic clubs, community groups, churches, and schools, they envisioned the new organization in expansive terms. MAP-South’s constitution, adopted in December 1965, declared the group’s dedication “to the improvement of the community working with the framework of the anti-poverty program seeking to develop the economic, environmental, and social conditions of the citizens of the area.” This stated intention tacitly acknowledged the complex realities of this well-established black community. While well-heeled African American families had long resided alongside stable as well as poor working-class households, the area was now rapidly changing under the impact of significant urban migration by impoverished families from West Tennessee, Mississippi, and Arkansas. LeMoyne Gardens, a public housing project from which much neighborhood activism emanated, sat across from LeMoyne-Owen College and the prestigious Metropolitan Baptist Church, and owners of the black businesses on and near Beale Street shared neighborhoods with families living in dire poverty.23

When President Johnson announced the federal War on Poverty in 1964, MAP-South applied to operate as a delegate agency of the Memphis Office of Economic Opportunity, funded by the national OEO. Political controversy within Memphis and between the city and the OEO stalled funding until January 1967. Undeterred, a committee headed by J. D. Springer, principal of Booker T. Washington High School, held monthly meetings to hammer out a framework for developing grassroots community leadership and addressing urgent poverty-related problems. The group also accrued political power and public recognition through community efforts including voter registration and boycotts of local businesses. Its prominence—or notoriety, depending on one’s perspective—increased with participation of such well-known leaders as the Reverend James Lawson, a visionary of the civil rights movement who had led Nashville’s first sit-ins and had helped to found the Student Nonviolent Coordinating Committee prior to moving to Memphis to pastor at Centenary Methodist Church in 1962.24
MAP-South’s political profile and early prominence in the antipoverty movement entangled the organization in power struggles with Mayor William Ingram that resulted in the funding delay. Congress’s passage of the 1964 Economic Opportunity Act, with its provision for the Community Action Program administered by the OEO, sparked heated conflict. Ingram moved to establish the Community Action Committee, whose members would assure his control and thwart an alliance between a federal agency and a black community organization. As in other cities, the most heated confrontations emanated from the legislative requirement that Community Action Programs include “maximum feasible participation” by poor people.25

As the founders of MAP-South proceeded with their planning and activism, the National Association for the Advancement of Colored People, Tennessee Commission on Human Relations, and Congressman George Grider pressured the federal OEO to freeze funding until a plan with community involvement rather than city control was hammered out. Even when the OEO finally approved an independent War on Poverty Committee (WOPC) and citizens’ board to oversee citywide funding and programming, conflict surrounded the hiring of Washington Butler Jr., an African American analyst with the Tennessee OEO, as WOPC director. The OEO ultimately chartered MAP-South as a delegate agency and beginning in January 1967 channeled funds directly to the organization, making it possible to employ Autry Parker as executive director, secure office space, and launch its action plan.26

MAP-South truly ignited the neighborhood in the early months of 1967. The much-anticipated first meeting of the MAP-South Citizens’ Association drew several hundred to the auditorium of Booker T. Washington High School on April 20, 1967. Mary Collier reported for the membership committee that more than eight hundred people had joined the organization, a number that would double within months. By March, in addition to the staff of social workers and clerks hired by Parker, MAP-South had hired and begun to train fifty neighborhood aides, including McKinney, who would organize others while expanding their own horizons and skills. Aides, working with social workers, knocked on doors on every street in the nine-census-tract area to initiate block clubs and identify indigenous leaders (mostly women). The organization’s 1967 annual report indicated that aides and social workers had established 73 clubs representing 1,621 members, had held 685 club meetings, and now had a contact list of more than 5,000 people. Block club activists became members of the Citizens’ Association, the highest body of MAP-South, which in turn selected members
of the Policy Committee that oversaw the organization's ongoing work between Citizens' Association meetings. MAP-South also hired students as neighborhood aides and appointed college graduates, veterans of the civil rights movement, to its staff.27

