

Interview with Dr. John Holt, conducted in his office in Asheville, North Carolina, on October 10, 1979. The interviewer is Bruce S. Greenawalt of the University of North Carolina at Asheville.

Bruce S. Greenawalt: Dr. Holt, none of us come on the scene without a family background of some kind, and I thought maybe the best place to start here would be with your own family background: what you may know about your grandparents, both your paternal and maternal grandparents, where they came from and what they did, and who they were.

Dr. John Holt: Let's start with my maternal grandparents, since they were probably more interesting. My grandfather; his name was Plummer Austin Richardson and he came from Halifax County. My grandmother's name was Louise Battle. But the interesting thing was: he had a third grade education, and he walked from Halifax County to Nashville, North Carolina, and became a barber while he was still a teen-ager.

Greenawalt: Halifax County is off in the Eastern North Carolina; that was quite a walk.

Holt: It would be a matter of maybe fifty miles. He became a barber; set up the first barber shop in Nashville, and he educated himself to a very high degree. In the meantime, by 1927, he was the first black millionaire in North Carolina. He made his money in tobacco farms. So he started as a barber, and then he started buying

Holt: (Cont'd.) tobacco farms. After a while he had about thirteen or fifteen tobacco farms, and then he went into real estate; then he went into insurance; then he established a funeral home, and one thing after another.

Greenawalt: What state was all this activity going on?

Holt: All right there in Nashville; in Nash County, Edgecombe County, say, from Halifax County up to wherever Durham is, in this area. During this time he became general treasurer of the National Masons, which at that time was the biggest fraternal order for blacks in the country, and also treasurer for the AME church.

Another interesting thing: when the Depression came, he lost much of his fortune; much of his real estate and all, but he kept his farms, against all of the things. His concept was (and I remember him telling me this) that he started with the farms and the brown earth would always be there.

Then World War II came, and in something like two or three years . . . anyhow, during the war. . . he paid off over a half million dollars in debt and then just started again. When he died rather suddenly. . . I think, in 1948, he again was in that realm. He had nine children. My mother happened to have been the oldest. The things that this man did: he wrote beautifully; he left a library of over five hundred books, including a collector's item of Shakespeare, and also to the extent of books on embalming, and so forth, and he'd read them all.

Greenawalt: Where was his home?

Holt: His home was in Nashville, North Carolina.

Greenawalt: ~~Nashville, North Carolina.~~

Holt: Which is a little town, ten miles from Rocky Mount, and in '48, when they had his funeral, people came from all over the country, and they estimated that five thousand people came to his funeral. The significant part to me, and I've always felt this since I was a little boy, was that this was done out of Nashville, North Carolina; not as big as Hendersonville.

Greenawalt: You must have had quite a few memories, then, of the man, if he lived on until 1948.

Holt: Yes; I did. As a little boy, we used to go down in the summer time and had homes and things there on the farms. I didn't learn a lot about farm life, but it was just a unique experience.

Greenawalt: Did he have tenants, or sharecroppers, working these farms?

Holt: He had tenants. . . and he also, during this time. . . and I only found this out in later years. . . but he gave, about seven or eight farms to people who had been tenants for him over a period of time, and he would just give them the farms. At one time, he reportedly owned around two hundred houses. My uncle still owns the funeral home there in Nashville, and one in Louisburg. At one time, for, I guess, a period of about twenty years, they had the largest black burial association in the state; that was unusual. My grandmother was the daughter of a Blackfoot Indian and a white man in Nashville.

Greenawalt: Are you talking about Mrs. Richardson?

Holt: Mrs. Richardson; and the peculiar thing about it: this was one of those family areas where everybody knew everybody else and where everybody was everybody's first or second or third or fourth cousin, and so forth. On her side of the family, her father gave her and her brother, both, big farms right there in Nashville. So, on my mother's side, they came up under rather affluent circumstances for that time. Well, they really came up under kind of affluent circumstances for any time.

My father was born here in Asheville, and we never have really searched much of his history, but we do know this: that his father was sent to Asheville from Spencer, North Carolina, in charge of the group that laid the track leading to Asheville. A very significant thing: I never knew my paternal grandfather, but he headed this group, and he sent his brother to medical school. He was Dr. John Walker, who was one of the early black physicians here in Asheville.

He sent his sister through college, and she was the first black college graduate here, and was the Lee that Stephens-Lee school was named for. My father went to school here and then left.

Greenawalt: Where did he attend school?

Holt: He went. . . at that time it was called "Catholic School." That was Catholic Hill, the school that finally burned down. Well, it burned down years later. I think it burned down about the twenties. He went to school at Catholic Hill, then he left and went to Morristown, which was a church junior college.

Greenawalt: Tennessee?

Holt: Morristown, Tennessee. Then he went to Livingstone College in Salisbury. He graduated from there and then went to Howard University to Medical School. During the years he was there at Livingstone and at Howard, he worked on the railroad during the summer time, right up until his senior year in medical school, and he met a fellow named Mr. Day.

Greenawalt: How do you spell that?

Holt: D-a-y. . . who was a candy maker in Morristown, New Jersey. Now, from what I have been told years later, they had this formula for making chocolate. Later on. . . and they and Hershey had been friends or partners, or something, in the candy business. So my father worked for Day. . . during the summers, for the last two years he was in medical school, and later Day helped him in many other ways get on his feet. During the time my father was going to school. . .

Greenawalt: Let me just try to get this in some sort of time frame. When was your father born?

Holt: I think Papa was 62 when he died in '49. I think he began to practice medicine here in 1918. During this time, he also educated. . . he sent. . . at least he helped his brother and sister go through college; one later became an outstanding minister in AME Zion Church; the other came and was a teacher here, and both died relatively early of TB. Out of eight or nine children, my father was the only one who ever lived to get over fifty.

Greenawalt: . . . And then your mother?

Holt: . . . and my mother died in '64. They must have been married here in 1918.

Greenawalt: She was a local person?

Holt: No; she was from Nashville, and an interesting thing there: my father happened to meet my mother when she came. . . my grandfather, my maternal grandfather, Richardson, was this official in the Masons. The Masons had this big convention here, and at that time it was at Hopkins Chapel Church over on College Street and my mother came as her father's secretary, and that was when my father and mother met, and then a year or two later they got married.

Greenawalt: I think you touched on all of the various lines except your paternal grandmother.

Holt: I never knew anything about her at all. In fact, it's something my brothers and I have said that we are going to get together and start tracing down a lot of these things, if the three of us can agree on something.

