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**The Foundation for the  
History of Women in Medicine**

**The Renaissance Woman in Medicine Oral History Project**

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**Gene-Ann Polk, MD**

**Foundation Board Member Emeritus  
Professor Emerita, Clinical Pediatrics, Columbia University**

**Interview Session One  
8 December 2014**

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## Gene-Ann Polk, MD

### Interview Profile

This three-session interview with pediatrician, Dr. Gene-Ann Polk (b. 3 October 1926, Roselle, New Jersey; d. 3 January 2015, Lafayette Hill, Pennsylvania) is conducted in December of 2014 (total duration 5 hours 30 minutes). From 1953 to 1994, Dr. Polk worked at Harlem Hospital in New York City, as well as serving other roles in the early part of her career. At Harlem Hospital, her career included roles as a physician and administrator. In 1962, when Harlem Hospital was affiliated with Columbia University, she became joined the Columbia faculty and retired as a professor Emerita. Dr. Polk joined the Board of the Foundation for the History of Women in Medicine in 2006. She is now Board Member emeritus. The interview is conducted at Dr. Polk's home in Lafayette Hill, Pennsylvania. Tacey A. Rosolowski, Ph.D. is the interviewer.<sup>1</sup> Dr. Polk's daughter, Carol Penn, is present during two of the interview sessions and videotapes them. Carol Penn, Dr. Polk's husband, Edwin C. Horne, DDS, and her longtime friend, Gloria Twine Chisum, PhD, are present during part of the third session.

Dr. Polk received her BA from Oberlin College in 1948 and her MD from Woman's Medical College of Pennsylvania in 1952. From 1952 to 1953 she was an intern at Sydenham Hospital, New York. She completed her Pediatric Residency at Harlem Hospital during 1953 to 1955. In 1968 she earned a Masters in Public Health from Columbia University. Dr. Polk worked in private practice and in city and county-based health care clinics as well as at Harlem Hospital. She has been active in mentoring young black women into the medical professional and preserving the history of the contributions of black women to medicine.

While at Harlem Hospital, Dr. Polk pioneered research on the treatment of neonatal drug addiction and established a neonatal transfusion program. As she rose to leadership positions --Director of Pediatric Ambulatory Care, Acting Director of Pediatrics, and Director of Ambulatory Care Services—Dr. Polk had increasing impact on the delivery of care within the hospital and the network of clinics she established. She has received awards from the Susan Smith McKinney Steward Medical Society and The United Negro College Fund.

In this interview, Dr. Polk sketches her entry into medicine and her long career caring for children and strengthening the care delivery systems in and around Harlem Hospital. She describes growing up as the “privileged” daughter of a physician in a small town, sharing observations about race and gender in Post-War America and the fifties. She talks about her drive to practice medicine and how she acted on this commitment from the beginning of her residency at Harlem Hospital. She sketches the evolution of her career with the hospital and her many contributions to care delivery. This interview provides a portrait of a woman with enormous energy, drive, and humor. Dr. Polk is recovering from a long

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<sup>11</sup> Dr. Polk was interviewed for the Drexel University Legacy Project in 2003. Interview is available via the Archives at...

illness during this interview. Her voice weakens at some points and she must take frequent breaks.

**Gene-Ann Polk, MD****Interview Session One: 8 December 2014****Session One**  
*Interview Identifier*

[00:00:00]

Tacey A. Rosolowski: All right. We are recording, and let me just put the identifier on for the archives.

I'm Tacey Ann Rosolowski, and today is December 8, 2014. The time is about 1:28 in the afternoon, and today I'm interviewing pediatrician Gene-Ann Polk, and this interview is being conducted for the Foundation for the History of Women in Medicine. It's the Renaissance Women in Medicine Oral History Project. The interview is being conducted at Dr. Polk's home in Lafayette Hill, Pennsylvania.

From 1953 to 1994, Dr. Polk worked at Harlem Hospital in New York City. Her active career spanned roles as a physician and administrator, and in 1962 she also joined the faculty of Columbia University Medical School, so it was faculty roles in there, as well, as well as many other things that we're going to be talking about today. [laughs] She joined the board of the Foundation for the History of Women in Medicine in 2006 and she is now a board member emeritus.

Gene-Ann Polk, MD

So thank you, Dr. Polk, for agreeing to participate in this interview.

Gene-Ann Polk: Okay. Thank you for being here.

## Chapter One

### *A Privileged Upbringing in a Small Town*

Summary: In this chapter, Dr. Polk talks about her family and early years growing up in Roselle, New Jersey. She explains that she was born at home, the second in a family of four girls born to Charles C. Polk, MD, a general practitioner, and Olive Bond Polk. (Sisters: Carolyn, Gene-Ann, Barbara, Josephine.) She discusses the small-town feel of Roselle and the close, home centered family in which she was raised. She notes that her father served the small black populations in Roselle and in nearby towns. She recalls that race was not an important factor in schools, but recalls instances of negative comments in town and explains that her parents taught her how to handle these comments. Overall, she explains, she was raised in a very positive environment of diversity, with many advantages, financially and culturally, that she would not realize until she got older.

Tacey A. Rosolowski: Well, it's a real pleasure. Well, I wanted to start, as you said, where we should start, at the beginning, so I wonder if you could tell me when you were born and where, and tell me a little bit about where you grew up.

[00:01:24]

Gene-Ann Polk: I was born October 3, 1926 in Roselle, New Jersey, at home.

Tacey A. Rosolowski: At home?

Gene-Ann Polk: At home.

Tacey A. Rosolowski: Wow.

Gene-Ann Polk: Most births, certainly among the black population, were at home.

Tacey A. Rosolowski: Did you hear any stories about that from your mother?

Gene-Ann Polk: Well, I heard it from my father because he delivered most of the black babies around Roselle.

Tacey A. Rosolowski: And did he deliver you too?

Gene-Ann Polk: No, it was my sister's godfather who delivered me. I was the fourth—the second, rather, of four girls born to my parents. My father was Charles C. Polk, MD, and my mother was Olive Bond Polk.

Tacey A. Rosolowski: And it's B-o-u-g-h?

Gene-Ann Polk: No, n-d.

Tacey A. Rosolowski: B-o-n-d, I see.

Gene-Ann Polk: Bond Polk.

Tacey A. Rosolowski: And did she work?

[00:02:25]

Gene-Ann Polk: She worked, but she never worked outside of the home. They met as students at Howard University and they came to—not to Roselle, actually to Westfield, which is maybe three or four miles away, to practice. He came to practice with Dr. Howard Brock, who delivered me. That was my sister's godfather. And he worked there for two years before they came to Roselle in 1924. I guess that was the year, yeah.

Let me tell you a little bit about Roselle.

Tacey A. Rosolowski: Do, yes.

[00:03:12]

Gene-Ann Polk: It always considered itself a suburban part of New York City, actually, twenty miles away. Roselle was two miles from Elizabeth, which was maybe four or five miles from Newark, and Newark, of course, very close to New York City. So that was important in terms of my growing up, because a lot of the things that we did were not in Roselle but in the surrounding areas.

At the time that my folks moved when I was growing up, I would say that it was a rather small black population in Roselle, but there were surrounding towns that had, again, many small black populations, and that was the group of patients that my father had, for the most part.

We lived right at the French—between neighborhoods, and actually I lived right across the street from school for my whole life from kindergarten through high school. If I'd wanted to, I could have stayed for two years at junior college. In summers they had a music school, and I went to music school in summertime.

Tacey A. Rosolowski: So that was kind of a small-town feel, even though you were—

Gene-Ann Polk: It was a very small town and a very close town, because my high school graduates continue to have reunions up through sixty-five years of graduation, and I'm still in touch with a few of them.

[00:05:16]

It was a good place to grow up. Excellent schools. Of course it was during the Depression, so nobody had much of anything, and we were a lot better off than I knew we were. I just thought that my family was like everybody else's family, but I realized later that it was not just like everybody else's family, that I had many more advantages. As my younger sister used to say, "Did you realize we were affluent when we were young?"

I said, "No."

She said, "We had a chauffeur."

I said, "We didn't had a chauffeur." We had a man around the house who did everything, you know, including the driving.

Tacey A. Rosolowski: So tell me a little—because I was curious when I was reading and hearing you talk in the Drexel interview, too, about growing up in this area. I was wondering about the experience that you had of race at the time. What was that like in this particular suburban area?

Gene-Ann Polk: Where I grew up, it really was not much—well, I didn't think it was much of a problem, certainly not in the schools. Everything else was separate, you know, the churches. There were certain places that you just didn't go to, like the roller-skating rink, the bowling alley. If you went to the movies, they tried to put you in the balcony, but my mother said, "No, you don't sit in the balcony. You sit downstairs." That's what we told the manager. We sat where we wanted to sit.

[00:07:01]

Tacey A. Rosolowski: So your parents kind of were teaching you how to stand up against that.

Gene-Ann Polk: Absolutely, from the beginning. And like I said, it was many years later that I realized that this was being instilled in me.

But my school experiences were great. I mean, I had wonderful classmates of all colors, and I was involved with many

school activities. My mother made sure that the four girls all took piano lessons. We all learned to play another instrument. We all took dancing lessons, even though it was at the daycare center. Newark, being very close by, had a Performing Arts Center then that was called the Mosque Theater.

Tacey A. Rosolowski: Mosque?

Gene-Ann Polk: M-o-s-q-u-e.

Tacey A. Rosolowski: Oh, the Mosque Theater. Interesting.

[00:08:14]

Gene-Ann Polk: Mosque Theater in Newark. It was close to New York City, so that famous artists on the way into the city or out of the city would stop there for performances. And when I tell people I heard Rachmaninoff play, they say, “Are you kidding?” Yes, I did hear Rachmaninoff play—

Tacey A. Rosolowski: Wow.

Gene-Ann Polk: —and he didn’t play the *Prelude in C-sharp Minor*. What he played for his encore was “Flight of the Bumblebee.” I remember that. [laughter]

Tacey A. Rosolowski: So you had really a pretty diverse cultural experience then.

Gene-Ann Polk: I had a very diverse cultural experience because that's where I was introduced to the ballet. The Ballet Russe de Monte Carlo came every year—

Tacey A. Rosolowski: Wow.

Gene-Ann Polk: —and we went every year. My first opera was the Metropolitan Opera on its way to someplace, but they performed *Aida*, and we had to learn the music to *Aida* and the story before we went.

Tacey A. Rosolowski: Wow.

[00:09:24]

Gene-Ann Polk: That's my mother. That's the way I grew up, but I thought everybody else was growing up that way. As I say, it was years before I realized they weren't, so I had quite an exposure to a lot of things. My parents were really wonderful.

## Chapter 2

### *Memories of a Physician Father*

Summary: Here Dr. Polk recalls her father's role as a physician, which she easily observed since he had his office in their home and her mother was the "office girl." She explains that his patients often paid in goods during the Depression. Her father served both black and white patients, particularly Italian families and that was how she learned to make dandelion wine. She also recalls her father saving money (quarters at a time) for her education and that of her older sister. Dr. Polk talks about making house calls with her father as a girl; she also joined his practice after receiving her MD (between 1955 and 1962/3). She tells stories of practicing with him.

[00:09:24]+

Gene-Ann Polk: Of course, my father was the breadwinner. He was a general practitioner, and he had two bags that he used for making house calls. He made a lot of house calls. One was for the general house call and the other bag was his obstetrical bag because he might be called out to do a home delivery. The office was in our home, which made it convenient for him to have my mother there as his office girl, keep the office clean, take care of the children.

Tacey A. Rosolowski: So she had a double shift and a triple shift. [laughs]

Gene-Ann Polk: She had triple shift. We all had dinner together at five o'clock. He'd come out of the office and have dinner and then go back in and see his patients.

As I say, he was the breadwinner, and through the early years of the Great Recession, Depression, a lot of his patients paid for their services doing work around the house, such as women would come in and clean and iron; men would sometimes bring in game after going hunting. I ate a lot of venison, rabbit, and fish, and a lot of green vegetables that they grew in the backyard.

[00:11:33]

Tacey A. Rosolowski: Now, was your dad's practice pretty much exclusively among the black community or did he have white patients as well?

Gene-Ann Polk: He had white patients as well. He had a large Italian population. They kept him provided with homemade wine, and that's where I got my recipe for dandelion wine. [laughs]

Tacey A. Rosolowski: Did you make dandelion wine?

Gene-Ann Polk: I did.

Tacey A. Rosolowski: Oh, that's wonderful. [laughs]

Gene-Ann Polk: I'm an old winemaker. [unclear] wine.

Tacey A. Rosolowski: Great.

[00:12:11]

Gene-Ann Polk: What else was I going to say? Daddy, he spent an awful lot of time with his patients. We thought he didn't spend much time with us and then we realized during the summer was when he spent more time with us getting us ready to go off to camp. He'd take us shopping to get the things we needed for camp, and on holidays he would take us to his home, which was in South Jersey, an all-black community, Lawnside, L-a-w-n-s-i-d-e.

He said that my older sister was his fifty-cent baby. Every time he got fifty cents for seeing a patient, he'd put it in a jar for her. I was the quarter baby. This was to pay for our education, that the quarters went to pay for our education.

Of course, his practice got a little better because World War II came along and he had patients who were working in industry who always paid him. They may have owed him money, but went back and paid him. That was it. He had good patients.

Tacey A. Rosolowski: So what did you know about your dad's practice? I guess the real question I'm asking is to what extent did your father's practice have an influence on you going into medicine eventually.

Gene-Ann Polk: Well, the fact that his practice was in the home. I wanted an office in the home. He made house calls. I made house calls.

Tacey A. Rosolowski: Oh, you did.

[00:14:01]

Gene-Ann Polk: He saw any patient, many patients. If there were two or three in the family, he would charge the first child, and the second one he'd add on maybe a little, the second one, maybe a little bit. I found that out after I went into practice with him, because I did practice in his office for about—'62 or '63. We used to go down. He had said he was going to stop doing home deliveries, and then I said, "Dad, I'd like to come and practice in your office when you're not there."

He said, "Okay, that means I'm going to continue to do deliveries." So he continued so I could see the babies, because that's all I was doing was pediatrics. So on Wednesdays he took off. I'd take Wednesday and Saturday mornings. I had two days a week in his office.

My children were young. Harold remembers it because I'd take them with me, and they'd play with their cousins or whoever else happened to be in the house until I got out of the office. But I think that was the way most of the practitioners were in those days. They all had their offices in the home. Most of them were general practitioners. There were a few specialists that I knew, but most were general practitioners.

## Chapter 3

### *A Role-Model Mother*

Summary: Dr. Polk talks about the influence of her mother, who was very interested in cultural activities and community action. Under her mother's influence, Dr. Polk took music lessons and attended theater and classical music events. She recalls that her mother became a Girl Scout leader in order to start a troupe for black girls. She was active in the family's church. She also entertained her daughters' friends, creating a "drawing spot" at the Polk home. Her mother was an "exceptional person," she recalls, and talks about the "social work" her mother did mentoring young people. She also served on many boards of organizations and received the New Jersey Mother of the Year Award in 1976. Dr. Polk talks about the extra-curricular activities she took part in.

Tacey A. Rosolowski: So tell me about your interest in science and biology when you were in school. I think in your Drexel interview you said you originally wanted to be a musician. So how did that balance happen, music and then science, that led to your interest in medicine?

[00:16:06]

Gene-Ann Polk: Well, I liked science. I liked school. I liked studying. I liked—there wasn't anything I didn't like about school, that's all I can say. I was a good student. I guess I finished at the top of my class, and it was no problem. And I had many other activities as well.

Tacey A. Rosolowski: Like what else did you do?

Gene-Ann Polk: Like what else did I do?

Tacey A. Rosolowski: Mm-hmm.

Gene-Ann Polk: I have to tell you about my mother, because a lot of it is because of her. I told you about the cultural things that she would take us to. When my sisters and I wanted to be Girl Scouts, they didn't have a black Girl Scout troop, so my mother became Girl Scout leader.

And on Sundays at the church we went to, in the evening they had what was called Christian Endeavor, and my mother took charge of that. And after that was over, we could all go back to our house, where we had a recreation room with music, and she let us dance on Sunday night, you know. So we could pull the crowd together, go to church, do what you had to do for an hour, then go back over to the Polks' house and have some fun.

Tacey A. Rosolowski: It sounds like you remember that with a lot of pleasure.

[00:17:38]

Gene-Ann Polk: Well, I did because everything seemed to revolve around the home. There weren't too many things outside of the home that we did other than, as I said, the music lessons, etc., etc. But all of our social activities were around the house, around the home, and our

home was, I think, a drawing spot for many of the young—my class, my friends there in Roselle.

Tacey A. Rosolowski: It must have been great for your parents, too, to have all of these young fun people around.

Gene-Ann Polk: Oh, yeah. Well, they knew where we were. That was one thing. They always knew where we were.

Tacey A. Rosolowski: Yeah, yeah, I'm sure. [laughs]

[00:18:23]

Gene-Ann Polk: My mother really was an exceptional person, and besides raising the four of us, there were three other young women who lived in the house at one point or another and helped her. One was my father's baby sister, who went off to college and was a music major; the second one was my father's niece, who went into nursing and finished nursing at Harlem Hospital; and the third was my mother's young cousin, who became a secretary and went back south. And then the four of us came along. I was the second.

Tacey A. Rosolowski: And your sisters' names?

Gene-Ann Polk: Carolyn was the oldest one and Carolyn, C-a-r-o-l-y-n, was eighteen months older than me. We were very close in age. Two years behind me was Barbara, and then two years behind her was Josephine.

My mother was extremely involved in the community. She had prepared to be a social worker, so she did her own social work. When she first went to Roselle, she gathered the group of young teenagers together, and as they finished and graduated from high school, she'd get another group and mentor them until we came along and she could mentor us.

Tacey A. Rosolowski: So how did that have an influence on you, I mean seeing your mother do that kind of work at a community level?

[00:20:19]

Gene-Ann Polk: It meant that we all had to be involved with community. She was on the board of several organizations, social service organizations in the county. She was first this and first that, and first this and first that. She was also—I have to mention this—the New Jersey Mother of the Year in 1976, recognized for all of her activities and for raising all those girls.

Tacey A. Rosolowski: Wow. Seems like she was really a role model.

Gene-Ann Polk: She was a real role model. Yeah, absolutely.

Tacey A. Rosolowski: Lucky you.

Gene-Ann Polk: So, I mean, you know, she never stopped doing, and the idea was, okay, you just keep doing, that's it, as you can do it. And that's one thing she always said, you can be anything you want to be and you could do anything you want to do, and over and over again. So I guess that's what I carried, I guess, in my mind the whole time.

## Chapter 4

### *Howard University and a “Year of Comfort”*

Summary: Dr. Polk begins this chapter by talking about her extracurricular activities, then discusses her college education. Though she first thought she'd be a musician, she made the decision not to follow that path. She talks about her decision to attend Howard University despite her parents' wish that she go to Oberlin College to focus on music. She explains the effect that being in a black setting had on her older sister and that she wanted that social experience herself. She spent a year (1944/'45) enjoying the “complete experience” that Howard provided as well as the relief from constantly thinking about race. She then notes that she needed more stimulation, which prompted her to transfer to Oberlin.

Tacey A. Rosolowski: Tell me about your decision to go to Howard and then to Oberlin.

[00:21:38]

Gene-Ann Polk: You asked me about my other activities.

Tacey A. Rosolowski: Oh, yes. Thank you for remembering that.

