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Interview with Edith Irby Jones

Edith Irby Jones MD

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NG: This is Natalie Garza. It is Friday January 17, 2014 and I am interviewing Dr. Edith Irby Jones in her offices on Prospect Street. Can you begin by telling me your full name?


NG: Okay and is Irby your maiden name?

EJ: Irby is my maiden name.

NG: Okay when were you born?

EJ: December 23, 1927.

NG: Okay and where were you born?

EJ: In Mayflower, Arkansas.

NG: Okay and you lived for some time after that in Conway?

EJ: Until I was approximately 6 or 7 years old.

NG: And how old were you when your family moved to Conway?

EJ: Well we were from Mayflower which Conway and Mayflower are very near.

NG: Okay.

EJ: I was I would say about 4 or 5 years old not school age yet. Let me when you say family prior to that we lived in Mayflower. My father was killed by a horse and we prior
to that we were on a farm and we moved to Conway so my mother would be able to have someone around to help with us as children.

NG: Who else was in Conway to be able to help?

EJ: Conway was actually her father’s home that is from Mayflower out from… Conway she was also a teacher. So she was able to get a job and that was the main reason and people were near more than anything else. Being on a farm you are maybe 10 miles at least 5 miles from anybody else and she did not want to live alone with us as children and that is why she moved to Conway.

NG: Okay and prior to your father’s passing what kind of work did he do?

EJ: He was a farmer.

NG: Was this land that you all owned?

EJ: You own part of it but part of it you farm for income to share crop and all the other arrangements that you have. We were living on property owned by the owner of the farm and so forth. So I would say not really owned in the sense that you owned property now.

NG: Was it like tenancy farming or something like that?

EJ: I’m not sure.

NG: Okay.

EJ: I just know we were on the land owner’s property that there was some arrangement about living there. But I’m not sure about the details.

NG: Okay and while you were there what did your mother do? Was her primary responsibility within the home or was she working outside of the home as well?
EJ: No we were out where we were miles from anyone else. Occasionally did she what they call day work but she was primarily in the..I would say as far as work and occupation she helped with the farm work.

NG: And you said she was a teacher so then did she go to college?

EJ: Well she went more than high school. I wouldn’t call it college. She had after high school teacher education but did not go to college such as we have colleges now. I would say she went to a teacher’s preparation school.

NG: Then you moved from Conway to Hot Springs you said around 7 or 8 years old?

EJ: Yes when I was 7 or 8 years old.

NG: Do you know why the family moved to Hot Springs?

EJ: Yes because she needed more help than living on the farm and to be closer to someone else. You had to walk at least maybe 8 to 10 miles before you came to anybody else’s house and she had an aunt her mother’s sister lived in Hot Springs and she went to Hot Springs because she was there and had some assistance with us.

NG: How many siblings did you have?

EJ: I had two brothers. Well I had a sister that expired and then I had two brothers.

NG: When did your sister pass away?

EJ: I was just school age. So I approximately 6 I was approximately 6 or 7 and she was 13.

NG: And I read an interview where you talked about her passing as an influence in your desire to become a doctor.

EJ: Yes.

NG: Can you tell me about that a little?
EJ: She died what I know now was typhoid epidemic. And most of the children and I mean most of the children became ill. Some of them very ill and some of them as she did died. But I noticed that the ones where the doctor when it and out of the home. I don’t know whether they even had an office where they took people because the doctor’s did home visits. But I noticed that the children where the doctor went in and out of the homes to check on them tended to live. He came to see us and I don’t remember seeing him more than once but that doesn’t mean he didn’t come more than once but he certainly did not come frequently. I thought it was because we did not have money to pay him. Now that is my belief because the other children where he came was the lady that owned the house that we lived in, another lady that lived in a house that looked much more elaborate than the one we lived and we thought it was because we didn’t have money adequate to pay I thought.

NG: Can you describe to me what it was like to grow up kind of the rest of your school years in Hot Springs?

EJ: Well when I went to Hot Springs they placed, my mother had school taught me at home. They placed me in the class with my brother who was in the 4th grade by her teaching him and by where he should be but I had rheumatic fever and rheumatic fever causes the joints to swell and be painful which meant I could not do much walking and he was actually my healthcare partner in addition. When the other children were walking fast and so forth he saw that I was okay that he stayed and helped me from place to place. Then as we grew they continued to keep me in the class with him. And I don’t know when I surpassed him. I think they skipped me a grade because my mother school taught
me too I mean home taught me also. But I was skipped a grade and got a grade ahead of him so I graduated a year before he did.

NG: And the schools at this time were segregated is that correct?

EJ: They were segregated.

NG: Was there any discussion about this at all or was it just that’s just the way that it was.

EJ: That’s… well if there was a discussion I was not aware of it. That was just the way it was. The schools were located in the black areas. So we just, that’s just the school where we were assigned to I supposed. We never even considered that you went to the school closest to your location. And the people who lived in that location were black predominantly black. I do remember that I did have some little white friends, girls that were my age and that the parents lived next door to where we were living and that she did not work. The mother of the white children did not work. My mother worked. The father worked in I’m not sure what business he was in but it was something with a truck. He used his truck. I don’t know whether he delivered or whether he was a collector. I don’t know what business but that mother stayed at home and my mother worked outside of the home and other families’ homes and their children cooking their meals, cleaning their house whatever was needed. But this mother Mrs. Flemings then acted as a next door neighbor mother to us. She cooked our meals, disciplined us if we needed to be. Saw that we were safe and secure and that was how we lived until we moved from Hot Springs from Conway to Hot Springs. And living in Hot Springs we had the school which was walking distance. The teachers who were concerned and it was for me a natural process and my mother worked then as a maid and she worked for a physician who had a baby
about 18 months old and at that age it wasn’t much I could do in the home to really help. I know that now and knew that later. So my job was to take care of the baby. Entertain the baby, walk the baby in the carriage on the street and it wasn’t like it is now. It was safe for a little girl to walk the baby. But the fathers, the father of the baby’s mother lived two houses down from where the father, the physician lived and usually I would end up walking the baby to her and walking there she just blew my head. “You’re going to do this, you’re going to do that. You’re going to have everything you need. You are fine.” She let me to think that I could turn the world older. And she was saying how much she regretted that she didn’t do any more than she did because people told her she was a woman and couldn’t do it. I suppose I spent during the summer I would spent 4 to 6 hours a day with her. During the winter I went over on weekends on Saturdays. She just had me thinking that I was the smartest person in the world that I could do anything I desired to do and she never mentioned the fact that she was white. She never mentioned the fact that I was black and I would have obstacles. It was just never, it wasn’t even in her vocabulary. It was a fact that don’t let being a woman stop you from doing what you wanted to do. And they would let me at that day and time it was safe for a child to babysit another child and I was 7, 8 maybe a little older but not much older. But when they would go out at night they would have me come over and stay with the baby. Well at least I could use the phone for safety if something happened. But it never dawned on me, it certainly didn’t seem to have dawned on them that I would be unsafe there with their 18 month old baby. When they would come in they would usually find both me and the baby asleep on the bed. Sometimes they would take me home. Sometimes they would wait until we woke up the next morning to take me. But he was a physician and she was a
stay at home mom. But she was involved in lots of civic activities and things that took her outside of the home during the day time. But she and he pushed me that, “You’re smart you can do anything you want to do” and I believed her.

