

The following interview was conducted and transcribed by Emily Schiller for her senior honors thesis in the Department of History at the University of Michigan. The interview was conducted in February 2011 and transcribed in July of 2011.

For four years, Dr. Tolbert Small served as a physician volunteer for the George Jackson Free Clinic founded by the Black Panther Party in Berkeley, California. At the time of the interview he was a physician and co-founder at the Harriet Tubman Medical Office in East Oakland, California.

Emily's interview with Dr. Small first appeared on the web site It's About Time, dedicated to the Black Panther Party's legacy and alumni.

Emily: I read your interview in the Revolutionary Worker and listened to the tape in the Stanford archives about how you got involved in the Panther clinics. For the purposes of our recordings, would you like me to ask you questions about that, or skip everything I know?

Dr. Small: *[laughs]* I had worked with SNCC [the Student Nonviolent Coordinating Committee] in 1965 during the time of the Lowndes County Freedom Party in Lowndes County, Alabama. When I was driving to medical school, I used to have a Black Panther bumper sticker on my red barracuda and of course it was the Black Panther Party of Lowndes County. Mark Comfort, who was a SNCC organizer and had a group at Oakland called the Oakland Direct Action Committee, was the one who actually told Huey about the name for the Party. As far as the George Jackson Free Clinic goes, we were first involved in fighting racism and then social justice. We felt that the purpose of the government was that it should provide education and health care. Of course, our government, unlike most European governments, still doesn't provide health care for all its people. In France they pay you to go to college. In California now, the only people who will be able to go to state school will be upper-middle class because tuition keeps going up, about thirty to forty percent. So, any social movement organization was supposed to provide health care for the community; the Black Panther Party had multiple survival programs—you know, survive until revolution and survive until you get a socially conscious government. Health care was one of these programs. [The Black Panther Party] already had free clinics in New York, Seattle, and Portland.

The Berkeley Panther Group was under the leadership of John Turner and the person who did a lot of the grassroots work was Sheeba Haven Grayson—who I believe you've talked to. They were instrumental in getting the building, getting a plumber to come in and fixing things in the rooms. The clinic opened in 1971. At the time the clinic opened, I was working there Mondays, Wednesdays and Fridays—Monday afternoons, Wednesday afternoons and Friday morning. I was going to prisons to visit Angela Davis and Friday mornings to visit George Jackson at San Quentin prison. Prior to the opening of the clinic I used to do house calls for all the Panthers—I took care of everyone from the babies to the leadership. They would call me, and I would do house calls. After the free clinic opened, there were fewer house calls because I could see people inside the free clinic.

The free clinic was very well thought-up. The Berkeley Public Health met with us and they did all of our geriatrics cultures and syphilis tests; I got the lab tech at the center I

they did all of our gonorrhea cultures and syphilis tests; I got the lab tech at the center I worked at the health center that I worked at, Henry Smith but we called him "Smitty," to do electrophoresis. We were doing hemoglobin electrophoresis on our sickle cell patients—it was state of the art. I got all of the doctors—Joe Selvie, an epidemiologist, and Bruce B. and another physician, an ophthalmologist. At our fullest we were working five days a week; it was a busy clinic. I would sometimes be there at 2 'o clock in morning; I remember seeing several people one night. It served a lot of the needs of the community in Berkeley. I worked there from 1970 to 1974 but I was told the clinic stayed open until 1980 or 1981. It was very labor-intensive. I remember seeing a lady there who had [a chronic condition] and was diagnosed at the George Jackson Free Clinic, which of course this meant genetic counseling for her children.

Emily: I'm interested in the structure of the clinic and how it got started up. Who proposed the clinic and how did you get materials for it to start?

Dr. Small: John Turner and Sheeba, she was called Claudia then, wanted to set up a free clinic and, when they asked me, I told them that I would help them set it up. The Black Panther Party set up the clinic and rented the building. I had pharmacy representatives at Oakland giving me medications; we had a whole line of pharmaceuticals to provide for the patients free of charge. Structurally, the Berkeley Black Panthers were the ones who rented the buildings, did the plumbing and the carpentry work. I supervised it and told them what to do and how much space for the rooms. We got donations and exam tables from physicians going out of practice. Community volunteers would come in and work. We actually even trained some of the personnel there to do screenings for sexually transmitted diseases because we believed that people could learn how to do things if they had someone who was willing to show them and they wanted to learn. I remember one of the community volunteers who later went on to medical school—he is a pediatrician but maybe even retired by now.