Greenawalt: I've lost track here about how your father got to Asheville.

Holt: He was born in Asheville. His father came to Asheville as the head of this gang putting in the. . . they put down the ties, the wooden part of the railroad.

Greenawalt: The railroad coming from Swannanoa Gap into Asheville?

Holt: Coming up the mountain; apparently it came out of Spencer; out of Salisbury.

Greenawalt: Yes; it did.

Holt: So, for that day and time, as I understand it, he was very affluent in the black community, because I suspect, at that time that was, possibly, among the highest paid avenues open to a black person.

Greenawalt: Do you happen to know where your father was living in those years?

Holt: Yes. As a little boy, as the railroad used to go westward, there used to be a little shack that sat up on the hill. Just a little shack, maybe a little larger than this room, and that was where my father was born. As he grew older they lived in a larger house on Hill Street, and then later, a larger house on College Street, and I don't ever recall those.

Greenawalt: This leads us just about to your generation. You were born. . .

Holt: . . . September 5, 1921.

Greenawalt: Where do you come in the line of your siblings?

Holt: I was first.

Greenawalt: You were first. How many brothers and sisters do you have?

Holt: I have two.

Greenawalt: Sisters?

Holt: Two brothers. I was born in '21; my brother Charles was born in '23, and my brother Cecil was born, I think, in '26.

Greenawalt: Were you people born at home?

Holt: No; we all were born at the Blue Ridge Hospital

Greenawalt: Why don't you tell me about what sort of education you had in Asheville?

Holt: I think, to a certain extent, I had a somewhat unique education. We lived on College Street; on the corner of College and Furman. Directly across the street from our home was Hopkins Chapel Church. Diagonally across from our back yard was the Allen School. At that time Allen School was one of the excellent private schools for blacks in the whole country, but it was a girls' school. As I understand it, four of us were the first black boys to go to Allen School. I think I started school when I was either three-and-a-half or four, and went to Allen for the first three years, I think, then that was as far as they would allow boys to go, and I transferred from there to Mountain Street School, which is now Herring School, and from Mountain Street to Stephens-Lee, and I finished Stephens-Lee in '37. Then I went to Morgan State.

Greenawalt: Let's stop here for just a minute; you raised questions in my mind about the Allen School, and you might be able to answer. Did it have much of an impact in Asheville, or did it appeal chiefly to boarding students?

Holt: Over the years, ninety percent, probably, of the students . . . and this goes even 'way back. . . probably were boarding students, and yet, I think it was always considered in the black community here,



Holt: (Cont'd.) that it was a kind of special thing to go to Allen, versus the public school system. After I finished Allen, then they began to take boys. I think each class had a few more, and my youngest brother went all the way to the sixth grade at Allen.

Greenawalt: So Allen went through the twelfth?

Holt: Allen went through the twelfth, but took boys only to the sixth; that was the highest they allowed boys to go.

Greenawalt: I remember hearing the Allen choir at one time, and I guess it was quite active in going around to the various churches, singing.

Holt: Not only that; they had a reunion in the Summer of '78, and they had graduates in all kind of professional fields all over the world. Their graduates have really been outstanding. During the years Allen was running, it was considered to be one of the outstanding small, private, church-run schools available for blacks.

Greenawalt: It was a Methodist Church . . .?

Holt: Um,hum. Everybody knows it as Allen Center now, but those were the school buildings. They weren't the school buildings that I went to, but they were the school buildings they were using.

Greenawalt: What led you to pack your bag and take off to Maryland to Morgan State College?

Holt: At that time that was going North, and I just wanted to go North, and Morgan happened to be a very small school, and it was a church-affiliated Methodist school and there had been two other

Holt: (Cont'd.) fellows, Luther and Herbert Harding, from here had gone there and had done well, and although it was not my family's desire that I go, but that was what I wanted to do, and since I was just fourteen when I went, it was quite an experience.

Greenawalt: Did you find yourself unusually young at fourteen, or was that average?

Holt: No. There were two factors: I started. . . I was young, not necessarily bright, but I was young, but I started to school early, and at that time at Stephens-Lee you only went to eleven grades to graduate, and since I was born in September I was nineteen when I graduated. *[From Morgan State College]*

Greenawalt: What led your parents to put you, as a three-and-a-half-year-old boy into school? A lot of parents like to hold on a little bit longer than that.

Holt: One thing: my parents knew everyone at Allen; they were always over at our house, and my father was the physician to the school, and I was not the only one. There must have been eight or nine black boys that went in to the first grades with me at that time. They were all older than I, but I was a big boy for my age and I passed for being much older during the time I was at Morgan, too.

Greenawalt: Let's hold your career at Morgan for just a minute and back up and ask something about your father, who was practicing in Asheville at that time. You mentioned that he was school physician at Allen. What other sort of practice did he have?

Holt: He had a general practice in Asheville from the time he started until the time he died, but one of the unique things about my father. . . and this goes back to his history. . . as a boy, he and Dr. Pritchard worked together on the railroad, and became very good friends. Pritchard later came back to Asheville and became an outstanding surgeon, and Pritchard and Anderson founded Aston Park Hospital. There was an understanding, from what I remember my father telling me, that Pritchard had always said he was going to do this: he was going to have his own hospital, and when he had his hospital Pappa was going to be a member. This is an actual fact: my father was the first black person to be a full-fledged member of a private hospital in North Carolina, and he did that right up until, I guess, probably in the forties, when they opened the Asheville Colored Hospital and then they closed Aston Hospital to blacks at that time.

Greenawalt: Had Pritchard passed from the scene by then?

Holt: Pritchard passed very early, but Papa stayed on the staff, I guess, up until. . . in fact, I suspect he was even on the staff up until the time he died, but the historical tragedy thing was that he was the only black doctor who could admit and treat patients in that hospital.

Greenawalt: So he was the exception to the policy?

Holt: He was the exception to the policy, and yet it helped him in his medical practice tremendously. One thing: over the years he gave anesthesia for the hospital for all of the surgeons, and it threw him in close contact with this small group of doctors that worked there,

Holt: (Cont'd.) and probably made him a better doctor in his contemporary practice at that time. Some of the doctors. . . and I was not aware of this when I was growing up. . . but when I came back to Asheville, Dr. Belcher and Dr. Justice and Dr. Nailling (who knew my father very well; Papa helped Nailling get on his feet early in surgery) they all said that he was really an excellent physician, and an unusually astute diagnostician. I think this experience there helped him; it all came from this childhood friendship.

