

# **Community Health**

Community health organizing can take on a variety of forms, from preventative to nutritive to different degrees of care. This section shows presents documents from different grassroots programs organizing for community health.

Essential questions:

1. Why have individuals organized to ensure the community's health?
2. How has economic oppression specifically affected children with regard to their health and welfare?
3. RE: "New York's Chinatown," Akwesane Notes, Black Panthers: How in particular have marginalized groups created awareness and constructed methods to tackle health issues?

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Susan Driver, ed., Queer Youth Cultures, 2008.

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## **"America's Children," 1976**

### **Pamphlet: "America's Children," 1976**

There are many aspects of child health in this country of which Americans can justifiably be proud: mortality of infants and children is decreasing, and medical knowledge is available to wipe out or greatly diminish the incidence of disease and disability.

The pages that follow summarize the hazards to the survival of infants and children, and document the general state of child health or illness. They also outline outstanding health problems, and major federal health programs now in place to meet them.

Several important conclusions can be drawn from these statistics:

- Americans know more about good health than they put into practice; better delivery systems are more important than more medical knowledge.
- Poor health among America's children today is often bound up in the conditions of life: poverty, social stress and mores, the absence of good health education, marketing of valueless or damaging products, environmental pollution.
- Proper preventive care and treatment are only available to some of us: the poor, racial minorities, and those who live in certain parts of the country lack the services and manpower that are available to others.
- Rising costs may increase those inequities and make progress in good child health care more elusive.

**THE MOST IMPORTANT FACTORS GOVERNING CHILD HEALTH  
COME INTO PLAY BEFORE BIRTH. MANY OF THEM WE KNOW  
HOW TO CONTROL, BUT NEGLECT DOING SO. A BABY IS LIKELY  
TO GROW INTO A HEALTHY CHILD AND ADULT WHEN ITS  
MOTHER:**

- had good nutrition as a child
- has good nutrition during pregnancy<sup>1</sup>
- begins pre-natal care early in pregnancy
- is between 20 and 35 years old
- has a good education
- is in good health
- has not been pregnant recently<sup>2</sup>

**LACK OF THESE CONDITIONS GREATLY INCREASES THE  
LIKELIHOOD OF LOW BIRTH WEIGHT (UNDER 5 1/2 LB.) AND  
BIRTH DEFECTS.**

Low birth weight:

- is associated with almost half of all infant deaths<sup>3</sup>
- substantially increases the likelihood of birth defects<sup>4</sup>
- is three times as likely when mothers have no pre-natal care<sup>5</sup>
- is proportionately highest among children whose mothers are under 15.<sup>2</sup>

Birth Defects:

- afflict 200,000 new-borns every year<sup>6</sup>
- are found in highest proportion when mothers are under 17 and over 35<sup>7</sup>
- result from environmental factors alone or in combination with heredity 80 percent of the time, it is estimated<sup>8</sup>
- happen less often when the mother has pre-natal care<sup>4</sup>
- are closely linked to maternal nutrition; mental retardation is especially closely linked.<sup>1</sup>

<sup>1</sup>National Foundation, *Leaders Alert Bulletin #25*.

<sup>2</sup>Stickle and Ma, "Pregnancy in Adolescents: Scope of the Problem". *Contemporary Ob/Gyn*, June 1975.

<sup>3</sup>National Foundation, *Annual Report 1974*, p. 9.

<sup>4</sup>National Foundation, *Facts: 1976*, p. 7.

<sup>5</sup>DHEW, NCHS, *Monthly Vital Statistics Report, Summary Report Final Natality Statistics*, 1973, p. 5.

<sup>6</sup>National Foundation, *Facts: 1976*, p. 5.

<sup>7</sup>National Foundation, *Leaders Alert Bulletin #29*.

**ALTHOUGH WE ARE OVERCOMING SOME TRADITIONAL CHILDHOOD DISEASES, A NUMBER OF GROWING HEALTH PROBLEMS WITH ROOTS IN OUR SOCIAL AND ECONOMIC CONDITION, THE "NEW MORBIDITY", CAUSE INCREASING CONCERN. NEW ALIGNMENTS OF EXPERTISE AND RESOURCES ARE REQUIRED TO COPE WITH THEM.<sup>1</sup>**

• *Behavior problems, learning disorders, and school problems* form a constellation that acutely troubles parents and community;<sup>2</sup> children who display these problems need more than traditional medical attention.

• The *mental health* needs of children are increasingly acknowledged. New federally sponsored community mental health centers in the last decade have made help available where there was none before; in 1971, 200,000 children were served in these centers.<sup>3</sup>

It is estimated, however, that only 10 percent of the children who need help are getting it,<sup>4</sup> and of course real progress in this area will only be made by tackling the social and economic stresses that underlie so many mental health problems.