Gene-Ann Polk: Because I was looking at the piano and realized I had started piano lessons when I was five years old and continued through the twelfth grade. Then I started my cello lessons when I was in the fourth grade and continued, played in a lot of musical groups in high school. I played in the New Jersey All-State Orchestra, cello, for two years. I still have a pin. I remember that. I learned how to shoot a rifle at camp one summer, so I became part of the rifle team at the high school and I was on the—

Tacey A. Rosolowski: So you were a good shot.

Gene-Ann Polk: Pretty good, yeah. I was a sharpshooter, yeah.

Tacey A. Rosolowski: Yeah? My dad used to take me target shooting too. [laughs]

Gene-Ann Polk: I scared my husband because the first time I went—I'm trying to remember. The shotgun in the—what do you call that?

Tacey A. Rosolowski: Skeet shooting.

[00:22:56]

Gene-Ann Polk: Skeet shooting, yeah. First time I picked up the shotgun and went skeet shooting, I hit the bird the first time.

Tacey A. Rosolowski: Oh, my gosh.

Gene-Ann Polk: Whee! [laughs] Didn't hit it ever again, but that was impressive, I must say.

I played piano a lot for different groups. That's one of the things we'd do on Sunday evening would be to gather around the piano and sing, you know, and duets with my sisters, with trios.

We had one piece where there were eight hands with all four of us playing at one time. It was a mess. [laughs]

Tacey A. Rosolowski: Sounds fun, though. It sounds fun.

Gene-Ann Polk: Oh, it was fun.

Tacey A. Rosolowski: So you had wanted to become a musician? You thought about that seriously?

[00:23:56]

Gene-Ann Polk: I don't know that I—well, I thought about it because I liked music so much, but it must have been around tenth or eleventh grade that I decided, "I can't spend the rest of my life teaching kids how to play the piano. That's not what I want to do." Of course, Oberlin was in the back of my parents' mind because they thought I was going into music, but I knew I wasn't going into music, and certainly once I got to Oberlin, I knew I was not going into music.

Tacey A. Rosolowski: But didn't you do a year at Howard University?

Gene-Ann Polk: I did a year at Howard University.

Tacey A. Rosolowski: Now, why was that? Why did you go there first?

Gene-Ann Polk: Well, my mother and my father, my godmother, my aunt, my sister all were Howard people, and I just thought I was supposed to be going there also. Of course, I'd visit my older sister, and she seemed to be having not only a good education, but a great time. And I guess I realized it was the fact that it was the first time she was in an all-black setting, and there's a comfort level when you're in that kind of setting. And I wanted to enjoy it, so I made it possible for me to go, not that my folks wanted me to do that first year, but I did.

Tacey A. Rosolowski: What was their reason? Why were they not comfortable with you doing that?

[00:25:35]

Gene-Ann Polk: They wanted me to go right on to Oberlin.

Tacey A. Rosolowski: Okay. Just sort of focus. Yeah.

Gene-Ann Polk: But I never made an application to Oberlin. I just applied to Howard, so that's where I was accepted. And then my mother said, "Well, what about Oberlin?"

I said, "I didn't apply."

She said, "Apply now."

So I applied, and I was accepted for the second semester, but I had already started some courses that I wanted to finish, and I convinced my father that I should stay and finish the year at Howard and do the summer school and go back the following summer and finish everything. So, as I said, I got one year, two summers out of Howard, and I really enjoyed it.

Tacey A. Rosolowski: So your transfer to Oberlin was really your parents' idea, not your idea so much?

Gene-Ann Polk: Well, I was ready after I had the—I wanted the one year. I was ready.

Tacey A. Rosolowski: I mean, just so I understand, so that one year was really for the social experience, you think?

[00:26:41]

Gene-Ann Polk: Well, part of it was the social experience that I wanted at Howard, that was for sure, but I did well with my classes there. I felt I just wanted a little more stimulation, and I was ready to make the transfer. And I had a friend who was in that same position. Her parents wanted her to go to University of Michigan, and she said she wanted that one year at Howard. She turned out to be my best friend. So after one year, we both went off. She went to

Michigan, I went to Oberlin, and we stayed in contact right until the time she died.

Tacey A. Rosolowski: When you look back, how did that year at Howard influence you as you moved forward in your college career?

Gene-Ann Polk: It was a year of comfort, I have to say, because you didn't have to think about anything except—you know, you didn't have to think about race or—I guess that may have been the first time that I had experienced that. It was always in the back—never really the outstanding feature, but always something in the back of your mind. You knew that there was that thing called race, and you couldn't escape it. You still can't escape it.

[00:28:29]

Tacey A. Rosolowski: So you were at Howard 1944, 1943, '44?

Gene-Ann Polk: Forty-four, '45.

Tacey A. Rosolowski: It's hard for people now to imagine what race must have been like then when there's still Jim Crow laws and—

Gene-Ann Polk: It was just part of your life in those days, and I think all along, my parents were trying not to make it the only focus of our lives, that

there were other things that we could do and should be doing and must do.

Tacey A. Rosolowski: Were there any conversations at Howard among faculty or among students about race and what the students should do as they went out into the—

Gene-Ann Polk: All the time, yeah.

Tacey A. Rosolowski: And what did you take away from those conversations? Any lessons or—

[00:29:28]

Gene-Ann Polk: Well, that's Washington, D.C., and Washington was a segregated city.

Tacey A. Rosolowski: Still is in a lot of ways.

Gene-Ann Polk: We could go downtown to the movies, could go shopping, spend your money. And there was really very little reason for us to leave the campus, except to go shopping if you had some money and wanted to go shopping. I had a friend who was able to do a whole lot of shopping that I couldn't do and wouldn't do.

But the focus was there on the campus because they brought in the great artists at that time and speakers, and there were dances and there were athletic events and whatnot, all of this is taking place right there in the heart of Washington, D.C., but not part of Washington, D.C.

Tacey A. Rosolowski: Right. So, very protected, almost like its own small town.

Gene-Ann Polk: Yeah.

Tacey A. Rosolowski: Wow. So what was Oberlin—I'm sorry, I didn't mean to interrupt you.

## Chapter 5

### *An Extraordinary Godmother*

Summary: Here Dr. Polk talks about her godmother, Myra Smyth Kearse, MD, who was the only woman in her class at Howard Medical School when she received her degree in 1925. She explains how Dr. Kearse came to be her godmother and describes her as a “little lady with a whole lot of energy and stamina.” She tells an anecdote about how Dr. Kearse stood up against racial inequity. She notes that Dr. Kearse was an important role model.

[00:30:54]

Gene-Ann Polk: I think the other major influence would have been my godmother, who a physician, Myra, M-y-r-a, Smith Kearse, K-e-a-r-s-e, finished Howard Medicine in 1925, of course the only girl in her class.

Tacey A. Rosolowski: Wow.

Gene-Ann Polk: There weren't any in my father's class who finished in 1921, nobody in his class. No women in his class, I should say. My godmother and my mother had been very close friends as college students, sorority sisters, and she came to practice in a smaller town than Roselle. She was in Vauxhall, V-a-u-x-h-a-l-l, New Jersey, and she came to do general practice there.

She was, again, a major influence because I knew she was doing medicine. I knew was a physician, and I knew she was—well, she and my mother together, you know, were not much over five feet tall or 100 pounds, but little ladies with a whole lot of stamina and strength, energy, and wanted to push their kids right on. My godmother's daughter, by the way, is the Honorable Amalya Kearse, A-m-a-l-y-a. She was the first black woman to become a circuit court judge.

[00:33:03]

Tacey A. Rosolowski: Wow.

Gene-Ann Polk: And was also under consideration for the Supreme Court at one time.

Tacey A. Rosolowski: Wow.

Gene-Ann Polk: Still doing quite well.

Tacey A. Rosolowski: You had some very impressive women in your background you looked up to as role models.

Gene-Ann Polk: I'll have to tell you about my godmother, one other story.

Tacey A. Rosolowski: Yeah, yeah.

Gene-Ann Polk: Her husband had taken the test to be the postmaster of the town. He came out on top. Three times he came out on top and three times they overlooked him. So she wrote to Eleanor Roosevelt to let her know what was going on, and Eleanor told Franklin to go ahead and make him the postmaster of the town, which is what happened.

[00:33:53]

Tacey A. Rosolowski: Wow. That's a wonderful story.

Gene-Ann Polk: That's a good story. It's true.

Tacey A. Rosolowski: Any more stories about your godmother, or you want to tell me about Oberlin?

## Chapter 6

### *Oberlin College: Different From Howard University*

Summary: In this chapter, Dr. Polk talks about her adjustment to Oberlin College after the protected environment of Howard University. She also explains the courses she took as a chemistry pre-medical student and notes that she “likes to be challenged” and enjoyed doing well in classes that women usually didn’t take. She shares some stories about the atmosphere for a black student at Oberlin. She also clarifies that she had decided to be a physician in 11<sup>th</sup> grade. She recalls discouraging comments made: even her mother asked, “Are you sure,” pointing out the social and family sacrifices she felt Dr. Kearse had been required to make for her career. Dr. Polk recalls her determination in the face of these comments. She explains the process of applying to medical school and her selection of the Women’s Medical College of Pennsylvania in Philadelphia

Gene-Ann Polk: I can tell you about Oberlin, yes.

Tacey A. Rosolowski: You didn’t start doing science immediately there. Did you start taking music at Oberlin?

Gene-Ann Polk: I did. I took cello for one year or maybe more, one year or one semester, whatever it was. I was also doing chemistry labs and biology labs. And my cello teacher said to me, “You’ve got to make up your mind whether you’re going to practice the cello or do your laboratory work.” So I stopped the cello, and that was it.

Tacey A. Rosolowski: What was it that you enjoyed about chem and bio?

[00:35:02]

Gene-Ann Polk: I liked chemistry in high school. I was a good student. I liked the challenge of exploring things and doing something that most other women didn't like to do. I thought that was—I did like that challenge. I liked to be challenged. I was a chemistry pre-med major, so most of my science courses were chemistry. But I found out I wasn't meant to be a chemist. I was meant to be something else.

Tacey A. Rosolowski: What did you discover that made you feel you weren't cut out—

Gene-Ann Polk: Physical chemistry.

Tacey A. Rosolowski: Oh, physical chem. [laughter] I think that's the downfall of many people.

Gene-Ann Polk: The whole class struggled with physical chemistry, except for one fellow, and he was always *way* over the—he was chemistry pre-med too. We met again in New York as he went to Columbia, and I saw him. He ended up on staff at Columbia. John was a great fellow, John Ultman. He ended up in Chicago, was at Columbia for many years. I can't remember what his specialty was. But we

would go out to dinner sometimes before I got married. After I got married, my husband and I were [unclear] his family.

What was the other thing you asked me?

[00:37:15]

Tacey A. Rosolowski: First I wanted to ask you if you wanted to take a little bit of a break.

Gene-Ann Polk: I would. Thank you.

Tacey A. Rosolowski: Okay. Why don't we do that just for a moment.

[recorder turned off]

Tacey A. Rosolowski: Okay. Well, we are recording again after, I don't know, about a ten-minute break. So let's see. It's about 2:12.

We were talking about Oberlin, and I had wanted to ask you how you found Oberlin in terms of being a woman student and being a black student. How did that all work out after the experience at Howard?

[00:37:50]

Gene-Ann Polk: First of all, I didn't like it. [laughs]

Tacey A. Rosolowski: You didn't?

Gene-Ann Polk: The change, it was so different, it took a little bit of adjustment. So here I was, the dormitory that they—and they didn't really have big dormitories. They had big houses, ex-presidents' homes. My first housing experience as a sophomore, I guess the house was farthest out from the city, from the center of town and the school, so I had to ride a bicycle to get to my classes all the time.

I had a single room in the house. All the other rooms were either doubles or triples. And then this next year when I became a junior and I was applying for room, they said, "Oh, we've got a room for you already." It was another single room. Then the third time they gave me a single room, I realized that they didn't want to give me a roommate. I was the only black girl in that setting.

Tacey A. Rosolowski: Oh, my gosh.

Gene-Ann Polk: But it didn't click right away. As I say, it was just a different kind of experience. I found the students were very competitive, for one thing. They were all at the top of their classes. And where things had been relatively easy for me at Howard, I was meeting some competition for the first time in my life, hadn't had any in high school and none at Howard, but I did my classwork.

[00:40:04]

I realized with all those music students around, they didn't need another pianist or cellist, so I just gave up that, and my classes, for the most part, were—I had to take things, like I took a religion course, I took a philosophy course, took a sociology class. I took a class in American literature, music appreciation. All of those classes I liked very much and did well in. It was good because it kept your grades up in all those science things. I had done my physics at Howard, so didn't have to do physics. There was chemistry and biology, for the most part, and the science classes, mostly chemistry. As I said, it was fine until I met up with physical chemistry, which was way off the map, as far as I was concerned.

Tacey A. Rosolowski: So when in this process did you decide you were going to go to medical school?

Gene-Ann Polk: Oh, I decided that right from the beginning. I knew. I said, "I can't spend the rest of my life teaching kids how to play the piano. I've got to do something else with my life." That must have been about eleventh grade.

[00:41:44]

And right from the very beginning, I was a pre-med major at Howard and at Oberlin. I was going to go to medical school. It

was surprising how many people said, “Oh, you’ll never make it. You’ll never make it. You’ll get married. You won’t make medical school.” And that’s what they said, not only from one of the kids in my generation, but also from some of the older people trying to tell me, “It’s not for you. It’s not for a woman.”

Even at one point my mother wasn’t certain that was what I really wanted to do. She said, “Are you sure? You see what your godmother’s life is like. She’s so involved with her patients and she doesn’t have time for this or for that.” She did make time for this and for that. That didn’t stop me. I just had made up my mind that’s what I wanted to do and I was going to do it. That’s it.

Tacey A. Rosolowski: And how did you visualize it? I mean, what did you think being a physician would do for you? What would be the satisfaction that you thought you’d get from it?

Gene-Ann Polk: Satisfaction, first of all, was that it was something that I wanted to do and could do and would do, that’s all, and I just felt that it was something that I really wanted to do. That was all there was to it, so I was going to do it. And every time somebody said, “You can’t,” I said, “I can.”

[00:43:26]

Tacey A. Rosolowski: And you went ahead.

Gene-Ann Polk: Somehow or other I had a little stubborn streak in me. I wasn't aware of it for a long time. [laughter] If you tell me, "You can't," that's what gets me moving. "Oh, but I can. Don't tell me I can't, and I will."

Tacey A. Rosolowski: So tell me about the process of applying to medical school.

Gene-Ann Polk: I applied to three schools: to Columbia, to Howard, and to Women's Med. I heard almost immediately from Columbia that I was not accepted. So then shortly thereafter, I heard from Women's that I was accepted. Then my father asked me, "Well, what about Howard?"

I said, "I haven't heard anything from them."

So he got one of his friends to see what was going on, and so shortly thereafter, I had been accepted at Howard, but I had already accepted the place at Women's and I wasn't going to Howard anyway.

Tacey A. Rosolowski: Were you sorry?

[00:44:53]

Gene-Ann Polk: No, I wasn't. I really wasn't, because I just had the feeling all along that if I'd wanted to go to Howard, I'd get to Howard.

That's all there was to it. There was no reason for them not to accept me. And I thought I'd be happy at Women's.

Tacey A. Rosolowski: It sounds like you were a person who really trusted your own gut feelings about things—

Gene-Ann Polk: I did, yeah.

Tacey A. Rosolowski:—like, made a decision. It's like, "Yeah, I know that's the right decision."

Gene-Ann Polk: Yeah. "I can, that's all. Don't tell me I can't. This is what I want to do, I'll do it. That's all there is to it." And I guess I went through most of my life doing that, not realizing what I was doing, because I was pretty much determined with whatever it was that I wanted to do, I could do or would do.

## Chapter 7

### *Medical School: A Protected Environment*

Summary: In this chapter Dr. Polk explains her process of applying to medical school and her selection of the Women's Medical College of Pennsylvania in Philadelphia. She then talks about the unique atmosphere at the Women's Medical College of Pennsylvania (MD conferred 1952). She first explains the commitment to bringing women into the medical profession. She notes that she was one of only four black women in her class and recalls only one black professor. She explains that she was ill several times during medical school and recalls how driven she was to make up for the time lost as a result.

[00:45:50]

Tacey A. Rosolowski: So tell me about the experience at Women's [Medical College of Pennsylvania, Philadelphia], because I think you're the first woman in medicine I've interviewed who went to a single-sex medical school.

Gene-Ann Polk: Really?

Tacey A. Rosolowski: Yeah, and I'm really curious about that experience.

[00:46:07]

Gene-Ann Polk: Women's was a protective environment, that's the first thing I should say, and they let it be known that, "We want to see you graduate and we want to be fair about it." I had heard from some of the other schools that the "Look to your right, look to your left.

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One of you is not going to be here next year,” that kind of story. Never heard that at Women’s Med. It always was, “We want you to succeed,” and most of the professors were that way. There was one who took a dislike to one of my good friends, and finally dropped out, but other than that, it was really, I would say, protective.

Tacey A. Rosolowski: Are there any particular faculty that helped you, mentored you, or were special role models?

Gene-Ann Polk: I don’t know that there was anybody in particular. There were two black girls in the class. Actually, there were three. We never did find out who the third one was—she was able to pass—a girl from Texas. I don’t think she intended to, but it just happened that she did.

Tacey A. Rosolowski: And she never revealed it?

[00:47:42]

Gene-Ann Polk: Not directly, but, you know, always when we would go to concerts together, she’d talk about her family, but I just never made a connection. That’s all. I’d talk about my family and never made a connection. That was it.

Tacey A. Rosolowski: Interesting.

Gene-Ann Polk: Interesting, yeah. But all in all, I would say—the dean was Dean Fay at the time, Marion Fay. She taught biochemistry and she was tough but she was fair. Some of the women in OB/GYN were tough women in OB/GYN and in medicine—not medicine, in surgery, because the only surgeon I remember, McFarlane, Katie McFarlane. Katherine McFarlane, was quite a well-known OB/GYN who happened to bring the first black woman doctor on staff at Women’s Med.

Tacey A. Rosolowski: Oh, wow.

Gene-Ann Polk: It was a Philadelphia woman named Helen Dickens. McFarlane brought Helen Dickens in to operate, and everybody was, “This is great!” This had never happened before, and she became part of the staff. Her son became very much a part of the staff, I think, until he—he was a PhD, MD/PhD. I think he’s at Johns Hopkins now. I can’t recall his name right off the bat. He was son of Helen Dickens.

[00:49:52]

There was one black professor with in medicine, Holloway. I’m trying to think of his first name. And he was really the first

black professor that I can remember at—he was the first there at Women’s Med, internal medicine, very bright, very brilliant, really, and impressive. Other than that, the staff was all white. We were always happy to see Holloway. Edward was his first name.

I’ve just got restless legs, that’s all.

Tacey A. Rosolowski: What did you think of your education there?

Gene-Ann Polk: I thought it was good. Certainly it matched everything I heard from all the other schools, except maybe Columbia. Everybody talked about Columbia being the best of everything, you know. Certainly I thought the education was as good as that of any other school, and when I’d see women students from other schools and we’d exchange stories, they were just sort of amazed that I was in that kind of setting.

