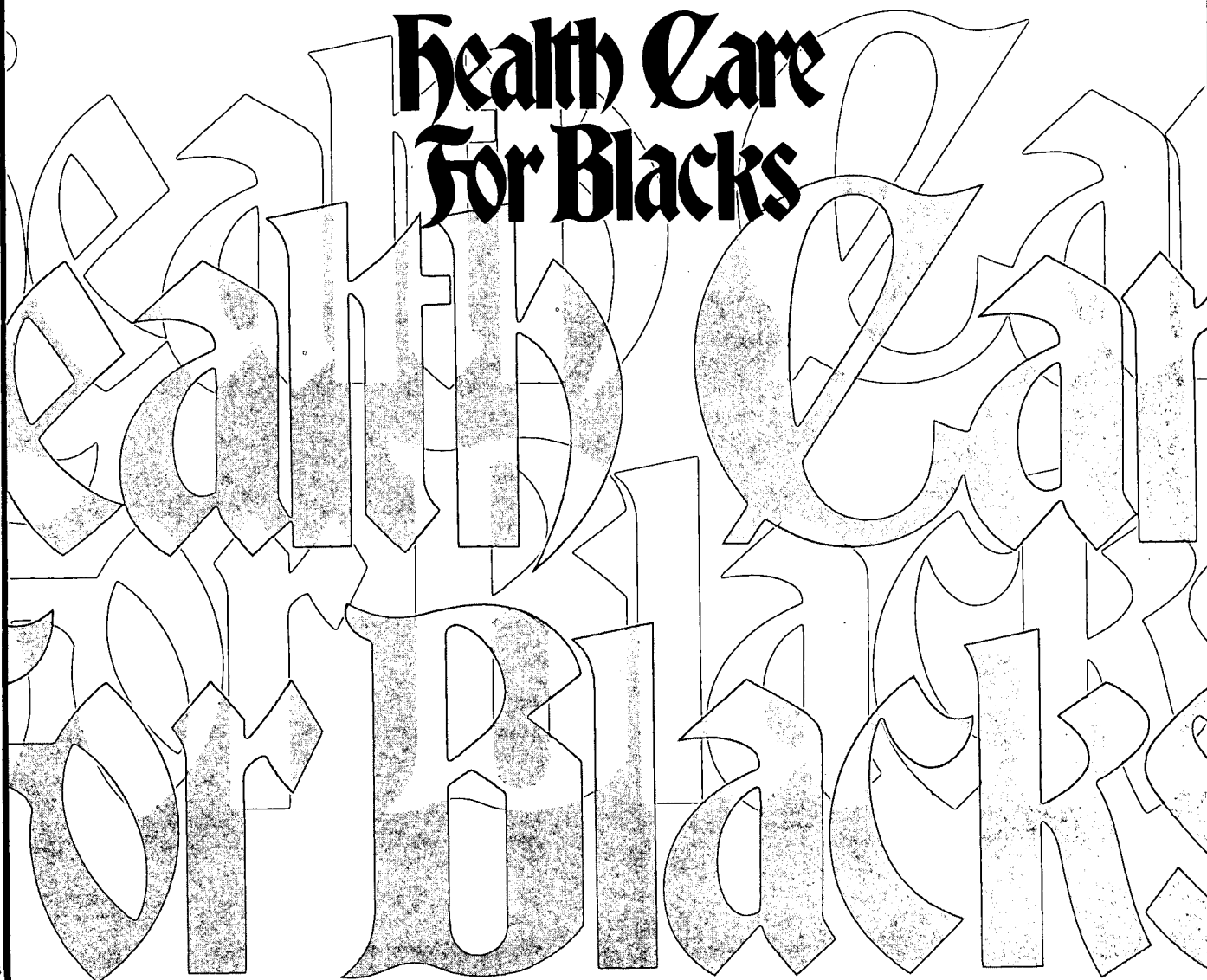


Health Care For Blacks



Perspective

Following are excerpts from a keynote address by Basil Paterson, former vice chairman of the Democratic National Committee, at Howard University's 6th annual communications conference. The address was delivered on February 19, 1977.