• *Child abuse* is a recently recognized phenomenon of national scope, involving both disability and death. We are just beginning to investigate its dimensions; its origins are largely in the pressures of the society in which we live. (See p. 83)

<sup>1</sup>Haggerty, et al, *Child Health and the Community*. John Wiley, 1975, p. 94.

<sup>2</sup>Ibid, p. 316.

<sup>3</sup>DHEW, NIMH, *Statistical Note #92*, August, 1973, Table 2.

<sup>4</sup>Kramer, Morton, Sc.D., *Historical Tables on Changes in Patterns of Use of Psychiatric Facilities 1946- 1971-73*, NIMH, September 1975, Table 13.

## 1. How do socioeconomic factors affect early child development?

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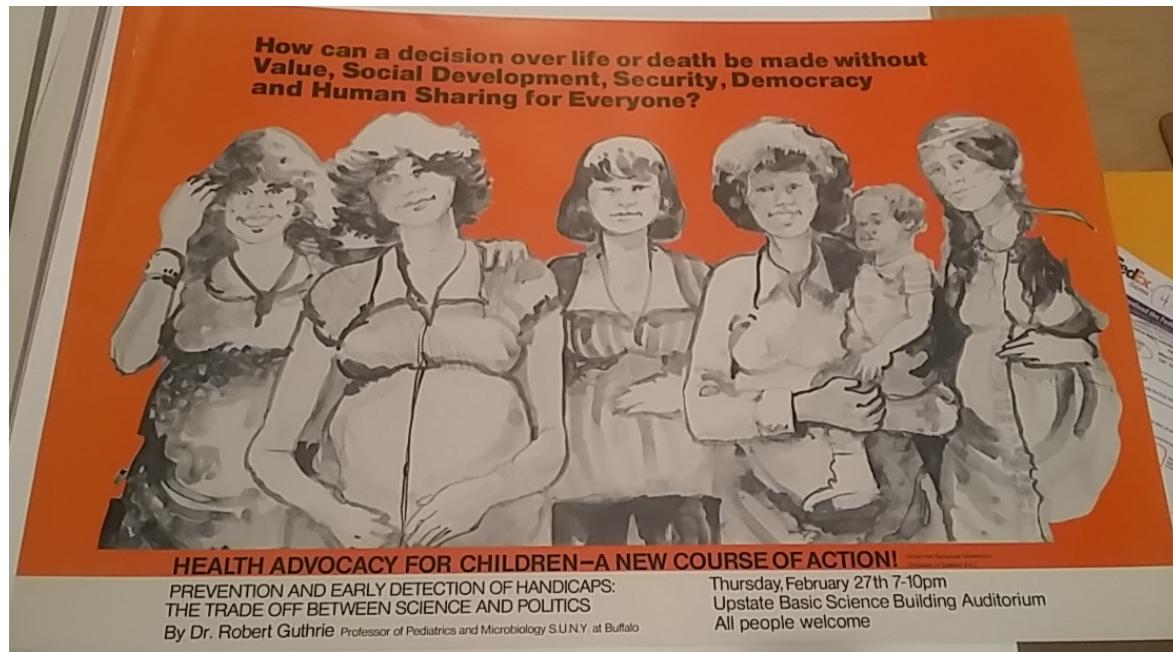
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## Poster: "Health Advocacy for Children"



2. Why do you think the artist decided to depict the women the way they are seen in the poster?

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3. What do you think the poster represents about the tone of the conference it was promoting?

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## "Setting Up a (Womyn's) DIY Health Collective"

Down There Health Collective, Washington D.C., "Setting Up a (Womyn's) DIY Health Collective."

# Setting up a (womyn's) DIY Health Collective

## All you need:

- interested people
- speculum, mirror and flashlight for cervical exam
- there are lots of great zines and books on this subject that you might want to look at (see info below)
- safe space (you define what this means!)

**Information and accounts based on experiences from the  
Down There Health Collective, Washington, DC**

4. Why do you think this Collective listed the items a potential collective would need? Why do you think these were chosen?

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5. Why do you think the Down There Health Collective formed?

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### **The Black Panther, front page, June 13, 1970**

The Black Panther, June 13, 1970, cover. "People's Free Health Center." Man helps two women down the steps of a trailer. Inset quote: "The Free People's Health Center occupies this land illegally according to the law, but we feel that the people's authorization is the only authorization necessary."