Tacey A. Rosolowski: I’m amazed you were in that kind of setting. [laughs]

[00:51:39]

Gene-Ann Polk: It wasn’t—I was going to say it wasn’t easy. It wasn’t easy because I was sick several times during the course of medical school. I had infectious mononucleosis, which sort of knocked me out, and then at one time I had two or three bouts of infectious mono that weren’t as—you know, made it a little rough. Because I

can remember at one point not being able to go upstairs to my room and just having to sort of climb up on my hands and knees to get up there, and stay up there until it was time to come down the next morning and go on off to school.

One summer I was three weeks late starting school because I had developed a throat infection, what turned out to be infectious mono. They thought it might have been strep—not strep, diphtheria. They were giving me diphtheria antitoxin for a while.

Tacey A. Rosolowski: Oh, my gosh.

Gene-Ann Polk: Then I did have a urinary tract obstruction which required surgery. But I made it.

Tacey A. Rosolowski: Yeah, and you didn't delay your progress through classes or anything at that point?

Gene-Ann Polk: No, I didn't.

Tacey A. Rosolowski: That was lucky.

[00:53:18]

Gene-Ann Polk: Sometimes I had to spend an extra couple of weeks to make up for time I had missed, but I didn't consider dropping out at any point.

I would frequently take [unclear]. Instead of having lunch, I'd have a quick lunch and then lie down on a sofa for the rest of the hour till I got my strength back. But other than that, I made it. [unclear] comfortable position [unclear]. [Note: Dr. Polk is adjusting her seating to be more comfortable.]

## Chapter 8

### *Internship and Residency, a Marriage, and Harlem Hospital*

Summary: Dr. Polk begins this chapter by explaining that she got engaged during her fourth year of medical school to Edwin C. Horne, an oral surgeon and he was going to Harlem to advance his career. Dr. Polk recalls being “scared” by the Harlem Hospital Emergency Room. (She would do her Pediatric Residency at Harlem Hospital in '53 – '55.) She chose to do her Rotating Residency at Sydenham Hospital in New York, '52-'53. She briefly compares Sydenham and Harlem Hospitals and explains that Sydenham was designated as a hospital where black physicians could admit their private patients (as opposed to turning them over to a white doctor for referral and to take over their care). Dr. Polk also notes that she did her rotating internship at Sydenham and decided to focus on pediatrics.

Tacey A. Rosolowski: So tell me about your internship, which was at Sydenham Hospital, correct?

Gene-Ann Polk: I got engaged my senior year in medical school, and my husband was at—well, my fiancé was a senior at University of Penn Dental School, where he was a DDS, not an MD.

Tacey A. Rosolowski: And his name?

Gene-Ann Polk: Edwin C. Horne, Edwin H-o-r-n-e. And we had decided he was going to Harlem. There was no doubt about that, because that was the best place for oral surgery residency. So we were going to be

Gene-Ann Polk, MD

in New York, and I looked at Harlem, went there for an interview, and I got a little scared by their emergency room. I went to Sydenham, which was not too far away, maybe within ten blocks of Harlem, and it was a smaller hospital, a gentler environment, and I thought I could be all right there. And so that's how I ended up at Sydenham. Sydenham [pronunciation] is what they called it. Sydenham [pronunciation] is what the people inside called it, and the outsiders called it Sydenham [pronunciation].

[00:55:51]

Tacey A. Rosolowski: Well, I guess I'm an outsider, then. [laughs] Thank you.

Gene-Ann Polk: You're welcome.

Tacey A. Rosolowski: So tell me—well, I guess I'll get to that question later. But you did end up doing your residency at Harlem Hospital.

Gene-Ann Polk: Oh, I did. I did two years of residency at Harlem Hospital.

Tacey A. Rosolowski: Do you want to compare the two, Sydenham and Harlem? Is there something relevant to say about that?

[00:56:15]

Gene-Ann Polk: I'd say the difference was in size and the type of patients that they served. Sydenham also had—[unclear] was an unusual hospital

because the city of New York [unclear], I guess it was the Department of Hospitals knew that there was no place for black doctors to admit their private patients, and their arrangement with Sydenham was that they have half of the hospital as a private section for, well, mostly black physicians. There's still a few white physicians who admitted their patients there.

Tacey A. Rosolowski: Wow.

Gene-Ann Polk: It was mostly the black physicians who were able to, for the first time, have a hospital to admit their patients.

Tacey A. Rosolowski: Can I ask, what did they do before then?

Gene-Ann Polk: Well, they did the same thing my father did. If you had a patient who needed to be in the hospital, you had to refer him to a white doctor to put him in the hospital. That's it.

Tacey A. Rosolowski: Which meant you lost the income from continuing to treat them, of course.

[00:57:34]

Gene-Ann Polk: Uh-huh. Because it wasn't really until the beginning of World War II that the hospitals started to open up for black physicians,

and it was mainly the Catholic hospitals that opened up first. My father went on staff at St. Elizabeth's Hospital and for the first time was able to deliver his patients in the hospital, not at home.

Tacey A. Rosolowski: Wow.

Gene-Ann Polk: And that was early, I guess, in World War II, and there was a shortage of physicians all over, all over. Even at Women's Med there was a shortage of physicians. I guess it must have been my senior year, they used the senior medical students as house officers because they were short of interns.

Tacey A. Rosolowski: Right, right. Okay, so there's that history. So Sydenham is opening up, and so black physicians can refer patients there and practice with them in those settings.

Gene-Ann Polk: So I had the experience of working with a lot of the private practitioners there in Harlem, most of whom—well, with surgeons and OB/GYN types, not too many in general medicine, and only one pediatrician that I knew of.

Tacey A. Rosolowski: Now, had you selected your specialty at that time?

[00:59:16]

Gene-Ann Polk: I did what was called a rotating internship, where you did a little bit of everything, and I was pretty much certain that I wanted to do pediatrics. I liked surgery, but I gave up the idea of surgery. I knew that definitely was not for women at that point. I didn't know any women surgeons. OB was all right, but OB/GYN, no. Internal medicine, no. I liked pediatrics. I guess maybe at one time I might have thought a little bit about psychiatry, but not for long.

Tacey A. Rosolowski: Now, tell me a little bit about the situation for children and neonatology and just the field of pediatrics at the time.

Gene-Ann Polk: At the time, it was just general pediatrics. There was no—I'm trying to think. There may have been one or two specialists at Columbia. This is the first neonatologist up there. There was Silverman. I met him through John Ultman. That was at the time that I was taking care of most of the babies at Harlem Hospital, so I guess I would have been considered a neonatologist because I had charge of the normal nurseries and the premature nursery as well.

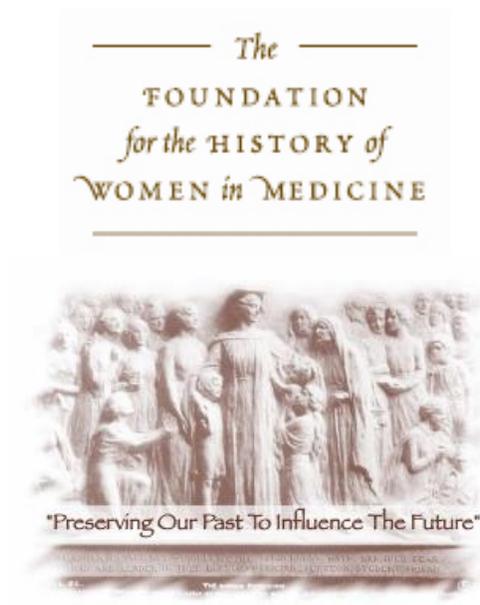
[01:01:07]

Tacey A. Rosolowski: Do you want to take a little bit of a break?

Gene-Ann Polk: Yeah.

Tacey A. Rosolowski: Okay, let me just pause it.

[End of December 8, 2014 interview]



**The Foundation for the  
History of Women in Medicine**

**The Renaissance Woman in Medicine Oral History Project**

**\*\*\***

**Gene-Ann Polk, MD**

**Foundation Board Member Emeritus  
Professor Emerita, Clinical Pediatrics, Columbia University**

**Interview Session Two  
9 December 2014**

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## Session Two

### Interview Identifier

[00:00:00]

Tacey Rosolowski: Today is December 9, 2014, and this is Tacey Ann Rosolowski. Today I am conducting my second session with Dr. Gene-Ann Polk. The time is approximately 1:00 p.m., and, as I said, this is our second of three planned sessions together.

So, thanks, Dr. Polk, for giving time again today.

Gene-Ann Polk: [unclear].

## Chapter 9

### *A Memory of “Raw Racism”*

Summary: In this chapter Dr. Polk describes a dramatic brush with racism at the age of about seven that still remains with her. It occurred during one of the yearly trips to North Carolina she took with her family to see her grandparents. Dr. Polk describes the challenges for black Americans who traveled in the South at that time. She explains the “Green Book,” a guide listing accommodations and facilities that blacks could use in the South. She describes the experience she had when her parents stopped for gas and to use the rest room. Dr. Polk says that her parents kept her and her sisters very protected from racism and also gave them tools to deal with all kinds of challenges. They also instilled a strong work ethic, and this was very important in her own life.

Tacey Rosolowski: You said, before we turned on the recorder, that you wanted to talk about one instance of just blatant racism that you had experienced. Would you like to tell me about that?

Gene-Ann Polk: I would, because it happened when I was, I think, maybe seven years old.

Tacey Rosolowski: Wow.

Gene-Ann Polk: You had asked me if I had encountered racism, and I said to some extent, but this was what I would call “raw racism.” Every summer we would go to North Carolina to visit my mother’s parents and you had to, in those days, really prepare for a trip

going beyond Washington, D.C., because you knew you were going to encounter all kinds of racism and segregation problems.

My mother would prepare our clothes. We had a big car, a big Buick, that was comfortable for six people, and she had a little trunk on the back. She'd put clothes in the trunk plus whatever else, I don't know. She'd prepare a big lunch, and we would leave about five-thirty in the morning, go to South Jersey, catch the ferry over to Delaware, where we'd stop and have breakfast first before getting on the ferry.

[00:02:09]

Then the next stop would be Washington, D.C. by way of Baltimore, because she liked to point out the people cleaning their white marble steps in the morning, first thing. So there was sort of things we sort of looked for. We always arrived in Washington maybe around noon, at which time we would have lunch somewhere around the Potomac River, and our driver, our chauffeur, Billy, would rest, get his rest because he had to resume driving.

Tacey Rosolowski: That must have been a long trip in those days, I mean with the speeds.

Gene-Ann Polk: It was, and always when we stopped in Washington, there was something she wanted us to see or do. So we went to the Lincoln Memorial, the George Washington Monument, the Library of Congress, and some other place.

Tacey Rosolowski: Your mother was a culture maven.

[00:03:18]

Gene-Ann Polk: Yeah. And she had lots of friends in Washington.

From then on, it became a little more perilous because the next safe stop that we knew of was in Richmond, a black service station where we knew we could use rest facilities, restroom facilities. In those days there was such a thing as a “green book” that was published for blacks driving south, telling them places where they could eat—

Tacey Rosolowski: Oh, my goodness.

Gene-Ann Polk: —where they could use the restroom, where they could possibly stay overnight. That was the only way you knew that you would not be facing real segregation.

Tacey Rosolowski: And danger.

Gene-Ann Polk: And danger. So I don't know which side of Richmond it was that we had to make a stop. The car needed a lot of gas. As I say, I think I must have been around seven. I was young, because this was something that's still very vivid in my mind. We stopped for gas and my mother asked if we could use the restroom. Well, the signs always said "white ladies only" or "black women," which was the latrine in the far back. So the attendant said, "Yes, you can use the restroom."

[00:05:07]

So we went into one that said "white ladies only," and I remember we passed by a large window and somebody was staring out of the window. No sooner had we gotten in there and not really settled, there was a knock on the door, boom, boom, boom, boom, boom! "Come out of there! Come out of there! This is for white ladies only." I remember the sound still very vividly in my mind.

I guess at that point, I don't know, I don't remember much after that, but I do remember that that was my impression of the South, that it's not a good place to travel.

Tacey Rosolowski: What did your mother say to you about that experience afterwards, do you remember?

Gene-Ann Polk: I don't recall, because I think she was trying to protect us from this and I think she was just that much more protective in terms of what was going on. I don't know what she said. I think she said, "Go ahead and use the toilet." That was one thing. And after that, we just got up and left. I don't even know if she had the gas put in the car, to tell you the truth.

Tacey Rosolowski: Wow. Wow. Were you frightened?

[00:06:37]

Gene-Ann Polk: I was. I was very frightened. I was frightened and I said—and I remember this so vividly. That was my only experience that I can think of raw racism, and that's all I can call it. Yes, I did experience it and I think it's an awful thing for a kid to have to face it at seven years of age. I might have even been younger. I don't even know.

Tacey Rosolowski: Wow. I was impressed when you were talking yesterday, when you were talking about your family context, and it seems as though, whether by direct message or indirectly, by example, your parents actually seemed to be giving you a lot of tools to deal with the implicit racism in American culture. Do you feel that that was true, looking back?

Gene-Ann Polk: Oh, that was true, but I don't think I was fully aware of that until many years later when I realized how much they were actually giving us in terms of experiences, culture, racism, community activities, and real appreciation of the arts and of the work ethics, definitely the work ethics, because they both seemed to be continually doing something. If not for their family, it was for somebody else.

[00:08:18]

Tacey Rosolowski: Yeah, I was really impressed with that when you were telling me—I was working on the notes I took yesterday, and there were three instances. Your dad was a kind of a role model; your mom was a kind of a role model; and then your godmother was a kind of a role model. That's really pretty amazing to have all of those folks in one family.

Gene-Ann Polk: It really is, you know, and as I told you, so often I thought, well, everybody grows up like this, you know? And I said, no, everybody does not grow up like this. I had really wonderful surroundings. That's all I can say.

Tacey Rosolowski: Well, that's very, very cool for a young person to have that and take advantage of it later on.

Was there anything else you wanted to say about that experience of racism?

Gene-Ann Polk: No, that's all. As I say, it's always been in the back of my mind, the voice, the knock, and the signs we would see, "white ladies only," "black women," "black water," "white water."

Tacey Rosolowski: Interesting, too, that it was "black *women*" and "white *ladies*."

[00:09:31]

Gene-Ann Polk: That's what it was.

## Chapter 10

### *A Portrait of Harlem*

Summary: Dr. Polk begins this chapter by noting that she was the only black female on staff when she began her residency at Harlem Hospital. In response to a question, she then gives a brief overview of the history of Harlem, where she spent a great deal of her professional life. She explains that Harlem was first a summer getaway spot for well-to-do whites from New York. It shifted racially in the early 1900s until it was almost completely black by the 1920s and still a good place to live. Dr. Polk notes the cultural life of Harlem, with its music and theaters alive during the Jazz Age. After the Depression and World War II, the numbers of middle income blacks shrank and the area became more depressed. By 1952 it was almost predominantly low income with crowding and many attendant health problems.

Tacey Rosolowski: Would you like to start talking now about beginning your career in Harlem?

Gene-Ann Polk: Beginning my career in Harlem.

Tacey Rosolowski: Well, I mean, you had gotten your medical degree. We talked briefly yesterday—do you need to take a little break?

Gene-Ann Polk: Actually, I guess I never left Harlem. I finished my residency and sort of stayed on.

Tacey Rosolowski: And that was in '55, correct?

Gene-Ann Polk: 1955, doing one thing or another. As I think about it, of the attending staff, I was the only black female on the attending staff at that time, and there was one black male on the staff, and all the rest were Jewish and [unclear].

[00:10:31]

Tacey Rosolowski: What is your recollection of the kind of atmosphere there, both as a black individual and as a woman? I mean, did you feel that you held to a different standard than the white attendings and white physicians, or how did that all work out?

Gene-Ann Polk: No, I don't think that I felt there was any real difference. I wasn't looking for it, I guess, and so if there was, I just didn't recognize it as such.

Tacey Rosolowski: Before we really start talking about what you were doing, I'd like to ask you to tell me a little bit about Harlem at that time. Because it was funny, I mean, I grew up in New York State and kind of knew about Harlem and its mythic status, but I think a lot of people, particularly younger people, won't even really know what Harlem was like. So maybe tell me a little bit about what it was.

Gene-Ann Polk: Well, Harlem had had its heyday, I would say, because the—what was it? The good days till the time of the Depression, Harlem

was—certainly the nightclubs in Harlem were very attractive to whites from downtown, “whites only” here, too, in most of those places.

Tacey Rosolowski: And this was also, what, Jazz Age too?

[00:12:01]

Gene-Ann Polk: It was the Jazz Age. They had the Apollo Theater and the Cotton Club and the dancing girls—I guess the Cotton Club dancing girls still around when I was at Harlem. But that’s what it was. It was a place—white people didn’t live in Harlem. However, Harlem had been built as a summer—not resort area, but as a summer-home area for wealthy whites from downtown, the center of the city, to get out of center city, center of New York City, and that’s why some of the best housing in New York is still right there in Harlem.

Tacey Rosolowski: I didn’t realize that about Harlem. So when did it shift and become more—

Gene-Ann Polk: It shifted about the beginning of the 1900s, when the large homes could no longer maintain themselves and they started—well, as whites moved out, blacks moved in, but they moved in, in one-room apartments [unclear].

Tacey Rosolowski: So those big buildings were maybe turned into rooming houses or something.

[00:13:42]

Gene-Ann Polk: And some apartment houses were being built. It was a gradual change, I think. By the 1920s, Harlem must have been almost completely black, and what they range of Harlem would have been, what they said, 155<sup>th</sup> Street south to 116<sup>th</sup>.

Tacey Rosolowski: Now, in terms of the socioeconomic demographics, was there a lot of poverty? Were there middle-class families there?

Gene-Ann Polk: There were never middle—there were a lot of blacks who had—they moved to Harlem from the same reason that the whites moved. They owned brownstones, large brownstones, and it was a good place to live. They had big churches, great churches, and well-known places like Abyssinian Baptist Church, which is still the largest church in Harlem that people flock to go see. Sunday mornings, there's a big line three blocks long of tourists waiting to get in to see what the church is all about.

And, of course, the nightclubs. There was nightlife, more blacks, I'd say, beginning in maybe the 1920s, if not a little bit earlier. But certainly by the time of the—what did they call that, just before the Depression when everything was—the Jazz Age, I

guess, and a lot of cultural things taking place. Madame Washington, who was the first black millionaire had a home there and entertained. And life started to come into Harlem to enjoy some of that culture. There were a few places where there was mixing, but a lot of places where there was no mixing.

[00:15:55]

After the Depression and right after World War II, it started to see a change, and middle-income blacks were starting to move out of Harlem into the suburbs, New Jersey, Westchester, Brooklyn—well, they had been in Brooklyn for a while—and Long . And as Harlem became more and more depressed, there were more and more of those who could move out, moved out, and what was left was a very large population of low-income people who were the ones that were occupying the single-occupancy rooms and whatnot. By the time my husband and I got to Harlem, which was in '52, things were really shifting. I think Harlem, for the most part, there were a few middle-income blacks left, but not too many. They were moving out. They wanted to have a better life too.

Tacey Rosolowski: And I suppose there were all the attendant health problems that came with a low-income population.

[00:17:35]

Gene-Ann Polk: Well, that, too, yes. Yes, it was definitely crowding. Everything was overcrowded because the only place that you could probably live in Manhattan, I would say, would have been Harlem. I think Brooklyn had a fair number of low income, but not like Harlem. So I would say by the time we got to Harlem, that was mainly the population that we were dealing with. As I say, we had a few professionals around, and the professionals were leaving also.