The single biggest topic of conservation in America today is not politics or basketball, it is the recent television production of "ROOTS". To some, the most significant thing may well be that \$6.5 million was spent to portray an institution started in this country in 1619 and ended in 1865. For many, the obvious hypocrisy is that no one has the guts to present the true picture of black America today. Some have discussed their concern about the reaction of whites as well as blacks to this story of our heritage. This, in spite of the fact that the book was given a Hollywood flavor and toned down considerably.

Most significant to me and I hope relevant to you is the fact that aside from blacks who attended southern schools with black teachers, few others in this nation received more than cursory information about the kidnapping of millions of blacks in Africa, the death of millions at sea and the brutal enslavement of those who survived. Until quite recently, most school textbooks distorted the black man's part in United States history. They picture us as having been contented under slavery and bewildered by freedom; what grim cruelty to assign such readings to students of any race. We were never given the stories of James Christian, Henry Brown, Sojourner Truth and Harriet Tubman. Yet when we study what our forebears endured and how they fought to survive, we must be encouraged.

The history of the black man in America has, indeed, been one of struggle against mighty odds for freedom, dignity and identity.

We live in a society that is permeated with racism, both deliberate and institutional. We live in a society that is con-

stantly victimized by subtle as well as overt means of influencing our way of thinking. It is here that black journalists can make their greatest contribution. For it is your responsibility to get the information and pass it along with an understanding of events that is unfettered by the barnacles of bigotry.

I grew up listening to street speakers on what is now known as the black nationalist corner, 125th Street and Seventh Avenue in Harlem. And I knew that they didn't know what they were talking about. For surely, if what they were saying was true why couldn't I read it in the newspapers or in my school books. It is now clear to me that much of what I heard them say was the clear, unvarnished truth and that I, along with millions of other blacks, lived years of my life in a condition just somewhat short of "brainwashed." It is the responsibility of everyone in this room to do everything in our power, individually and collectively, to assure that our sons and daughters and their sons and daughters shall never have to experience the loss of that great ingredient God has given each human being, the freedom of thought.

The dangers are there and they come in a variety of shapes and speak with many tongues. So the task of developing and expanding a free and responsive press is not an easy one. I know that those of you who will graduate from Howard University this year are eager to take your place in the world of communication. But you must recognize the dangers within — the dangers within yourself. Like all other young blacks who set out on a mission to reform America there are pitfalls that can ensnare you. But you can triumph if the prospect of apparent financial and professional success does not blind you. You can triumph if you are not seduced by ambition, if you do not succumb to fear, if you do not suffer amnesia. We must understand that no matter how high a person may go, he must not forget from whence he came. For if you forget your beginnings, you lose yourself. There is much work to be done. It isn't easy, but you can do it.

FOCUS

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National black network: a caucus goal

By Rep. Parren J. Mitchell

Rep. Mitchell (D Md.) is chairperson of the Congressional Black Caucus. He is a member of the Banking Currency and Housing Committee, the Budget Committee and the Small Business Committee in the House of Representatives.

In the March edition of *Black Enterprise*, there is a cogent, penetrating article entitled, "The Rise and Fall of Black Politics." The central theme of the article is that "blacks have the numbers but still lack political clout."

The question that looms largely then is why we do not have the political clout? In seeking answers to the question one confronts several paradoxes. By way of illustration, most black elected officials, at any level of government, are possessed of fiercely loyal supporters who believe that their man or woman is the greatest elected official in the country. This fierce, loyal support to individual black elected officials is evidenced by the fact that they are very often returned to office again and again. Another paradox is that these elected officials very often do have considerable clout. Their amendments to bills and their pieces of legislation are frequently enacted into municipal, state and federal law.

The two paradoxes cited constitute the nub of the problem. Individual constituencies and individual accomplishments do not add up to state-wide political clout nor national political clout for black people. What then is required, certainly at the national level, is a black constituency which is given specific information on issues, policies, programs and procedures on an ongoing, regular basis. The national black constituency must be provided a mechanism by means of which it can feed into a national body, — i.e., the Congressional Black Caucus, — its information, ideas, reactions and innovation to all that develops in the legislative administrative process.