Greenawalt: What led him into anesthesiology-- at least, doing this part-time at the hospital?

Holt: He did it part-time during the hospital, and years later Dr. Ambler, who was the anesthesiologist here, told me that Papa was just fantastic with ether, and when the new things started to come out a group of them, surgeons there at Aston, tried to get him to go back and just go into anesthesiology, and yet, at that time, anesthesiology was not a specialty. At one time, I think, he went for a month to McGill, or something, in Canada. But it was never a major part of his practice. That gave him an indirect advantage over the other black physicians at that time and at one time Asheville had seven black physicians. During the time I was born, during those early years, there was a Blue Ridge Hospital located down on Clingman Avenue, and I think all of the black doctors at that time belonged there.

Greenawalt: Do you recall the names of these seven black doctors?

Holt: Later on, I think they reached seven, or thereabouts, in the early forties.

Greenawalt: I guess one of them would be Dr. L.O. Miller?

Holt: Dr. Miller and my father started off at about the same time. They even started as partners for the first year; that must have been around 1918. After that time they practiced separately, but remained good friends. Before they came back, there was Dr. Walker, who was my father's uncle; there was a Dr. Bryant, whose home was where Jesse Ray's funeral home is; Dr. Thompson, and apparently two or three others, whose names I don't recall, who were already practicing here in 1918 when Miller and Holt came. Following that, there was a Dr. White, Dr. Gallego, and later Dr. Harrison came for a while. He is still here. A Dr. Hoskins and Dr. Michael. Michael, Harrison and Hoskins left for World War II, and only Harrison. . . Harrison and Michael came back. . . I think at that time, the seven would have been Holt, Miller, Gallego, White, Harrison, Hoskins and Michael. But that was up in the thirties and forties. During the time, I'm not certain about the year, but whenever Aston Park started, which must have been in the twenties, I guess, then Papa was on the staff and sent his patients to Aston. The other black doctors, after the closing of the black hospital, the Blue Ridge Hospital, the other black doctors had to send their patients to Mission Hospital, but could not treat them. Years later, I think some of them got the privilege then of admitting patients and then following them through. But over those years, my father did have a unique advantage.

Greenawalt: Let's return to you at Morgan College. Did you ever

Greenawalt: (Cont'd.) have any doubt about what you would be?

Holt: Oh, yes; (though I was big, I really was out of . . . I was the only one in my class from the South, and) I had an ambivalence that everybody in the family. (. . my father) assumed that I wanted to be a physician, and I guess maybe subconsciously I did, but the things I had seen. . . I had seen how hard he worked and I had seen him cry when people would die. Things like that. And I really had wanted no part of it, but a peculiar thing happened: when I finished Morgan I was accepted to Howard University Medical School, but at that time you had to be twenty-one, and I was only nineteen, so they accepted me for two years later, and this was right during the beginning of World War II, so, very cockily, I guess, I thought that was a kind of insult. You know how you are when you are eighteen, twenty, (through there. . .) you think you know it all. But I couldn't come back home, because my father was the examining doctor who was sending all these boys off to the war, and it was hard to explain that I was three and four years younger than most of my classmates had been, who had finished school here. So, therefore, in '42 I went to Western Reserve to school and I was there two years, and I was sent by the army to the University of Michigan for a year on the A.S.T.P. program.

Greenawalt: A.S.T.P.?

Holt: Yes; it was the army training. . . Army Specialized Training Program for World War II. I was there when the war ended; then I went to Brown University for two years on a fellowship.

Greenawalt: What were you studying at Brown?

Holt: Physiology; I finished my work on my doctorate at Brown and couldn't find a job. At that time there were only two places in the country that used black physiologists, or had any need for them, and that was Howard and Meharry. . . medical schools. So I ended up going to Texas to teach.

Greenawalt: Teaching where in Texas?

Holt: I taught at Butler College. . . that must have been about '48. . . '47. Then I taught three years at Tillotson College in Austin, Texas, and was head of the chemistry department there. Then in '51 I went to Jackson College in Jackson, Mississippi, which was the black state school, and helped set up the chemistry department out there. I stayed there a year, and that was when I decided I really wanted to study medicine after all, and the following year I went to Meharry, in '52.

Greenawalt: Did you spend the traditional three years there?

Holt: No; I spent four years at Meharry, and I finished at Meharry in '56. Then I interned at Chester County Hospital in Westchester for a year; then I spent two years in psychiatry at Embreeville State Hospital. . . No; I spent a year in cardiology at Hahnemann.

Greenawalt: In Philadelphia?

Holt: In Philadelphia; then two years at Embreeville; really three, but my third year at Embreeville they lost their accreditation.

Greenawalt: Where is Embreeville?

Holt: Embreeville is about ten miles from Westchester; between Westchester and Coatesville, and it was the experimental hospital for mental illness for the state of Pennsylvania. At that time it was one of the three leading hospitals in the country in drug therapy. It was far ahead of its time.

Greenawalt: While you were doing a lot of this study in Pennsylvania, at Brown, and elsewhere, had you made up your mind to return to Asheville?

Holt: No; I returned to Asheville as a necessity. I was in my third year at Embreeville when the letter came stating that I had borrowed money from the state to finish medical school. . . this was from the North Carolina Medical Commission. . . and the agreement was that they charged you no interest the first year, and then started charging interest after your first year. I had been going on about five years. . . the internship; then I spent a year at Hahnemann, and I was on my third year at Embreeville, and by then I owed them . . . you know the interest went from eight to sixteen percent. . . so for the four or five thousand dollars I borrowed from them I owed them about eight or ten, and they told me they would send the marshals for me if I didn't come back to North Carolina to practice. So, in coming here, the agreement was you had to practice in a rural area of less than ten thousand, so the thing I worked out with them: at that time there was only one black doctor here and that was Dr. Harrison, I worked out that I could come to Asheville providing I had an office in Arden, so I had to set up an office in Arden and go once a week



Holt: (Cont'd.) there, and then set up an office here. Had it not been for that, I would have gone into psychiatry. The third year I was at Embreeville, when they lost their accreditation and I was the senior resident, then I became director of research, and that was during the time when A.S.T.O. mono-amino oxidase inhibitors were becoming the thing to use in treatment of depression. Some of the research work that we did there that was published in the American Journal of Psychiatry was the outstanding thing, for about four years, that had been done on a comparative basis of the four drugs that had been used at that time.

But once I got here, my plan was to come, work a couple of years, pay the state off, and go back. But I had underestimated the fact that you cannot raise a family and pay off any ten thousand dollars in two years. Then I began to get involved in other things here, and the family didn't want to move, and so forth, and I just got stuck.