## Chapter 11

### *Two Busy Professionals Struggle to Find a Place to Live*

Summary: In response to a question, Dr. Polk says that she and her husband, Edwin, “lived at their hospitals” and to clarify, explains that this was not a joke. Because of difficulties finding a place to live in Harlem, they each had rooms at their respective hospitals. She describes some challenges finding a sublet and notes that they also lived together at Harlem Hospital in 1954. She notes that the difficult living situation influenced her decision to do her residency at Harlem Hospital.

Tacey Rosolowski: So where did you live?

Gene-Ann Polk: When we first got married, Ed lived in Harlem Hospital, I lived in Sydenham Hospital. [laughter] We didn't have a place to live. We were looking for apartments and we couldn't find anything. There were a lot of single-room occupancies.

Tacey Rosolowski: So you weren't joking when you said you lived in the hospital?

Gene-Ann Polk: Oh, I wasn't joking, no.

Tacey Rosolowski: I thought you were joking.

Gene-Ann Polk: Oh, no. That's where we lived the first couple of months of our marriage.

Tacey Rosolowski: Wow.

[00:19:07]

Gene-Ann Polk: It was funny, because we'd compare what they were serving for dinner and go either to his hospital or to mine, depending upon the menu. [laughter]

Tacey Rosolowski: Wow.

Gene-Ann Polk: We did finally get an apartment. It was a sublet. We got that through friends of my husband's. The apartment was on Fifth Avenue, a prestigious address, Fifth Avenue at about 107<sup>th</sup> Street, I think. That's the apartment house where they said LaGuardia once lived—

Tacey Rosolowski: Wow.

Gene-Ann Polk: —across from Central Park. Oh, we thought we were living someplace. We must have moved in maybe in October or November, a couple months after we got married in August.

Tacey Rosolowski: Of '53?

Gene-Ann Polk: It was maybe three or four months after [unclear].

Tacey Rosolowski: August of 1953?

[00:20:25]

Gene-Ann Polk: Fifty-three. The woman who sublet the apartment to us said she was going to be away for a year. She was going to St. Thomas to stay with her sister. This was a nurse. She was head of the Black Nurses Association for many years, Mabel Staupers, Keaton Doyle Staupers. I remember that name.

Tacey Rosolowski: The last name, Staubers?

Gene-Ann Polk: Staupers, S-t-a-u-p-e-r-s. But she came back early. She came back just—it was the night before or the day before we were getting ready to take our vacation in June. She came back and said, “Well, I decided it was time for me to come back, but we can share this apartment.”

And I said, “No, we can’t.” So we had just packed all of our things to take a trip to North Carolina to visit his parents, and so we packed up everything that we had back there in the apartment. It was about midnight when we got out of the apartment with all of the things that we wanted to—at least to put them in a place where we could get them when we got back. We spent the night in

Philadelphia on our way, a place where—the family with which I had lived for four years. It’s a nice neighborhood.

[00:22:15]

We took out the small bags, my jewelry, some of my clothes, and that was about it, and said, “Well, this is a nice neighborhood. We’ll just walk away and leave this.” Of course, that was not the case, because the next morning when we came out, the car window was broken and all the things we had on the backseat were gone. What we had in the trunk, by the way, were old clothes that my mother was sending south for families there, so the trunk was filled with old clothes. All of our good stuff was on the front. It was gone.

I called my father and said this happened, because the car was in his name anyway. He had given me the car. And he said, “Keep going. I’m wiring you some money. Buy some more clothes and go,” which is what we did. I was so glad the next day we were on our way to North Carolina, and that was it. But that was an experience you don’t forget either.

Tacey Rosolowski: Boy, no kidding, yeah. Tell me about—

Gene-Ann Polk: [unclear].

Tacey Rosolowski: I'm sorry.

Gene-Ann Polk: You had asked where did we live. Well, that's one of the reasons why I decided to go to Harlem Hospital, because we couldn't find an apartment. This had happened to us in June. I said, "Well, you know, I can get my residency at Harlem in July." So at least we had a room together and we lived at Harlem Hospital until just before Christmas. That would have been '54, Christmas of '54, right.

[00:24:29]

When we got an apartment at The Riverton, which was one of the housing—we didn't call them projects. Metropolitan Life had several places down in southern Manhattan, and the one place in northern Manhattan, in Harlem, was The Riverton, which was again a prestigious address and a good place to live, which was just one block from Harlem Hospital. So that's where we lived until we moved to New Jersey.

## Chapter 12

### *Confident as a New Resident at Harlem Hospital*

Summary: In this chapter, Dr. Polk describes her work as a resident at Harlem Hospital (1953 – 1955). She also notes that she was very confident as a physician at this time, though she wasn't during her internship at Sydenham. She tells an anecdote from this period: two instances when she did not call her attending for assistance because she wanted to take responsibility for delivery of a breech birth and also of twins.

Tacey Rosolowski: Now, you said when you were looking around at different places that you were afraid of the emergency room at Harlem. What was the reason for that?

[00:25:27]

Gene-Ann Polk: That was when I was looking for my internship. I came up to the Harlem area to see. I checked out two hospitals. Those were the only two I knew, Harlem and Sydenham. And as I say, I remember walking through the emergency room in Harlem, which was very, very busy at that time, and I said, "Oh, I don't know if I could really take this."

They said, "Oh, yes, and you have to ride the ambulance."

And I said, "I don't know that I could do that either." I really didn't think I could, so that's why I chose to go to Sydenham.

Tacey Rosolowski: So when you were working at Harlem Hospital after your residency was over, what were the roles that you served there?

Gene-Ann Polk: I guess I was more or less fill-in for everything that was not being done. I told you I had charge of the nurseries. That was my first real role.

Tacey Rosolowski: What did you do?

Gene-Ann Polk: I checked the nurseries every day and made rounds with the house staff, and then I went to the one clinic that we had for premature infants and those who had had some difficulty of one sort or another. That was the only Well Baby Clinic that we had in the hospital at the time; Well Child Clinic, I would say. Everything else was for sick patients and whatnot.

[00:27:25]

Tacey Rosolowski: Let me just ask you another question. Did you feel very confident as a doctor at that time?

Gene-Ann Polk: At the time I got to Harlem, yes, I did feel confident. I had some doubts during my internship because I wasn't quite sure what I wanted to do. And as a rotating intern, you went through every service, surgery, get up at five o'clock in the morning, do rounds and take blood, because they didn't have phlebotomists. You had to do the bloodwork, draw bloods. Then you'd get in the operating

room by seven o'clock with the attendings. That was all right. OB/GYN, that was all right. I delivered a couple of babies, quite a few babies, including one breech and a set of twins, which upset my resident very much that I hadn't called. I said, "I didn't have time."

Tacey Rosolowski: Wow. Wow.

Gene-Ann Polk: I did have time.

Tacey Rosolowski: So why didn't you call?

[00:28:40]

Gene-Ann Polk: I felt that I could take care of it, you know. That was it. [laughs]

Tacey Rosolowski: And did you want to take care of it, rise to the challenge?

Gene-Ann Polk: I really did. I said, hey, I'll never have another chance like this again. So that's what I did, and she was really upset with me. "Your godmother [unclear: addressing daughter, Carol Penn]." I don't think she ever forgave me for that one.

But anyway, by the time I had left—including I had to do pathology, and that was all right until they call you for an autopsy. I said, "Gee, I've never really done an autopsy." But the surgical

residents would help you do the—they do the main part of that.  
But as I say, I went through all of the services.

One thing, did I tell you that while I was there at Sydenham  
about the—I think I did tell you about the music we would do in  
the evenings.

Tacey Rosolowski: Mm-hmm.

## Chapter 13

### *Establishing Strong Connections and a Reputation as a Leader*

Summary: In this chapter, Dr. Polk notes the strong friendship she built with her fellow residents, connections maintained until today. She notes that she was the only female resident, but did not notice a difference in how she was treated, though she admits she was not looking for differences at the time. Dr. Polk explains some conflicts she had with the administration and tells a few anecdotes about how she asserted herself to make necessary changes in hospital procedure. She says she was “rebellious at this point.” She ends this chapter with a striking story about how Harlem Hospital was using torn up sheets for diapers in the nursery; she intervened so Pediatrics could be supplied with proper diapers for the babies.

Gene-Ann Polk: That was fun. I felt very confident by the time I got to Harlem that the residency was not going to be a problem. There were three of us doing the first year of residency and one chief resident during the second year, and then the three of us that started out did do a second year. We all did a second year and remained friends. The other two were fellows from Howard University, and I was, again, the only female.

[00:30:34]

Tacey Rosolowski: And you said you didn't really notice any difference and that you really weren't looking for one at the time.

Gene-Ann Polk: Well, I didn't, except I guess the nursing staff did, because after Ed—he did a year and a half of residency training and then he left

Gene-Ann Polk, MD

to start a practice, private practice, and at that point I was left—well, they had moved all the women house staff to the all-nurses’ quarters, but since we were a couple, we were still living in the main area for house staff. Had a nice room the second year. First year, the room was so small, we just took turns getting dressed. It was really that small. [laughs]

Tacey Rosolowski: Young married life.

Gene-Ann Polk: Yeah. So the second year, I said, “Oh, fun. This is great.”

After Ed left, I got this nice room to myself, and they kept telling me, “You’ve got to move. You’ve got to go over to the nurses’ facility.”

I said, “I don’t want to move,” and so I just refused to move, except that one day I came back to the room and they had packed all my things into a laundry cart and said, “Okay, you’re moving,” and gave me a tiny room in the old nurses’ quarters.

[00:32:16]

The only way to get there from the Pediatric Service was through the tunnels, and I said, “I don’t want to come through the tunnels.” That’s what I told the head of nursing and whoever else was—the security and every other place. I said, “What I want is a key to the back door so I can let myself in. I’ll walk across the

parking area,” because I felt better doing that than walking through the tunnel. “And if you give me the key, I’ll be happy.” Well, they weren’t going to give me the key, so I said, “Okay, I’ll take my calls from home.” So I did for a couple of days, and they finally gave me a key.

I didn’t like the room I was in, so most nights when I was on call, what I would do is stay in the room where the male residents in Pediatrics, because they were not on call at the same time, so I could stay in their rooms or outside, sleep in the pediatric emergency room. I just didn’t like the old room, the old nurses’ residence, and I guess I was rebelling at that point.

[00:33:42]

I know at another point they told me that—I don’t know why this happened, but [unclear] had gotten a grand piano for the house staff recreation room. One of the wives of one of the surgeons had donated it and she was giving it to housekeeping. And a couple of days later, the piano disappeared. So then we got some new furniture for the house staff, and one of the housekeeping people came to me and said, “They’re going to come and take this furniture away from this rec room. It’s going someplace. I don’t know where.”

So I called a couple of the residents together and said, “I’ve been told that this is going to happen.” I said, “We’re going to sit in these chairs and wait.”

And somebody came and said, “Oh, we’re taking this furniture.”

I said, “You can’t. It belongs to the house staff.” And so we sat. And so they finally left and we had our furniture.

Tacey Rosolowski: So you’re getting a reputation.

Gene-Ann Polk: Oh, I didn’t know that. [laughter] The first time I was on call for nurseries—we’d had our service divided between nurseries, pediatric medicine, pediatric surgery, so I was over in the nursery—

[interruption]

Tacey Rosolowski: We’ll just take a quick break.

[recorder turned off]

[00:35:45]

Tacey Rosolowski: Okay, we’re back on. Okay, we’re recording again.

Gene-Ann Polk: I looked at the babies. I said, “These are funny diapers.” I saw a nurse tearing up a sheet, and this is what they were using for diapers.

Tacey Rosolowski: Sheets?

Gene-Ann Polk: Sheets, yes. And I said, “You know, this does not make sense.” I said, “I want to see the head of Nursing right now.”

“You mean the head of Nursing? Not the supervisor, not—?”

“The head of Nursing. I want to see the head of Nursing.”

Now, here I’m the first-year resident in Pediatrics calling for the head of Nursing to come right to the nursery. And she came, and I showed her what was going on. I said, “Who ever heard of not having diapers?” The laundry service was the central service for all the city hospitals. “And why don’t we have enough diapers here?” Well, that’s how we got diapers for our nursery.

Tacey Rosolowski: Why were they using sheets? What was her explanation?

[00:37:01]

Gene-Ann Polk: They didn’t have anything else to use. Had to use something to put on the babies.

Tacey Rosolowski: I mean, was it a cost-cutting measure or what—

Gene-Ann Polk: I guess maybe nobody ever questioned it. It was always cost-saving methods from central office, you know, and, of course, Harlem and Lincoln, the two predominantly black hospitals, got the short end of everything, but there was no reason for that. We were also a city hospital.

Tacey Rosolowski: Right. I mean, with these stories, it's clear, I mean, you were establishing yourself as a person who was going to be very assertive in this hospital about what you thought was proper procedure and what you thought was the right thing to do.

Gene-Ann Polk: Mm-hmm.

Tacey Rosolowski: You said you weren't really aware of that at the time.

[00:37:55]

Gene-Ann Polk: I wasn't really aware of it. These are things that needed to be done, so let's do it, you know.

## Chapter 14

### *On Staff at Harlem Hospital: Creating a Transfusion Program; Research on Neonatal Drug Addiction*

Summary: In this chapter Dr. Polk describes two initiatives she spearheaded when she joined the staff at Harlem Hospital. She first narrates how she developed the blood transfusion program for newborns (1958/'59), eventually ensuring that the Hospital had pre-prepared kits available to transfuse infants. Next she talks about how she became involved in researching neonatal heroin drug addiction. She describes the symptoms she was observing in newborns and how she followed twenty cases to determine the effectiveness of methadone versus phenobarbital in controlling the withdrawal symptoms.

Dr. Polk next explains that she went to her chief-of-service to talk about writing up/publishing her results, only to hear from him that this investigation “wasn’t important.” He then introduced her to two male physicians from the Bronx who were looking at the same question, indicating she should help them. They published results before her, using some of her cases. Dr. Polk notes how disappointed she was, particularly in her chief-of-service.

Tacey Rosolowski: So when you were employed there, tell the story of how you shifted from being a resident to actually being on staff at Harlem Hospital.

Gene-Ann Polk: Well, it was just a matter of timing, anything else, you know. I left one position and went into the other, as they were always short of attending staff, and I had to work with the residents behind me, so

I knew them and I was continuing to mentor and teach them. And I just stayed on, that's all. I liked what I was doing.

Tacey Rosolowski: When you said you were mentoring the students who were coming up behind you, what did you mean? What were you doing for them?

Gene-Ann Polk: I meant mentoring the residents that were behind me.

Tacey Rosolowski: I see. What were you doing for them?

[00:38:49]

Gene-Ann Polk: Well, I made rounds, frequently made rounds, and things that needed to be taken care of, we took care of. A case in point would be the transfusion—you know, you see a case of erythroblastosis fetalis, that's an Rh-sensitivity, a baby going all the way through the disease of Rh-negative. You see it once and you know that at other hospitals that they're doing exchange transfusions. So we went down to Mount Sinai to see what they were doing and how they were doing it and decided, well, you know, we can do this at Harlem as well. So one of the residents who was very keen and was pushing me along, too, said, "Okay, we'll get ready for the next one that comes up."

Of course, I didn't have any prepared kits or anything. You had to do your own preparations, which meant we were filing down needles, and we had to have a nurse to constantly wash out the syringes, and it [unclear]. Several years later, they began to prepare these kits that included everything you needed, and I went to the medical board and asked them to approve buying some, which they did.

Tacey Rosolowski: What year was that, that the program was actually up and running?

Gene-Ann Polk: Well, I would say that would be about '58 or '59.

Tacey Rosolowski: I read in the background materials that you were also working with some people conducting research on neonatal drug addiction.

[00:41:17]

Gene-Ann Polk: No, I was doing the research.

Tacey Rosolowski: Oh, you were. Okay, so tell me about that.

Gene-Ann Polk: Well, I guess the first baby I observed with neonatal drug addiction was over at Sydenham. I didn't know what was going on, a baby with lots of tremors. You'd touch them and they'd just shake all

over the place. They said, “Oh, this is the baby of a drug addict on heroin.” It was either heroin or methadone withdrawal.

So there were many more cases that were occurring in Harlem, and so I began to keep track, and I think I had a group of twenty cases that I had written up and observed. I wasn't quite sure how to treat these babies, just use a little phenobarbital, that's about all I could think of. It wasn't really very scientific. Couldn't even tell you what the amount was. I was trying to control the tremors and the extreme excitability that they were showing. It took about three or four days for them to quiet down.

Then I approached the chief of service and said I made these observations and wanted to write up the cases. I think I had written up several cases. As a resident, I think I published three papers, along with staff, all on one form of tuberculosis or another, but I felt that this was something that was absolutely different. I remember my chief of service saying, “Well, this is not important. You don't have to publish this.”

But then a little while later, he said that there were two obstetricians in the hospital in the Bronx where he was working, who were beginning to observe these things and he wondered if they could come over and talk with me. I was tracking the cases.

Tacey Rosolowski: Were they men?

Gene-Ann Polk: They were men. I said, “Yeah, they can come and talk.” And then they asked me about abstracting a couple of cases. I wasn’t quite sure what they were talking about, tell you the truth, but I said, “That’s okay.” And then the next thing I know, they had published an article, the first one in any of the U.S. journals on drug addiction of the newborn, and I guess one or two of the cases that they talked about were my cases, the only baby among the group of twenty that had died. So for a long time the statistics were quoted as being one in five of these babies will die, and I knew that that was not the case, that it was really more like one in twenty or twenty-five.

Tacey Rosolowski: Oh, wow. Now, the paper that you have on your CV, you’re third author. There’s E.J. Kahn and L.L. Newman [phonetic]. Is that their paper and they put—

[00:45:07]

Gene-Ann Polk: No.

Tacey Rosolowski: Oh, this is their paper.

Gene-Ann Polk: This is one that we published in ’68.

Tacey Rosolowski: Sixty-nine.

Gene-Ann Polk: Sixty-eight or '69.

Tacey Rosolowski: So they never cited you as a—

Gene-Ann Polk: I was thanked in the article.

Tacey Rosolowski: Okay. [laughs]

Gene-Ann Polk: I was thanked and my chief of service was thanked for letting us share the cases. I mean, I was really disappointed.

[00:45:33]

Tacey Rosolowski: Well, I can imagine.

Gene-Ann Polk: Mainly disappointed with my chief of service, who had let this happen. There were some other things that I observed, but I wasn't anxious to write up anything again, tell you the truth. So that's why this other article here, how many years later, quite a few years, '68 or '69, I remember working on it.

## Chapter 15

### *Many Roles at Many Places: Pro Bono Work and Work for Low Pay*

Summary: In this chapter, Dr. Polk sketches the variety of roles she pieced together in the late fifties. She explains that she worked for the City of New York Clinics once a week, seeing babies at Well Baby Clinics. She was paid \$5.00 for this service. She clarifies that despite her many roles at Harlem Hospital, she was only paid for working at the premature nursery one day a week. She took on this unpaid work because she liked it. She saw patients in her father's private practice two days a week. She describes additional work with the Children's Aid Society. She then talks about joining the staff of Lenox Hill Hospital (approx. 1956 – 1967), where she was the only black doctor on staff. She treated pediatric allergies, working on the service of Dr. Matilda Gould. She also describes the only instance of sexual harassment she ever experienced and how Lenox Hill Hospital handled the situation. She also describes the only instance of sexual harassment she ever experienced and how Lenox Hill Hospital handled the situation. She tells an anecdote about racism at Lenox Hill.