Neither block clubs nor MAP-South programming underscored poverty on a single-issue basis. Clubs strategized about how to eliminate substandard housing, inadequate income, welfare ineligibility, and environmental problems (which in contemporary parlance referred not to forests and rivers outside the city but to open sewers, toxic waste, and the lack of streetlights and recreational facilities). For youth, MAP-South sponsored employment counseling, clubs, and summer workshops in writing, drama, art, and music. Aides initiated voter registration drives and established emergency centers, while social workers helped families, including migrants, identify public resources for addressing eviction, decrepit houses, unemployment, illiteracy, medical problems, and hunger. In 1968, a VISTA worker assisted women at LeMoyne Gardens in organizing a Welfare Rights Organization. MAP-South also helped activists initiate seven community action projects in other black neighborhoods, among them Southwest Shelby, North Memphis, and Orange Mound.28

In addition to material needs, staff members encouraged poor, working-class African Americans to think differently about poverty, race, and their lives. "Our people are burdened with a legacy of being ostracized politically, socially, economically and educationally from the mainstream of American life," declared MAP-South's 1968 annual report. Organization newsletters encouraged members to consider poverty as part of this legacy rather than as a result of personal failings or a racial attribute. One article spotlighted the summer youth program’s rejection of menial jobs such as those assigned by the Neighborhood Job Corps. Instead, it aimed at "working with one’s mind, a necessary condition-response to break the pattern of Negroes traditionally holding menial jobs, and to prepare children for our electronic age by teaching them to think and express themselves in modes not as dramatic as rioting but more sustaining."29

This language diverged from prevailing white liberalism, as articulated by Daniel Patrick Moynihan's 1965 report, The Negro Family: The Case for National Action. That report also evoked a burdensome historical legacy but added a new twist. "Three centuries of injustice," Moynihan argued, had "brought about deep-seated structural distortions in the life of the Negro American." The "structural distortions" to which he referred involved a "culture of poverty" that enveloped the black family—in particular, a matriarchal structure in which
black men were weak or absent. This “tangle of pathology,” he claimed, was “capable of perpetuating itself without assistance from the white world. The cycle can be broken only if these distortions are set right.” Moynihan laid poverty at the feet of this distorted black family; resolution to poverty thus required outside intervention to strengthen “the Negro family so as to enable it to raise and support its members as do other families.”

Moynihan’s call for “assistance from the white world” conflicted with MAP-South’s emphasis on “working with one’s mind.” The organization’s leaders both engaged and defied Moynihan’s treatise on the cycle of poverty. The 1967 annual report, for example, seemed to echo Moynihan by asserting that the organization “was designed to mobilize every available resource to beat the cycle of poverty” in what it described as a self-help goal. The 1968 report, however, declared that despite the historical ostracizing of blacks, “we have demonstrated the imagination, initiative and thrift that many in the established order accuse us of not
having." Rather than appealing for white intervention, the report emphasized that "we as a people can recognize the uniqueness of our situation even with the great problems we have which have caused many cities to explode with flames." The experience of that first year had prompted a direct challenge to the cycle-of-poverty thesis by embracing black imagination and "people involvement.""30

MAP-South's intense support for the 1968 sanitation strike reflected this emphasis on self-determination. The headquarters for community support was in South Memphis, as were many of the workers' homes. Lawson headed the Committee on the Move for Equality (COME), founded by black ministers after some protesters were sprayed with mace during a march, and Lawson reached out for King's support. Strike families' dire circumstances spurred the MAP-South Policy Committee to solicit food donations from wealthy whites and Memphis-based food industries such as Quaker Oats and Ralston. This effort would provide the basis for a MAP-South's work on hunger and malnutrition.32

SELF-DETERMINATION, MEDICAL RESEARCH, AND THE STRUGGLE TO SAVE BABIES

MAP-South organizers confronted health crises caused by stress and malnutrition associated with persistent poverty, hard labor, and exposure to health and safety hazards. Statistics for the decade ending in 1970 showed far higher death rates from stroke, arteriosclerosis, degenerative heart disease, hypertension, and cancer for black forty-year-olds in the MAP-South area than for forty-year-olds in the city at large. MAP-South's first annual report described formidable barriers that led many area residents to skip basic medical care. In 1966, the U.S. Public Health Service's new Office of Equal Health Opportunity had picked up the Civil Rights Commission's trail by charging Memphis hospitals with continuing de facto segregation, in violation of the 1964 Civil Rights Act. Baptist, Methodist, and St. Joseph's had admitted a total of five, three, and two black patients, respectively. MAP-South attempted to offset these problems with such programs as a pilot tuberculosis skin test project cosponsored with the health department.33