Emily: What type of health disparities and racism did you witness in Berkeley?

Dr. Small: The Mason Dixon line started at the Canadian Border. I interview my patients for Black History Month. There is one lady who tells me in the 1940s at one of the premier hospitals in Berkeley, all the African American patients were kept in the basement. She tells me an interesting story about a white woman who had an African American husband and had her baby in the basement. I have other patients who were born in the basement of Providence Hospital. I remember the mother of one of my friends in Detroit who worked as a nurse at the Detroit Receiving Hospital and that when she first started working there, they had segregated lockers.

Racism was part of our culture, it's part of our history and it was almost like our government was more interested in Darwinistic survival of the fittest—or survival of the richest—and not so much interested in social reform and social justice, like providing health care and education. When people think of the free speech movement it was also a city of segregated hospitals. In fact, one of the hospitals that I used to work at, Alta Bates, they wouldn't let African Americans come on the staff until they needed Hill-Burton money, which they got in 1968 or the late 60s, and needed to integrate. A premier surgeon applied to work and they told him to withdraw his application; they would not let him on the staff. Dr. Watson later applied and when the receptionist took one look at him they wouldn't give him an application and then he had to call the hospital to get it. That situation in Berkeley and Oakland is also the situation in Detroit. The physician who founded the African American museum in Detroit, Charles Wright, was involved in fighting racism at Wayne State University. All the black specialists there had to leave.

My best friend in medical school was the first African American to do a neurosurgery resident in the state of Michigan. In 1970 when he finished residency, he was told that

he would have had a great career outside of Detroit. He ended up becoming a plant doctor for General Motors. Dr. Wright was telling us that there was an Indian physician who did her residency in an OB/GYN program at Detroit and he found out that the white physicians were being paid more money than he was. He asked the chief resident why the white residents were earning more than he was; he looked the Indian resident in the eye and said that “white folks need more money than Indians.” I think there was a racism throughout the culture in health care and one thing we young activists did then was to fight racism.

Emily: I’ve read a lot about the Medical Committee for Human Rights, the free clinic movement and physicians becoming more active in the late sixties, early seventies. Did you notice this happening? Did free clinics like Haight Ashbury or the Berkeley Free Clinic ever partner with the Black Panthers?

Dr. Small: Well, the Berkeley Free Clinic was started by some whites. Sue McAlester started it as a graduate school project at UC Berkeley with, who would later be her husband, Chuck McAlester. The clinic was set up by her and they later became members of the Black Panther Party. It was the Berkeley group that Dr. Levinson, who you’ve talked to, was involved in. They were white folks involved in the Black Panther Party. I forget the name of the group.

Emily: The ICCF or NCCF [Intercommunal and National Committees to Combat Fascism]?

Dr. Small: Yes. They were the ones who were in that group and set it up. The first clinic I worked in was called the Black Man’s Free Clinic and I used to volunteer as an intern. It was set up by B. Meyers and I used to go around there when I was an intern. Someone else from the Medical Committee for Human Rights worked there, too. Eventually, the community decided they wanted to have an African American so they got an African American director, Meyers, to be the head and set it up. Meyers set up another clinic called the Everyman’s Clinic. All these free clinics were opening around the same time and some of them are still doing very well, like the Chicano Free Clinic. There’s one in Union City and it’s still working but a lot of these community clinics were opening. There were not really a lot, whenever there are people trying to do good they’re always in the minority, but there were a number of physicians and activists who believed that health care was a right and that they would set up community clinics to take care of people who were deprived of health care.

Emily: Did the George Jackson or other BPP clinic work with other clinics in California or were they mostly contained within Berkeley?

Dr. Small: It was mostly contained. We didn’t really work with anybody. The George Jackson Free Clinic was called the Bobby Seale Free Clinic; when George was assassinated, they changed the name. George was one of my patients I used to visit him in San Quentin. I was the first non-prison doctor. I used to go in at Oakland to visit David Hilliard.

Emily: I read the transcript of you on the radio talking about sickle cell anemia testing—how was that program structured at George Jackson?