Brain Trust

With the above knowledge in mind, I began in 1972 the business of organizing a "Brain Trust" to deal with the issues of minority enterprise and housing and community development. This brain trust, which chose to remain anonymous, has during the past five years significantly improved the lot of black Americans. The brain trust, now more than six hundred strong, includes black bankers, contractors, economists, C.P.A.s, and savings and loan executives. In short, every aspect of economic development is covered. In our quarterly meetings, we examine legislation, regulations and governmental policies from the black perspective. At each meeting ideas for amendments, new legislation and new regulations are proposed and it is my job to seek to implement those recommendations.

It is my fondest dream that during this coming year, the Congressional Black Caucus will develop similar brain trusts in other areas of significance to black America.

Impact

Just imagine a brain trust on the administration of justice made up of black judges, lawyers, corrections administrators, law enforcement agents, etc. Can you imagine the impact of six hundred such persons on the legislation, proposed regulations and existing policies in the field of the administration of justice?

Each person in the brain trust could contact a minimum of five other persons to aid in a lobbying effort. Recall if you will the infamous S.1 legislation to revise the criminal code proposed in the 94th Congress. Fortunately, that legislation met the fate it deserved . . . it died in committee. But suppose that 5,000 telegrams, phone calls or letters of protest had deluged the committee, presenting arguments from the black perspective against S.1. Black America would have been heard from in an effective, forceful manner.

Can you begin to assess the amount of political clout associated with education, or with the problems of the black aged or with the problem area of manpower?

Under the skillful leadership of Rep. Louis Stokes (D Ohio) and Rep. Ralph Metcalfe (D Ill.) a brain trust on health is being developed. It will be made up of blacks in medicine, nursing, psychology, psychiatry, health administration, dentistry, health paraprofessionals, etc.

Health will be a major issue on the national scene for at least the next decade. We must have our health brain trust in place and operative if we are to demonstrate "political clout" on this issue.

How do we secure political clout? Certainly this national network will enable us to do so. And, in my opinion, similar brain trusts should be organized at the state level by black elected officials.

An Effective Lobby

Let us carry the analysis of this approach to its highest level. Sixteen black brain trusts, each made up of approximately 600 persons, operating in coordination with the Congressional Black Caucus, and having the capability within each brain trust to contact at least 3,000 additional people on an issue. The arithmetic is simple. Approximately 9,600 blacks serving in brain trusts plus 48,000 contact persons for the brain trust operation equals a potential lobbying pressure of 57,600 black people with the ability to exercise political clout on issues that affect our social, political, economic and psychological survival in America.

During the remainder of 1977, much of the effort of the Congressional Black Caucus will be devoted to forming and strengthening this national network.

The Congressional Black Caucus remains relentlessly committed to its philosophical mandate, "The use of authority and power to establish and uphold what is right, just and has always been lawful, in obtaining a condition of being equal in power and in values." To live up to that mandate we need the national black network. To achieve significant political clout that national constituency must be galvanized, utilized, and maximized immediately. This is our incredible task. It shall be done.

Health care for blacks

By Dr. William A. Darity

Dr. Darity is a professor of Public Health and dean of the School of Health Sciences at the University of Massachusetts. He has written extensively on health and social problems in the black community.

The following article is an update of one prepared by the author which was published in the Journal of Black Health Perspectives, June/July 1974.

Black health professionals are increasingly concerned with the socio-economic problems of the black community as they relate to the total health picture of black Americans. Such problems as inadequate housing, high unemployment, low paying jobs, and inferior education contribute heavily to the dismal picture of black health care in this country. In addition to these problems, blacks suffer from high mortality rates, inadequate medical and dental care and a lower life expectancy than whites.

Black citizens have an urgent need for health programs designed specifically to meet their needs. And there must be concentrated attention focused on such dehumanizing situations as the widespread use of blacks in human research experiments.