Tacey Rosolowski: Can I ask you—I wanted to clarify something, because on your CV, from 1955 to '59, the entry is City of New York, clinic physician, Division of Maternal and Child Health. Now, was that the employer of record when you were at Harlem Hospital?

Gene-Ann Polk: No. I was actually working at off-site Well-Baby Clinics. Let's see. I had two or three of those. I must have made three, at least three a week at different clinics, you know, for a morning session. It paid \$5 an hour for seeing these babies. Well, that was more

than I was getting for seeing the babies at Harlem, because I wasn't getting anything for that.

Tacey Rosolowski: So from '55 to '59, you did that. So when you were at Harlem—because Harlem isn't listed here as an employer of record. So how were you employed at Harlem at that time after your residency was over?

[00:47:25]

Gene-Ann Polk: Well, the only thing that I was paid for at Harlem was the Premature Nursery Clinic that I did once a week, and that was, again, \$5 an hour, \$15 a session. That was the only thing that I was paid for. Everything else was gratuitous.

Tacey Rosolowski: And why did you do it?

Gene-Ann Polk: I liked what I was doing.

Tacey Rosolowski: Was that usual at the time for physicians, for women?

Gene-Ann Polk: What was usual was for physicians to donate their time for teaching house staff or making rounds. That was the only thing that was the usual thing. And since I didn't have—I really didn't have a practice, except the two days a week that I spent in my

father's office, and I just took over and did what I was doing there at Harlem.

Tacey Rosolowski: Because then from '55 to '65, you were in practice with your father, private practice, also, in Roselle.

Gene-Ann Polk: Right. That was two days a week. And that plus the Well-Baby Clinics were my main source of income. But I didn't have any expenses, so it didn't really bother me.

Tacey Rosolowski: Now, it also says that you worked with the Children's Aid Society of New York City, 1955 to '59. What did that entail?

[00:49:14]

Gene-Ann Polk: That entailed after-hours, actually. It was in the afternoon, after the kids came out of school. I went to Children's Aid Society for after-school activities. One of the places had a swimming pool, and so I checked them. And they all went off to summer camp, so during the winter I would do the examinations, and just before they went to summer camp, I'd run them briefly by me before they got on the bus, make sure they weren't carrying—hoping they weren't carrying any infectious disease with them. [laughter] Anyway, that was how I spent my time with Children's Aid Society.

Tacey Rosolowski: Now, putting all of these pieces together of a practice, did you think about putting all the pieces together? Did you want one position somewhere that was going to employ you full-time but couldn't for some reason?

[00:50:23]

Gene-Ann Polk: No, not really. Lenox Hill Hospital came along in all of this because I got an appointment at Lenox Hill Hospital. I was the first black doctor on staff there. I said they had come looking for me. I wasn't particularly looking for them.

Tacey Rosolowski: What year was that?

Gene-Ann Polk: That would have been about '56 or '57. I'm not quite sure. But somewhere in my archives is the letter of appointment I would get each year to staff at Lenox Hill Hospital.

Tacey Rosolowski: And what did you do there?

Gene-Ann Polk: I did pediatric allergy there. That's what I wanted to do. They wanted me to do adolescent medicine, but I said I didn't like adolescents, so I wanted to do pediatric allergy, which is what I did. I did it with the woman who was in charge of that program area, was a Columbia graduate, Matilda Mae Gould, G-o-u-l-d.

S\_\_\_\_\_ Mae, they called her. Anyway, and she was a tall, willowy blonde, who said, yes, she used to be a model at some point in her life.

She shared her office with her brother, who was an ear, nose, and throat surgeon, mainly known as the ear, nose, and throat surgeon for John F. Kennedy and for Johnson, LBJ. So that was the office that she shared with her brother because they didn't need much equipment and they were in the office at different times.

I worked with Matilda, I guess up until maybe the sixties, up until maybe—even after—

[00:52:45]

Tacey Rosolowski: I don't see Lenox Hill on here, but I may have just missed it.

Gene-Ann Polk: I worked with her, I guess, until—anyway, she would spend her summers in Europe, and I'd take over her practice, going into New York—it was a Park Avenue office, of course—twice a week to see patients and give them testing and give injections. I worked with her until late in '67, I think it was.

The only time I encountered any kind of sexual harassment was at Lenox Hill Hospital.

Tacey Rosolowski: Oh, really?

Gene-Ann Polk: Because there was one pediatrician there, he kept trying to feel my waist or my bottom or something, and I said something to her, and she said something to the chief of Pediatrics, and he was quickly moved off service with me. That's the only time I can remember being bothered by anybody. That was at Lenox Hill Hospital.

Tacey Rosolowski: Wow. But it was amazing they actually did something about it.  
[00:54:12]

Gene-Ann Polk: Oh, yeah. Well, I mean, I complained and they took care of it.

Tacey Rosolowski: What about the racial dimension, since you were the only—

Gene-Ann Polk: Well, we had a common coatroom for all the doctors on the staff, and I remember one doctor—this was not a pediatrician, I don't even know who he was, but I'd see him when I was changing, you know, putting on my white coat, and he smiled. And after a couple of days—it happened a couple of times, I think—he says, "I visited your country."

And I said, "My country?"

He says, "Yes, aren't you from—?" I guess he said India.

I said, "No, I'm an American black," or an American Negro.

And he never said another word to me after that.

That was my—what was my image there? I was just accepted as another member of the staff, for the most part.

Tacey Rosolowski: Let's just pause for a sec while—

[recorder turned off]

[00:55:21]

Gene-Ann Polk: I was accepted as a member of the staff. If they'd have parties, we were invited. We were having our house painted, and I was sort of complaining to Dr. Gould. I said, "Gee, I think I need to get out of the house."

She says, "Well, you can come to my place, but you can't bring your husband." [laughter] So [unclear].

Tacey Rosolowski: You want to take a little bit of a break? Want to take a break?

Gene-Ann Polk: Mm-hmm.

Tacey Rosolowski: Okay.

[recorder turned off]

## Chapter 16

### *Private Practice and the Challenges of Children*

Summary: In this chapter, Dr. Polk explains how she came to open a private practice in 1959. She and Dr. Horne had moved to Englewood, New Jersey and built a home designed to include an office for her practice. She joined the staff of Englewood Hospital and notes that she was referred all of the black patients who had no money. Her roles continued to expand. She also took on Well Baby clinics and, in 1963, became a physician for the Englewood Schools. She also started a Head Start program and served as a consultant to Head Start.

Dr. Polk also notes that she adopted her daughter, Carol, in 1960 and her son Chris in 1963. She explains that she was able to continue her career because she eventually found good housekeepers to rely on. She notes that she was ready to give up her career if she couldn't get good child care.

Tacey Rosolowski: I'd like to hear more about—you had all of these different roles you were serving. So what were the events that transitioned you from serving all these roles to actually becoming acting director of Pediatrics at Harlem Hospital? Because you became assistant director, actually, in 1962.

[00:56:33]

Gene-Ann Polk: I started my private practice in Englewood in 1959.

Tacey Rosolowski: Oh, okay.

Gene-Ann Polk: We had built our home, and it included an office in the basement area.

Tacey Rosolowski: Now, what was happening in 1959 that enabled you to create your own private practice?

Gene-Ann Polk: We had built a house. We built our house with the understanding that I was going to have an office in the house, so right from the beginning it was part of the plans.

Tacey Rosolowski: Okay. Gotcha.

Gene-Ann Polk: So '59 is when we moved to Englewood, and I started my practice in '59 and joined the staff of Englewood Hospital in '59. They were very happy to welcome me on staff, and I soon found out why, because all the newborns that I was seeing were those that didn't have any money. Black patients, no money, they were just sending right to me.

Tacey Rosolowski: Oh, wow.

[00:57:53]

Gene-Ann Polk: And the next thing I heard was, “Okay, we need somebody to run the Well-Baby Clinic in Englewood. Gene-Ann’s not that busy. Let her do it.” So I did that.

Tacey Rosolowski: And why did they think Gene-Ann was not so busy?

Gene-Ann Polk: They didn’t know about the other things I was doing, and I was relatively new in my practice, and so they assumed that I had time that nobody else had, and I could fit it into my schedule once a week to see well babies at a clinic there in Englewood.

And then the next thing, the school physician had either retired or had died, and they asked me if I’d take over the role of school physician.

Tacey Rosolowski: That was in ’63.

Gene-Ann Polk: In Englewood. And I did that, just added it to the schedule of things I was doing. And I started a Head Start Program and became a Head Start consultant in New Jersey, so I went to visit a couple of schools that were just getting started with Head Start. And then let’s see. What else was I doing then?

Tacey Rosolowski: I’m amazed.

[00:59:35]

Gene-Ann Polk: Well, children along the way.

Tacey Rosolowski: Yeah, tell me about when did the children come along?

Gene-Ann Polk: Well, I couldn't have children of our own, so we adopted, and Carol in 1960, right after we'd been in Englewood for a year, and Chris in '63. We had the two children and I had all the other things going for me, hoping that I had somebody who could come in and take over when I had to leave and go off. I had a series of housekeepers, some good, mostly not so good, until it was 19—I guess—65 that I finally got a great housekeeper who stayed with us for fourteen years and saw my kids out of high school.

Tacey Rosolowski: But you never thought, when you had adopted your children, that you would stay home or stop working?

[01:00:52]

Gene-Ann Polk: I didn't until I reached the point where I wasn't sure about the housekeeping services or childcare services, because we didn't have any—I didn't want them—I don't even know if we had a daycare. Daycare centers, no, we didn't have any daycare centers. Just had to make my own arrangements for childcare and, at one point I just felt that, "Maybe I can't do it. I'll just give up

everything and take care of the children.” I was going to do that. I was ready to do that, and that’s when I got somebody really great.

Tacey Rosolowski: Yeah, even today, I mean, when you talk with professional women, often that’s the make-or-break, you know, can they get childcare.

Gene-Ann Polk: That’s it. That’s it exactly, and I went through that. I know what they’re talking about. So childcare makes the difference between whether you work or whether you don’t work, even if the government doesn’t want to give you food stamps.

## Chapter 17

### *Burnout and a Career Crossroads*

Summary: Dr. Polk begins this chapter by noting that she realized “I was doing a whole lot.” She notes that she was seeing a lot of patients in her private practice, some of whom deferred her payments because “you have a husband to support you.” She saw many children on welfare. Dr. Polk explains that she eventually realized that she was seeing many patients for little pay and that there were many pediatricians in the area. She thought to herself, “I’ve been doing public health,” so she decided to get a degree in that field (conferred 1968).

Dr. Polk then explains an additional role she took on prior to working on her MPH: in 1962 Harlem Hospital became affiliated with Columbia University and she was given faculty status and kept the teaching programs going for the housestaff at Harlem Hospital. She was paid for this position. She then recalls a key moment in 1967, when she arrived home with her children, asked them to get out of the car and then just sat there for about an hour, unable to move. She decided to get her degree in Public Health. She explains that, at the time, Mae Gould, MD at Lenox Hill Hospital, asked her to join her private practice on Park Avenue in New York. Dr. Polk’s chief-of-service at Harlem Hospital also wanted her to take over the Directorship of Pediatrics. She explains why she chose Harlem over the more lucrative option. She became Director of Pediatrics after she got her degree.

Gene-Ann Polk:           Anyway, I think at some point I realized I was away a whole lot, and in my private practice in Englewood, I was seeing a lot of patients, a lot of whom were children of other professionals, so they were—what do you call them? Anyway, I never charged for professional children because that was the way it was in those days. You just didn’t do it. And then I had a predominantly middle-class population that was struggling to keep up with all their expenses. And I had one woman tell me, “Oh, well, I put

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your bill on the bottom because I know you have a husband who can support you.”

Tacey Rosolowski: Oh, wow.

[01:03:12]

Gene-Ann Polk: You got that kind of an attitude. I never got that in Roselle. Patients always came in with money, no complaints, and I had no complaints with them. But the middle-income folks were sort of a pain.

I saw a lot of children who were—they were under Child Welfare with the county and whatnot, and Child Welfare paid me for them, but I knew I would be paid for those services. But at some point I remember thinking, “You know, I’m seeing these kids. I’m not making any money. There are lots of pediatricians in the area, and they don’t really need me. I should go someplace where I can take care of a whole lot of children at one time.” I said, “As I look at it, I’ve been doing public health here and I like what I’m doing, but I want to be paid for what I’m doing.” And that’s when I said I wanted to go get my degree in public health. That was in ’68. I did get the degree.

At that point, I had started working for—the affiliation of Harlem Hospital with Columbia took place in 1962, and I was the only member of the pediatric staff that wanted to go with the

affiliation. I didn't want to be paid by them, but I wanted to work for Columbia with the city paying me, and then that's what I agreed to do.

[01:05:25]

Tacey Rosolowski: So that was the condition? Because you became assistant director of Pediatrics in '62, so that was how that was all arranged.

Gene-Ann Polk: That's how that arranged. There was nobody else who—and that's when I really had to assume a lot of responsibility. Every day I was in there for a couple of hours, but I was being paid by the City of New York to do that.

Tacey Rosolowski: So what were some of the projects you took on in Pediatrics at that time?

Gene-Ann Polk: Projects?

Tacey Rosolowski: Things that you wanted to accomplish within Pediatrics.

Gene-Ann Polk: Well, let me just try and think. Sixty-nine or '62?

Tacey Rosolowski: Sixty-two.

[01:06:16]

Gene-Ann Polk: Sixty-two. I just wanted to make sure that things were going on at the hospital. I mean, I was seeing newborns, I was making rounds every day with the house staff two or three hours, and it was taking a lot of time. I guess I threw that into my puzzle, too, into the pie.

Tacey Rosolowski: Now, did you have teaching responsibilities via Columbia as well?

Gene-Ann Polk: No. No, no, no. My responsibility was only there at the hospital, just to make sure that things were moving along there. We taught grand rounds. I wasn't part of a medical board, no, not at that point. It was keeping a teaching program going for the house staff that was not for the students or anything.

It all came to a climax in 1967, when I said, "I can't go on living like this," because I know I came back from Roselle one day and I told the kids to get out of the car and I just could not move. Literally I could not move. It was for about a half an hour or an hour that I just sat there waiting to get my energy back to get up and go. I said, "I just can't live like this anymore." And that's when I decided I wanted to get the degree in public health just so I could do what I liked doing and I'll be paid for whatever it is that I'm doing.

[01:08:20]

In the meantime, Mae Gould, who [unclear], had asked me, she said, “My patients like you and I like you, and you do well. I want you to come and practice with me in New York, do [unclear].”

I said, “I’ll think about it.” So I had to make that decision between private practice of pediatric allergy on Park Avenue or going to Harlem Hospital full-time. It was at that point that they did have a director of Pediatrics, and he had asked me to come in and consider having full-time staff because the city was interested in integrating Well-Baby Clinics with the curative clinics in the hospital, and he wanted me to take over that responsibility. I said I would. I mean, I made the decision that I’d go to Harlem. I don’t know that everybody was happy with that.

Tacey Rosolowski: Now, why did you make that decision? I mean, those are pretty different working scenarios.

Gene-Ann Polk: I just couldn’t see myself—well, I could have done it. I fit very well into that setting on that side of the Avenue and I could have done either, but I just had the feeling I wanted to be in Harlem. I really did, because I liked my work there and that’s what I thought I could spend the rest of my life doing. So that was my decision. However, I was not going to do that until I got my degree. That

was my arrangement with the chief of Pediatrics at the time, that I would get the degree and then come work full-time at Harlem Hospital.

Tacey Rosolowski: Who was the director at the time?

[01:10:38]

Gene-Ann Polk: Eric Kahn, K-a-h-n.

Tacey Rosolowski: Oh, he's one of your co-authors on the paper.

Gene-Ann Polk: Right.

Tacey Rosolowski: Gotcha. And was he supportive of your decision to get the degree?

Gene-Ann Polk: Oh, absolutely. He was supportive of my decision to stay at Harlem Hospital.

Tacey Rosolowski: I bet he was. [laughter]

Gene-Ann Polk: He lived in Englewood, and, actually, I did see his children a couple of times as patients. I did like him.

## Chapter 18

### *Director of Ambulatory Pediatrics*

Summary: In this chapter Dr. Polk talks about her leadership of Ambulatory Pediatrics at Harlem Hospital. She explains that she was hired into that role to integrate the Department's well-baby and curative functions, but she accomplished much more than that mandate. She integrated all services for children. She describes the factors that had kept the functions separate and then then talks about how she got people to work together. She comments on where she got her leadership skills. She also observes that the only resistance she encountered was from the nursing staff, but she eventually was able to integrate their functions to achieve her vision for continuity of pediatric care.

Tacey Rosolowski: So you assumed the role of chief of Pediatric Ambulatory Care in '68 and you kept that until '75.

Gene-Ann Polk: Yeah.

Tacey Rosolowski: So what was the scope of responsibility? I mean, you talked about integrating those two functions.

[01:11:35]

Gene-Ann Polk: Well, that was my main responsibility, was to integrate the curative and the well-baby aspects of pediatric care, but I realized—and then my office was right in the middle of all the pediatric clinics. At that point, we had clinics going on continually, some by appointment, some walk-ins. Even the pediatric emergency room was all in that same area of the hospital where I had my office, and

Gene-Ann Polk, MD

I found myself responding to other areas, other than what I—so I gave myself the title of chief of Pediatric Ambulatory Care, and I said that included the emergency room and all the clinics that I oversaw.

Tacey Rosolowski: So you really took on a whole lot more than your original mandate.

Gene-Ann Polk: Oh, I did.

Tacey Rosolowski: Gee, I'm surprised. [laughter]

Gene-Ann Polk: Yeah, I wonder why. Because they're waiting for me.

[01:12:58]

Tacey Rosolowski: Now, let me ask you, though, because so often in a complex organization different functions are often siloed, as they say. I mean, they're kind of separated in their own boxes. Having one person who saw all of them, did that help integrate services and connect them?

Gene-Ann Polk: Oh, it did. Yeah. I worked well with the nursing staff. We had a social worker, we had a pediatric recreation therapist, and we put all these pieces together and took care of the children. That was it.

It was actually during that time, I guess, that—I'm trying to remember when Barbara Barlow came on staff as a pediatric surgeon. I guess it was a little bit later. It was just easier to, say, go over all the responsibility. I guess I liked micromanaging, you know, making everything fit together. There wasn't really anybody else I could assign responsibilities to anyway, so we just worked together.

Tacey Rosolowski: Did you feel like you had a very clear vision of how it all ought to work?

[01:14:29]

Gene-Ann Polk: Absolutely. You had to work together, and these were areas where people hadn't always worked together. Nursing wanted to be responsible for this and this only, you know, and administration was under the City of New York and not under Columbia University, and I felt I needed to take care of the administration of the clinic as well.

Tacey Rosolowski: Now, what did you bring into this, basically as a leader who was able to overcome some of those boundaries and challenges between functions? How did you get people to work together?

Gene-Ann Polk: Well, I guess I had been doing that most of my life, actually. I had frequent staff meetings, gave everybody a chance to express themselves, tell me what they needed, and I tried to take care of their concerns. I had meetings with the house staff.

By that time, we had attending staff of pediatricians who were just working in the clinics, because we had all-day clinics going. So I got a meeting once a week or once a month with all of them, and they wanted some educational services added to their program. These were mainly foreign-trained physicians who had completed their residency in pediatrics and had maybe another two or three years on their Green Cards and wanted to stay. And they were good, and we worked together and they stayed. Some of them, if they were able to get whatever was required to stay on, they stayed on. At the time I retired in '94, some of them were still working in the clinics.