**The Black Panther newspaper was published from 1967 - 1980 by the Black Panther Party. It was nationally and internationally circulated, and was the most widely read Black newspaper from 1968 to 1971. This cover of the Black Panther promotes the People's Free Health Center, a major component of party chapters across the country. As noted in the Panthers' Ten Point Plan, "We believe that the government must provide, free of charge, for the people, health facilities which will not only treat our illnesses, most of which have come about as a result of our oppression, but which will also develop preventative medical programs to guarantee our**

**future survival.” The People’s Free Health Centers were the establishment of this vision.**

**6. What do you notice in this image? Why do you think it is important to conveying the goals of the People's Free Health Center?**

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**7. What do you think were the reasons and some of the challenges related to the illegal occupation of the space that held the Center?**

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### **Akwesasne Notes, “The Oppression of the Unborn: Fetal Alcohol Syndrome,” 1981**

**Since 1995, Akwesasne Notes (published on the Akwesasne Mohawk Reservation) has been a voice for issues and concerns of Native Peoples. In this article, the journal discusses fetal alcohol syndrome (FAS).**

# The Oppression of The Unborn

## FETAL ALCOHOL SYNDROME

Sandra Johnson, mother of 10 children, is a Mohawk woman who live at Akwesasne in the village of St. Regis, Quebec. She is an apprenticeship midwife and for the last three years has been doing extensive research on the Fetal Alcohol Syndrome. Sandra is not a scientist, she is not a physician. She believes that it is up to people who are interested and know about FAS to make that knowledge available to people. With her commitment to the health of mothers and the unborn she exemplifies the kind of community health activist that many of our communities need. We hope the following interview with her will educate and encourage other mothers to look clearly at what needs exist in their own communities to secure the health and well-being of infants and mothers.

KC: Sandy, what led you to do the research you have been doing on the Fetal Alcohol Syndrome?

SJ: It started with an interest in nutrition, with pre-natal nutrition - how babies grow, what makes them grow, and I became especially interested in what stopped them from growing or developing the way they should. That led into all the teratogens that cause birth defects to the fetus, and alcohol seemed to be one of the biggest ones that had the most effect on the fetus. What struck me most was the terrible effects it had on the unborn baby and that it was preventable. If it wasn't something that wasn't preventable, I don't think I would have been interested in it, but the birth defects caused by alcohol are preventable, and yet it happens so much.

KC: So alcohol is a teratogen? (A teratogen is any substance or influence that causes birth defects in the developing fetus.)

SJ: Definitely, yes. It is one of the largest, besides a few other drugs. But because it is a legal drug, and it is so easy to get, it has to be one of the largest teratogens that there is.

KC: Can you describe Fetal Alcohol Syndrome?

SJ: The easiest thing to spot is that usually the baby is smaller than it should be for its gestational age. They are shorter, with a low birth weight, and they don't grow and thrive normally. For example, at three months old, the newborn will still weigh nine or ten pounds, or even less. They may be only 18 or 19 inches when they are born, and their growth is very slow. This slow growth continues all their life and there is never a catch-up period as there are with some other defects. Also, the brain size is smaller, and the head circumference will usually be smaller. At a year or so, their head circumference will still be a lot smaller than a normal baby. Often, the baby that has been exposed to a lot of alcohol before it's born is usually a very cranky baby, a very colicky baby, or a very hard baby to adjust to. So somebody that might have been drinking throughout their nine months and then come home and have this really hard baby to look after - this is what they might be dealing with - the effects of alcohol.

Also, it's easier to pick up who drinks and who doesn't drink in a small community like this than you would in a big city where people came in off the street and you don't know their background. You have a better idea which baby to look at for the signs of FAS. A lot of the babies that I've noticed here were a little premature, by maybe three weeks or one month, they had very low birth weights and were shorter than other babies. They are not the usual big happy babies that you find a lot of the time. That's what I mostly look for. You can check their physical features, but it's not always apparent when they are born. The mothers complain that the babies are very hard to look after. They cry a lot. Nothing makes them happy. They don't grow no matter how much you feed them, the babies just don't thrive. They don't mature like other babies do for their age.

Maybe when they get a little bit older, it seems to me, they are kind of dull, kind of blah ... they aren't nosy, they aren't curious, they aren't inquisitive. They are content to sit and play with just one little toy. They crawl later. They walk later.