The gap between the life expectancy of black and white Americans narrowed from 10 years in 1920 to six years in 1973. The life expectancy in 1973 for white males and black males was 69 and 62 years respectively, and for white females and black females 76 and 70 years, respectively. Considering the fact that it took over 50 years for black life expectancy to increase four years, it will take at least another 100 years before there is parity between the races in this area. And this projection is based on the unlikely assumption that the present rate of life expectancy of whites will remain constant. It is more likely that advanced medical technology will increase the life expectancy of all Americans but there is little evidence to suggest that blacks will enjoy the same life span as whites.

To fully understand the reason for this disparity it becomes necessary to examine a few selected health indices.

Death Rates

In 1969 the death rate from all causes in the United States was 731 per 100,000 estimated population. The rate for whites was 695 per 100,000 population and 1,046 for non-whites. The difference was 352 per 100,000. In other words, 352 more non-white persons per 100,000 non-white population were dying than whites. A look at some of the specific causes of death in 1969 shows: the rate for major cardiovascular diseases per 100,000 population was 341 for whites and 458 for non-whites; for malignant neoplasms, 127 for whites and 159 for non-whites; for accidents, 53 for whites and 76 for non-whites; for influenza and pneumonia, 23 for whites and 42 for non-whites; for diabetes mellitus, 13 for whites and 28 for non-whites; for cirrhosis of the liver, 13 for whites and 24 for non-whites; and for all forms of tuberculosis, two for whites and eight for non-whites. These data indicate differential ratios from 33 percent for major cardiovascular diseases

to 470 percent for all forms of tuberculosis. (The differential is calculated by dividing the specific rate for non-whites by the white race.)

Infant and Maternal Mortality Rates

In 1950 the infant mortality rate for the United States was 29 percent. In 1971 the rate had dropped to 19 percent overall. However, the white infant mortality rate was 17 percent compared to 30 percent for non-whites, a difference of 13 percent. From 1950 to 1971 there was a decrease of 39 percent in the infant mortality rate among whites and only a 31 percent decrease among non-whites.

The proportional difference (or deficit ratio) in infant mortality between white and non-whites increased from 66 percent in 1950 to 80 percent in 1971.

In 1940, the maternal mortality rate was three per 1,000 live births for whites and eight for non-whites. In 1973 the maternal mortality rate was .1 for whites and .3 for non-whites. Although there was a considerable decrease in actual numbers for both whites and non-whites, the differential ratio remained constant at 300 percent. In 1940 the maternal rate was 2 1/2 times as high for non-whites as for whites. In 1973 the rate was three times as high.

Physician and Dental Visits

The fact that blacks are receiving less medical care than whites is illustrated by comparing physician visits per year among both groups. A Health Interview Survey taken by the National Center for Health Statistics in 1973 showed that in the 17 to 44 age group, 13 percent of low-income whites made no physician visits as compared to 15 percent of low-income non-whites. And it must be remembered that these data surveys, like the decennial census, tends to miss large numbers of the low-income black population.

Using the same age group to determine dental visits in 1973, there were two dental visits made by whites and one visit made by blacks. Using income as a variable, it was found that individuals making over \$10,000 per year made two dental visits in 1973, while those making less made only one. The mean income for black families was less than \$8,000 in 1973 while for white families it exceeded \$13,500.

Program Development

In order to improve the lot of Americans in the area of health, at least two elements must be considered. They are: (1) the development of health programs which are adapted to the needs of the black community, whose general purposes are to eradicate a long period of deprivation and neglect and (2) elimination of health programs which are designed to exploit blacks and bring them under social control.

Most health programs in the United States have been designed to meet the needs and problems of the majority white population. As long as problems of a health nature are confined largely to the minority community, there is little effort to provide funds and other support to attack the problems. The drug situation in the United States was not viewed as a major concern until white youths from suburban communities became involved in drug usage. Now

hundreds of millions of dollars per year are being made available for study, research and program development on drug use and drug abuse.