Greenawalt: What year was it that you returned to Asheville?

Holt: Sixty-one.

Greenawalt: Sixty-one; and by then you had met your wife and had a family already started?

Holt: Yes.

Greenawalt: I want to make sure I don't get by this. Tell me something about how you met her.

Holt: I met my wife while I was at Meharry, so I must have met her in about '53; we must have gotten married in '56. It must

Holt: (Cont'd.) have been '58 when Johnny was born, because I was still in Westchester. That's my oldest boy. Then two years later, I guess about '64, my youngest boy was born here. My wife . . . [inaudible]. . . daughter who was eight, that I adopted, Jackie, so we have a family of three.

Greenawalt: You established a practice in Asheville then under some duress.

Holt: Yes; it worked both ways. It was fantastic how many people remember my father, and it seemed to me that apparently at some time or another my father must have treated about every black person in Asheville. (So, from nearly the day I . . .).

[End of Side A, Tape I]

[Side B, Tape I]

Greenawalt: That was a very fortunate position to be in, I suppose.

Holt: From that point of view, and yet I really left something that I had become interested in and was becoming really talented in when I left psychiatry.

Greenawalt: Was it much of a culture shock, if I may use that word, coming from that part of Pennsylvania to Asheville in 1960 or '61?

Holt: Yes; particularly since I had spent nearly all of my adult life in schools, in academic atmospheres; either going to schools or teaching. The atmosphere, even at Embreeville, was more scholarly. Really, it was more like a college campus than a hospital.

Holt: (Cont'd.) To a certain extent, it reminded you kind of like Highland, here. On the other hand, it was not the shock that you might expect, because I really was coming home, where I was pretty well known, and saw quite a few people who I had gone back to school with. Every year, during all of these years, I would always come home in the summer time. I did come at a time when apparently another black physician was needed.

Greenawalt: How many black physicians were there in 1961?

Holt: One.

Greenawalt: Just one; that's amazing that earlier there had been seven, and by 1961 the number had been pared back to two, with your addition. What was responsible for that?

Holt: Many things. This was one of the things Illinois State had been investigating, as of '75. In 1940-something there were around three hundred and fifty black physicians in North Carolina; in 1975 there were about one hundred and twenty-five. Among the things: older doctors would die off; younger doctors would not want to go to small towns; this thing. . . many of the younger doctors would borrow money from the state, and rather than come back and have to go to some place less than a population of ten thousand, they would just borrow the money and pay the state back. . . or even not pay the state back, but wouldn't come back. That was an important factor.

There are other factors. One main one here in Asheville: the income of physicians in Asheville or in the Western part of the

Holt: (Cont'd.) state not as high as those in more industrialized areas in the Eastern part of the state, so therefore it wouldn't be particularly attractive. During that time there was very little social outlet for black professionals in Asheville, so it was not necessarily an attractive place if you had options to decide to come.

Greenawalt: Maybe we can rely on your memory of some of the earlier medical conditions in Asheville. What I would like to do is turn to the subject of health care available for blacks, and maybe back up here again. . . and we've already mentioned a few hospitals that were in existence, and I know that you were not, perhaps, personally affiliated with any of these, yet you may have some family memories, or whatever, that would help. There is an elusive hospital that some people. . . a lot of people don't seem to know about, and that was the Torrence Hospital, which was founded, I think, around 1915, on Hill Street. Do you happen to recall anything about that?

Holt: No.

Greenawalt: It was founded by Dr. William Green Torrence, and, as I say, it's elusive, I've not been able to find much about it.

Holt: That's the first time I've really ever heard of it, but I do remember the one . . . Blue Ridge.

Greenawalt: Let's turn to the Blue Ridge Hospital, then. You said that was on Clingman Avenue?

Holt: Yes.

Greenawalt: Apparently it was begun around 1922.

Holt:           Something like that, and I only remember . . . I remember where it was; I remember it was a white stucco building, and in later years I met several of the nurses that had worked there, but that was during my very early years, and that was about the extent that I remember, really.

Now I remember more vividly when my father and some others were working very hard to set up the Asheville Colored Hospital. I think Papa was the first Chief of Staff. I remember making several trips with him when we were looking for a Superintendent of Nurses. One of the significant things at the Asheville Colored Hospital, incidentally: this whole hospital had been the personal home of Dr. Bryant, who was one of the early black physicians here.

It is my understanding that there was a good working relation between the white and black doctors at the Asheville Colored Hospital. I don't remember it, and was never involved in it, since it was closed by the time I came here, but for its day and time, it certainly was not comparable to the larger black hospitals we had throughout the East.

I think the decision of Aston Park and the coming of the war, I think there were many factors that led to it developing, behind which was that they wanted to get the black doctors out of Mission Hospital.

Greenawalt: Out of Mission?

Holt:           Out of Mission. I don't think it involved my father;

Holt: (Cont'd.) in fact, I know it didn't involve my father at Aston Park, because when Pritchard left, this was a lifetime thing that he had at Aston Park. Not having been on the scene, and never having talked with anyone in detail, but Dr. Harrison probably is the only person I know who would know some of the facts on why they decided to develop and have an Asheville Colored Hospital.

Greenawalt: Is Dr. Harrison retired?

Holt: He's semi-retired; he's very alert, and I think he works two or three hours a day whenever he feels like it.

Greenawalt: Do you know when the Asheville Colored Hospital was founded?

Holt: It must have been about '44.

Greenawalt: Do you remember any of the founders? Was that the hospital that Mary Shuford had?

Holt: No. It was founded by the whole group of physicians, and it was a cooperative venture of black and white physicians, as I understand it.

Greenawalt: Yet, at that time, in, say, 1943, black physicians were in Memorial Mission Hospital.

Holt: They were admitting patients, but not attending them.

Greenawalt: Not attending them; so this gave black physicians, then, the only opportunity to attend hospital patients?

Holt: As I understand it.

Greenawalt: Was that hospital sufficient to care for the health needs

Greenawalt: (Cont'd.) of the people?

Holt: No.

Greenawalt: Were the people knocking at the door, and yet there were no beds?

Holt: I really don't know. I think Papa still admitted patients to Aston Park, and I think, for certain types of surgeries and things they still were being admitted by white doctors to the Mission Hospital, but you could well imagine that. . . I imagine there couldn't have been more than twenty rooms.

Greenawalt: By the time you came on the scene in 1960, had all that changed?