The effects of FAS range from mild to severe. In some of the milder cases - maybe not so much as when the

baby is really small - but as the baby is maybe two years old, three years old, the attention span is often a lot shorter than other children. They tend to be hyperactive. They are not classic, happy, contented babies. There are learning disabilities. This is what I am working with in the schools. It seems that all these children that are exposed to any amount that is more than moderate suffer from learning disabilities. This is what I am trying to hit on in this program, is to spot these children. They are not stupid, they're not lazy, they're not backwards. They have learning disabilities. And because it's not physically evident, it still stems from the alcohol they were exposed to before they were born. They don't do well in school. They have the pattern of repeating grades. They just don't absorb, they don't comprehend as well as another child. But it isn't easy to detect. This is why I'm trying to go into the schools and give the teachers a knowledge of this - so they'll be able to deal with the children. These children aren't troublemakers.

The one thing that everyone should know about FAS is that it's preventable. If it's not necessary, it doesn't have to happen. And it is 100% irreversible. There is no way you can ever go back and re-program a child or change anything about an FAS child. Even if they're taken out of an alcoholic home and put into a foster home, their rates of growth and development are almost exactly the same as if it were left in an alcoholic situation.

KC: How much alcohol can a woman consume during pregnancy and still be safe? How is the amount of alcohol and the time of pregnancy related to the degree of damage to the child?

SJ: No safe level of alcohol consumption during pregnancy has been established. The general advice from experts is not to drink at all during the whole nine months and abstinence is suggested even when you are

planning a pregnancy. One good binge can do damage to the child. It is so concentrated, in such a short amount of time, that even one good binge can be devastating to the developing fetus. In the first three months the brain is growing, the central nervous system is developing. This is a critical time. This is when alcohol can do the most damage. Alcohol kills brain cells which can't be replaced. This is why an FAS child will have a smaller brain size. Alcohol is a poison. Remember, the pickle things in alcohol! And it easily reaches the fetus and produces life long damage that is 100% irreversible. The second trimester of pregnancy has to do with the development and refinement of organs and systems like the respiratory system and the heart. The last three months is when the fetus puts on a lot of its body weight. Alcohol in any of these stages would have different effects. They say that they can tell by the child which stage of pregnancy the mother drank the most - just by the defects the child has.

KC: How would you counsel a woman who drank alcohol during pregnancy and wonders if she may have damaged her child?

SJ: There is no use to carrying a burden of guilt. The important thing is to get help for the child if she notices any of the signs of FAS. Of course, you would talk to her about future pregnancies and all the effects of alcohol and what it can do. If you are dealing with a woman who is an alcoholic it is a different kind of problem because even though she might want to quit drinking she may not be able to. So you would have to see that she gets further counselling and maybe rehabilitation. Maybe she'll need a good birth control method. She may consider abortion. If the alcoholic

*Fetal Alcohol Syndrome  
continued next page*

Alcohol is known to cause birth defects. Some of these defects can be seen and some cannot. This 2½ year old is the child of a chronic alcoholic. The short eye slits, flattened groove between the nose and upper lip, underdeveloped upper lip, small head circumference and poor development of cheek and jaw bones are classic signs of FAS. Other defects include mild to severe mental retardation, heart defects, poor muscle development and function, poor attention skills and problem solving abilities, behavioral difficulties and failure to thrive. A good question for prospective mothers: Is drinking worth it?