Interruption for lady to bring coffee

EJ: My boys are jealous of her. In particular one the younger one Keith if I say, “ahh” he said, “What is it mom?” He is unmarried now but he’s with me at night and he be sure that all is well.

NG: Well that’s good.

EJ: The other one is more concerned about my overall welfare. Do you have enough of everything? Well I don’t need much at my age. What do you need? Transportation has been my greatest slow up. I almost need to depend on someone to take me wherever I need to go and particular. Now I can come from here to my home. Should not but I do. But I dare not get on the freeway because number one I don’t see well enough and number two I’m not sure I could maneuver. When you get older you lose something. But of the choices I decided to get old.

NG: Right. Were there expectations when you were growing up that you would go to college?

EJ: Eh there were expectations that I would continue to stay in school, excel, help other people, have religious orientation. I went to Sunday school, church, summer school bible school. I would say they were not expectations that, “You have got to do this.” But I was put in an environment where people around me who made certain expectations that I thought this was norm, that this was a normal thing to do.
NG: Can you are you talking about this family that your mom worked for or are there other people?

EJ: The whole… it was the community. Not only the family that she worked for but for instance the church the Sunday school that I would go to I was picked up, taken went to what we call then the BYPU, the Baptist training Union and it was usually dark when it was out. But if following that there was a church service if she did not go to the church service someone always took me and brought me back. It was they didn’t verbalize expectations. They just put me in an environment where I now know that these expectations to be met. But no one ever told me, “You need to go to school.” School was expected. No one ever told me, “You need to go to college.” I didn’t have no money and I knew I was going to college it was just which college? I had a high school teacher who had gone to a college in Tennessee, private Presbyterian college and she said, “That’s the college that you’re going to go to because they are going to teach you not only the arithmetic, English, reading, writing and so forth but they are going to teach you how to help the world to be better. You are not just going for yourself you are going to improve situations wherever they are.” She was my high school sponsor and had gone to that particular college herself. And she helped me to secure scholarships, saw that I had transportation by way of at that time train. We weren’t riding airplanes and so forth. And to follow up to be sure that things went well there for me. And of course my mother had been in spite of the lack of education she had taught, she had taught she had actually in the rural area she had taught elementary school and so she had been influenced that education was important.

NG: So there was a lot of support from her.
EJ: A lot of support and then from my church particular. The people in my church that I went to Sunday school and stayed for church, this is a Sunday and stayed for church services and came home and went back to what we call then BYUB, Baptist Training Union and my mother would usually come after the Baptist Training Union to church and I would go back with her but if she did not come someone was there always to take me back, bring me, do whatever was necessary to have me to be there and they sent me on trips to what we call lake they had a lake and they had seminars and so forth on the lake and to other small cities in Arkansas. They would have certain intermingling of members for some reason and I would usually go to those affairs. So I was always on the go under the supervision of someone who thought that I could move and be and help the world later.

NG: And the college you went to was Knoxville…

EJ: Knoxville College in Tennessee. There was a private (still is) Presbyterian supported school. Stayed there four years and graduated Manga Cum Laude. Worked full time except for classes in the President’s office. So I got to know the business of… because I took shorthand I could take his letters and have them sent out. I got to know how to function when there were meetings, how to arrange for having meetings what do you call it, scheduled and people informed and what was necessary to be done to have successful conventions even the college days. Because I didn’t have any money I was always supplied with spending money either from what I had earned working or that some of the teachers saw that I needed something they would go down and buy it as if I was their child. If I was going to a convention and it was going to a colder area they
would be sure that I had the appropriate clothes to wear, that I had money to spend even though it was not part of the convention that I would not be there without money.

NG: And Knoxville College is a historically black college?

EJ: It’s a historically black college and it’s still functioning in Knoxville.

NG: That’s amazing because a lot of colleges…

EJ: Have closed.

NG: Right.

EJ: It is not functioning at the level I would say it was when I was there because number one black students can go anywhere now so they want to go where there are more privileges, more things to do and Knoxville College may not have those. Like when I was there we had football games and teams and basketball. I even played on the basketball team. Basketball teams and all of the extracurricular enhancing activities. Debate team I was on the debate team. And they would let us travel from college to college either by car, by bus always with an adult supervisor to give us directions and all we all count act and what we ought to do. I was on the debate team as I say and we used to go as a debate team and debate the colleges and we won most of the time.

NG: Were many of your peers from Hot Springs going to college as well?

EJ: Significant number.

NG: Okay.

EJ: I would say ¼ even more than that of my class members went to some college.

We had a teacher who was so stimulating, Mrs. Margaret Martin Long, Margaret Long Martin who was so stimulating to push that you could hardly be in her presence either as a teacher or a home room what do you call them counselor that you would not want to do
something. So I would say at least ¾ or more of our class went to a college. Many of the male went to the college in Arkansas because it was near, it was less expensive. But I went to Knoxville because of her. She had gone to Knoxville. Not only did she make the necessary arrangements but she spent some of her money to be sure that I had what I needed. She had her house. We didn’t have to worry about what we did on weekends. She used her house to give parties for students. She used her money to buy whatever was necessary to serve at the parties. So the students we didn’t have an alcohol problem then. We didn’t even have a smoking problem then. I don’t know what problem we really had as teenagers that they consider problems now. Because we had so many people, number one looking out for us and parents who were close to what was going on that that was no problem. I could go home at night I chose to and would not have any fear of being molested or being bothered. But usually someone was always there to be sure that I was there and safe and for instance, coming home from church at night if my mother did not go. We didn’t have cars like we have now. We walked. And the family that would bring me home I lived down the hill from where they would be passing and they would stand there until I got into my door and my mother knew if I stayed for BYPU and after church that I was going to be brought home and I would be safe. I would say I had indeed I had a whole village rearing me. Then my mother became ill. She had a thrombosis in her leg and could not walk significantly and the family for whom she had been working was recently married he was a physician and she was a stay at home mom but she wasn’t a very stay at home. She was a party girl and but she was a good home maker but when he would get off from work and they would go out partying at night I was only I know I was less than 12 when I first started and they would let me stay there with the baby. But
things are not like they are now. There was no fear that I would be molested or the baby would be harmed. And when they came back not only did they find the baby asleep but they found me asleep also on the bed usually with the baby in my arms. And they actually saw that I didn’t lack anything. If I needed something and I’m here trying to remember their names and can’t. But they saw that I didn’t lack anything. School if it was clothes, she would go down and shop to be sure that I had. If I was in a play they would be sure that I was there and got whatever I needed.