A direct case of "benign neglect" which affects the black community is Sickle Cell Anemia. This blood disease affects an estimated one in every 500 black children in the United States. It is estimated that between 25,000 to 50,000 blacks have the disease and another two million carry the trait. These facts were known for generations, yet resources of any appreciable scale were not made available until black elected officials, black community leaders, black athletes, and black actors began to push for action to study, research and control the disease. Before 1972, the federal government was spending only one million dollars annually on Sickle Cell Anemia research. Through concerted action by concerned blacks, Congress authorized \$25 million for Fiscal Year 1973, \$40 million for Fiscal Year 1974, and \$50 million for Fiscal Year 1975.

Diseases which affect blacks in large numbers must be attacked from both the public and private sector, as is the case with Cystic Fibrosis, Tay-Sacks disease and sensitization to the Rh Negative Factor. And the time has come for a push toward more comprehensive services, such as guaranteed health care, full employment, better educational programs and adequate housing.

Exploitation and Social Control

It has been pointed out by a 1974 National Academy of Science report that an estimated 80 percent of all human experimentation in medicare is carried out on the low-income population.

The now famous Tuskegee study on syphilis, which was carried out on black males, is an example of inhuman treatment of black Americans by white Americans in the name of research and the advancement of science.

The Tuskegee study was a "no treatment" study conducted among 600 black men who were suffering from syphilis. The men were given no treatment so that a study could be made of the normal course of untreated syphilis in man. And the patients were not told they had syphilis. The study was supported by the United States Public Health Service.

The study commenced in 1932 but it was not until both the national and international press published the information in late July 1972, 40 years later, that it was made known. At least 28 to 100 men are known to have died as a direct result of no treatment in this study. Studies earlier in the century in Scandinavia had already provided evidence of the clinical manifestations of what happens to persons who go untreated for syphilis.

The ill-fated swine flu program provides another example of exploitation among blacks. When the swine flu shots were first administered on a test basis, Rep. Parren Mitchell (D Md.) charged that in his Baltimore district, low-income parents of 3 to 6 year-old children were requested to voluntarily bring their children to be innoculated. Many of the parents complied with the request. Mitchell accused health officials of using low-income blacks as guinea pigs.

Health officials, soon thereafter, embarked on a nationwide innoculation program which was terminated when it was revealed that some individuals who received the innoculation either died or had adverse side effects soon afterward.

The cases of exploitation among blacks is more the rule than the exception according to black health professionals.

Health Care as a Right

If we accept the definition of health as given by the World Health Organization, — "Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity," — we can approach the solution in a holistic manner. One of the truisms in the black community is that the present practice of medical care based on fee-for-service is inconsistent with the economic and social conditions of the black community. Another truism is that medical care void of community development, community building and community control, is the same as applying a bandage to a deep puncture wound — everything is covered to become a mass of illness later. To approach both of these problems, we as black Americans must not only accept the principle that health is a right and must become a social responsibility but, we must work for needed legislation to serve these goals.

Dr. Paul Cornely, in his article for the American Journal of Public Health, says: "The abolition of charity medicine must be implemented with the passage of legislation establishing a national health insurance scheme dedicated to the principle that every individual in the United States has a right to medical care."

A Comprehensive Approach

National Health Insurance will allow our full attention to be directed towards a comprehensive approach to health problems in which all factors associated with life, life style, and the socio-economic health of the black community are considered.

Elizabeth Watkins, in her study of low-income black mothers says, "The socio-economic characteristics of these mothers and the severity of their social problems emphasize that the provision of comprehensive maternity care is incomplete unless there is concurrent social planning for adequate income, decent housing, and increased opportunities in education and employment for these families."

Health, social, political and economic problems in the black community are intricately intermingled and therefore a single-shot approach to solutions will have little or no impact. Professional health workers in the black community must become oriented to a multidisciplinary approach to social problems. Black health workers should become strong advocates of national health insurance legislation. Once we have guaranteed health care we will be better prepared to concentrate on other pressing problems in the black community.

Minorities in the administration

After two months in office President Jimmy Carter has appointed only an estimated 24 members of minority groups to top-level positions in his administration, according to a survey conducted by the Joint Center.