MAP-South integrated its health care work with creative staff development. The 1968 annual report featured McKinney as the new director of health and nutrition programs, pointing out that she had benefited from a tutoring program for neighborhood aides. The report quoted McKinney as saying, "The manner of teaching makes a difference and the instructors have humane inte-
est. Being in a class with those your same age makes a difference.” It described her as “a perfect example of a talent that was overlooked by the outmoded ways of thinking and seeing in our culture. Through hard work and intelligence, she has helped MAP-South and has been rewarded on that basis rather than some artificial standard.” In this view, she embodied the self-determination that MAP-South sought and that American society devalued.24

McKinney and other aides responded vigorously after meeting malnourished children and mothers unable to reverse these tragedies. They encountered babies and young children with distended bellies, visible rib cages, and spindly legs, with subdued activity levels and small head circumferences and bone measurements—indicators of potentially permanent mental and physical retardation. Their efforts to address this crisis resulted in a July 1968 agreement between MAP-South activists and research physicians at St. Jude Children’s Research Center. Aides and social workers would refer malnourished infants and preschoolers to a pediatric nutrition clinic at St. Jude, where they would receive intensive care. MAP-South reported that 150 children were treated in the second half of 1968 alone. With Pinkel, a pediatric cancer expert, as director, St. Jude had opened its doors on a nonsegregated basis (including live-in accommodations) in 1962. The brainchild of Lebanese American entertainer Danny Thomas, St. Jude’s mission was to research and cure catastrophic childhood illnesses. In 1967, the same year that MAP-South sent neighborhood aides out for block-by-block canvassing, Pinkel had confronted hunger and malnutrition among African American children in the area around St. Jude. His focus on this issue had been nudged by his daughter’s participation in an OEO-sponsored summer youth program. However, he had already hired Dr. Paulus Zee, a pediatric nutrition specialist, to initiate a nutrition program among poor, predominantly black pediatric cancer patients at the clinic after observing how malnutrition obstructed their treatment.25

Individuals involved in the MAP-South/St. Jude collaboration emphasized the uniqueness of this relationship. Zee consistently commented on the crucial roles played by MAP-South, while Lawson noted the innovativeness and openness on the part of the St. Jude doctors. “Our block workers took malnourished babies over to St. Jude’s,” he recalled. “They proceeded to examine them. That wasn’t supposed to be their work. Their specialty was supposed to be cancer research. But they didn’t throw them out.”26

This collaboration led St. Jude’s doctors to break new ground in medical history. Pinkel reclassified malnutrition as a catastrophic childhood illness, with
kwashiorkor linked to liver failure and marasmus to physical and mental underdevelopment. He worked with MAP-South to establish a health care program and initiated an investigation of malnutrition in infants and young children under Dr. Zee's supervision. MAP-South neighborhood aides and nurse assistants received training on childhood illnesses. They visited homes in their assigned areas; evaluated the health of infants, preschool children, and pregnant mothers; and sent babies with signs of malnutrition to the hospital clinic. There, nurses and doctors examined them, administered health care, and sent them home with Similac, a baby formula enriched with vitamins and minerals, including iron. In extreme cases, they admitted infants to the hospital.37

These developments provided the scaffolding for an ambitious Surplus Commodities Food Prescription Program begun in 1969. Through an agreement with the state agriculture department and the city/county health department, MAP-South neighborhood aides identified women, children, and babies in urgent need of nutritional support. St. Jude medical staff wrote prescriptions for food, as Geiger had been doing at the Tufts-Delta health center. Based on the idea that food was the medicine of choice for poor people, MAP-South workers then distributed food commodities from a warehouse. St. Jude added iron- and vitamin-enriched baby formula to its warehouse stock in 1970. By 1973, an average of 140 individuals visited the warehouse each day.38

According to Pinkel, this combination of community involvement and medical research distinguished the MAP-South/St. Jude project from other community health programs and allowed those involved to project their experiences far beyond Memphis. St. Jude's staff maintained records of head circumference, weight, bone age, and levels of vitamins A and C and serum iron in children they encountered through MAP-South as well as those enrolled in Head Start. This investigation tracked the impact of nutrients on babies' health and development, including brain and bone growth, responsiveness, and anemia. Zee extended his conclusions in a Journal of the American Medical Association article by comparing Memphis findings to information from the rural Mississippi Delta.39