NG: What did you major in at Knoxville?

EJ: Chemistry, Biology and Physics.

NG: Three majors.

EJ: Three majors. But I also worked in the office. So that’s where I actually got the skill of meeting people, doing conventions, all the other things that go along with living and interacting with people.

NG: And did the sciences come easy to you?

EJ: They were not difficult. They were another class. I have not been one of those that did not need to study. I studied. I took notes I reviewed them, I studied but I did make good grades.

NG: Were there many other women that were taking those kinds of classes or majoring in those things?

EJ: No we were predominantly male. We were predominately male in the school. It was I don’t remember what period it was now was the war before or a war after but anyway we had significant numbers of students who were away in service.

NG: Okay.
EJ: And it was predominantly girls at that time because the fellows were either in service for some reason had not started back to college.

NG: So you’re talking about World War II.

EJ: World War II.

NG: Okay was did that have any kind of impact on you that you were one of few women in the science classes or did it not phase you?

EJ: Not really, not really because you had choices you didn’t have to be. You could select your major and most of the women selected education because teaching at that time for the most part was a higher paying easier to get positions. And most, in fact most in my classes the medical the pre medical classes it was predominantly men. I’m trying to remember now a woman who was actually in the class.

NG: What kept you motivated to keep working towards going in to medicine?

EJ: Number one I had rheumatic fever when I was a child. And I remembered the difficulty it was for me to get a doctor and to be served. Then once I got in the science field I liked the science field. I like the challenging, the learning, the all the things that went with being stimulated to be informed and so forth. And I knew I didn’t want to teach. That wasn’t one of my things. It never dawned on me that I could be president of the United States you know. I didn’t dawn on my I could be political and reach some goals. So I chose that which I thought I could serve the most people, influence the most people and being able to be at their best and to assist where I could in having people to live healthy lives, to not only get well but to stay well and to be able to function and do those things that were necessary and to have funds to help those who needed funds and that has been my goal to not only make it for myself but to make it for others, to have
enough to give, to give. And I believed and still do that the more you give the more come back to you. Now I can’t explain it I don’t even try to but I have recognized that you can think that you are at the bottom of the barrel giving and something surprisingly will come back to resupply, oversupply that all your needs and wants are usually met. All you have to do is imagine them, know what you want to do. Be sure you are willing to share it with others and somehow or other it always comes.

NG: Did you have any role models of black female doctors or other or even male doctors to kind of mentor you or look up to?

EJ: Well I was in my whole neighborhood mentored me. From as I say my mother worked as a maid for a young white physician. And not only did his wife mentor me she treated me like I was her child. But her big daughter. I helped her but her baby then was about 18 months old but she would usually lecture to me about what to do and things to do, how to dress and she would even sometimes go and get the clothes for me. But her mother (his mother rather) his mother is the one who really indoctrinated me. Her husband was a physician and had died. This was her son who was a physician now and she would have me to come with the baby which was walking distance no more than about at most two blocks. And I would walk from their house to her house and she would just indoctrinated me that “You don’t need to continue to be a maid all your life. You can be a doctor and I regret that I didn’t do anything.” She was a party person, well not a party girl but a society person. “That I regret that I didn’t go. I want you to go.” When I would walk the baby down, she would just fill my head full of possibilities. And see that my world was full of stimulating activities. See that I was a part of the Girl Scouts and all the other things that I ought to be a part of. His wife was more of a society lady. She
went to the society things but she also saw that I had appropriate clothes when she would go shopping for herself and she would see something she would buy that for me and that wouldn’t be a part of that salary but a part of having me to look good and so forth. So actually I almost felt like they were a part of my family. They made me think that I could do it and by the time they pumped me full of, “You know you’re special. You can do this and you can do that.” I start thinking that I could do it and when I applied to medical school I applied to I guess 3, 4 plus as many as I had the money to pay the application fee. I applied to the University of Arkansas because it was near and it never dawned on me that I was applying to a school that never had blacks. I didn’t care if they never had blacks I just wanted to go to medical school. So when I applied and they accepted me and everybody made such a big thing of it I wasn’t surprised at all. Because not only did the University of Arkansas accept me, every medical school I applied to accepted me. And I had a choice but the tuition at the University was like $300 then and the tuition elsewhere was in the thousands. So I knew where I needed to go even though I didn’t have $300.

Phone interrupting

NG: Did anyone question why you wanted to keep going to school? Did anybody say, “Why isn’t this good enough? (your bachelor’s degree).

EJ: I think the people around me expected me to keep going to school. I was I didn’t have anything else.

Phone interrupting.

EJ: Okay where were we?

NG: Okay so you were the first African American Student to go to the University of Arkansas.
EJ: That’s been a long time ago. Yeah I was there first.

NG: Did you… so your first day there this story was covered nationally that you were the first?

EJ: Yes

NG: Your first day there did you know there was going to be that much interest? Did somebody tell you ahead of time there’s going to be?

EJ: I didn’t care. No I did not know. It never dawned on me. I was accepted to more than one medical school but I wanted to go to medical school and medical school tuition is very expensive.

NG: Right.