Dr. Small: That’s interesting; I didn’t know anyone recorded that. One of the black radio stations interviewed me about sickle cell anemia. That must have been about forty years ago, from the files at Stanford. He must have kept track of everything and I guess the things that David wanted Stanford to have he gave to them. There was an article from Dr. Scott, of the University of Virginia, who dramatized the neglect and published it in JAMA—the Journal of the American Medical Society. He realized they were raising 2.5 million per year for muscular dystrophy, 1.9 million for cystic fibrosis but less than

2.5 million per year for muscular dystrophy, 1.5 million for cystic fibrosis but less than 100,000 dollars for sickle cell anemia. Obviously sickle cell anemia had more mortality than any of those diseases. Most were dying by the time they reached the age of 35. Bobby Seale felt this was another form of racism and of neglecting the diseases of African American people and so we decided to dramatize sickle cell anemia and set up a Foundation. We had some prominent people, some of whom actually never met. Linus Pauling was on the board of directors. A famous actor who had a Ph.D in biochemistry was also on the board of directors. A doctor from the sickle cell anemia program in Detroit was also on the board of directors.

We used hemoglobin electrophoresis, or sickledex, and they actually got hold of the chemical form. They would use the sickledex test [at the clinics]. Sickle cell anemia is a disease of which .9 percent African Americans have or carry the trait for it. If two people with the trait marry they can have sickle cell anemia. We worked to identify it and do genetic counseling. This lit a fire under Richard Nixon and he actually pushed for funding. Doctors from one of the cutting edge children's hospitals out here will say that they weren't able to get any money for sickle cell anemia until the Panther Party dramatized the need for sickle cell anemia. We tested hundreds of thousands of people. Bobby Seale says we tested a million; I don't know if we tested a million people, but we did test hundreds of thousands of people for sickle cell anemia.

Emily: Did you test at the George Jackson Clinic?

Dr. Small: Yes, we did. In fact, we used hemoglobin electrophoresis which was the state-of-the-art for testing for sickle cell anemia. People could come in any day of the week and get blood drawn and, if needed, get counseling.

Emily: I guess education is really important with sickle cell anemia. How did you talk to patients about why the Panthers were setting up clinics or why it was necessary? Did you talk about it like it was political?

Dr. Small: Providing health care can be a political statement. It's interesting how a lot of right-wing dictators in Latin America would send physicians out into the community rural areas and would actually kill them. It's against the law to teach slaves how to read; if you keep people ignorant you can keep them under control. Of course, we dramatize the neglect of the government in not funding sickle cell anemia. There's a sickle cell anemia article [in *The Black Panther*] and Huey told me it was actually the bestseller. It was a way of providing a health care service and dramatizing the racism in the health care system which was the neglect; this was all on a grassroots level. People would be counseled about what their chances were of giving the disease to their children if their spouse had the trait.

Emily: It's interesting that you use the word "dramatizing." Was that a tactic to have a shock factor with sickle cell anemia? I understand the use of the words "black genocide" in *The Black Panther*—especially around the time that the Tuskegee study is being exposed. Was the phrase "black genocide" and tactics like this a way of getting attention for issues like sickle cell anemia?

Dr. Small: Actually it was Elaine Brown who came up with the term "black genocide." But it is a form of dramatizing the issue and that's why we set up the National Foundation for Sickle Cell Anemia Research.

Emily: With the context of Tuskegee being surfaced in 1972, what were African Americans' opinions toward medical institutions? Did you ever feel that people came to the clinics because they were distrustful of white medical institutions?

Dr. Small: There's a statue of the father of gynecology in New York who had

experimented on slaves without anesthesia or the skills. One of my patients was a physician there at the time of the Tuskegee experiment. He would ask: "I used to wonder, if when we're experimenting with these black folks who had syphilis; aren't there white folks who get syphilis?" There's a tradition of racism in health care and there are obviously a lot of African Americans who are suspicious of health care in the United States because of the racist tradition of not providing health care and not treating people, like with the syphilis experiment. And I think that the issue of sickle cell anemia was part of racist culture permeating in this country.

Emily: I read about you giving June Hilliard your phone number. Why did you choose to associate with Black Panthers when there were other Black Power organizations at the time?

Dr. Small: I was interested in doing work with anyone doing positive things in the community. I did some work with Mark Comfort. I worked with SNCC when I was a medical student. In college we organized an NAACP chapter. One of my SNCC friends used to run the chapter in New York. I was really interested in fighting racism, especially having been born in Mississippi, and the Panthers were on the cutting edge of fighting racism in the country. I didn't know I'd become as involved with them as I did; everyone thought I was a member in the Party, but I wasn't. It was fighting for health care, education, an end to police brutality and the Jim Crow-isms. African Americans weren't even allowed to vote in the South. When I moved [to California] in college, one of my SNCC friends used to run the chapter in Detroit, and told me to hook up with them.