Tacey Rosolowski: Do you want to take a little bit of a break?

[01:17:17]

Gene-Ann Polk: Yeah. I'm trying to think about how I got them to work together. I said, "We want to work together."

Tacey Rosolowski: You know, different people in leadership positions bring such different energy, and I was just wondering—I'm also thinking back

to your experiences in your home, seeing your mom really being kind of an activist, if you will, and I'm wondering where you got your own skills from in that area.

Gene-Ann Polk: Well, I got them from her.

Tacey Rosolowski: You think so?

Gene-Ann Polk: Yeah, because I was also involved with, I guess, my sorority at that time, which she was a member of, and my godmother was also a member of the same chapter.

Tacey Rosolowski: What was the sorority?

[01:18:07]

Gene-Ann Polk: Alpha Kappa Alpha, Incorporated. And they just wanted me to take a more active role, and I said that I couldn't do it. I wasn't a good member, but not a leader in there. They were leaders. I saw how they worked well with people, that's all. You just learn to work with people. You don't force your way on situations, but you sort of blend things together and mix them, and then they work.

Tacey Rosolowski: Did you ever get any pushback because you were a female asking people to make changes or being a leader?

Gene-Ann Polk: I got pushback from nursing staff. They wanted to rotate the nurses through all the clinics, and there were some clinics that I said, “They need the continuity of care, and so you can’t keep throwing somebody new into that setting. You’ve got to provide some continuity.” And finally, they came along with that. It was a matter of everybody doing whatever needed to be done to make things work. That’s all. That was what I said, “Everybody has to do whatever needs to be done to make things work.” I guess that was my mandate.

Tacey Rosolowski: Let’s take a little bit of a break, okay?

Gene-Ann Polk: Okay.

[recorder turned off]

## Chapter 19

### *Director of Pediatrics and Perspectives on Pediatrics at Harlem Hospital*

Summary: Here Dr. Polk explains the influence of Dr. Eric Kahn, who began as Director of Pediatrics at Harlem Hospital in 1962. She explains that he had to build the program up from very little and he accomplished a great deal. In a digression, Dr. Polk talks about the photograph included below of the staff at Sydenham Hospital when she was an intern there. She discusses a paper she published with him on neonatal drug addiction. Dr. Polk then explains that, when Dr. Kahn retired in 1975, he expected a new director to come in and reorganize the program. Dr. Polk explains how she became acting director (1975 – 1977), a position that she did not feel prepared for.

[01:19:52]

Gene-Ann Polk: Dr. Kahn started in 1962 and he had to really build up a program because there was very little while I was there.

Tacey Rosolowski: And the program was what?

Gene-Ann Polk: The rest of the program was me.

Tacey Rosolowski: Oh, the pediatrics program. Oh, okay. Gotcha.

Gene-Ann Polk: Pediatric program. He was from South Africa, and, of course, the people from Harlem, when they heard a South African doctor's going to head Pediatrics, "Never," you know, and did sort of a

protest. But he turned out to be just a wonderful director of service, and people had to change their minds very quickly.

But it took that period of time from '62 until '68, I guess, certainly '67, to build up the staff and make some changes in the public areas and the hospital area itself, and that's why this paper was done. I know I had shown him when he came—first time he was in a nursery, I showed him one of the babies showing withdrawal reaction.

[01:21:23]

Tacey Rosolowski: So just for the record, so the listener know, we're referring back to the paper that Dr. Polk co-wrote with Dr. Kahn and Dr. Newman, and the title is "The Course of the Heroin Withdrawal Syndrome in Newborn Infants Treated with phenobarbital or chlorpromazine" in *The American Journal of Pediatrics* in 1969.

Gene-Ann Polk: Right. We were working on that at the time that I was doing the program in public health.

[unclear]. That's my house there.

Tacey Rosolowski: Just for the record, we're taking a little hiatus here, and I'm looking at a photo. And this is your internship class?

Gene-Ann Polk: Internship, yeah.

Tacey Rosolowski: Oh, how cool. Big class.

Gene-Ann Polk: Well, that was for the whole hospital. Yeah, she can have a copy of that.

Tacey Rosolowski: How neat.

Gene-Ann Polk: Can you find me on there?

[01:22:36]

Tacey Rosolowski: I'm not sure. I'm not sure.

Gene-Ann Polk: Well, I have to look for myself. Here I am.

Tacey Rosolowski: Oh, is that—yeah, I was kind of wondering.

Gene-Ann Polk: I'm not much like that anymore.

Tacey Rosolowski: We all change, don't we?

Gene-Ann Polk: Yeah, we do. Yes, we do. Do you want a picture of this?

Tacey Rosolowski: I'd love to. I'd love to, yes.

Gene-Ann Polk: Okay. I'll make you copy of this article.

Tacey Rosolowski: Because as I said, anything like that that I have copies of I can just drop directly into the transcript.

Gene-Ann Polk: I'll do this one [unclear].

Tacey Rosolowski: Okay.

[01:23:13]

Gene-Ann Polk: I'm ready.

Tacey Rosolowski: Okay. Well, we've been recording.

Gene-Ann Polk: Okay.

Tacey Rosolowski: So we were talking about your research, the research paper. So you didn't have any trouble convincing Dr. Kahn that this was worthwhile?

Gene-Ann Polk: Oh, no, not at all, because this was something he had never seen before, never heard of. And at that point, I guess Bellevue was doing some work, too, so that was a joint study. It actually started

while I was doing my public health degree, so, you know, I was adding little things all along the way.

Tacey Rosolowski: Now, let me ask you about the study, because you were looking at these two different drugs, phenobarbital and chlorpromazine. What did you find out about their effectiveness in treating neonatal drug addiction?

[01:24:09]

Gene-Ann Polk: Well, I think the conclusion was that the chlorpromazine was really much more effective. For one thing, it was easier to do the dosage for—was this just prematures? No, this was just for all babies.

Tacey Rosolowski: Newborn infants, it said.

Gene-Ann Polk: Newborn infants, all different sizes. So you had to determine dosages. We had been using phenobarbital at Harlem. Chlorpromazine was being used at Bellevue. I think our conclusion was that they responded maybe a little bit faster. I don't know if they did or not, but this is something that just was going to run its course. The treatment changed over time to using methadone for withdrawal in the infants as well as in adults. At that point, that was the only thing that was being used.

Tacey Rosolowski: Was the situation with drug use and drug addiction higher in Harlem than in other—

Gene-Ann Polk: Oh, much higher than any other place in the city, much higher, mm-hmm, much higher. And it was not just heroin. As the other drugs came along, crack cocaine and other things, incidence was always higher in Harlem.

[01:25:53]

Tacey Rosolowski: Now, when you finished your degree, you became acting director of Ambulatory Care in 1978.

Gene-Ann Polk: In '78, that was—yeah, so that was ten years after that.

Tacey Rosolowski: What else did you want to say about those intervening years in Pediatrics?

Gene-Ann Polk: Dr. Kahn retired from his directorship in 1975, and we were expecting a director from Yale, a new director who had been working with Columbia, I guess, for some time, working out a whole new direction for Pediatrics, working with house staff and students. He had an executive position.

Then we found out he was also being recruited for another hospital for director of Pediatrics, and our staff decided, no, we didn't want him. "If you're going to go off looking already for something else, we don't need you." So that's when, as I say, Kahn was retiring. He had already put in an extra year and he said he just had to give it up at that point.

[01:27:49]

The person who should have gone in there rightfully was a doctor who was going off to the University of Nairobi to work and he was not going to change his mind, and they finally said to me, "You're the one that's got to do it."

And, you know, I didn't want to. I said, "No, I don't want to be director of anything."

I certainly had not had anything to do with the—but at that point, they had medical students coming in and the residents from [unclear] Hospital coming into the program. We had a good teaching program going, and I hadn't been involved with any of the teaching program. They were in all the wards. What we were doing in the clinics was entirely different, and I just had doubts that I was ready to take on that responsibility, but they said nobody else could do it or would do it. "At this time, you've got to do it." And so I did, and so that's when I was acting director of Department of Pediatrics again. That was for two years.

Tacey Rosolowski: Right, '75 to '77.

Gene-Ann Polk: Yeah, it was only supposed to be for a couple of months or a year at the most. At the end of '77, I said—I had put off my sabbatical for two years and I said I really didn't want to do that anymore. I needed a break, and so I gave up that responsibility. That was '77.

## Chapter 20

### *A Sabbatical and International Travel*

Summary: In this chapter Dr. Polk describes a long trip she took during her sabbatical period to follow up with the foreign pediatricians who had trained at Harlem Hospital's Pediatrics in Underdeveloped Countries Program. She lists the countries she visited, and some of the individuals and programs she visited. In Nepal, she notes, she visited a hospital founded by a colleague who had graduated from the Women's Medical College of Pennsylvania.

Dr. Polk also observes that during this trip she saw diseases that physicians never saw in the United States. She also saw evidence that Harlem Hospital's Underdeveloped Countries Program was effective.

Tacey Rosolowski: So the sabbatical, that was '77 to '78. Now, did you do your degree during that time?

[01:29:56]

Gene-Ann Polk: No, I had done my degree in '68.

Tacey Rosolowski: Okay, that's what I thought. So what was the sabbatical? What did you do during that period?

Gene-Ann Polk: Oh, I had a wonderful time.

Tacey Rosolowski: Good.

Gene-Ann Polk: Yeah. I had thought I would spend part of the time with the pediatrician that had gone to Nairobi, and he had asked me to do

that, and then I decided, no, there was something more I wanted to do other than go to Nairobi. Then I thought about the foreign staff that we had trained over the years. I said, “I’d like to know how they’re doing. I’d like to follow up with some of them.”

I was going to an international pediatric conference in New Delhi, and I thought I could work out something that incorporated all of this, so that’s how I spent my sabbatical. Actually, I went with a group of pediatricians that was going around the world. They were leaving from California and going to New Delhi for the week of conferences and then ending up in Cairo and going back to New York. I said, “Oh, that’s one way for me to get around the world, and I’ve got the time. I’ll find the money somewhere.”

[01:31:34]

Most of these places where we were stopping, we had some people who had been residents or fellows that I could meet up with. I said, “That’s my sabbatical project, I’m going to find these folks and see what they’re doing and see if they have anybody that they want to send to Harlem Hospital.” And that was how we worked that one out.

Anyway, I made arrangements to go as far as Cairo with the group, and then there was a meeting going on in Senegal maybe four weeks later, five weeks later. It was the NAACP—no, it wasn’t. It was a meeting of—I’m trying to remember what the

black organization was. They were going to Senegal, and I said, “Oh, I can go as far as Senegal and return home from there. And then if I go to Senegal, Ed can meet me there, and we’ll have a week together and go on back to the States.”

So that’s how I ended up doing a nine-week tour around the world, some with the group, and most all of Africa, I was absolutely on my own. I have very good notes of all my contacts, because I figured at some point I’d have to be able to let them know that I had really satisfied my requirements for a sabbatical and I had to prove to income-tax folks that I had spent my money for a good reason.

[01:33:47]

Tacey Rosolowski: So what were some of the lessons learned or important experiences that you had during those nine weeks? Because that’s an amazing experience.

Gene-Ann Polk: Well, the first place I met people was not directly—Hong Kong, I picked up a roommate along the way—I didn’t know this until I started—and she had Hong Kong contacts, and so I met other doctors in Hong Kong through her. And, of course, there was a program that the pediatricians had worked out anyway, so all along the course of our travel, we were meeting with other pediatricians.

In Japan I had a fellow, and she and her husband had been house staff with Ed and me, and I had written them to tell them I was coming. And, of course, they met me and brought the children to meet me, and gave me a string of pearls and invited me to see their jeweler if I wanted to. [laughter] I did follow up with them. Actually, that same couple, with their children, came back to Harlem Hospital maybe ten years after that visit, and by that time their daughter had already become a pediatrician.

Tacey Rosolowski: Oh, wow.

[01:35:32]

Gene-Ann Polk: And then I met another fellow in Japan also. I'm trying to think of his name, but I can't offhand.

Then our next stop was Thailand. We had trained many doctors from Thailand. I made contact with one of them, who brought her husband and her son and took the time off. When I was in Thailand, they spent the whole time there as part of their vacation and showed me around their country.

Tacey Rosolowski: Was this the first time you'd ever been out of the country?

Gene-Ann Polk: No, no. Then from Thailand we went to Nepal. I didn't know anybody in Nepal, but one of the women in Nepal—no, I guess I really didn't know anybody in Nepal.

Then the next stop was, of course, India, where we had several fellows and a full program for a month—not for a month; for a week. I went back to Thailand—not Thailand; to Nepal. We went to a hospital in Nepal that had been started by a graduate of the Women's Medical College, maybe—I can't think of her name offhand, but thirty years before I had finished, she had died, but her husband was still there, and we talked, had a good talk about his wife and about the hospital and what she had done. So that Nepal was a good experience.

[01:37:38]

Then India. Some of the entertainment that was done was by the Women's Hospital there, Lady somebody or other. I'd have to look at my notes to give you the correct names on all these things. There's a female medical college that had contacts with the Women's Medical College, so that was over and above the convention itself.

Our next stop was Iran, and there, one of the women in the group had a niece who was married to an Iranian who was running a clinic up in the mountains, and she took us up there. Iran was an interesting place to visit because the Shah was still in power and

you could see the U.S. influence. So we landed in the airport. They said, “Put your cameras away and don’t take them out again until you’re beyond the airport grounds.” And it was obvious that the whole airstrip was filled with planes from the United States, and I did sneak a picture of something, I think.

We went up into the mountains—I’m always sneaking a picture—and when we went up to visit the mountain clinic, which is a public health clinic, interesting visit, but on the way up, the young girl had said to us, “Put your cameras away, because we’re going up into an area where they are preparing for something,” war or something. And I could see into the mountain itself. They had these tunnels and they were taking ammunition into the tunnels. This was in Iran. I did sneak a picture there too. [laughter] That was a fascinating visit.

[01:40:05]

I got to sit in the chair, the royal chair that had gone back and forth between India and Persia, and there were no restrictions on that. I think I have a picture of me sitting in the royal throne that had gone back and forth. And you could see the money and just the extravagance of things there in that country at that time was almost obscene. That’s all I could say.

Then after we left Iran, that was an interesting visit because the crew from “I Spy” was there doing a film, and the Shah from—

not the Shah. Sadat from Egypt was on his way to Israel for a meeting, and his staff was staying there at the hotel where we were. Some of our folks got displaced for a couple of days so that his staff could be in there.

And then we ended up in Egypt, and I didn't have any staff in Egypt, but one of my administrators had a brother who lived in Egypt, and I made contact with him and we met them another time, Carol and me.

[01:41:50]

And then the African part, as I say, I was more or less on my own. Everybody thought there were two of us because it was Gene and Ann Polk. "Where's the other one?"

I said, "[unclear] meet me at the airport."

Made stops in Kenya, Zambia, Tanzania, went over to the island off of Tanzania, Zanzibar. I did know a lot of people in Nairobi. One of my classmates from medical school, she was working with the Peace Corps in Nairobi, and then, of course, I met the doctor who had been at Harlem and we went to several meetings together.

But what I did with my classmate, I asked her if she'd ever been on safari. She said, "No." So I turned in one of the safaris that I had and got a ticket for her and we went on safari together.

She was able to make contacts with the family of people that she had trained, so that was interesting.

Then my next stop was Nigeria, and they kept saying, “Are you ready for Nigeria?”

I said, “I’m ready for anything. I’ve been all over the world.”

Nigeria is a case by itself.

Tacey Rosolowski: Really?

Gene-Ann Polk: Yeah, it was.

Tacey Rosolowski: How come?

[01:43:50]

Gene-Ann Polk: People were difficult, very difficult. I couldn’t find a place to stay. The hotel where I thought I was going to stay said they’d never heard of me, and so I kept trying to find a hotel. I finally ended up in the back of a telecommunications office that had—well, they knew what the situation was because they had two- or three-bedroom suites for people coming from elsewhere, and that was arranged with somebody that I met on the airplane. That was all.

But Nairobi—I mean Lagos, Liberia. Liberia, I met with the head of Health Services, Health and Human Services for the country. I saw her not too long ago. But she was the only member

of that particular staff that was saved when they had the coup in '79 or '80. She showed me around her hospital and I said, "Well, when I retire, I want to come back and practice with you."

She said, "Fine," which is wonderful.

And then I went from there to Ghana, and Ghana was a good connection because we had trained many doctors from Ghana, and I had been in touch with the chief of Pediatric Service over the years, and they were very, very accommodating. My host happened to be Nkrumah's son, Nkrumah, who was the first president of the country, and his son was a pediatric hematologist and he hosted me while I was there.

And then my next stop, I guess, was Senegal, where my husband—and rested.

Tacey Rosolowski: Yeah, that's a lot. Did you learn a lot? Did these services practice pediatrics in a different way or organize—

[01:46:20]

Gene-Ann Polk: They did, and their main diseases were altogether different. I saw things like measles with complications. Now, we never had too many patients with—I mean, measles at that point, in this country, was now really under control, but measles was out of control. Severe diarrheas, trichinosis, polio, things that you didn't see in this country anymore, which were common, and the polio vaccine

had just come out. I'm trying to remember. The measles vaccine there just—I'm trying to remember. Measles was—yeah, I think the measles vaccine was available then too.

Japan had an excellent program and very well-trained physicians, generally speaking, exceptionally well trained, an exceptional program. But many of the other countries, things were not well developed at all.

[01:47:49]

Actually, the name of the program that we had at Harlem where we had the fellows, especially who had several more years left on their visas, the name of our program was Pediatrics in Underdeveloped Countries. So we knew that many of them were going to be returning home and we wanted to prepare them to be able to take care of their patients at home as well as to manage the patients there in Harlem. They'd have some of the same problems.

Tacey Rosolowski: So it must have helped to go on that grand tour and actually see the situations they were going to be returning to.

Gene-Ann Polk: Oh, absolutely. As I said, I kept copious notes and never had to write it up, but just in case, I was ready to do it.

Tacey Rosolowski: Did you learn anything from that experience that helped you look at things or organize things differently in Harlem?

Gene-Ann Polk: Not particularly, but I knew that the program that we were doing for underdeveloped countries was a good one and that we were able not only to attract fellows who had trained at Harlem, but also those who had come from other hospitals who wanted that same experience.

[01:49:20]

Tacey Rosolowski: It sounds amazing, like an amazing experience, a very well-used sabbatical.

Gene-Ann Polk: Oh, it was great.

Tacey Rosolowski: So when you came back—well, since we're at kind of a stopping place, do you want to take a break or do you want to stop for today?

Gene-Ann Polk: No, just take a break for a minute.

Tacey Rosolowski: Okay, take a break.

[recorder turned off]

## Chapter 21

### *Director of Ambulatory Care Services*

Summary: In this chapter Dr. Polk explains how she took on the Directorship of Ambulatory Care Services at Harlem Hospital in 1978, after returning from her sabbatical period. She explains that she was invited to be interviewed for the position as an affirmative action candidate. She then describes her decision to become a serious candidate for the position. She comments on her increase in salary and benefits, citing Dr. Kahn as an effective mentor who helped her negotiate and operate as an effective administrator.

Tacey Rosolowski: Okay, we took just a really quick break.