EJ: Because I was a native of Arkansas and because the tuition there was less than anyplace else. I don’t know where I thought I was going to get the money to pay that. But I accepted the University of Arkansas. That was before all the publicity and so forth that I accepted that. It never dawned on me that it was so different. I has gone as I said to Knoxville College. We didn’t have white students but we had white faculty members and somehow or other they had pumped into my head which I wish I could pump back into my head that you could do anything you wanted to do. That ask for what you want and you will get it. They were Presbyterian so in addition to being just faculty members I would say they were missionaries to enhance the living and I worked in the office of the President because I had been taught typing and shorthand. So I acted as assistant to his secretary and he had pumped into my head, “You can be anything you want to be. Strive for what you want you, you get what you actually strive for.” I know now it was what do you call it what do you call when people tend to cause you to motivate you by constantly
what do you call it? Well anyway by constantly having your expectations elevated. It was and I believed them that you could prepare yourself and you can get anything you want. So I decided I wanted to go to medical school. Now don’t ask me my mother was a maid and my father was a farmer. I hadn’t had any significant contact with anyone in medicine except when my sister had typhoid fever and died from typhoid fever but all around me the people were dying from typhoid fever. So I was not special in that situation. But then when I applied to medical school I got several acceptances. But University of Arkansas tuition was a little bit. I don’t even remember what it was. But I didn’t have that. Like $125 it was very little. Then when my home town particularly my church found out they made a lot of publicity in the papers that this black girl had been accepted to the University of Arkansas and people came to my rescue asking me how I was going to pay for it and my church took up collection after church services for me to go and the little ladies with the bells the Salvation Army stood on the streets Main Street, they’ve only got one Main Street in Hot Springs in Central Avenue and Shook Bells and said, “Edith Irby Fund” and nickels, quarters, dimes and…” So when I went I didn’t have $500 when I went to the University of Arkansas I had my money but I wasn’t sophisticated enough to get it changed into paper money. So I took my nickels, quarters and dimes in envelopes, these are quarters, these are dimes, these are dollar bills. And I had my tuition and from then on people put money in envelopes and said, “I hope this helps you.” They even… I got scholarships so I didn’t have to worry and there were three other girls in the class. So it was 4 girls in the class of 91 and somehow or other we bonded as girls because we were all scared of what was expected of us. One of the girls lived past me on the way to medical school and she was on the bus and at that time
busses were segregated, whites from here up and blacks, colored (we were colored then) and colored from here back. And she would be on the bus and would be sitting where she should be. She was blonde, blue eyed very pretty girl and when I got on I knew I wasn’t going to get to school it I saw with her in the white section. But she would come back and sit with me because she thought they weren’t going to bother her. And they didn’t. But somebody got to her father who was a veterinarian for the state and said, “Somebody is going to hurt those girls. You need to stop her from riding with that black girl.” So he bought her a car. And we had one of the few cars in the class. So every time we got ready to go out at night to do autopsies or any other things, we had at least a car full of maybe 4 to 6 fellows riding in the car because we had a car. Nobody ever bothered us and we did that until cars got to be common that everybody had their own car by that time. But even at the time we graduated we would still go everywhere together and she was very blonde, very blue eyed, very ______ (53.55) looking but did not care what they said and we had one other girl in the class, Betty. Betty lived well walking distance to the school but it was across from a tennis court. We just thought you know it’s a public tennis court we’re girls and we are going to go out and play tennis. Somebody called the police and they came and said, “You all can’t play out here because somebody has complained that this park is for white only.” So being as naive as we were we just got in the car and went over to Baptist College which was predominantly which was all black there was no predominant… and we played in their tennis court on their tennis court and nobody bothered us because it was a private court and that was the only time that we had any confrontation. As I said when somebody got to Mary’s father and told him that, “Somebody’s going to hurt those girls” and he bought us a car so every time we went out
at night whatever that we needed to do things together like autopsies let’s say class at night somebody she would have a car full of fellows, it would be three on the front seat, me and one other and the car in the back would be as full as many fellows could get in there. And we did that and when somebody would come on the campus that they didn’t recognize they would just form this circle around me so that they couldn’t even see who was in the circle just in case they meant harm. It was fun but I know now how stupid it was. How silly. But at that time we were, we didn’t care. We was just moving and being and I weight about 96 at that time. Extremely… I’m 5 feet tall if you stretch me and I just didn’t think that that there was anything that I couldn’t do. That the world was mine and as I saw most of the fellows were mature. They had been to the service and they had returned and wanted to go to medical school. When we would study together we studied together that is all we were concerned about. They weren’t even concerned that I was a girl. They weren’t concerned that I was black. There was just no concern and we had one fellow Polanski who every time that we would have assignments and I guess it was so I wouldn’t be left out of any. They would assign the classes. But every time that we had an opportunity to select our classmates who would work with us on different projects like autopsies and so forth, Polanski, Mary and I would always cling together and soon Betty started clinging with us. So we always had our four people to work together. I would say I can’t remember any exciting situations. It was like, “We’ve got to get this class, we’ve got to pass” and that was how it was.

NG: So you feel that your classmates were protective of you?

EJ: Extremely so.

NG: And you didn’t experience hostilities on campus or anything like that?
EJ: Oh no.

NG: But there… you were segregated in certain ways weren’t you?

EJ: Yes.

NG: Can you talk about that a little bit?

EJ: Yes we were segregated for eating. At that time we could not eat in the dining room together. There was white and there was colored and the colored ones usually the help at the hospital. They I don’t know how they found out whether they told me or I knew it. But anyway we knew that we could not eat together. So Mary would bring her lunch and we would eat in the women’s lounge but some of the others like laboratory assistants, laboratory people would bring their lunch so we all ate lunch in the rest room parlor for the women. And nobody said anything about it. But then they said somebody got concerned and said that I was using the women’s restroom and that was forbidden at that time. So they assigned me a rest room that was all my own. That nobody… I couldn’t use it but the maids who were black and I couldn’t use it with the white students and white help. So they gave me a restroom that was all my own. But was my private rest room so whoever wanted to could use my private… whoever I wanted to because they kept it locked I had a key and they would use my restroom and we would talk and that was okay. They had met the expectation of segregation from the state. And as I said in riding the bus to school and so forth someone complained to Mary’s father that somebody is going to hurt those girls that you need to tell Mary not to sit with that girl. I knew if I sat on the bus we wouldn’t get to class. So she would come back and sit with me. So he didn’t tell her he was veterinarian of the state he didn’t tell her to stop riding
he just bought her a car. And now we had our own car with many of the fellows riding with us whenever we would go anyplace.

NG: What was Mary’s last name?

EJ: Arthur A-R-T-H-U-R.

NG: So when you would have lunch then at the hospital sometimes it would be with Mary and other black…

EJ: There were no other black.

NG: Okay so when you said lab assistant or lab people.

EJ: They wouldn’t let me eat with the lab people. No I didn’t eat… the lab people had a separate black restroom.

NG: Okay.

EJ: They had a separate because they had a lot of black employees. So they had their own dining room, the black and white dining room but they asked me not to use that one because it was employees’ dining room. They didn’t say because it was black but because it was the employees’ dining room and that they had a dining area and it was one of the library rooms with the you know the library tables and so forth and so on. But nobody could eat lunch there but me. Nobody could use that room during lunch period but me.

NG: Did you ever feel isolated by that?

EJ: No because everybody was the fellows the girls were just like this with me. Mary and Betty so we if they isolated me they isolated the three of us. And the fellows were always protecting. If somebody would come on the campus who they didn’t recognize they would form this fortress around me and we’d just be talking and nobody ever said why they formed… it was unspoken.
NG:  Right.