## 8. What are the symptoms of FAS? How could it be prevented?

9. Do you think the article sufficiently discusses why FAS occurs? Why/why not?

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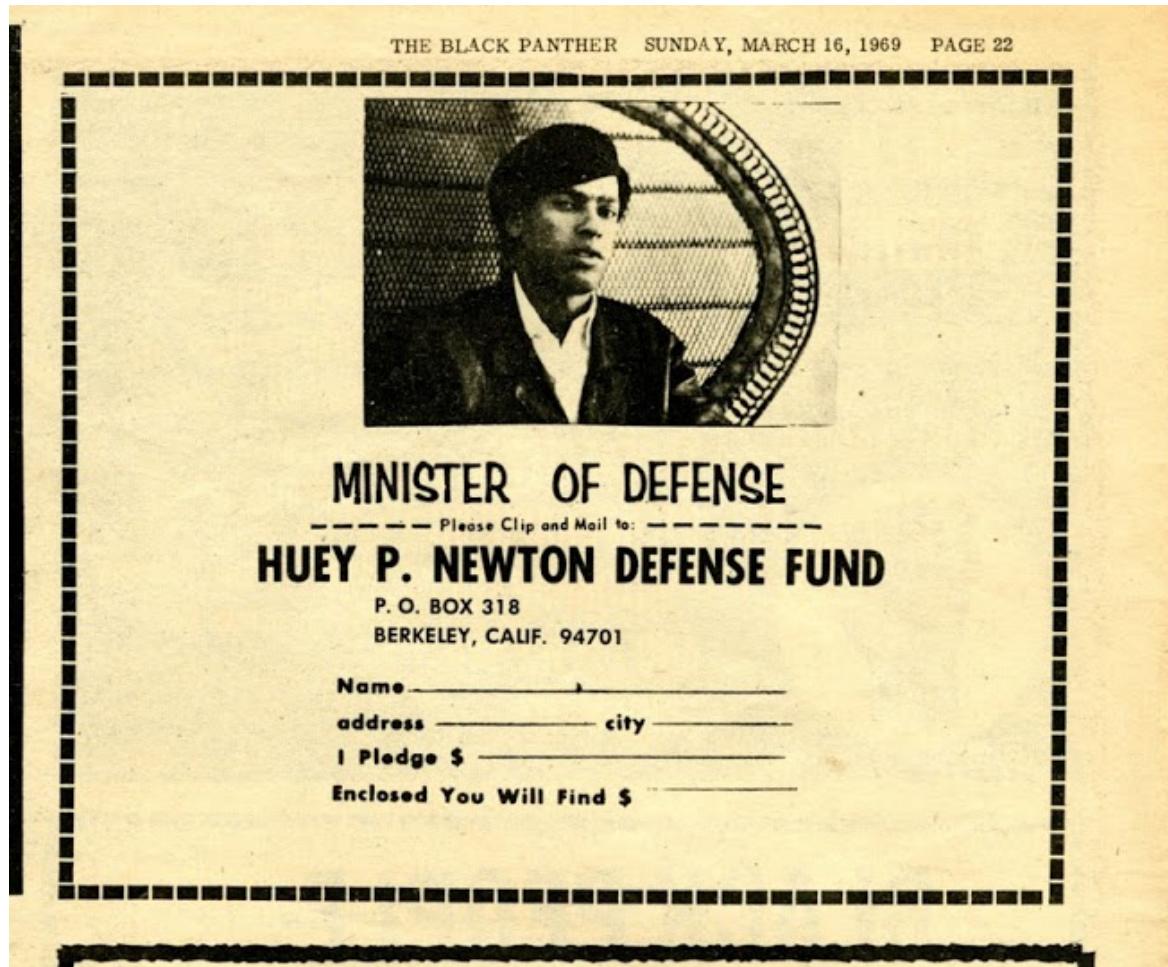
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## The Black Panther, March 16, 1969

Page 22. Two cut-out calls for donations, one for the Huey Newton Defense Fund and one for the Free Breakfast for School Children Program.

**In this document, the newspaper calls for donations towards the Free Breakfast for School Children Program, which began in Oakland and expanded across the country to provide breakfast to children before school (based on research at that time noting a good breakfast as essential to learning).**



# BREAKFAST FOR SCHOOL CHILDREN

OAKLAND, California -- The National Advisory Cabinet to the Black Panther Party is working with and for St. Augustine Episcopal Church's program: breakfast in the morning for Oakland's school children in the black community.

All children in grammar schools and growing young adults in Junior High Schools can receive free, FULL BREAKFASTS in the mornings before they go to school. The first of these breakfasts will exist one hour before school hours at St. Augustine's Church, 27th and West, and the Black Community Center, at 42nd and Grove Streets. EVERY SCHOOL MORNING.

The National Advisory Cabinet and church members are calling on all mothers and others who want to work with this revolutionary program of making sure that our young have full stomachs before going to school. The schools and the Board of Education should have had this program instituted a long time ago. How can our children learn anything when most of their stomachs are empty? Black people in the Black Community-mothers, welfare recipients, grandmothers, guardians, and others who are trying to raise children in the black community where racists oppress us - are asked to come forth to work and support this needed program. Soul food: grits, eggs, bread, and meat for the stomachs is where it's at when it comes to properly preparing our children for education. LET'S DO IT NOW. Support this community program.

Those who want to volunteer their work every morning or every other morning can come to the BLACK PANTHER PARTY CENTRAL HEADQUARTERS at 3106 Shattuck Ave., Berkeley or contact Father Niel at these numbers: 534-6684, 893-1016. Interested persons may also contact Ruth Beckford Smith at 893-8211 or sign up with other community peoples and citizens for full stomachs and better education of black children.

We urge as many mothers and other black citizens as possible to unite with this COMMUNITY-BLACK PANTHER PROGRAM. We are also asking all businesses throughout the black community to donate the necessary food and utensils to prepare the foods for our children. Call the Black Panther Office at 845-0103 or 845-0104. Everything of value donated to BREAKFAST FOR CHILDREN is tax deductible. Items or funds may be sent c/o St. Augustine Episcopal Church. Just let us know, both black and white communities and citizens, what you can donate in money, time, etc.