There are 158 presidential appointees and appointee-designates overall, according to White House figures. Members of minority groups make up 15 percent of the overall figures. There are 15 blacks, eight Hispanics and one Asian.

These 158 positions do not include the White House staff which counts more minority members than any previous administration.

Although President Carter has the authority to make hundreds of presidential appointments, he has used this authority very sparingly.

Some observers estimate that less than one-quarter of the top positions have been officially announced.

The snail's pace in which appointments are being made is not inconsistent with what happens when a new administration takes over in Washington. There are thousands of applications to process and countless security and background checks to conduct.

However, considering the decisive minority vote that Carter received in the November election, it is no wonder that minorities are waiting anxiously, and in some cases impatiently, for the job filling process to be completed. They well remember Carter's campaign pledge to bring more minorities into policy and decision making positions within the federal government.

The top-level positions surveyed by the Joint Center include the White House staff, the secretaries of the eleven federal agencies, twelve undersecretary positions in each cabinet agency, about 60 assistant secretaries, a dozen or more general counsel positions, and 120 ambassadorships.

The Joint Center survey reveals that minorities have penetrated every cabinet agency in top-level positions. The post of assistant secretary dominates the list. The principal duty of an assistant secretary is to advise the secretary on matters relating to his area of specialization.

The survey further shows that there are a number of pending announcements of positions to be filled by minorities. However, to keep the record straight, the FOCUS listing includes only minority appointees and appointee-designates. The names at this time are not meant to be all-inclusive.

FOCUS will publish a complete listing when the presidential job filling process is completed.

The White House

The following minorities have been identified as presidential appointees or appointee-designates serving on the White House staff. They include: Martha Mitchell, special assistant to the President; Larry Bailey, deputy assistant for intergovernmental affairs; Valerie Pinson, special assistant for House liaison; Jim Dyke, special assistant to the Vice President; Larry Oliver, special assistant to the Vice President for congressional relations and Edna Draper, administrative assistant to presidential assistant Hamilton Jordan.

Minority White House staffers who hold positions of a non-policy making nature include: Elizabeth Mitchell, assistant director for scheduling; Barbara Heineback, press advance for the office of Mrs. Carter; Angela Corley, assistant to projects director, office of Mrs. Carter; Christopher Bates, information specialist, office of Mrs. Carter; Edward Maddocks, staff assistant to the President; Amelia Parker, staff assistant for policy analysis and Bill Drummond, assistant press secretary for domestic affairs.

The Cabinet Agencies

Following is a listing of minority presidential appointees and appointee-designates who hold top-level ambassadorial or agency positions.

Department of State

Andrew Young, U.S. Ambassador to the United Nations; John Reinhardt, director, U.S. Information Agency; Donald McHenry, deputy representative to the United Nations Security Council; Patsy Mink, assistant secretary for the Bureau of Oceans and International Environmental and Scientific Affairs; Barbara Watson, administrator for the Bureau of Security and Consular Affairs; Abelardo Valdez, assistant administrator for the Bureau of Latin American Affairs in the Agency for International Development.

Department of Treasury

William Beckham, assistant secretary for administration.

Department of Housing and Urban Development

Patricia Harris, Secretary; Chester McGuire, assistant secretary for Fair Housing and Equal Opportunity; William Medina, assistant secretary for administration; Juan Rodriguez, special assistant to the Secretary, and Graciela Olivarez, head of the Community Services Administration.

Department of Defense

Clifford Alexander, Secretary of the Army; and Edward Hidalgo, assistant secretary of the Navy.

Department of Justice

Wade McCree, Jr., Solicitor General of the U.S.; and Drew Days, III, assistant attorney general for civil rights.

Department of Transportation

Chester Davenport, assistant secretary for policy.

Department of Health, Education and Welfare

Mary Berry, assistant secretary for education, and Arabella Martinez, assistant secretary for human development.

Department of Interior

James Joseph, undersecretary of the Interior.

Department of Commerce

Fabian Chavez, assistant secretary for tourism.