EJ:  At that time I guess it was because of my size. I weighed less 105 I know. And I was young. I was younger than they were because they had been off to service after they finished college and before they got into medical school most of them had gone to the service and had known blacks before and they knew that blacks didn’t rub off on them. When they came out of the situation they were still white and there was no harm done and they would come to study with me at night in my apartment and I had an apartment which was what we call garage apartment. It was a house, the garage and a two bedroom, two living room area, a bedroom area and a kitchen. That was on but it was in the… I guess predominantly black neighborhood. It was on the edge. But there was no fear. They had no fear about coming and staying there and catching the bus which was right at across the street almost from where I lived getting to me. It was… I guess I was young and stupid and excited but it was fun, it was fun.

NG:  When did you get married?

EJ:  My second year…

NG:  In medical school?

EJ:  In medical school.

NG:  And how did you meet your husband?

EJ:  How did we meet? We had gone to some meeting. Oh I know I really met him teaching while it was his first major job. He had just gotten his Ph.D. and I was working at the college in the summer for some income when school was not going. The register took a leave during the summer for extra what do you call post graduate course and left me in charge of the office. And what I did of course was look up records and mail records
to wherever they were required or whatever they had to do. But there was also in addition to my being in the office there were other people who knew the office. So I was given a job to survive. That’s when he came, my husband came as his first job post his Ph.D. to the school and the teachers at that time were segregated from the students for eating and so forth and we just sort of got to know each other. Then while he was there early he got a car and not many of the teachers and students had cars then. I don’t know we married less than 6 months after we got to know each other and that’s the end of the story. Then we had the children and they went off to college and then we came down here because I could be with him. There was no jobs where I wanted to practice. So he came down here to be the Director of Student Activities and I came to do my residency at the Baylor College of Medicine. Then I finished that and we stayed on and then I put a sign out there, I want work and I’ve had plenty of work. I can remember when we used to say here until 12 and 1 o’clock at night. Because patients were sitting all out on the porch out there waiting to be seen. But it was fun, it was fun. They would bring food with them and share it and so forth and all of my helpers at that time are dead now and they didn’t die prematurely. Ms. Ruffin, Ms. Puckett, Mr. Gallow, Ms. Babinow, all of them who was equally involved and excited as I was at that time. To stay here and serve and so forth.

NG: What college was your husband working at his first job?

IJ: His first job was AM&N in Pinebluff, Arkansas.

NG: Okay.

IJ: That’s where I had done in the register’s office I was working for the summer as a helper as a source of some income for the summer between medical school freshman and sophomore medical school.
NG: And what was his name?
IJ: James Beauregard B-E-A-U-R-E-G-A-R-D Jones and known particular as JB.
NG: Okay and his Ph.D. what was that in?
IJ: Education. He was actually administrative education.
NG: Okay. So after you finished at the University of Arkansas what did you do?
IJ: I came to Houston.
NG: Oh you came straight to Houston.
IJ: I did my residency here with Baylor College of Medicine. Primarily at Veterans Hospital but he took a job here and I took a job here and we came to Houston.
NG: His job here was at TSU?
IJ: At TSU.
NG: Ofkay. Now the hospitals then were segregated in Houston when you came for your residency?
IJ: Yes.
NG: And so that’s why you were at Veterans?
IJ: At VA.
NG: When did you have your first child?
IJ: It was in 1952 I graduated in 1952… I was at the come on… how old is Gary? I graduated in 1952, the child was born had to be 1953.
NG: Okay so after you were done with school?
IJ: After I was done with school.
NG: But you were doing your residency then.
IJ: I was doing my residency then.
NG: So one of the things that I’ve talked to other women about kind of this balance of trying to figure out how to balance your personal life and your professional life. How did you manage that?

IJ: I had a supportive husband and before I left Arkansas I had an aunt who also when the children were very young who helped me to care for them. I’ve always had excellent help, excellent help and who understood and who was available the hours I needed them and my husband was excellent help. He let me be free to do the things that I could do and enhance me. He was a very motivated educated supportive husband. He wrote my speeches that were not medically scientific. He bought my clothes to be sure I was always looking the part. He bought my cars. He saw that the help did whatever they needed to do to be sure I was okay. He actually medically and otherwise saw that I was able to do the things I could do. For instance when I was president of the National Medical Association he made all the arrangements for me to get there. He had someone of his friends to be sure to pick me up, get me to where I needed to go and get me situated. He knew somebody everywhere. He was I didn’t have to worry about everything. He bought my clothes, he made the reservations. He saw that I was picked up and carried and I didn’t have difficulty with my vision then but I just had been what would you say protected. He saw that everything was at my demands whenever I needed it.

NG: When you say that you had help did you mean household and with your children?

EJ: Well yes in addition to his help I always had household help to see that the house was in condition that the children were taken care of. That the children got to school, got picked up, got to their activities and so forth.
NG: So you have a total of 3 children?
NG: Okay. Your specialty can you tell me what your specialty was?
EJ: Well I did a specialty first in Pediatrics. I started in Pediatrics and that was in Little Rock. But then when I came to Houston the hospitals were segregated and I could not get into a Pediatric Residency. And I went into Internal Medicine because I could do it at Veterans Hospital and I needed residency in Internal Medicine with Baylor College of Medicine.
NG: So then at that time there weren’t many black doctors that were specializing in other fields because they weren’t permitted into the hospitals or what was going on there?
EJ: I would say not as many as there are now. But usually they did what they needed to do to go to a hospital. If they wanted to specialize they went to another part of the country where they could get the specialty.
NG: Okay. Can you tell me… talk a little bit about what the Texas Medical Center was like in terms of…
EJ: There was at that time Baylor College of Medicine which was the major center there. Then there was St. Luke’s, Veterans Hospital, well Veterans Hospital was really not it was sort of out from the center. But it was St. Luke’s and Baptist Hospital that was there at that time.
NG: Were they open to treatment of black patients or not at all?
EJ: Yes they were open to black patients but they were segregated.
NG: Okay and what about getting privileges at the hospital were you able to get privileges?
EJ: Right as soon as I applied I was accepted because I knew most of the fellows who were along with me who also were getting privileges but plus the fact those who were Chairmen of Department had been my teachers and they would say if I wasn’t qualified it would have to be on the basis of race and not on the basis of education because they were the one who said I was educated. They educated me. So there was no problem getting privileges.

NG: Was that the norm for other black doctors?

EJ: There wasn’t no other black doctors who had applied. I don’t know of anyone, John Maddison had a residency after me and he had no problems. I don’t know of anyone who was actually denied because no one bothered to apply as far as I know.

NG: Can you tell me about the Houston Medical Forum, can you tell me what that is?