Holt: All that had changed; there was no colored hospital. When I came, I applied for privileges at Mission Hospital. I had no problems with any privileges. In fact, when they found out my background in psychiatry, I was put on the mental health roster. Everything I applied for was approved. This was considerably different from what black doctors were experiencing (throughout) in other parts of the state.

When I went to the first Illinois State meeting and told them that I went to Asheville and applied for privileges; they were given to me. If anything, I was given duties and things that I didn't even want; had not been particularly experienced in. They even gave me privileges in obstetrics, and that was something I hadn't done in years. So, I really had no personal problems. On the other hand, this was a time when patients were racially segregated, and all black

Holt: (Cont'd.) patients were segregated in the old Victoria wing of Mission Hospital. I began taking emergency calls, and I, even in that day and time, I really don't recall any incidents of personal discrimination, <sup>that I recall vividly,</sup> particularly, not with physicians.

Greenawalt: Was the old North State Medical Society a parallel organization to a white organization in the state?

Holt: No; the Old North State Medical Society was started, I think it was founded in 1887, and had been the society for black physicians for the state ever since. Blacks were only admitted to North Carolina Medical Society, I think on a scientific basis, in 1962. So it must have been like '64 or '65 before a black could be a full member of the North Carolina Medical Association.

Greenawalt: So, in other words, when you came here in '61 you could not belong to this other organization.

Holt: No.

Greenawalt: How did that barrier crumble? Was it due to pressure from physicians?

Holt: I had no problem at all joining the Buncombe County Medical Society. The Old North State had been fighting for membership and for recognition, for years. This was during the time of Hill-Burton funds, and at that time, federal funds to build hospitals, et cetera; they all had to come from the Hill-Burton Act. By getting this non-discriminatory clause in that, in my opinion, that was the first big step in breaking down the segregated pattern in hospitals. I believe, and I'm not certain about this, but I believe the A.M.A.



Holt: (Cont'd.) came out with this thing that component state societies could not discriminate racially. I think that was the thing that finally opened up full membership to any licensed doctors in the state. When I came there was a thing that if you belonged to your county medical society, and there were counties in the state where blacks couldn't even belong to the county medical society, if you belonged to the county medical society at that time you could be a scientific member, but not a full member. In other words, you were not entitled to come to any of the social affairs. Then later on, even after I was a member of the North Carolina Medical Association, and the Old North State, and the Buncombe County, there was one time when they had traditionally met at Grove Park Inn, and when they found out there was a black in the organization they cancelled and had to have it somewhere else.

Greenawalt: What did the Association do, transfer it to another. . .

Holt: They transferred it, I believe, to the Greek Center. Then there was a time when I understand they had it, I think one year they were going to have it at Biltmore Forest Country Club and it was cancelled because at that time Otis Michael and Vincent and I belonged. Now, I think of course, there would be no problem. Since then there have been Buncombe County Medical Society meetings at Grove Park and there has been no problem.

Greenawalt: Let me turn from medicine for a minute and ask you what other associations have been important to you in your life.

Holt: Since coming back?

Greenawalt: Yes.

Holt: I guess I had been here two years, and I'm really certain it happened this way, essentially, Weldon Weir appointed me to the Asheville Housing Authority. This was my first introduction to civic affairs, and it was at an important time because the revitalization and urban renewal was just starting. Joe Schandler, the optometrist, was head of the Board at that time. One of the members was Professor of Sociology out at U.N.C.-A.; I can't recall his name. We had a five-man board and it was a very unusual experience; it was a very unusual board. We went all the way to Washington and had the support, incidentally, of the City, and told them we rejected the idea of building barracks, barrack-type public housing, and we were among (if not the first) we were among the first public house groups to be told: "Well, then, you come up and let us know what you want." We traveled seven or eight different cities trying to find unique plans and ideas. That was when the idea of the Erskine project and the high-rise there on Clingman. . .

Greenawalt: Clingman or South French Broad?

Holt: South French Broad. . . and came up with those two ideas. I think we saw something like that in Jacksonville, Florida, and somewhere, maybe Atlanta. Then we had to fight for a couple of years because of cost, but finally got those two projects approved and they later each received awards, architectural awards, as being among the nicest in the Southeast. So I was on that during this very important period of about three years. Then I got appointed

Holt: (Cont'd.) to the school board, and I guess that must have been about '67. During that time we began to have some unrest in the schools, and so forth. I was on the original Human Rights Commission. This was a time when that organization became vital, really, to the community, and that was interesting.

Greenawalt: When you were serving on the school board and the Human Rights Commission were you in close contact with many members of the black community?

Holt: Yes.

Greenawalt: Were there any challengers within the ranks who thought that you weren't representing them well?

Holt: Two vivid things: once we had disruption at Asheville High, and we had this meeting, and oh, gosh, they called me all kinds of names, from Oreos to something. . . you name it. But that night they came back and said, "Oh, Doctor, we all know it really wasn't anything personal, it just happened that we had to do our thing." I imagine, during that time, it was not an unusual thing for me to have bomb threats, people were going to put bombs in my car, and all that.

Greenawalt: These were from what, blacks or whites?

Holt: From blacks.

Greenawalt: Because you were not. . . ?

Holt: There was always a group that would feel that. . . at that time the popular thing was to talk out. . . or however you want

Holt: (Cont'd.) to put it. I have never been most effective just talking; I think, nearly all that I've accomplished, then, and even now, is probably done more on a person to person basis. Public statements are good if you know what you're talking about, and I used to like to know background, and maybe hear two points of view before coming to an opinion, and that was not very popular at that time.

On the other hand, I think there has always been a significant area in the black community who felt that I have always tried to promote things. This probably came from two-fold, not necessarily just seeing what happened, because whatever happens you are always working on it a year or two ahead of time, but from the fact that I don't think in all these years anyone has ever come to me saying something personally that they were involved in with the schools, or jobs, or something, that I didn't try to do something about it: call somebody, or do something.

I think the word got out, though, that I was not militant, I would try to help, or I would have contacts; that type of thing. So it was never a deeply threatening thing during those years. I had threats; I had people who accused me of doing nothing. I think I was significant in the integration of the schools here, which was unique, because we did it all at one sweep, when it was not a popular thing to do. But that was the culmination of three or four month, two or three times a week meetings, and . . .

Greenawalt: Your practice was suffering a little bit during that period, wasn't it?

Holt: Yes; but never to the extent where you really suffered, you know, you get behind in your bills. . . I'm probably going to owe bills as long as I live, so it really made no big difference. That, I think, might have been my most challenging and possibly most difficult thing, because it was an ambivalent situation because you knew you were getting rid of the black schools.