Department of Agriculture

Alex Mercure, assistant secretary for rural development.

Department of Labor

Ernie Green, assistant secretary for employment and training; Alexis Herman, director of the Women's Bureau.

Brenda D. Neal

Historic Richmond Election

For the first time in seven years Richmond, Va. voters on March 2 had an opportunity to elect members to the city council. And blacks won races for five of the city's nine council seats.

The winners were elected under a court-approved single-member apportionment plan ordered by U.S. District Court Judge Robert R. Merhige, Jr.

The Court case which led to Merhige's order was filed in 1971 and no city elections have been held in Richmond since (See November 1976 FOCUS).

The apportionment plan ended nearly 30 years of at-large voting in Richmond, which in effect, diluted black voting strength and served to frustrate the will of black majorities.

Under the new apportionment plan four council districts are predominately black, four predominately white and one "swing" district is roughly equal in racial composition.

On March 8, the newly elected council unanimously chose Henry T. Marsh, III, a 43 year-old civil rights attorney, to serve as Richmond's first black mayor. Marsh has been a city council member for 11 years and has served as vice-mayor since 1970.

Black Journal Opinion Poll

According to an opinion poll conducted by Black Journal, black leaders show a decline in the belief that President Jimmy Carter will "reward blacks" for their massive electoral support last November.

Black Journal, the longest running black public affairs program, on television, conducted a poll of 100 black leaders shortly after the November election. At that time, 80 percent replied, "Yes", when asked, "Do you think a Jimmy Carter administration will reward blacks for their support?"

Shortly after Carter announced his cabinet selections, the same sample group was asked the same question and 51 percent replied "No." Tony Brown, Black Journal's host and executive producer, said that the results indicate "perhaps a credibility gap" between Carter and black leaders.

Black Journal conducted the poll for its ninth season premiere program, "The New Power: The Black Vote." The poll results were part of the first of 13 Black Journal programs for the 1977 season produced by WNET/Channel 13 in New York.

Civil Rights Report

In a 39 page report on civil rights developments in 1976, the U.S. Commission on Civil Rights said that reorganizing and strengthening federal enforcement of civil rights laws and regulations must be made a top priority for the Carter administration and Congress.

The report described the task for the executive and legislative branches of government as "formidable" and urged both branches to "press for desegregation of our schools as firmly in the North in the coming years as was done in the South in decades past."

The Commission's report noted that gains in school desegregation and political participation by minorities and women had increased over the past year, however, these

gains were offset by a slowdown in the economic progress of these groups. The nation's slow recovery from the 1974-75 recession, the report suggested, "badly eroded affirmative action efforts" and resulted in "the continuation of wide gaps in employment rates, income, and occupational status between white males, on the one hand, and female Americans and black males on the other."

Cited in the report were occupational fields in which women and minorities have made little, if any progress. It maintained that soaring costs and race and sex discrimination are major barriers to improved housing conditions in the nation.

Zeroing in on the performance of the federal government's civil rights efforts during the past year, the Commission said it was disturbed by the "inadequate" civil rights performance and criticized some government agencies. The Immigration and Naturalization Service and the Indian Health Service were cited for "cavalier disregard" for the rights of Hispanic Americans and Native Americans.

On the positive side, the Commission noted the "encouraging developments" in school desegregation, particularly the relatively peaceful opening of schools last fall. It pointed out that the cities of Boston and Louisville, both of whom earlier desegregated their schools with difficulty, began the fall term with growing public acceptance of school desegregation.

The report concluded by stating that the President and Congress "must relate specific programs for economic progress, government reorganization and other reforms not only to the goals of efficiency and productivity, but also to the goal of giving all of our people an equal chance in such areas as education, housing and employment."

The Commission on Civil Rights is an independent, bipartisan, fact-finding agency concerned with the rights of minorities and women.

First Groups of JCPS Human Resources Fellows Chosen

The Joint Center for Political Studies has selected the first four Fellows in its Human Resources Fellowship Program. They are: Ellis Cose of Chicago, Illinois; Velia V. Ortiz Jones of Los Angeles, California; Jacqueline Craig of Washington, DC and Jean M. Sharp of New York City. These four Fellows will begin their one-year terms on April 15, 1977.