EJ: It’s an organization of black (at that time) black physicians, multi-disciplined not related to surgery, internal medicine and it’s an organization of predominately black physicians. I don’t know whether they have any whites in it now or not. But I do know at one time they did.

NG: Did you become a part of that when you came to Houston?

EJ: Yes I did.

NG: What purpose did it serve for you or what did you get out of it?

EJ: I got to know the other black physicians that I didn’t come in contact with during my residency, during my practice at Methodist and the other hospitals that were not black.

NG: What did that mean to you?
EJ: At that time? That I could see the patients. That was what I mean that I had a place where I could see my patients and a place where I could do my contact with continuing medical education. It was just a part of for me at that time just a part of practicing medicine. Because I knew most of the people who attended because either they had done residency with me for some reason but it was not a… it was not like special it was like that’s medicine that’s part of doing medicine.

NG: As an organization was there ever issues addressed related to black patient care or anything like that?

EJ: Only with special diseases that black patients usually have but we were related to patient care. Not like… but like sickle cell disease which is a black disease like heart disease in black because of diet, because of other reasons that black economically maybe have a high percentage of the causes. But not as black… the only real black disease, black disease is sickle cell anemia.

NG: What about in a societal sense that they weren’t having access to healthcare in the same way that white patients might?

EJ: Well they still had their national… for instance their national medical association is national organization.

NG: Of African American doctors?

EJ: Of predominantly African American doctors and they had study groups had what do you call them sectional meetings that were mainly related to diseases and so forth. I would say and the organizations like Houston Medical Forum met at least monthly and each monthly meeting there was what they called the scientific activity and diseases would be addressed, disorders would be addressed. Not necessarily black but all diseases,
there would be a scientific meeting along with all of the political and other kinds of meetings.

NG: Okay. Can you tell me what I don’t know if you feel like you’ve addressed this already but what was the Texas Medical Center atmosphere like towards African Americans during that time?

EJ: It was not an issue as far as I knew. They had to meet certain imposed segregations but not because of the Texas Medical Center but because they were state required. For instance we just discussed the fact that they couldn’t eat together in the same dining room. But that was not the medical center. That was imposed by the state. Those were that blacks and whites didn’t eat in the same dining room. And the medical center, there was at least of their concerns they had black and white waiting areas. Where white waited in one area and black in the other. But that was how it was all over for everything. It wasn’t necessarily in the medical center it was the way things were then.

NG: What about for women. Did you feel there were many opportunities in medicine for women at that time?

IJ: We got what we asked for. Most of the women in medicine are much more aggressive than I am. At least I say mine quietly, you know I’m diplomatic. But most of the woman that I can remember as instructors, Dr. Dar for instance who was not only strong academically but she was vocal and pushy and but not because she was a woman but because that’s what she wanted. And she would have behaved I’m pretty sure the same way if she had been a male.

NG: Was this at Arkansas?

IJ: Well here and Dr. Dodd was here.
NG: Okay.

IJ: But at Arkansas and here I was maybe one of the two women here but in
Arkansas it wasn’t the fact that I was black it was that they were hesitant about a woman
being able to care for them. But nobody ever objected, nobody that I know of, no one
ever said, “No she can’t be my doctor.” They assigned us alphabetically and the fellows
as I said as someone came on the campus and they didn’t recognize. They didn’t say,
“We’re protecting you.” They just formed this conversational and everybody was around
me and it was just as if we were carrying on a conversation. But they didn’t say, “We
don’t trust them. Or We don’t know what’s going on.” As I said the tennis court across
from the school and they came and put us off playing tennis. Saying we can’t do that.
And they were very diplomatic, apologetic and being as we were we just went over to
one of the black colleges and went on that tennis court and played and no one there
objected.

Interruption

NG: Okay Dr. Dodd that you mentioned…

EJ: Was my pediatric faculty department…

NG: At Veterans.

EJ: No she was at Arkansas.

NG: Oh okay. Did you have any mentors here in Houston?

EJ: I didn’t know anyone when I came to Houston.

NG: And was it always your idea that you would have a private practice?

EJ: Yeah. At one time I thought about taking a faculty position but that isn’t what I
want. It wasn’t what I wanted then. No I was always wanted to take care of people who
I thought would be less exposed to being taken care of. And particular after I came to Houston. But I did so in Arkansas I practiced for a while there. But when I came to Houston with my residency here and with the exposure to other Houstonians and to physicians I knew I wanted to be out and where people could come to me and I could take care of their needs.

NG: You’ve talked… you’ve mentioned a few times about service. That you wanted to serve other people. Did you feel like you had a responsibility to serve as a mentor to other African Americans wanting to get into medicine or was that not a concern of yours?

EJ: Not especially African Americans I was concerned with all young people who wanted to get. It didn’t have to do. I guess it’s because I had been so exposed to multiple races all the time it wasn’t just limited to just blacks but to anyone who wanted to be a physician and wanted to have an opportunity to serve. Because all of my actually school mentors were white. Because that’s what I was exposed to. And I don’t know any of them who showed any kind of resentment or hesitancy about serving blacks.

NG: Did you find yourself in the position that you ended up talking to young people about becoming a doctor or even not that of continuing their education or anything like that?

EJ: Oh yes. Up until I was let’s say visually impaired. I was always going somewhere to either lecture for students and not necessarily black students but to students about and particular women about what’s it’s like to be in practice in a predominantly male world which right now is getting less predominant because lots of women are saying, “Hey I can do it.” And they are doing it.
NG: So can you talk a little bit about what obstacles there were or what kind of maybe hostilities there were towards women?

EJ: You know if they were there I didn’t encounter them. As I say I can remember when all the publicity about my going to medical school. Well I just wanted to go to medical school. I didn’t care if it was a blue, black or green medical school.

NG: No but for women in medicine. Were there difficulties for women in medicine?

EJ: Maybe. Medicine is difficult period.

NG: Okay.

EJ: The expectations are much higher in medicine in practice than anything else. Even lawyers and my daughter was a lawyer. But even in the other professional the expectation for medical care, you are talking about all you’ve got when you are talking about you. Money doesn’t mean that much as your health, your body, your brain. Nothing means as much to you and not even and we say our children and we do we love them. But nothing means as much to you as you. Does that make sense?

NG: Yes.

EJ: Because if you are not there is no you. There’s nothing… if you are not you can’t have other people be. If you are not then all of your aspirations and so forth there’s nobody to carry it on. Who’s going to do it but you? So I don’t know how to politely put it. Somebody said the buck stops here. And that’s the way it is in medicine. As a medical person not only are you supposed to be enhancing to yourself but you are supposed to be enhancing not only those you care for but for all of that around you and that’s instilled into the physician. You are responsible. You are responsible. There are no excuses why you should treat somebody less than expectations. There’s no excuse for you to not give
service adequately to be the best that can be given. There’s just no excuse. If you can’t
do it then you need to find someone else who can do it. Don’t try. But do what you can at
the time. Don’t say, “I can’t do it and leave that person there.” Do what you can but get
help to have it done.