With all the compromises that we made to go through this integration of our system, it was the black community and the black schools that really took the brunt. We closed two of the best schools that we had in the system, Livingstone and Herring. Herring was virtually a new school. Ninety percent of all of the bussing had to be done of blacks to white suburbia, or white schools, but that was the pattern, or still is the pattern. Many places are going through it now. But that was the pattern, and that did just cause considerable dissension in the black community, and I was the one in-between because I was possibly the catalyst, fighting that we just do it all now instead of this fighting H.E.W. each year, and doing a little bit. Yet I understood what the blacks, what we were feeling, too, in our communities, because blacks are no different than anybody else.

Your neighborhood school does give your neighborhood a certain status; it is the focal place of community life, and so

Holt: (Cont'd.) forth, and was more so then, maybe, than now.

Greenawalt: In spite of occasional fist fights and complaints, in -- especially the high school, the integration of schools and, for that matter, restaurants, was relatively peaceful and quiet, especially if we compare it to other parts of the country. How do you explain that?

Holt: Very simply: the approach that, once our school board got together, and incidentally, this involved one of the remarkable things I ever experienced, the chairman of our school board at that time was . . . I can't remember his name.

Greenawalt: Funderburk?

Holt: No; he is a chemist, and he was an avowed racist. That was what I understood when I went on the school board and he was outspoken. . . Phil Sales. During this three months of these discussions and arguments, and so forth, we'd get to the place we'd call each other all kind of names, and Phil Sales changed, and that was the change in the vote that we would just de-segregate our whole system. . .it was Phil Sales. He went from one extreme. . . and when he finally decided that this really is the right thing to do, and we'd been unfair, then he was just as strong on this other side.

So the reason we did it better here, possibly, than any place in North Carolina at that time, and it was because the essence of the change came from the school board. And it came: "This is what we're going to do; this is the way we're going to do it." Also there

Holt: (Cont'd.) was support from the news media, and all, too.

There was later a book, during that time there was a book, called A.B.C., or. . . anyhow, the book brought out: where your authoritative body just goes on and does something, and says, "This is it." It worked. Where you went about it piecemeal, and you were having this study done and that study done, and all, that was where you had your bigger problems. So I think that had a lot to do with why things went more peacefully here.

Greenawalt: What do you think converted Sales, just the logic of the situation or these long meetings you were having?

Holt: Phil Sales is a very religious man; he is outstanding in the Methodist Church, and he grew up just believing that segregation was right, not necessarily discrimination, but he never realized that the two were involved together. In our discussions, and he is a great reader, and when he got to reading about some of these things and then began to realize that over the years Asheville High had received three or four times as much money as Stephens-Lee had received for training approximately the same number of students. I think many of these things just caused them to change. Also, Keleher changed. Keleher, I don't think, ever had a racist philosophy.

Greenawalt: Is this Doctor, or. . .

Holt: Yes. . . but he came from the North, and he actually had very little black experience. He once told me that. . . I sent him a book called, The Negro American. . . Lee Charles, a friend of mine

Holt: (Cont'd.) at Morgan, was co-author. He later told me he didn't realize that blacks had fought in the Revolutionary War. About the oldest black person he could remember reading about was George Washington Carver. His attitude was that we had come over here on a kind of "freebie" and blacks were kind of shiftless, and that was the reason that they hadn't done better. When he began to particularly tell me his impressions when he read that Frederick Douglas was saying before Congress in 1880-something some of the same things we were saying in the 1960's, and he changed.

Much of what I think I have been able to accomplish, one way or another, has been more on an individual basis, versus the more publicized impression of a public official.

The other thing: I think I was the first black on the Executive Board of the Chamber of Commerce. This introduced me to a whole new world of community and civic activity. I think I was like many people. You imagine Chamber of Commerce composed of a lot of industrialists and pretty wealthy people who kind of look out for themselves, and I found that this was not necessarily true, that generally, right down the line they are concerned about the community. I think I was on that for either three or four years. That was a very significant experience for me.

Greenawalt: From time to time, you have mentioned the A.M.E. Church. Has the church played any role in your upbringing?

Holt: Not particularly; I still am a member and on the Trustee



Holt: (Cont'd.) Board of Hopkins Chapel church, where I grew up, where my family grew up, but I don't think the church has had any unusual influence on me one way or another.

Greenawalt: Did you ever have any association with the Y.M.I. building?

Holt: Yes; I belonged to it. My father's office was in the upstairs of the Y.M.I. building for, I guess, thirty-some years. I was active with the Y.M.C.A.; just on the board, but nothing unusual happened.

Greenawalt: Maybe, before I wear you out completely, I could return for a few minutes to the subject of medicine, as such. In some parts of the country there was a dispensary movement, or the appearance of neighborhood clinics to treat particular neighborhoods. Has that ever occurred in Asheville?

Holt: Since I have been back, it has not, with the one exception, and this was very significant. Model Cities, when Model Cities was operating, had this community health center over on Phifer Street, and it took them a year, and probably a good million dollars, to get it developed, but by the second year they were treating as many as a hundred and fifty people a day. They had full-time doctors; it was well-equipped. They had vans to go and bring the people in and out. I happen to know something about this because I was on the board. I think, the third year of it, as Model Cities was being phased out, the City was going to support it; Appalachian Regional Fund was going to support it, and the County Commissioners decided not to support it.

Holt: (Cont'd.) Later on we found out it was nearly personally Curtis Ratcliff, who went all the way to the state level to get it defeated, since for it to stay in existence they had to have three sources of funds. At that time, it was one of the best examples of the neighborhood clinic that I have seen, and it was considered to be one of the best in North Carolina.

This was done with Federal funds, when the Federal funds. . . well, even the City funds were Federal funds, and since then there has been no attempt at it, and I don't think there has been any attempt within the black community, with the exception of Dr. Shuford's efforts, to have any kind of clinic.

Greenawalt: Do you feel as if the clinic does have something to offer, the clinic idea?

Holt: I think the clinic idea has a lot to offer, providing it could be funded to the point where it could at least offer adequate care. The Oak Street Clinic was the follow-up of the Model Cities.

Greenawalt: That's the one in the Baptist Church?