So when you came back from your sabbatical—

Gene-Ann Polk: Well, when I came back, I was ready to settle back in my old job as director of Pediatric Ambulatory Care. The director of Ambulatory Care Services died, and they asked me if I would just act until they got a new director. I said, “Okay, of course,” because I was fresh at that point. [laughs] And it wasn’t going to be—as far as I knew, I knew what the director before me had done, which was just about nothing, because that’s what he said to me. He says, “Oh, that’s going to be an easy program for you.” He said, “There’s nothing for you to do except to let somebody else do it.”

[01:50:42]

When they were doing the recruiting for the new director of Ambulatory Care Services, the head of the search committee came to me and asked if I would come for an interview, and I said, "I'm not interested." He came back to me a second time and asked me the same thing, and I said, "I'm not interested."

But he said, "I need you for affirmative-action purposes. We haven't interviewed either a woman or a black." He said, "I need you in order to complete affirmative action for this particular search."

I thought about it and I said, "They're going to use me again," you know.

And then I discussed this with my family, and they said, "You've been acting this and acting that and acting this and acting that. About time you took a permanent job. If you want to do it, go ahead and do it."

[01:51:57]

So I told the head of the search committee, I said I was ready to interview and that I was an active candidate, and I said to myself, having met the other people who had come through, said, I'm the best qualified, and if they don't ask me to do this, then there's something wrong with them, not with me.

Tacey Rosolowski: Can I interrupt you just for a sec? Because you said you felt like you'd been used. What were some other circumstances in which you felt that way?

Gene-Ann Polk: Well, I know in the Pediatrics Department at [unclear] Hospital—that's what it was—a couple of their grants, they'd write us into the grant and without us knowing that we were written into the grants. I found out when I went for a couple of the grant, I guess, interviews. I said, "They're writing us into these grants, and we're not getting anything out of any of them."

Tacey Rosolowski: So they were getting money for you, but you weren't being paid the money?

[01:53:08]

Gene-Ann Polk: That's right. We weren't. They used our statistics and they used our patients and published on the basis of that, like I have been used before.

Tacey Rosolowski: Right, with the research [unclear; referring to research on neonatal drug addiction].

Gene-Ann Polk: The first time, yeah.

Tacey Rosolowski: Did you feel that there was a racial dimension or gender dimension, or was that just professional lack of ethics in general?

Gene-Ann Polk: It was a little bit of everything. [laughter] It's just being used, maybe because Harlem, black female, maybe, you know, all of it thrown in together. And so that's one of the reasons why I said I was an active candidate, but I knew I was the best one that they had for the position.

Tacey Rosolowski: Now, I wanted to ask you one other question because you said you kind of conferred with the family about this decision.

Gene-Ann Polk: I did.

Tacey Rosolowski: Why? Why did you have a family conference about this question?

[01:54:15]

Gene-Ann Polk: Because this was the first time I was going to be an actual director of Service, you know, and I had to—and I was going to assume—I was no longer going to be acting, and it was no longer a subclinical position, that I had to take that responsibility. And they said, “Okay.”

Tacey Rosolowski: And were you thinking ahead to the fact that the heavier responsibilities meant this was going to cut into your time with the family?

Gene-Ann Polk: Oh, I didn't think it was going to be a heavier responsibility, but that's what it turned out to be, because I found out Ambulatory Care included the Emergency Room, all the clinics, the Homecare Department, Employee Health Service, Ambulatory Detox Program for drugs, and I guess it included all the clinics, yeah, because I had clinic chiefs, like I had been.

And then it was shortly thereafter that we got involved with the network of primary-care clinics. There were things happening in the community, there were things happening in public health, and things just seemed to explode, actually.

Tacey Rosolowski: So how did you get the news that you had been given the position or were being offered the position?

[01:56:09]

Gene-Ann Polk: Oh, they offered it to me the week later. That's all. They offered it to me, and I accepted.

Tacey Rosolowski: And were you happy with the package? Did they give you a raise?

Gene-Ann Polk: Oh, yeah. I was able to negotiate a good salary increase, and the perks were all good. I was happy with that. I guess I had learned from Dr. Kahn how to negotiate a bit.

Tacey Rosolowski: Was he kind of a mentor in that way?

Gene-Ann Polk: He was, yeah. He was good, because when I went full-time, I wasn't sure of what I was really buying into, and I had to take his lead and he was good. When they asked me, "What kind of salary do you want?" I said, "I never even thought about it," you know.

Tacey Rosolowski: I want to take one quick second.

[recorder turned off]

Gene-Ann Polk: He proposed a salary which I thought was very generous. I didn't know where to start. Remember, for years I'd been working for nothing or for very little, and it turned out to be a good salary he offered me. And then when it came to some of the side packages, you know, investment things, and I didn't know, he helped me make decisions on that. He was somebody I trusted, and I think I was right in doing so.

[01:58:05]

One of the things he said to me when I took over as the acting director after he retired, he says, “Don’t give away anything, because a new director coming in has to know what he’s getting or what they’re getting. So don’t give away any positions, any salaries, any space, anything.”

They were always trying to cut things, and I said, “I can’t cut, because you’ll never get a new director if you cut anything right now.” So that’s how I was able to maintain the department for him and that’s one of the things I remembered as I was running my department. Don’t cut. “Not giving anything away, not giving you any space, not giving you any staff, not giving any money.”

Tacey Rosolowski: Do you want to close off for today?

Gene-Ann Polk: I think so.

[01:59:09]

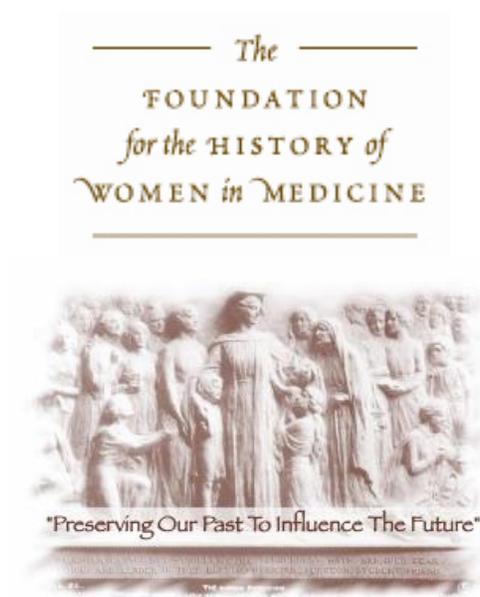
Tacey Rosolowski: Okay. Well, thank you very much. Can you tell me what time it is? Oh, I’m sorry.

Gene-Ann Polk: That’s okay. It’s 3:19.

Tacey Rosolowski: It’s 3:19.

Gene-Ann Polk: My watch is fast.

[End of December 9, 2014 interview]



**The Foundation for the  
History of Women in Medicine**

**The Renaissance Woman in Medicine Oral History Project**

**\*\*\***

**Gene-Ann Polk, MD**

**Foundation Board Member Emeritus  
Professor Emerita, Clinical Pediatrics, Columbia University**

**Interview Session Three  
10 December 2014**

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**Session Three**  
**Interview Identifier**

[00:00:00]

Tacey A. Rosolowski: Well, I am now officially recording and I will just put the identifier on. It is 11:36. I'm Tacey Ann Rosolowski, and today I'm at the home of Dr. Gene-Ann Polk and Edwin C. Horne, who is also present. And Dr. Chisum, I'm afraid I've forgotten your first name.

Gloria Chisholm: Gloria.

Tacey A. Rosolowski: Gloria Chisum, a friend of the family's, is also present today. And I'm here for my third session with Dr. Polk. So thank you again for agreeing to participate in the project.

Gene-Ann Polk: I'm glad to have you.

Tacey A. Rosolowski: Yeah, it's really a lot of fun.

[telephone interruption; recorder turned off]

## Chapter 22

### *The Importance of Telephones to Private Practice*

Summary: In this chapter, Dr. Polk talks about the importance of communications for private practice physicians. She notes that when she began her practice, answering services were just becoming available and she signed up for one very early. She recalls always carrying loose change so she could call the service to collect messages, even calling during intermissions at the ballet (she wasn't going to miss the ballet). She also recalls getting a pager in the 70s, after she closed her private practice, passing it among the staff on call at Harlem Hospital.

Tacey A. Rosolowski: So we had a brief break. This session is also being videotaped, and

Dr. Chisum wanted to make sure that that was all set up correctly.

All right. So we had plotted and planned a little before the interview session started and we have our new official start time.

It's about 11:37. You had wanted to tell me a bit more about private practice and particularly about the telephone situation, which I found intriguing. So tell me.

[00:01:14]

Gene-Ann Polk: Remember this was the days before cell phones. That's the one thing.

Tacey A. Rosolowski: There we go.

Gene-Ann Polk: And keeping contact with your office or knowing what was going on if you weren't there at the home was a little more difficult than it is these days. Actually, I think when I first went into practice, the telephone answering service was just starting to come in, and as soon as I could, I signed up to get the answering service. But then to keep in touch with the answering service, you had to call them, without a cell phone or—and so I always carried a lot of loose change in my pocketbook, had five cents and ten cents. You could make a call for that amount. And then periodically I would call answering service to see if there were any messages, anybody wanted a house call or whatnot. That was fine.

I even managed to get to the ballet a couple of times because at intermission I'd rush out and put my money in the cell phone and see if there was anything waiting for me. So sometimes I was covering not only myself but maybe another doctor, and I didn't want to miss the ballet.

[00:02:50]

Then I guess cell phones came—when the cell phones first came in, they weren't quite as, I don't know, as clear or as elaborate as what you can get now, but I got a cell phone as soon as I could. By that time, I was out of private practice, and what we were doing was passing the cell phone around in the hospital to

whomever was on call that particular night so that they didn't have to be chained to the telephone.

Tacey A. Rosolowski: Oh, interesting. Now, was this in the late eighties, maybe, with the cell phones, or was it into the nineties that they were available?

Gene-Ann Polk: Oh, no, it was in the—I guess the first ones started—maybe they weren't even cell phones. They were just ways of contacting you, now that I think about it. It was more or less a buzzer system, which meant—

Tacey A. Rosolowski: Like a pager.

Gene-Ann Polk: A pager, that's what we used, the pager, and that was in the seventies. So I'm trying to remember when I got my first cell phone. Of course, that was long after I had given up private practice, didn't really need one.

Tacey A. Rosolowski: We really forget. We've become so dependent on technology.

[00:04:14]

Gene-Ann Polk: Oh, absolutely.

Tacey A. Rosolowski: We forget, yeah.

Gene-Ann Polk: But it was important that you keep up with your practice. That was all there was to it.

## Chapter 23

### *Memories of Harlem in the Fifties and Sixties*

Summary: In this chapter Dr. Polk tries to capture the feel of Harlem in the years when she and her husband first lived and worked there. She describes the “125<sup>th</sup>-Street corridor” with white-owned businesses that served an exclusively black clientele. [She also recalls earning \$50.00/month as a resident.] Adam Clayton Powell led an early protest to demand that the Blumstein’s Department Store hire black saleswomen. Dr. Polk also recalls that a section of Harlem had a gypsy population. She tells an anecdote about feeling slightly threatened by the gypsy family of a very ill baby. She notes that patients were sometimes uncooperative and this was part of the feel of Harlem. She also explains that the hospital system demanded that hospitals perform a certain percentage of autopsies on patients who died under their care.

Dr. Polk next explains that the predominantly black community around the hospital had a neighborhood feel. The cultural life of Harlem started above 135<sup>th</sup> Street and this was where writers met and where the restaurants and nightclubs were located. She recalls that Harlem Hospital would invite entertainers performing at the Apollo Theater to come and entertain the staff at the Hospital Christmas party. She also mentions the churches that were an important part of Harlem culture.

Tacey A. Rosolowski: You had also mentioned that you wanted to talk a little bit more about what Harlem was like.

Gene-Ann Polk: Mm-hmm. I realized that there were a few things that I could have said other than the Harlem Renaissance. When we arrived at Harlem, the main thoroughfare was 125<sup>th</sup> Street, and there were stores all along the 125<sup>th</sup> Street corridor. The only thing was none of them were black-owned; they were all white-owned. And the

first store that came in, I guess, was Jackie Robinson's Divega store on 125<sup>th</sup> Street at the east end.

Tacey A. Rosolowski: What was the type of store?

[00:05:16]

Gene-Ann Polk: A Divega store was the—no, he had a haberdashery. I take it back. I mentioned the Divega store because that's where the televisions were, and we wanted to buy a television, but because we were making \$50 each a month—that was our salary as interns—we didn't qualify for credit of any kind. We had to wait until we had enough money to pay for the whole thing. That was the Divega store. That was the television store.

And the other thing, there was one restaurant called Frank's on 125<sup>th</sup> Street and this restaurant did not serve blacks at all. It was restricted to white clientele. And I think when they finally started opening up, people went to see if the food was really any different, and it wasn't, and maybe it wasn't quite as good as some of the eating. But Frank's was—I don't know how long it had been there, but it was part of that whole strip of white-owned businesses.

Tacey A. Rosolowski: Now, what happened to those white-owned businesses as Harlem evolved? Did they move or did they become integrated?

Gene-Ann Polk: Well, Blumstein's was the department store, and all of its clerks were white. They didn't have any black clerks. It was Adam Clayton Powell who led a protest to see that black girls were hired in the store as—what do you call them? Salespeople. As salespeople. And that must have been—it was after we had arrived in Harlem. That would have been maybe in the sixties, early sixties. This is all before the real civil rights period. But here the clientele was essentially black along that strip, but the jobs were not black. They were restricted, just as the restaurant had been restricted.

[00:07:59]

Tacey A. Rosolowski: Did you participate in any of the protests or were you involved in conversations about all of this?

Gene-Ann Polk: I was involved in conversations, you know, just casually, but I wasn't participating, no. I may have even been living in New Jersey at the time.

Tacey A. Rosolowski: Anything else about Harlem?

Gene-Ann Polk: Well, the area around Harlem—let me finish with the history, because there was a section all the way in the east part of 125<sup>th</sup> Street that was predominantly gypsy, and we had gypsy patients at Harlem Hospital. Actually, I remember one child who was very sick, had pneumonia, and I knew this baby was not going to make it. The gypsy family was down in the corridor of the hospital and they were chanting and praying, and the father was at me, “Doctor, get my child well,” you know.

And I was a little bit scared, and I called one of the attendings. I said, “You’ve got to come see this baby so I have some backup.” And the attending came right in, which was good for me.

[00:09:33]

Tacey A. Rosolowski: This was during your internship or your residency?

Gene-Ann Polk: During my internship. Sorry. I’m sorry. It was my first year as resident. This was Harlem Hospital. It wasn’t Sydenham.

The baby did die, and I had to ask for an autopsy, and when I did, I was a little concerned about meeting with the parents. It sounded a little threatening in terms of “Make my baby well,” you

know, "Get my baby well," but it turned out to be all right. I sat facing the door so that if necessary, I could get up and get out easily. These were little things that you did. Sometimes you had parents who weren't that cooperative. And always, if a patient died, you had to ask for an autopsy. That's all.

Tacey A. Rosolowski: Why did you have to ask for an autopsy?

Gene-Ann Polk: Each hospital was required to do a certain percentage of autopsies, and I'm not quite sure, but I know that this is true of the city hospitals, that if patients died, you needed to have a certain percentage of autopsies. And certainly in Pediatrics we had a lot of premature infants who didn't make it. So I guess maybe we had this many on our service as other services, if not more.

[00:11:25]

Tacey A. Rosolowski: Seems like it would be terribly upsetting for the parents. I'm just curious why they would require that.

Gene-Ann Polk: Why it would be required?

Tacey A. Rosolowski: Yeah.

Gene-Ann Polk: I don't know whether it was just a New York City hospital requirement or whether it was—I think in hospitals, period, the only way they could confirm, maybe, a diagnosis. And I don't recall hearing of any such requirement afterwards, to tell you the truth.

Tacey A. Rosolowski: Yeah, it's odd. Were there other things about Harlem that kind of shaped the way you practiced or felt in that atmosphere?

[00:12:15]

Gene-Ann Polk: Now, around the hospital, itself, it was predominantly black. There were restaurants and mom-and-pop stores and cleaners and barbershops and whatnot. It was sort of a little community itself just around the hospital, and this was entirely different from the 125<sup>th</sup> Street area, where the Apollo Theater and all this other activity was taking place.

The brownstones started, I guess, maybe going up above 135<sup>th</sup> Street, for the most part, and this is where the culture—where writers would meet, Langston Hughes and his guild or group. I was trying to think of the woman's name who wrote *Our (sic) Eyes Were Watching God*.

Tacey A. Rosolowski: Toni Morrison?

Gloria Chisum: Zora Neale Hurston.

Gene-Ann Polk: Oh, it'll come to me later on, because, as you know, this was one of the first novels published by a black female, *Our (sic) Eyes Were Watching God*. It was something that for years—they're still talking about it as a model for writers.

Tacey A. Rosolowski: I just don't remember the name.

[00:13:59]

Gene-Ann Polk: I guess I'm trying to fill in the Harlem feel, and that was about it. There were restaurants where you could eat, places like Small's Paradise, and you'd go to Small's to get fried chicken and waffles. That was the place to go. And then any number of nightclubs. One of the things we would do as residents at the hospital, something I guess they'd been doing for years, was when they had their Christmas party, they would go to the Apollo Theater to see who happened to be playing at that time and ask them to come to the hospital and entertain the house staff. And most of the time they would cooperate.

I know Ed and I went down one time, and it was Louis Armstrong who was performing. He didn't come, but he suggested a jazz pianist by the name of Willie "The Lion" Smith. I guess, you know, jazz folks know about Willie "The Lion." I hadn't

heard of Willie “The Lion,” but he came and he would come each year, even after we had left. And Willie “The Lion” apparently was a forerunner or very active in early jazz and very well regarded. We got to know him quite well.

Tacey A. Rosolowski: Interesting. So there was sort of community connections between the hospital and the surrounding community.

[00:15:49]

Gene-Ann Polk: Oh, yes. And, of course, the churches were very much—I mentioned Adam Clayton Powell. He was the minister at the Abyssinian Baptist Church. He was also a congressman and activist, and he kept Harlem rolling.

## Chapter 24

### *A Spiritual Person*

Summary: Dr. Polk explains that she is a spiritual person. She explains her denominational attachments over the years. She also explains that she has recently become involved in mindfulness practice, to relax, to become more connected to herself, and also to feel connected to a higher spiritual being. She comments on the effect of her spirituality on her medical practice.

Tacey A. Rosolowski: Now, you mentioned that when you were growing up, your mother was really active in the church. What denomination were you raised in?

Gene-Ann Polk: Methodist. It was African Methodist Episcopal, AME Church.

Tacey A. Rosolowski: Did you continue to practice when you became an adult and had your own family?

Gene-Ann Polk: I did, not in the AME Church, because the closest church to us in Englewood was a Lutheran church, where the kids went to Sunday school. And then I joined the church and was involved with several of the activities there. I was on the board of directors, I guess, for one period of time, short period of time. But I didn't stay with that church once my children had decided they didn't want to be Lutherans.

When I came back from Africa, at that time I eventually joined another Methodist church. It was Galloway United Methodist. It was United Methodist Church, and maintained my membership. I'm still a member of that church, even though I'm also a member of a church here in Lafayette Hill, another United Methodist church.

Tacey A. Rosolowski: So do you consider yourself a very religious or spiritual person?