Thank you

## BREAKFAST FOR SCHOOL CHILDREN

I WOULD LIKE TO DONATE  
SEND DONATIONS TO ST. AUGUSTINE'S  
EPISCOPAL CHURCH, 2624 WEST ST., OAKLAND

- Money      Enclosed is \$ \_\_\_\_\_  
 Time  
 Food or Utensils-State Kind and Quantity Below

If Business include for  
your tax exemption \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_

MAKE CHECKS TO: BFSC - ST. AUGUSTINES CHURCH

- 10. What is the significance of a call for support of the free breakfast program sharing space in the newspaper with the Huey Newton Defense Fund?**

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- 11. The piece argues that, “The schools and the Board of Education should have had this program instituted a long time ago.” Why do you think it took the school system so long to develop a Free Breakfast Program?**

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## **The Black Panther, June 14, 1969**

Page 3. “L.A. Panthers Begin Free Breakfast Program,” and “Boycott Safeway Stores.”

**In this piece, party members in the Southern California chapter describe the formation of the free breakfast program in Los Angeles, CA, and call on party members to boycott Safeway grocery stores.**



## L.A. PANTHERS BEGIN FREE BREAKFAST PROGRAM

Tuesday, April 29th marked the beginning of the Los Angeles - Southern California Chapter Free Breakfast for Children Program. We've named our program in honor of John Huggins, Deputy Minister of Information - Southern Chapter, who was assassinated on January 20, 1969, in U.C.L.A. - The John Huggins Hot Breakfast for Children Program.

Several weeks before we started the program, we sent letters to approximately 250 to 300 retail and wholesale stores in the community, requesting commodities for the program. The response from these letters was nil. (Once the program was under way, however, we did receive a visit from an official of the Los Angeles County Human Relations Board. He suggested that we were merely checking the breakfast program out in terms of legitimacy; that is, whether we were feeding kids because they were

hungry, or because we wanted to "indoctrinate" them with Panther ideology.)

We, nevertheless, did finally, on April 29th, start our first free breakfast program in Los Angeles at the University 7th Day Adventist Church (Budlong & Santa Barbara Avenues). All the night before, members from all L.A. sections thoroughly cleaned the kitchen and dining facilities of the church. The first day about 20 children appeared and were well satisfied with the breakfast. We now serve over 50 breakfasts a day. This of course, is just a pilot program, and we eventually will set up 8 to 10 more programs in L.A. and feed over 1,000 children.

Because of its size and extremely conservative political attitudes, Los Angeles has been a difficult area in which to organize for free breakfast programs. We have also had difficulty in getting

facilities in L.A. No church seemed to want to grant use of its facilities for free breakfast programs. The first minister to do so, however, was Reverend Lorenzo Payte, Associate Pastor of the University 7th Day Adventist Church. He had to literally fight for our right to use his church's facilities. Now the entire church says it supports our program 100%. (However, it is interesting to note that Rev. Payte has just received notice from the church that he will be transferred to a suburban L.A. area, namely Glendale.)

To expand this program further, the membership here in L.A. visited several churches on Mother's Day, in hopes of speaking to church congregations regarding use of their facilities. Not one of the churches responded favorably. Nevertheless, the following day, the Chairman of our Breakfast Committee, Gwen Goodloe, and

several others attended the Los Angeles Conference of Baptist Ministers. Here the Panthers presented to this large body of ministers an outline of the John Huggins Hot Breakfast for Children Program. After some deliberation, the Los Angeles Conference of Baptist Ministers voted unanimously in favor of the Free Breakfast Program and gave us their endorsement and commendation. This will make it somewhat easier for us to obtain facilities, and we will be opening more breakfast programs as soon as food supplies and finances permit.

We also moved to get the full support of the community by holding various housing projects. Polls from projects like Park Village and The Pueblos show that the community is enthusiastic about the Free Breakfast Program. The people are eagerly awaiting the start of breakfast programs in their

areas. Everyone seems to want to know why their area wasn't first. And finally...The children we feed now are beautiful and really relate to the breakfast and to the Party. They want to know all about Huey, Eldridge, Bunchy, and John and the Party and its programs. They wear our buttons and ask about the paper daily. The energy and enthusiasm they show after breakfast when we occasionally drive them to school makes us appreciate "that if it wasn't for Huey, there wouldn't be Free Breakfast for Children."

THE YOUTH WE ARE FEEDING WILL SURELY FEED THE REVOLUTION.

ALL POWER TO THE PEOPLE

Southern California Chapter  
Black Panther Party

## BOYCOTT SAFEWAY STORES

The Black Panther Party calls on the community to boycott Safeway stores in the East Bay. Why? They will not donate to the Free Breakfast for School Children Program.