Lennie Lott, an African American nurse practitioner and researcher at St. Jude, underscores the social impact of the nutrition project by relating a stunning story about the fate of a particular infant. Lott recalls a call she received in the early 1970s from a woman who was worried that her four-week-old granddaughter might be malnourished. That the woman made this call reflected the educational work MAP-South aides had been doing in her neighborhood. Lott
found the baby in grave condition, her head dangerously small and her anterior and posterior fontanels (the soft spots on babies’ craniums that demarcate gaps between the immature, growing bones protecting the brain) closed, an indicator that the baby’s brain had halted its development. Lott arranged for the baby to be admitted to St. Jude, where pediatric nurses fed and cared for her. Within weeks, the baby’s condition had improved. “An X-ray revealed that her fontanels had reopened,” Lott remembered. “Her brain had started growing again.” Lott saw this story not as a narrative of helplessness and salvation or of immorality and morality but rather as reflecting activism by MAP-South, St. Jude, and the grandmother. Because childhood malnutrition could cause permanent developmental damage, combating it literally meant seizing the future.40

St. Jude and MAP-South rejected stereotypes of black women as dependent, lazy, or licentious, instead emphasizing their labor to combat hunger and malnutrition. St. Jude reports claimed that their staff would have been stymied without door-to-door visits by MAP-South aides, because a racial gulf would have prevented residents from trusting the medical professionals. Zee lauded MAP-South as a “black self-help organization” that “let the most significant problem of a block be defined by the people who live there” and that was “worked out by the combined efforts of the families, block captains, aides, and social workers.” A Redbook journalist who authored a story on the program seemed awed at the extensive work accomplished by neighborhood aides. She noted that Johnnie Mae Jones, whom the writer accompanied on visits in December 1972, “seems to know almost every person, street and house in the area.” McKinney declared that as a grassroots organization comprised of “mostly poor, uneducated people,” MAP-South was doing something that “had never been done before. . . . We were like the little engine that could, that kept being told it couldn’t be done.”41

Zee declared in his article that poverty, not race, caused the stunted growth and anemia he had observed among poor black children and disparaged medical studies reminiscent of Moynihan’s sociological conclusions: “A deprived emotional environment has been suggested as a cause of growth failure. However, [studies] have demonstrated that growth failure associated with maternal deprivation is from under-eating secondary to not being offered food, or not accepting it, and not because of some psychologically induced metabolic defect.” Zee’s study, in other words, drew conclusions that contradicted those of the city health officials who had attributed black infant mortality and low birth weight to illegitimacy and immorality. Elsewhere, Zee also refuted assertions that low birth weight among black newborns was caused by a genetic racial
Figure 4. Summer youth program at MAP-South, July 1968. *Memphis Press-Scimitar* staff photo, courtesy of the Mississippi Valley Collection, Special Collections, University of Memphis Libraries.
defect, reporting that black newborns treated in a well-baby clinic displayed no signs of the malnutrition and anemia commonly seen among other infants in the MAP-South poverty area.42

Zee's emphasis on economic explanations for malnutrition and his accolades for MAP-South as a black self-help organization must be considered in light of other political and ideological developments in the mid- to late 1960s. Although social scientists in this period rejected biological racial explanations in favor of cultural ones, the latter took on racial meanings when paired with characterizations of poor communities as dysfunctional or pathological. In embracing this perspective, the War on Poverty sought to jump-start poor people's mainstream economic participation by creating vehicles for "maximum feasible participation" and individual achievement. In this sense, the MAP-South/St. Jude's collaboration paralleled at least the stated (if often controversial) goals of the OEO, which funded the project.

However, in this case, the reverse of the experts' expectations had also transpired: Poor black women had motivated medical professionals from outside their communities to become involved in their lives and publicly to articulate a different perspective on hunger. Zee's statements in the Journal of the American Medical Association and elsewhere reversed the flow of medical knowledge.