NG: What do you see as kind of the future opportunities for women in medicine?

EJ: Well I can see that women are predominantly right now I would say almost 60%
of those going into medicine practice of medicine are women. So the future for women is
the future of women in every other situation. They are learning who they are, what their
opportunities are and they are taking advantage of them.

NG: Do you get any sense that the medical field in Houston in particular has changed
in terms of women participating, women being able to have higher positions of power.

EJ: Oh yeah when I came for instance to Houston there were very few women in
medicine. In fact I can’t remember there was one other I think the residency there was
just the two of us and the others were men. Now the women are becoming the leaders of
the organization, they enroll so that now the class is not predominantly men it might be
women. I think that the expectations and the admission now is not based on whether you
are male or female but based on the qualifications that you bright with it and I think that’s
a plus for women.

NG: I want to just so that we get it on record. You opened your practice in 1962 is that
correct?

EJ: Here in Houston.

NG: Yes.

EJ: Now I went I graduated from medical school when?
NG: You said ’52.

EJ: ’52 I did a residency in Arkansas for how many years? Three years so that brought us to what?

NG: ’55.

EJ: Then I practiced in Arkansas for 8 years about which would bring us to what?

NG: ’63

EJ: ‘63, or ’62 maybe 7 years. I opened office I did the residency here for 3 years at Baylor which would bring us to what year?

NG: ’65, ’66.

EJ: Right and I have been in practice since.

NG: And you have always been in this office?

EJ: I’ve always been in this office.

NG: Okay can you talk about what you think, kind of your impact on the community has been?

EJ: Well a whole lot has happened in spite of me. For instance the complex that you see over there. That was not there. Those were private homes when I moved in. What impact have I had on the community? I don’t know.

NG: Well I mean you said that you would have people here until you know late in the night…

EJ: Oh until late at night…I can’t do that anymore.

NG: How do you feel that you served the community?

EJ: I think I served the community for at that time needed healthcare. It needed hands on health care. Many other places have opened since…
NG: Right.

EJ: ... then where healthcare physicians have come in to have offices, Ben Taub has been activated and Hermann has its clinics, River Side Hospital is almost walking distance from here. I think others have come in. I still even when I close my doors would have patients waiting in the reception area say at 8:00 and 9:00 to be seen and I don’t think it’s necessarily me it was a fact that I’m available for them to see and they did not feel as welcomed. They could not pay whatever their reasoning was they came here. And we were here until wee hours of the morning. Sometimes after 12 midnight seeing patients. Unfortunately all of our workers who were with me at that time are dead. The and as I sit here and I’m thinking we would even then be so stimulated, so that we would frequently even after we would stay here until 1:00 sometimes that we would go out and have lunch together and I would be taking home I never was a night driver. And be up at 4:00 a.m. the next morning to get here. And there was a young man, Mr. Gallow who lived further away from me, farther away from here to my office to walk to my home would drive me to my office, stay here and work all day, would go with the office staff to eat and would take me home. That was... that happened for years. All of that help have expired. I have outlived all of them. It was not just a place for making money. It was a place for feeling that you really are doing something to help people and they had the same attitude so money was not our only criteria however we made money. We bought this building. We bought the home I live in. My husband was working though. He was at Texas Southern and he had an income. They had cars and I had a car whenever we needed. We had all of the needs. We bought homes for them. Everybody had their own home. I had I build a home that I am now. I moved from the home that is on the next
street over the two story brick building there. I’m not even sure my son still owns it I
gave all of the property to the children. So I would not have that as a liability in
particular because I didn’t need it as an income.

NG: So the people you had working with you here were with you for a long time?

EJ: They were with me for a long time. They died out and they were young when they
came.

NG: When did you stop seeing patients?

EJ: When will I stop seeing patients? No, no I try not to. I may give advice on where
they should go. I don’t know the exact date but it hasn’t been long ago.

NG: Okay.

EJ: It’s been about maybe 2 months, 3 months that I actually said, “Don’t come.” But
if they came and they were in distress I didn’t let them go out in distress. I saw them ran
through their immediate care and sent them on someplace else.

NG: Did you ever become involved in civil rights issues that were going on?

EJ: Not involved no. I was the first black to have gone to a medical school in the
south. But there was no issue. I just went. I graduated and I started practice.

NG: So you were in Arkansas still when the Central High School was integrated
correct?

EJ: That was what year?

NG: In the ‘50’s I believe.

EJ: I finished medical school in what ’52? I was not a part of the Central High
School Mrs. Bates who had been my financer who saw that I had money to eat they
didn’t have scholarships or what do you call it whatever they have now to finance
students. And she would go and collect from the black professions on her street, 9th Street in Little Rock, money for me to have to live on. $10, $15, $20 whatever they had and that was how I lived. But scholarship wise there were no scholarships so when I left medical school I didn’t have any loans like most students have now because they gave it to me individually to see that I had something to eat. Daisy Bates if you don’t remember and you probably don’t. She was the one that lead the 9 into Little Rock. Do you remember that? Is this is before your time?

NG: Well I’ve studied that.

EJ: So she was the one to see that I had all the necessities that I needed and then once I got married and I met her my sophomore year in my medical school my husband saw that I had all the necessities, transportation. He cooked, he took care of the babies. He either carried me or saw that I was taken to every place I needed to go. And I’ve always had just support from everywhere. Even in High School I had this teacher who was supportive to be sure that I had what I needed in terms if there was a special costume she would see that I got it. She and I don’t know why but until her death I took care of her in her last years. But in her death and so forth they honored me as her daughter because she felt like she was responsible for whatever I needed and saw that I got it.

NG: What accomplishments are you most proud of?

EJ: Survival.

NG: Survival?

EJ: I’m still here. I’m 80… how old am I 85 or 86 how old am I?

NG: I’d have to do the math.

EJ: I was born in 19…
NG: ’27 you said.

EJ: ’27. What I’m most proud of? I don’t know. I don’t know I know what job I worked the hardest probably in was President of National Medical Association. And we had a good year. I think that I served them well and that the association was appreciative of my doing so. If I had it to do all over again that would be one of the things that I would like to go as it may.

NG: What were accomplishments during that year of your presidency?