Thisavaricious(greedyexploiting)businessman who owns the Safeway stores must come forth and donate to the Breakfast for School Children. We the people shop there, making the businessman fat and rich, this time in Safeway stores \$20,000 weekly. We the people must demand that each Safeway store donate, in food items of \$100.00 every week or cash. Not to feed hungry children is low and rotten. This is how the Breakfast for Children survives, by a few donations from the people, but primarily businessmen in the community. The Breakfast will survive because people's power

will make theavariciousbusinessman donate or will run the exploiters out of business. We just won't shop any more, until they concede to donate.

Boycott demonstrations of Safeway markets will start Friday morning at the 27th and West St. Store in West Oakland.

"Our duty is to hold ourselves responsible to the people. Every policy must conform to the people's interest." Mao

So we demand it children. The Black Panther Party's Free Breakfast for Children Program is feeding over 10,000 children in the nation, 100,000 or more by the end of this year must be fed. The power of the people to boycott can make this a reality. That reality to the children is that full stomach every morning before school.

BOYCOTT SAFEWAY STORES

Safeway stores whose top lieutenant is also in the drivers seat of Oakland's political machinery; one fascist Hooper, is losing anywhere from 15 to 20,000 dollars per day as a result of the Black Panther Party's boycotts. It is very insane for theseavaricious fools to refuse to contribute \$100 per week to the free Breakfast for Children Program while they are losing so much per day.

The boycott was intentionally launched at Safeway's 27th and West Streets store in Oakland. In two days, it happened to be Friday and Saturday the store had to close 45 minutes to one hour earlier. The people of the community relate to the free Breakfast program, because it serves them. And they will not support anyone who does not support them.



**12. What were some roadblocks to the Black Panthers' free breakfast program? What were some of its goals and outcomes?**

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**13. Why did the Black Panthers' call on party members to boycott Safeway?**

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### **Bridge Magazine, “New York’s Chinatown: An Overview”**

Bridge Magazine, Vol. 1, Issue 1, 1976. “New York’s Chinatown: An Overview.”  
Pages 14 and 15.

**Bridge Magazine was a publication of the Basement Workshop, an Asian-American arts organization active from 1970 through 1986. The first issue of Bridge, published in 1976, featured a piece providing an overview of Chinatown in Manhattan.**



## NEW YORK'S CHINATOWN AN OVERVIEW

by Robin Wu

New York's Chinatown—that living anachronism perpetuated through the myths of an ignorant public and glamorized by the monetary interests of its mercantile class—has, until recently, eluded extensive examination. Several explanations can be deduced: either nobody cared or, for some reason, personal data could not be gathered.

Attempts have been made to render Chinatown less "mysterious." The 1960 U.S. Census and the 1962 Cattell Report provide information on Chinatown prior to 1962. However, the Census Report is none too precise since all minority groups, with the exception of blacks, are under the category "non-white." The Cattell Report emphasizes the attitudes of a particular group toward illnesses and medical care and the reasoning behind these attitudes.

For data after 1962, the Chinatown Study Report (1969), a

sample survey of 565 families in the Chinatown area, and the Chinatown Health Survey (1970, as yet unpublished) provide a closer and wide-ranging examination of Chinatown.

The Chinatown Health Survey is a two-part study. Part one is a sample survey of 100 families, with data gathered on the respondents' housing conditions as well as their age, education, health, dialects spoken, etc. Part two is a survey of Chinese patients in the three health units around Chinatown.

The Chinatown Study and the Health Survey were done by college students. Because the Study Report has not been widely disseminated, information from it and the Health Survey is culled here for those interested in the conditions in Chinatown. It is hoped that this will narrow the information gap about Chinatown and explode some of its myths.

#### PHYSICAL ASPECT

Since the official lifting of the immigration quota in 1965, the rate of influx of Chinese immigrants has increased sharply—22,318 Chinese entered the U.S. in 1966. Previously, the annual rate never exceeded 5,700. An estimated one-fifth of these new immigrants arrived in New York, most of them settling in Chinatown, thus expanding its population to an, again estimated, 55,000. Originally bounded by Worth Street in the south, the Bowery in the east, Canal Street in the north and Mulberry Street in the west, Chinatown has now expanded considerably to as far as 14th Street to the north and the East River banks to the east.