Emily: That's interesting to me that you went from SNCC to a Black Power organization. So, I've learned about Stokely Carmichael articulating Black Power around that time. What was appealing about the Black Power approach to building a movement and why did you decide to join the Black Panthers?

Dr. Small: Stokely was a member once, the Prime Minister, but they had a falling out. I really believe in working with any progressive community regardless of their color—red, black, green, or brown—as long as they wanted to make change in America. I think Stokely had gotten disappointed with our European Americans and was not overly enthused of working with them. Stokely had a role to play and I'm sorry he died of prostate cancer. Stokely was a very creative speaker and he was one of the heroes of the movement. I've always felt that Howard University—they put up statues of football players and baseball players—that they should put up a statue of Stokely.

Emily: I agree. Did being involved with the Black Panther Party change your perspective on anything?

Dr. Small: I believe that health care is a right for the people and should not just be provided to people who have the money to pay for insurance. Of course, all the insurance companies look to deny health care. I get a call from Blue Cross and insurance companies to stop care; it's not a good situation. Instead, the European countries have an emphasis on social justice and not survival of the fittest.

Emily: I've read about your trip to China with the Black Panther Party and I really like the poem you wrote. How did the health care system in China serve as a model, like as you've mentioned the Barefoot Doctors and other things that the U.S. should be emulating?

Dr. Small: We went to Canton, Beijing and we went to Shanghai and Yan'an, Nanjing. We were guests of the Chinese government and we went to all the tourist places, like the Forbidden City. Some of our translators were actually translators for Nixon. We were walking up the steep hill on the Great Wall of China where Mrs. Nixon had walked up

training up the steep hill on the Great Wall of China where their women had walked up with high-heeled shoes. They were combining western and traditional medicine. They had brought tuberculosis and schistosomiasis under control. It was very impressive what they were doing in the health care field. I think we were all very impressed by their model of providing health care for the people. At that time their model was to serve the people. The Minister of Education was the head of the delegation; Emory Douglas, the Minister of Culture, was the number two person in our delegation.

Emily: I'm sorry to be jumping around, but I remember you saying that the clinic ended in 1980 or 1981—do you remember how it ended?

Dr. Small: The Panther Party itself ended. It ended with the demise of the Panther Party. I didn't realize the phone of the clinic was in my name, and when they were getting ready to shut off the phone, they called me.

Emily: The clinic in Seattle is amazing. I have some photos if you'd like to see it.

Dr. Small: The clinic in Portland [Oregon] is still running.

Emily: Was there any police backlash to the clinic, such as intimidation?

Dr. Small: I understand that when someone got arrested, they would ask her about the George Jackson clinic. Apparently, they had a lot of questions about what I did. J. Edgar Hoover wasted a lot of money spying on the Panthers. They cut a hole in the door of Huey's apartment and made it bigger because they were taking pictures of everybody who went in and out of Huey's apartment. It was a tremendous waste of money. J. Edgar Hoover allegedly had partial African American ancestry, and that's why he didn't like African Americans. He was allegedly gay, so he didn't like gay people.

Emily: What do you think were some of the biggest successes of the Black Panther clinics?

Dr. Small: That they did provide health care for people. They also helped dramatizing the fact that our government was not interested in providing free health care. They used to have free plumbing. There were 45 programs. They were trying to set up a free shoe program. The guy who was trying to set up the free shoe program actually went to China with us. They were organizing to be a progressive force and take on the oppression of the government. In fact, Bobby Seale ran for mayor and came close to winning. One of the guys who used to be in the Panther Party, Bobby Rush, was from Chicago. Barack Obama ran against him for Congress and lost.

Emily: Yes, I've heard about that; I kept up on some of his politics. What's the most important legacy of the party? Were there any failures?

Dr. Small: I was telling my wife just the other day that the Black Panther Party did 80% good and 20% bad. They were able to organize in the community. You didn't have kids murdering each other; they were disciplining in the Party and telling people to do positive things. Some of the people in the school went on to get Ph.Ds. They were providing positive services. They helped to make people like Martin Luther King more powerful in the white power structure because the government would always want to work with someone who would turn the other cheek versus someone who would not. They made some of the other groups more powerful. Places like Zimbabwe and Mozambique were trying to overthrow colonial empires and they were all socialist movements. I think it was part of a movement of countries around the whole world who were resisting racism and colonialism—and the Panther Party was part of that.