EJ: We significantly increased the enrollment. We were able to get multiple organizations to get what do you call post graduate courses for the physicians who were members and those who wished to be enrolled in their particular locations. I don’t know. Medical schools we were… I don’t know whether we were the cause but multiple medical schools who had previously denied black admissions took black students without any court requirements.

Beeping noise interrupting…..

EJ: Okay I left a message for her to either call me or step over here. You know she was a practicing lawyer for more than 20 years did she tell you?

NG: Oh wow, no she didn’t.

EJ: Yeah she was but she came home to be with me. She was on Martha’s Vineyard.

NG: Oh okay. I lived for a little while in Boston.

EJ: Oh really so you know about Martha’s Vineyard. In fact she still has a house up there I think in Martha’s Vineyard. She said she was going to sell it but I think she was just holding on.

NG: Did you ever teach at all at any of the medical schools here?
EJ: Yeah I did Baylor and UT both.

NG: Did you have like a regular faculty position or just occasionally you would...

EJ: No I was assigned.

NG: Do you remember when that was?

EJ: I don’t know. I just haven’t done so recently. In fact I’m pretty sure they list me now as a faculty. Occasionally I go over and lecture to the students about the practice of medicine but I don’t have classes now. But about the steps that they need to take to get into private practice. Some of the requirements of healthcare. But yes at one time I met classes and lectured on various subjects and gave students graces and I had students that came into the office to be mentored to for say instance I’d take two students for two months and two more students and so forth. I can’t do that now because I need someone to lead me around.

NG: Right.

EJ: Yeah but it was fun.

NG: And you enjoyed that?

EJ: Yes.

NG: Let’s see can you just tell me briefly about the center now the Edith Irby Jones Wellness Center?

EJ: Like what?

NG: What has become of this of your space?

EJ: You mean right here?
NG: We let’s say my daughter she does physical therapy for various what do you say various under my supervision. Post accidents, muscle pains but as far as the center itself we are not caring on any kind of medical care.

NG: Okay and what are your plans from here on out?

EJ: Well I’m still at Baylor and UT and that’s student’s orientation to practice. But since I’ve closed the office I haven’t made any ongoing plans to even keep that up after my time expires and that’s at the end of the school year. Because what I was actually doing I was bringing the students in addition to on the ward service I was bringing students to the office to give them hands on for what one does in the office setting. I can’t do that now because obviously I can’t see well enough to instruct someone else or take a chance on somebody else’s life even with my doing it. That I have not taken a leave of absence but everybody there knows that I’m having difficulty with my vision and that getting to and from the hospital and medical school they had arranged to have somebody to park me and get me in and out. But I’m I don’t want to do that because I endanger not only my life but I endanger somebody else’s life too if I’m the driver and so forth. And everybody in my world I need to keep busy doing whatever they are doing rather than having them to look after me. I am going to get something that is ongoing but I haven’t decided what it’s going to be yet.

NG: How long were you teaching?


NG: So you’ve been teaching throughout.

EJ: Yeah throughout.
NG: Okay. Is there anything else that you wanted to talk about that you thought we would talk about or that you think you should share? Especially in terms…

EJ: What are you doing with it I don’t know?

NG: Well this especially in terms of thinking about women in medicine and women in the medical field here in Houston.

EJ: Well it’s not the kind of problem… women now are I would say 50/50 almost in medicine. It’s not a… when I went in I might have been one of three or four women in a 15 in fact I usually was in an audience of 50 or more. It’s no rarity now. Women are more than 50% of the classes and they go in and they take their places. They take their places as leaders, as presidents, as residents and leaders. It’s not a novelty anymore. And at the rate we are going women are going to outnumber men in medical field (if they haven’t already). So it’s not a novelty.

NG: Right. Sometimes I think that there’s public debates going on about whether or not women can have it all in terms of having to care for families…

EJ: Well you know men are caring for children now. They just don’t bear them. They have taken the role of child care in allowing their wives to be a part of the professional world. And I think children benefit by that.

NG: Can you explain?

EJ: Well children get particular female children learn that they are not limited by the fact that they are female. That their mother is part of having the world progressing and they don’t have to select a certain career or any type of life span in order to serve as they want to serve. That all of the professions are open. Not only medicine but legal and otherwise are open to women and women are taking advantage of it and excelling.
NG: Okay. Anything else.

EJ: I don’t know anything else.

NG: Alright.

EJ: It’s been a delight to talk with you.

NG: Thank you so much.

EJ: Now tell me what are you going to do with this?

NG: Well this is for the Texas Medical Center Women’s History Project. So wanting to get the history…of where women have come from.

EJ: Did you know there are a whole lot of women in medicine now?

NG: Yes.

EJ: There weren’t when I went into medicine.

NG: And I think it’s important to understand what the experience was especially for people maybe someone who was a historian who wants to know the history of women in medicine to understand what the experience was for women throughout time how it differed.

EJ: But I had such a pleasant glowing kind of situation that the fellows looked out for me. They… I don’t know why. Because I was assertive at that time. I thought I could change the world and tried. Still trying. Where there is something I can do I want to be a part of helping it to be improved. The fellows in my class were just excellent. As I said they were a little bit more mature. They had been to the service but they saw that I didn’t miss a beat and then when I went into the residency I had the same kind of experience that things went well for me there. And in practice I don’t know what else I could have done. At 12 o’clock at night we sometimes still had a reception area full of people
waiting to be seen and usually my help after we had seen everyone would go out and party. That’s how much we enjoyed seeing patients and taking care of patients. And I had a supportive husband. If I said I wanted it he would go get it. He had the brains. He had the intelligence. He had the whatever there was to get things happening. And for me he was protector, saw that finances went well. Saw that I was well dressed. He bought the clothes. He took care of the children to see that they didn’t want for anything that was a necessity. He saw that my world went well. He brought the money in. He… in addition to his salary he managed mine well. He saw that we had other income just in case neither one of us had adequate income. He saw that the children were well educated that they went to the schools that could give them the best of what they wanted to do. He saw that I was financially secure even with his being out of the picture. I don’t know anything else he could have done except live longer.

NG: When did he pass?

EJ: 19 was it 89? Yeah it’s been a long time. When did he pass I don’t know. When you don’t see… really it takes away some of your memory ability. I’m thinking ’89. It’s been a long time. What is this? This is 2000 and…

NG: ’14.

EJ: I need to ask because I want to know. What is Myra’s number next door.

NG: I believe it was ’89.

EJ: Yeah I’m pretty sure it was ’89 but as I saw when you don’t see it takes something away from your brain and you are amazed how much you depend on your eye sight as part of memory. And part of it is old age I guess.

NG: Well I appreciate your time thank you so much.
EJ: I appreciate you. You are both pretty and smart. And that’s all you need.

NG: Thank you.

End of interview