Under the program, funded by a grant from the Rockefeller Foundation, ten fellowships will be awarded each year to minority persons interested in pursuing careers as administrators of human resources programs. Additional Fellows will be selected to begin their terms in July and September, 1977.

Mr. Cose holds a bachelor's degree in psychology from the University of Illinois-Chicago Circle. He has been a journalist with the Chicago Sun-Times since 1972, first as an urban affairs reporter and since September 1975, as national affairs columnist. Mr. Cose has won several awards for excellence in journalism. He will pursue his interest in urban affairs by concentrating on the administra-

Continued on page 8

Continued from page 7

tion of programs for community development with emphasis on efforts for neighborhood preservation.

Ms. Jones holds a Master's degree in education from Mount St. Mary's College in Los Angeles. She taught in the Los Angeles public schools between 1956-62 and since 1963 has been a teacher/consultant for bilingual education programs in the Los Angeles Unified School District. Ms. Jones is interested in the management of experimental bilingual programs, recruitment and training of leaders in this area and in the development of new programs to address the special educational needs of minorities.

Ms. Craig graduated magna cum laude from American University with a major in political economics. She taught for some time in the District of Columbia public schools before entering Harvard University Law School in 1973. Ms. Craig received her law degree from Harvard in June 1976 and since that time has worked with the District's United Labor Agency. She will continue her interest in labor and manpower programs and policies during her term as a Fellow by focusing on the administration of federal programs for manpower training.

Dr. Sharp received her Master's degree from Indiana University. She taught Spanish in Gary, Indiana high schools from 1965 to 1972 and during part of this time served as head of the foreign language department of Gary's West Side High School. She entered Teachers College of Columbia University in 1973 and received a doctoral degree in education in 1976. Since her graduation she has worked as a field specialist with the General Assistance Center at Teachers College, Columbia University. Dr. Sharp will concentrate on the administration of federal programs emphasizing the delivery of education services that meet the special needs of minority students.

Stokes Named Chairman of Assassinations Committee

Rep. Louis B. Stokes (D Ohio) has replaced Rep. Henry Gonzales (D Tex.) as chairman of the House Assassinations Committee.

The House on March 8 accepted the resignation of Gonzales who was dissatisfied with the conduct of the committee's chief counsel Richard Sprague.

Stokes was immediately appointed to the chairmanship by House Speaker Thomas P. O'Neill Jr., (D Mass.).

The appointment of Stokes gives new life to the committee whose existence was threatened by internal dissension.

In accepting the chairmanship Stokes said that the committee would move quickly to investigate the assassinations of Martin Luther King, Jr. and John F. Kennedy.

HUD Initiatives Outlined

In a March 7 address to the Congressional-City Conference, Patricia Harris, Secretary of Housing and Urban Development (HUD), outlined new initiatives to be taken by the Department in an effort to improve relations with elected officials.

She pointed out that previous contacts between HUD and state and local officials have taken place almost exclusively on a technical level and have been confined to program activities. She proposed that an office of intergovernmental relations be created within HUD as part of a new Office of Legislation and Intergovernmental Relations to be headed by an assistant secretary.

Harris declared that "the new office will function as an open channel for communications between myself and state and local elected officials."

Harris added that she was hopeful that "a dialogue will begin, and that we will discuss not only the broad policy issues before us, but also the particular program concerns which can tend, over time, to separate us."

In discussing HUD's 1978 operating budget, the secretary said that support had been secured for significant improvements over the previous fiscal year. She noted: a three year reauthorization for the Community Development Block Grant Program; a \$750 million increase over the current level to \$4 billion for fiscal year 1978; increases to \$4.1 billion in 1979 and \$4.3 billion in 1980; the inauguration of a new \$400 million Urban Development Action Grant Program as part of the 1978, 1979 and 1980 authorizations; a change to the "dual formula" mode for determining entitlement funding and more aid for small cities.

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