MAP-South also won support and assistance from white women anthropologists. After a tour of South Memphis, several women formed a group, the Women of Memphis, to address poverty, particularly its impact on children. Myra Dreifus, Selma Lewis, and Jocelyn Wurzburg further developed their ongoing work, with Dreifus's Fund for Needy Schoolchildren becoming the key advocate for free school lunches. Other projects proliferated under the aegis of the YWCA, Junior League, and Church Women United.43

Nonetheless, St. Jude and MAP-South faced formidable pressures, internally and externally. "Many people in Memphis didn't like it at all," recalled Pinkel. Many condemned the program as a civil rights rather than child health crusade and accused the effort of marring the city's image by exposing malnutrition. This conflict jeopardized the program's support: according to Pinkel, "Some of our St. Jude donors said they wouldn't contribute to the hospital anymore, which got our fundraisers pretty upset with me."44

Paradoxically, the nutrition program's success, including support from the USDA and the OEO, spurred tension within MAP-South. Leaders not centrally involved with the program worried that extensive concentration on mothers, infants, and young children, supported by state funding, siphoned energies
from other goals. "We became the agency to prescribe food," Lawson observed. "We were feeding eleven hundred families a month when I left the city in 1974." He saw this focus on malnutrition as just a "drop in the bucket" of the problems that faced Memphis's poor.45

MAP-South's work with unemployed youth drew more political heat than any other program. In 1967, MAP-South came under fire for employing Coby Smith and Charles Cabbage, young activists widely identified with Memphis's Black Power movement. Their views sometimes clashed with those of Lawson, who hired them, yet he saw in them a means of connecting with unemployed youth. The WOPC recommended that MAP-South fire the men for associating with organizations whose goals contradicted those of the War on Poverty, a reference to the Student Nonviolent Coordinating Committee, which now espoused Black Power. Moreover, the U.S. Senate's Judiciary Committee, headed by Mississippi's James Eastland, investigated whether Smith and Cabbage (and others nationwide) were fomenting race riots. White attorneys Lucius Burch and Mike Cody defended Smith and Cabbage at a WOPC hearing requested by MAP-South's Policy Committee. Yet the larger questions remained: Who would control the War on Poverty in Memphis? And who would get to define black self-determination and self-help?46

HUNGER AS A CRUCIBLE

This local struggle in the urban South intersected with national and worldwide efforts to combat hunger. The dissension at Nixon's White House Conference on Food, Nutrition, and Health, which convened one year after the start of the Memphis food program, was reported in Memphis newspapers. "Not since the faltering attempts to forge a melding of the three predominant poverty groups in the country by the Poor People's Campaign," declared an "observer" quoted in the Tri-State Defender, "has there been a concentrated attempt to bring the disadvantaged together." Another commentator wondered whether these showdowns might spark another civil rights movement.47

The Nixon administration's steps to redirect and ultimately dismantle the War on Poverty also provoked anger in Memphis. The decision to demand authority for the Community Action Program to state and municipal officials resulted in the shuttering of the WOPC offices in October 1970, but not before a sit-in by some of the three hundred fired employees, the arrest of several participants, and a protest rally by their supporters. Butler, the fired WOPC direc-
tor and a participant in the sit-in, rebutted charges that wearing a dashiki and a beard made him unfit to lead the committee, arguing that his dress made it easier to approach poor African Americans.48

MAP-South reestablished itself as an autonomous organization, ending its reliance on local, state, and federal agencies apart from the USDA. This independence, however, cost political power and narrowed MAP-South’s program to a focus largely on food distribution. The organization’s conflicts with the city came to a head after MAP-South (particularly Parker) and black physicians designed and won OEO approval to create the Memphis Health Center to serve South Memphis. The center opened in 1975, but four years of fighting over control undermined the original vision and sapped community energies. By then, city health officials, physicians, and the federal government had wrested control of the center from the neighborhood activists. MAP-South lost further clout through gerrymandering of the Ninth Congressional District and the razing of MAP-South territory around Beale Street as a consequence of urban renewal.49

Even as these conflicts heated up, the prescription food program gained a national profile. Although the Nixon administration would soon replace the OEO with the more decentralized Community Services Administration, Congress in 1972 approved and the president signed legislation sponsored by Senator Hubert Humphrey to create WIC under HEW’s jurisdiction. WIC would distribute USDA surplus commodities to pregnant and lactating women, infants, and preschool children. According to Pinkel, Humphrey had been inspired in part by Prescription: Food, a documentary about the MAP-South/St. Jude program made by Memphis’s WMC-TV.50

When McGovern’s Senate Select Committee on Nutrition and Human Needs convened hearings in June 1973 to address the USDA’s and HEW’s failure to implement WIC on more than a limited trial basis, committee members called on Zee, who testified about his team’s findings about the reversal of malnutrition through prescription food. Zee also introduced into the record the Redbook article, “How to Save Babies for Two Dimes a Day,” which displayed disturbing photographs of malnourished babies alongside text detailing the MAP-South/St. Jude collaboration. Committee members also viewed Prescription: Food, aired by WMAL-TV on the opening night of the hearings, June 5, 1973, which similarly revealed his team’s research on the severity of child malnutrition.