Holt: That's the one in the Baptist Church. This, <sup>the model clinic</sup> was a full-time thing, and they had funds for everything. They could go by and pick up the old people; bring them . . . and then take them back home, et cetera. I think that the black communities generally, and I think the errors in the black community are here that are no different, can thrive on certain neighborhood clinic-type concepts for three reasons: one, of transportation; two, your concept of your tremendously

Holt: (Cont'd.) large hospital, the metropolitan hospital(Mission). . . it is a frightening thing to the average person to have to go to the Emergency Room. It is an alien experience to be treated as a thing, you go in, and this is more frightening, not just because you're black, but it is more frightening to the person generally on your lower educational, economic role, who hasn't been thrown into this type of huge conglomeration. Therefore, many people, and I'm saying "black" because I just think there are more of us, but it applies to whites or anybody else, rather than go through this kind of experience just stay home and get sicker, or die.

Whereas, the neighborhood clinic idea, where it was smaller, you were coming in contact with one doctor who was going to follow you; you were coming in contact with the same nurse every time; they had home visiting nurses; it was a friendly atmosphere where the average person could more easily identify and adjust.

And your hospitals are just getting bigger, and it is a frightening experience.

Greenawalt: I think everyone looks forward with dread to a visit to the emergency clinic.

Holt: Emergency clinic or emergency room. . . and the two. . . well, we have this medical clinic here that I'm active in, and it means that two or three doctors are going to see seventy or eighty people in one morning and two or three hours. . .and then, since you're donating your time, and with this kind of quantitative pressure

Holt: (Cont'd.) on you, you can see you can't accomplish very much. That's a medical clinic. On the other hand, you're going to the Emergency Room. You could go to the Emergency Room and you figure you have a bad cold, and maybe you've had it before and you say, "Better go and have something done," and it costs you sixteen dollars before anybody does anything. . . just to register.

Because of the pressures on us, particularly in the Emergency Room, before the doctor sees you he's probably going to order a chest X-ray and a white blood count. Therefore, it's already forty-some dollars and nobody's even seen you.

Greenawalt: Is that the third advantage of the clinic?

Holt: This is what I was getting back to. Then by the time the doctor sees you, that's another twenty; then by the time they give you some medicine, and they are certain just to give you a prescription, so you end up with a sixty or seventy dollar bill, and maybe you did have pneumonia, or even maybe it was just a bad cold. Maybe you went expecting to pay twenty or thirty dollars, but when they tell you your bill is seventy dollars, you're subject to go out and not pay anything. So this was an advantage that was well-established in the '70's with this Model Cities clinic thing. It has been re-established all over the North. I was in Detroit this summer where they had many H.M.O.'s, health maintenance organizations, which are nearly like clinics, big clinic set-ups, and this is a mechanism that not only probably saves money, but brings a

Holt: (Cont'd.) whole lot of people into your health care system who ordinarily are left out or would have a very difficult time getting into it.

Greenawalt: Sounds like an idea whose time has come, but such ideas often arrive late in Asheville.

Holt: Not only in Asheville, but in many sections. For instance, the A.M.A. is against any kind of national health insurance.  
[End of Tape I, Side B]

[Tape II, Side A]

Holt: (Cont'd.) We were down in Chapel Hill. . . President of North Carolina Medical Association. . . we were there to select Morehead Medical Fellows, and he was telling me that that was against all traditions of American medicine. I told him that was not necessarily true, that right now, white physicians, black physicians, and even some well-off physicians who are 'weller-off' are thriving on Medicare and Medicaid. Yet, for years the A.M.A. fought right down the line against Medicare. They said it was going to bankrupt the world. They also fought against Social Security, too. I don't know how, or whether it would be a combination of these plans, but somewhere along the line in the next five years we are going to have a national health insurance plan.

Greenawalt: You've sort of led into this next question, which was to ask your opinion about the impact of Medicare and Medicaid on the

Greenawalt: (Cont'd.) practice of medicine.

Holt: It has helped the medical profession, generally, as well as it has helped your older and poor population. Right now, I think I am among a very few physicians in this area who see Medicaid patients in the office. The reason is: you get paid one-third of the cost. But any doctor is going to see a Medicaid or Medicare patient in the hospital; you don't find many of them turning them down. And now, whereas many doctors didn't realize it ten years ago, more and more of your population is getting older and older, and ninety percent of them are covered by Medicare, and Medicare pays generally your usual and customary fees, and I don't think you're going to find. . . out of three hundred doctors in this area, I'll bet you won't find twenty-five who don't treat Medicare patients.

Greenawalt: But shockingly few treat Medicaid.

Holt: The Medicaid system: something has to be done so that poor people can have accessibility, availability, and affordability to medical care. Right now it's the only thing we have. Now you have lots of doctors who don't have to treat poor people, because their practice just doesn't involve it, at all. They don't need the patients and they don't have to be bothered with them. But some of us, and I think more of the younger doctors feel this, regardless of what kind of practice you have or how much money you make, or how affluent you are, you still owe something to those who are less fortunate, and your Medicaid is your mechanism. Now I don't think there are a whole lot of doctors who would refuse to

Holt: (Cont'd.) treat a Medicaid patient in the hospital, whether they bill for it or not, but they just don't want to be bothered with them afterwards.

This is not a one-sided thing. There are good reasons not to be bothered with Medicaid. I have to pay a whole half-time secretary, just dealing with Medicaid, the forms are so difficult. You might hear from them in three or four months, then you find out you sent them a bill for nine dollars for lab, and they might approve three, and it has cost you six.

Generally, black doctors have supported Medicaid, because more of our patients have to depend upon Medicaid for their health care. I think that's over-simplifying it, and we could expand that, but basically Medicaid and Medicare have made a big difference to the physician; they have made a big difference to your older Americans, black, white, or whatever.

Greenawalt: Do you think it has improved the health of people?

Holt: It has had to improve the health of people, because our longevity keeps going up, and it has mechanisms where at least a poor person can be brought into the health care system. American health care system is somewhat unique. Once, if you can get brought into it and put on the conveyor, the conveyor can take you right on to whatever you need, whether you have money or not.

Six months ago I had a boy I picked up in the Emergency Room; thirty-eight, emphysema. He had to go into the Intensive Care; he had to have dialysis later on; he had an AV shot by the cardiologist.

Holt: (Cont'd.) He ended up staying in Intensive Care for nearly three weeks and in the hospital for five days. I think everything was done for him that could have been done had he been wealthy, and the only thing he had was Medicaid. Of course, nobody was paid any usual fees, or anything, but the thing that Medicaid has done, it has gotten many poor people into the . . . if you can get access to a primary care doctor, or either through the Emergency Room, at least it gets you onto this conveyor to what you need.