The sudden, large influx made the demand for housing greater than it already was. It also created a careless attitude on the part of landlords towards the upkeep and renovation of their buildings. As a result, housing conditions are deteriorating. Many buildings do not have intercom and buzzer systems to the locked front door. The Chinatown Study Report shows 62 percent of the respondents reporting that their apartment houses have not been painted in the past three years—which is a breach of the rent control law. Many apartments have no shower or bathtub facilities; shower faucets are sometimes found hanging from the ceilings of some living rooms. Private toilet facilities are also lacking in some households, as 6.2 percent reported sharing the use of a common bathroom.

Pest control is another grave problem. Rats and mice are found in 35 percent of the households reported by the Chinatown Study, while cockroaches infest over three-quarters of the homes.

In addition, burglaries occur frequently. A fifth of the residents interviewed has been burglarized; successive (three or four) burglaries have stripped some apartments of most of their furnishings. The Chinatown Study revealed that more than half of the respondents felt that police protection was inadequate and that Chinatown was not a "safe neighborhood."

Rents, on the average, are lower than the city average. The medium rent is \$50 a month. However, "key-money" is notoriously high; eight times the monthly rent is not unusual.

#### ECONOMIC ASPECT

Chinatown is a self-contained community. There are more than 200 restaurants which provide the main source of income for the majority of the male working force. Close behind are the garment factories, numbering over 100, and the more than 50 noodle manufacturing concerns, as well as food and grocery stores, pastry and gift shops. In addition, there are sundry book, liquor, drug and hardware stores; movie houses; beauty parlors; barber shops; laundries; travel agencies, and printing companies.

Of the residents interviewed in the Chinatown Study, 54 percent are between the ages of 18 and 64. Of these, 56 percent are full-time workers; 7.9 percent are part-timers, and 10.5 percent are either retired, on welfare, unemployed or refused to volunteer information. Of the men who are employed, 35.5 percent work in restaurants. The women, on the other hand, are more homogeneous as a working force: 75 percent of them work in garment factories. However, the fluctuating economic condition of the clothing industry leaves many of the less skilled jobless for periods of up to several months.

Working hours easily average over 40 hours a week, since a five-workday-week is more often the exception than the rule and since a twelve-hour-workday is accepted without question. The Health Survey found that of those over 65 (which is approximately 11 percent of the respondents), only about 64 percent receive Social Security. Many are still working, perhaps not so much for the money as to stave off the uselessness of old age. Many of them came to the U.S. alone, leaving their families behind.

Regarding welfare assistance, the percentage of Chinese recipients is, according to the Health Survey, negligible. Welfare assistance is often looked upon as charity and as such is rejected out of innate Chinese pride. On the other hand, of the families interviewed, 13 percent indicated that they know of friends who receive welfare assistance. But, in the actual survey, such "friends" are very hard to come by.

#### MEDICAL ASPECT

Generally speaking, the Chinese community seems to be rather healthy. Half of those interviewed in the Health Survey indicated that they have had medical checkups within the past twelve months, and only about 14 percent reported serious illnesses in the same period. However, the figures may be misleading since a routine visit to a doctor is sometimes considered a medical checkup and serious illnesses are not reported until they have become very, very serious. Part of the reason for the latter is the lack of Chinese doctors who speak the native language. It is reported that some patients have to wait for weeks, sometimes months, before they can get an appointment. All told, there are about 20 Chinese physicians (mostly full-time) in the immediate vicinity.

A number of the older people still have a strong faith in traditional Chinese medicine. The Chinatown Study indicated that 7.6 percent of those interviewed usually visit one of the approximately nine "herb doctors" for medical diagnosis and treatment, as against the 85 percent, in the Health Survey, who preferred Western medical treatment. Recent immigrants are of the younger age bracket and most of them prefer Western to herbal medicine.

As regards dental care, a sphere where the influence of the herb healers is practically nil, about 40 percent of those interviewed in the Health Survey reported checkups between 1969 and 1970. Fifty percent indicated their preference for Chinese dentists and for the same reason: a common language. But, in this case, there are only five Chinese dentists in the area.

Despite the high percentage who care about their health, only about two-thirds of those interviewed in the Health Survey are covered by some form of health insurance. The remaining ones simply cannot afford medical attention, which may be another factor for the low rate of serious illnesses reported. The most common insurance policy carried is Blue Cross, followed by Blue Shield. Only one-tenth of the respondents receive Medicaid assistance.

**14. What were the effects of housing situations in Chinatown on public health?**

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**15. How did Chinatown residents balance use of traditional Chinese medicine with more Western methods?**

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**16. Why did only 40% of the survey respondents visit report visiting the dentist over the course of a year? How do you think that could have been resolved?**

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## **Concluding Questions**

**17. Which of these documents most interested you, and why?**

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**18. What challenged you the most or made you want to learn more, and why?**

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