Dr. Zee’s testimony did not stand alone. Back-to-back statements by medical researchers from prestigious universities and international agencies conveyed findings from studies in Guatemala, Tunisia, Taiwan, Chile, Mexico, and the...
United States. Most involved poor women and children; some used laboratory animals. The hearings thus shifted attention away from local results and toward the larger physiological and neurological effects of malnutrition. A Johns Hopkins biochemist had found that the offspring of malnourished pregnant rats suffered “behavioral damages. . . [T]hey learn very slowly, and they make mistakes while learning.” He compared his study to others involving pregnant women and babies in Taiwan. Comparing rats to humans and Guatemalans to Detroiter proved that poverty, not race, caused malnutrition and the associated physical, mental, and behavioral deformities. Researchers took pains to argue that white babies would respond to nutritional deprivation in the same ways that black babies did.

And yet in the fraught racial milieu of U.S. politics in the early 1970s, linking “inner cities” to indigenous populations in poor countries could translate malnutrition and its effects into problems of race in terms of ingrained dependency, high birth rates, and social volatility. Liberal senators such as McGovern and Humphrey underscored WIC’s potential for preventing developmental deficiencies and insisted that the United States live up to its role as the leader of world democracy by eradicating hunger and poverty at home. Cognizant of the need to articulate these goals in pragmatic terms to win support from conservatives, however, they argued that federal expenditures for WIC were justified by the alternative: greater economic and societal costs if Congress waited for the babies to become teenagers and adults. As Redbook put it, babies could be saved “for two dimes a day.” In this view, unlike that espoused by MAP-South, mere nickels and dimes would allow the federal government to avoid riots and the potential costs of supporting adults incapable of functioning to their full capacity.

From today’s perspective, WIC appears to be just one more social policy from the War on Poverty era that funnels public resources to presumably dependent women and children. Its continuing existence appears to support rather than contradict prevailing views that the cultural dependency and immorality of the poor results, as Moynihan put it years ago, in a self-perpetuating cycle of poverty. Viewed from a different historical vantage point, however, WIC emerged out of years of struggle by poor African American women, MAP-South organizers, and St. Jude professionals who undermined scholarly claims about “dysfunctional” and “pathological” black families that could be salvaged only by government intervention. This intervention and professional expertise mattered greatly in South Memphis. Engaging in this project of black self-determination allowed poor women simultaneously to save babies and to develop talents and
skills. It profoundly impacted medical knowledge and practice. Interpretations of race as culture fueled new versions of racism in the post-civil-rights era. In the hands of organizations such as MAP-South, the idea of race as self-actualization opened possibilities for different kinds of relationships between poor African Americans, "experts," and the state, even in the face of repression.

Notes

2. Ibid.; MAP-South 1967 Annual Report, 1–2, 4; Autry Parker, "Politics of Community Organization: MAP-South, Inc.," 12–13; unpublished paper, Memphis State University, 1975, both in MAP-South Papers, MAP-South Office, Memphis.
3. Donald Pinkel, e-mail to author, November 2, 2009; Donald Pinkel, interview by author, January 6, 2010.


20. *Hearings before the U.S. Commission on Civil Rights, 16–17.*
21. Ibid., 23.
24. Minutes of the MAP-South Citizens' Association Meeting, April 20, 1967, MAP-South Papers; Parker, "Politics of Community Organization."
25. Parker, "Politics of Community Organization."
32. McKinney, interview.
34. MAP-South 1968 Annual Report, 16.


45. Lawson, interview by author; James Lawson, interview by Joan Beifuss and David Yellen, September 23, 1969, Sanitation Strike Archival Project, Special Collections, McWherter Library, University of Memphis.


49. Mullins, interview.