Greenawalt: Earlier, you predicted the appearance of a national health program within the next five or ten years. Is that something you would personally support?

Holt: I would personally support it, and National Medical Association, which is our black medical association, supports it. Now, we don't currently endorse the Carter Plan, or the Kennedy Plan, or the Long Plan, but we think it's just an idea whose time has come. It is going to be needed if we are to bring in and make accessible and available much of medicine. . .nearly all of the new things in medicine are expensive. . .and if we are going to bring more people into it, we are going to nearly have to go this way.

Going the private insurance route, which I know the A.M.A. kind of supports, and the Republican Party, and many people kind of support. . .an article I read the other day. . . have you seen it? The catastrophic policy that is presently presented by five of the big insurance companies. For eighteen hundred dollars a year you can get complete coverage. Which means that whoever wrote that



Dr. Holt: (Cont'd.) is not aware that we've got millions of people, particularly old, retired people, who may only get two thousand dollars a year to live on.

Greenawalt: Eighteen hundred dollars a year!

Holt: Yes, sir! I complain about paying eighteen hundred dollars a year for an insurance policy; I suspect you would, too! You might consider it necessary, and you might put it in your budget, but to say that this is available to the average person, and therefore, all they've got to do is just go out and get them a job, or something, and this is reasonable. That doesn't make sense.

If there is anything American that is ideally American, it should be the idea that as you make it, or as you become a little more affluent, a little more financially successful, you ought to carry with you the responsibility for the guy who doesn't make it, or at least some responsibility. I think we'll have the national health ~~thing~~ within the next five years. I don't think we're going to have it this year, because this is an election year, but I think if Carter is re-elected, if Kennedy is elected, or even if we get a Republican in; this will be one of the first things done in the first year of the next election.

Greenawalt: Certainly, in the meantime, the health of the American people is not the best as it could be; certainly our infant mortality rate is, in comparison to other countries, slipping.

Holt: Well, it is not because of lack of scientific know-how; it is not because of training, but it is the delivery system, still

Holt: (Cont'd.) based on those three factors: accessibility, availability. . . you'd have a much better chance of getting something done for you if you live even in a big city, in the "inner city." At least, everybody knows where there's an ambulance and an emergency room. But your concentration of doctors . . . your direction is still going in areas of specialization, concentration. It's where doctors can live more comfortably, so your accessibility to physicians is not ideal. Even if they are accessible, they're not always available; and even if they are available, they may not be affordable, so something has to give, and this is the only way that I know that it can go.

Greenawalt: Dr. Holt, let me ask this last question: The Southern Highlands Research Center has an interest in the mountain areas as a unique part of America, so the question occurs to me whether the practice of medicine in a mountain community such as Asheville has, in your opinion, differed from practice elsewhere because of the characteristics of the mountain people.

Holt: Now, or in the past, or both?

Greenawalt: Well, in your own experience.

Holt: In my experience, in my historical experience, my father treated many, many. . . he had many hillbillies, the true hillbillies that lived up two, three, four, five miles up in the mountains. . . and this was 'way back. When my father died, a guy came and brought us a check for a thousand dollars. He said, "I'm the one who, when you-all were little boys, I used to bring a cord of wood every year." He said, "Your father, many times

Holt: (Cont'd.) used to come up the mountains; he delivered two or three of my children." That type of thing is gone. The practice of medicine in Asheville and in Buncombe County is basically comparable to your practice of medicine in any other big city in the state. Where there are differences being made: they are developing clinics in Hot Springs, and in several other small areas in the Western part of North Carolina, that would be more accessible to your mountaineers.

I use "hillbilly" really as a positive term, meaning somebody that lives away up, kind of isolated in the mountains.

So, this is relatively new. Your big hospitals here in Asheville operate nearly no differently than big hospitals anywhere else.

Greenawalt: One thing struck me, and I'm not sure whether this is a characteristic of the region or not, but when my wife's aunt, or someone, was ill in Spruce Pine, in the Spruce Pine hospital, the family just moved into the room and stayed with her, at least one representative of the family. And since that time, I've had the chance to do that for my daughter here at Memorial Mission, and it struck me, that at least in the Philadelphia area, where I was familiar with, that sort of the whole idea of the family staying over night in a room was just something that would never occur or be permitted.

Holt: It wouldn't have been permitted here five years ago, either. This is possible at Mission and at St. Joseph's too. Not

Holt:(Cont'd.) automatically, but it is possible. If the doctor says, "Let them do it," it can be done. I'm not certain that this is unique to the mountains; I think it has a whole lot to do with your attitude of your medical staff in a particular area, and an attitude of your board and administration in a particular hospital. It could well be . . . now I happen to know about the two big hospitals here. It is possible that you could change your board of trustees and maybe it would not be possible, even here. I think this is more a change in the times, and not necessarily a mountain, oh. . . a mountain feeling characteristic.

Greenawalt: Have there been any special problems in treating blacks?

Holt: Yes.

Greenawalt: Any special health problems, or. . . ?

Holt: Yes; first, I'd qualify that and say, not necessarily unusual. One: blacks have this high incidence of hypertension, which can lead to strokes and heart disease, kidney disease, and so forth. So, therefore, there is an attitude that many white doctors have, that all blacks have can only have primary hypertension, and that we don't have secondary hypertension that you might find more among whites. Of course that is not true.

When I came in practice they used to just say that blacks could not have pernicious anemia. Well, an American black is not. . . big difference in an American black and one that you've got out of Africa. Most of us didn't just get automatically light from sunlight. Then there are such things as sickle cell traits, sickle cell anemia,

Holt: (Cont'd.) which are more common among blacks.

Greenawalt: Is there much of that in the Asheville area?

Holt: Six or seven years ago, when we did this screening, we screened six hundred people with hemoglobin electrophoresis, which is your diagnostic thing, and I think we came upon something like six people demonstrated to have sickle cell anemia, and maybe sixty that had sickle cell trait, which is not ~~any~~ synonymous; some people don't even consider it a disease.

Greenawalt: That's six percent, then.

Holt: . . .[inaudible]. . . it is not a big problem. Now there are even funds available if . . . that could treat sickle cell disease. So, generally, I would think the biggest problem in the black community, as far as medicine is concerned, is accessibility, being able to get into a program, being able to get to a doctor.

Greenawalt: Well, Dr. Holt, I would like to thank you very much for all of this time on your day off. . . and I feel that this will. . .

Holt: It has been relaxing to me and I've enjoyed it.

Greenawalt: Thank you, very much.