[00:17:54]

Gene-Ann Polk: I would consider myself a spiritual person, religious to some extent, but certainly spiritual. That was all part of growing up and very much a part of most lives of black people. In addition, since I've been here at The Hill, I've been involved with mindfulness for the past three years. I guess I started that shortly after this illness, but I found mindfulness to be quite a relaxation and a way of connecting with myself, mainly, and also connecting with some higher spiritual being.

Tacey A. Rosolowski: Did you feel or do you feel as though your spiritual senses had an influence on the way you practiced medicine?

Gene-Ann Polk: I think it did, because it was the way I felt about people that I was taking care of, that they were all important, all God's creatures.

Tacey A. Rosolowski: I've spoken to many physicians who feel that way from all different denominations. It's very interesting. So that doesn't surprise me.

[00:19:42]

Gene-Ann Polk: Never really thought about it, but, you know, I guess that was part of feeling a part of everything, involved with the world and all its people.

Tacey A. Rosolowski: Is there anything else that you wanted to tell me about Harlem before we move on?

Gene-Ann Polk: No, I think I've covered—about Harlem Hospital or—

Tacey A. Rosolowski: Or Harlem. And then we can talk about your role as director of Ambulatory Care.

## Chapter 25

### *Director of Ambulatory Care Services: Setting Up a Unique Service*

Dr. Polk first lists the variety of operations she was responsible for when she took on the Directorship of the Ambulatory Care Services at Harlem Hospital, noting that the scope of responsibility was much greater than she had realized. She then describes the process by which she and others at Harlem Hospital set up a unique service. She recalls meetings in which it was clear that plans were in the works to dramatically shrink the area served by Harlem Hospital. Dr. Polk next explains how another initiative enabled her to protect Harlem Hospital. She attended in which the Secretary of Health and Human Services, Joseph Califano, requested proposals for clinics that would provide a “home base” for delivery of medical care. She explains that Harlem Hospital submitted a proposal to open “store front clinics.” This proposal was accepted and funded by the Federal government. She recalls traveling around Harlem looking for clinic locations, then worked closely with an architect to design the clinic spaces. She describes the first clinic to open, the challenges involved, and staffing. She notes that it took only one year to open the clinics. She also explains that the results were “great” and that this initiative established the basis for the Harlem Primary Care Clinic Network, which eventually became known as Renaissance. To demonstrate the innovations in this program, Dr. Polk talks about her work with computer expert, Dan Cook, who computerized the clinic records, enabling Harlem Hospital to submit hard numbers with their reports to the Federal government. This method of reporting was copied by others.

Gene-Ann Polk: Okay. I think when we said that I wasn't quite sure how extensive a service that Ambulatory Care covered, I mentioned the emergency room, the clinics, the home care, the Employee Health Service. They had also a Nursing Service for nursing students.

But then I didn't know about some of the other programs, such as the methadone maintenance, which included, what, four offsite clinics where methadone maintenance was taking place, and

then we had a clinic onsite which was a detox clinic. It was part of Ambulatory Care, really never should have been, should have been part of Psychiatry. That was a large part of the program.

Then shortly after I took over as director, there was a meeting downtown that the president of the medical board asked me to attend. It was secretary of Health and Human Services. Califano was his name?

[00:21:55]

Tacey A. Rosolowski: Califano, isn't it?

Gene-Ann Polk: Califano had come proposing that storefront clinics, primary-care clinics, be opened to provide services and give people a home base for medical care, rather than using the emergency services or walk-in clinics. And he asked for proposals. I brought the news back to the hospital.

Then there was another meeting I attended, had to do with the Northern Manhattan Medical Consortium or some name like that, and that was really very interesting because the focus of that meeting was to tear Harlem apart. They wanted to give the southern part of Harlem to Mount Sinai Hospital, the northern and western part to Columbia University, and the eastern section to Metropolitan Hospital. That was their proposal. "We've got it planned. We're going to provide services through these other

hospitals. Harlem Hospital doesn't have to do all of this." Well, yeah, it was disturbing. I came back and—

Tacey A. Rosolowski: What did you think the reasoning was behind that?

[00:23:35]

Gene-Ann Polk: The reason behind it was, I guess, to diminish what Harlem Hospital itself meant to the community. That's what sparked my interest and our interest. I said, "No, this can't happen. You know, Harlem Hospital has been taking care of these patients all along. There's no way that any other hospital is going to do this."

So we wrote our own proposal. I was able to get the directors of Medicine, OB/GYN, and at that point the director of Pediatrics, because I was doing Ambulatory Care, get them all seated around the table with a few community people and to start talking about how we could take care of our own population with the so-called pillboxes or these storefront clinics.

So we wrote our own proposal, which did not include—well, it did include establishing—we said we were going to establish four clinics, clinics throughout the Harlem area, and that proposal was accepted and funded by the federal government and, we found out later, with matching funds from the city. Koch was mayor at that point. We got the funding and then we had to start finding places to do all of this.

Tacey A. Rosolowski: Open the clinics.

[00:25:36]

Gene-Ann Polk: Because the storefronts weren't going to do it. So I spent a lot of time just going through Harlem, looking for possible sites for these clinics. I went to the bowling alley that had closed. I went to a department store that had closed. He wanted to show me the basement because the area included a basement as well as one floor, one flight, one storey, and the basement was dark, had a dog in there patrolling the area. You had to be careful where you were stepping. I didn't stay down there too long.

In the end, we proposed using what had been Well-Baby Clinics which the city was trying to close anyway, to put all of our primary-care services. There were two Well-Baby Clinics in housing projects and then that was two of our clinics, and then two of the clinics we put into schools. They were Quonset hut-type settings that had been used by several of the schools and were not being used, and we said they thought we could use these, and we had the money to make the changes.

I worked very closely with an architect from the Health and Hospitals Corporation, and we ended up with four really very nice sites. The first one to open was in a housing project and it had been a Well-Baby Clinic. Getting that one open was fun of sorts

because you had to work with the council for the project itself, and they weren't too happy about the idea of us using the front door. They said, "Well, you can't come in our front door. You can get the clinic, but you can't use our front door. You have to put your own door in." Well, it turned out we did need a back door anyway because we needed an exit, so that was not a problem. But they weren't too happy about us using the front door of their clinic.

[00:28:41]

Eventually, the woman who was the president of that particular board just said to me one day, she said, "Dr. Polk, I don't like you. I don't like you because you're you. That's all." [laughter] I sort of knew what she meant by that. She didn't like me because I was me.

But several years later, she recanted and said, "You're all right, you know. You're all right."

So in the meantime, I was trying to send our youngest best-looking house officers over there to try and placate her.

We didn't have any problems staffing these clinics because in the hospital we had many residents in Medicine and Pediatrics who had obligations to the National Health Service Corps, and, of course, they were interested in maintaining—these young doctors wanted to stay in Harlem. They liked the idea that they could have a salaried position. And the National Health Service Corps, for the

most part, was willing, very willing for us to take them on, except in the case of one resident who had finished an OB/GYN and she was set to go to an Indian reservation, and I protested the fact that she could not stay in Harlem. I said, "You know, we train these people. We train them to take care of our patients, and then you want to put them elsewhere. We want to hold on to this doctor. You just have to let us have them." They let us have her. Initially, they did not want us to have her, and we did need an OB/GYN.

[00:30:56]

Tacey A. Rosolowski: Well, that training is a huge investment.

Gene-Ann Polk: Oh, it was.

Tacey A. Rosolowski: And you might as well have some benefit from it after the fact.

Gene-Ann Polk: Yeah. So, as I said, we had no problem staffing those clinics. Our proposal had covered adequately everything that was needed: changes in the buildings themselves, all the equipment that we needed in providing for staff, and then providing for a group of what we called outreach workers to go into the area and talk to young families in particular, and encourage them to come to our clinics.

Tacey A. Rosolowski: Once the program was up and running, what was the impact of them?

[00:31:48]

Gene-Ann Polk: The program, we had one year to do this.

Tacey A. Rosolowski: Oh, my god. [laughs]

Gene-Ann Polk: We had one year to do it, and we did it, a lot of cooperation from the directors of Medicine, Pediatrics, and OB/GYN, and we worked well together. And then there was one other clinic that we incorporated; it was a neighborhood family-care clinic that had belonged to Sydenham Hospital, which was closing. The city wanted to close that hospital. They closed that hospital and we took over their outpatient facility.

Tacey A. Rosolowski: I wanted to ask you, because yesterday when you were talking about how you reorganized Pediatrics, you talked about how you had this idea for a very integrated system for care delivery, and I was wondering if you were bringing a similar kind of perspective when you were adding your input to the proposal development, and also whether you kind of drew on the connections with people that you had built when you were in Pediatrics.

[00:33:06]

Gene-Ann Polk: Very definitely. What was unique about our program was that we had a central administration that oversaw the entire operation. Each clinic had its own little director, but they had to relate to a central area.

Tacey A. Rosolowski: And what was the reason for that?

Gene-Ann Polk: Well, there had to be something unique about the program to make it attractive, for one thing, in terms of the proposal, and four clinics was one thing, but what else was different about this? The central administration and the outreach workers were the things that were different, and things that were not being done elsewhere, well, actually, elsewhere we didn't know about anybody else doing networks of primary-care clinics.

Tacey A. Rosolowski: Interesting.

Gene-Ann Polk: So this was all new.

Tacey A. Rosolowski: And what was the result when you evaluated how effective it was?

Gene-Ann Polk: The results were good, excellent. We did very well. Those clinics are still going.

[00:34:23]

Tacey A. Rosolowski: Wow.

Gene-Ann Polk: They are the basis for what they call Renaissance—I guess Renaissance is now a consortium of Harlem and Metropolitan Hospitals and all of the outpatient clinics. I'm trying to remember what we initially called this. We just called it Harlem Primary Care Clinic Network. Eventually it changed its name to Renaissance. And this was, as far as I know, first in the country. It was a real network of clinics. We were able to make excellent reports and we had to report frequently about one thing or another to the central office of the Health and Hospital Corporation.

I was fortunate in having the young man who was directing the methadone maintenance clinics was also a computer expert and amazing. He did, I think, eventually connect all of the computers in the hospital with different directors of service. I proposed to him, I said, "Okay, Dan, we need to get this information downtown. They're requiring statistics about numbers of patients we're seeing and what kinds of patients we're seeing," all kind of things. You can imagine.

And he'd come back the next day with a program, definitely able to do this. So I'd give him the question and he'd give me an answer, and the reports we were sending were absolutely fantastic

and amazing, because none of the other hospitals in the Health and Hospitals Corporation was doing this. They didn't have the expertise.

[00:37:06]

Dan had first put all of the four detox clinics—methadone, not detox, methadone maintenance clinics, he put them all on computers. He had patients' names in there, the doses they were receiving, when they were receiving, what they got, when they got it, if they came regularly. He had all of that information.

Tacey A. Rosolowski: Wow.

Gene-Ann Polk: And he could do the same thing for not only our network, but for our clinics in the hospital itself, and I think, as I say, amazing reports. Nobody else was doing this. If Dan and I continued to work together, we might have had our own little business going.  
[laughter]

Tacey A. Rosolowski: Medical technology.

Gene-Ann Polk: Absolutely.

Tacey A. Rosolowski: That's funny.

[00:38:06]

Gene-Ann Polk: I had to use him in another capacity a little bit later on.

Tacey A. Rosolowski: What was his last name?

Gene-Ann Polk: Dan Cook.

Tacey A. Rosolowski: Did you want to take a little bit of break and get some water?

Gene-Ann Polk: Yeah. Let's finish up with Harlem, with the Ambulatory Care Services, and then I'll go on to my next job.

Tacey A. Rosolowski: Okay. Did you want to take a little break and have a drink?

Gene-Ann Polk: Mm-hmm.

Tacey A. Rosolowski: Okay. Let me just pause.

[recorder turned off]

## Chapter 26

### *A Highly Political Initiative for Senior Citizens; Finding Staff for the Primary Care Clinics*

Summary: In this chapter Dr. Polk first talks about an unfunded mayoral mandate she received to develop a primary care center for senior citizens. Dr. Polk explains why she took on this challenge. She also recalls the day the center opened and the “gold key” she was awarded by Mayor Ed Koch. She also comments on the fact that the clinic closed relatively quickly, indicating that its opening was “for show” and a very political move by the mayor.<sup>2</sup>

Next Dr. Polk talks about the challenge of creating continuity of care for patients treated both at the Harlem Hospital Clinics and the Primary Care Clinics. She describes the role of the “patient navigators” in providing smooth transitions. She notes that she “took the most pride” in the Primary Care Clinics. Dr. Polk then explains how she was able to keep staffing the clinics by offering community practitioners opportunities to earn Continuing Medical Education credits.

Tacey A. Rosolowski: Okay. We are recording again. So what were the other big accomplishments or big projects you took on as director of Ambulatory Care?

[00:38:46]

Gene-Ann Polk: Well, the first one I had to do was—and that was, I guess, within weeks after I assumed the position. The director of the hospital said, “Mayor Koch’s big plan now is to establish primary-care

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<sup>2</sup> The Interviewer took a photograph of Dr. Polk holding the gold key she received from Mayor Koch. It is available via the Archives.

clinics for senior citizens and he wants us to start one in the Harlem River Houses.”

And I said, “Fine.” I said, “What are you giving me in terms of money to do this?”

He said, “Nothing.”

I said, “I can’t do it. You know, I need to put a staff in there. This is only one day a week, but even so, you need a staff and you need some equipment.”

“Well, take some of the equipment out of the clinic and put it over there.”

We found the one room in the—I mean, before I did that, I said, “Okay, so you want a show.” [laughs]

He said, “Okay.”

I said, “I’ll do it this time, but I won’t ever do it again. Don’t ever ask me to do it again.” And I meant that, because how do you do something with nothing? But we took an examination table and a lamp from one of the clinics, and I assigned one of the doctors once a week to go over to start this thing.

[00:40:25]

The day that it opened—and I have a gold key back there that the mayor gave me—was a big fanfare. He had a city band of some sort playing music, a platform that had two rows of people there sitting, and community officials and whatnot. And, of

course, the hospital director had told me, “You’re going to have to give a speech.”

I said, “No, I’m not.” [laughter] So I think it must have been the president of the medical board or the vice president of the medical board who finally gave a speech. But in the end, I remember I had to make my remarks, and I told the community, I said, “This is for you, and if you see anything you want that we’re not doing, just let us know and we’ll make the changes.”

But I have back over here the gold key for the City of New York that the mayor gave me, he signed, and then the head of Housing signed it, the head of Aging signed it, the head of Health and Hospitals Corporation signed it. There’s signatures by several people, indicating that we had successfully opened this clinic.

Well, it didn’t last too long. Once we got the others things up and running, that clinic closed. It really was not an efficiently run thing, but it was the show that the mayor wanted, lots of fanfare. As Shakespeare said, lots of noise and signifying nothing.

Tacey A. Rosolowski: Yep. Was there an alternative provision made for Geriatric Services?

[00:42:47]

Gene-Ann Polk: Not really. Geriatric Services were rolled in with the primary care. It was all primary care because we were doing Medicine,

Pediatrics, Internal Medicine, Pediatrics, and OB/GYN. So we took care of the whole age range.

Tacey A. Rosolowski: So what were some other projects you worked on that you really felt were significant?

Gene-Ann Polk: The other thing was the connection between the hospital clinics and the ward and our primary-care clinics. We established a group of patient navigators, I guess you would call them, and the patient in one of the primary-care clinics was to see a specialist or come to one of our services there at the hospital, that this person would make the contact on both ends so that there was a very smooth transition and patients could get the service and the follow-up. And we maybe even provided transportation. I don't recall that.

Tacey A. Rosolowski: It's another one of those integrated services kind of perspective that you were bringing.

[00:44:31]

Gene-Ann Polk: Those were the main things, and, of course, it was the primary-care clinics that I took most pride in.

Oh, one of the other things that I did was we had community practitioners, mainly general practitioners and internists, and what I did was I guess I applied at the university to get continuing

medical education credits for these positions that provided adequate educational programs. We did that. Once a month I'd have a speaker, maybe from one of the in-service areas, and this went on for the entire time that I was directing service, on Saturday. That particular Saturday morning I would bring in coffee, make coffee, bring in something sweet for them to nibble. After a while, they decided that I didn't have to provide all of this, and the doctors took up a collection and said, "We'll pay for our own stuff."

## Chapter 27

### *An Interest in Mentoring Women and a Mentoring Project with Spellman College*

Summary: Dr. Polk begins this chapter by describing a mentoring project she set up between Harlem Hospital and Spellman College to encourage the entry of black women into medicine. She next explains that her interest in mentoring began very early in her career. She talks about the advice she would share with younger women.

Gene-Ann Polk: The other project was the one we had, a mentoring program with Spelman College in Atlanta, One Hundred Black Women—that's a group called One Hundred Black Women—each year would sponsor a student, black female student, because Spelman College was all female, black female school, to come to New York and to investigate possible areas of interests they might have, such as law and medicine and banking and business and whatnot. That was really Susan Smith McKinney, and we haven't talked about that.

[00:47:29]

It was all done at Harlem, and I had put the program together for that, so that for a week I'd meet the students every morning, again serve coffee and sweet stuff and orange juice, and then I'd have a speaker come in. Then we explored all areas of medicine, not only the physicians and nursing, administration, and I guess maybe, what, physical therapy, whatever we could get involved

with this. And then after the lecture, we'd send the students off with somebody who would take them under their wing for the next couple of days. So that was something that continued the whole time.

Tacey A. Rosolowski: And did that inspire a number of those students to go into medical fields?

Gene-Ann Polk: I think so. I can't say exactly how many, but certainly we had a broad interest. We had a group of maybe—what? Each time we'd have close to ten students.

[interruption]

[00:49:25]

Tacey A. Rosolowski: I was curious, because that's a very formal mentoring program, and I was wondering if doing that at Harlem Hospital kind of brought people's attention to mentoring. Did it change the way people within Harlem Hospital approached mentoring, even people within the hospital?

Gene-Ann Polk: Oh, I think so. Certainly for—I mean, we had been doing things in Medicine, but I think the other services such as Hospital

Administration and Nursing hadn't really been involved with anything like that.

Tacey A. Rosolowski: When did you become interested in mentoring as an important activity for a professional?

Gene-Ann Polk: Well, I think to some extent I was doing it all along, certainly with our house staff. Originally, most of our house staff was made up of foreign-trained medical graduates, and then after the affiliation in '62, I think the first group of predominantly U.S.-trained doctors came in maybe about '65, '66. No, it was later than that. No, it was before I got my degree in public health. Among that group there was several females, black females who came from Howard University, and I sort of took them under my wing. They may have been the first group that I really was concentrating on.

[00:51:31]

Tacey A. Rosolowski: And what were some of the bits of wisdom that you felt were really important to share with those young women?

Gene-Ann Polk: Well, I did tell them about my experiences with private practice and raising a family, and the one thing I advised them to do was not to go into private practice but to get a salaried job, so that they had a schedule they could follow if they wanted to raise a family,

that they had certain perks that just didn't come with private practice, get paid vacation and healthcare. I thought it was to their advantage to do that kind of thing rather than go into private practice.

I don't think any of them ever did go into private practice. I think most of them stayed either at our hospital or went on to—many of them went on to get degrees in public health, actually, and had very important positions in Washington and in New York.

Tacey A. Rosolowski: Wow. It says a lot about you. [laughter]

Gene-Ann Polk: One thing I said, private practice was fine, you know, but it didn't make too much sense for a woman who wanted to have a family. That's all.

[00:53:13]

Tacey A. Rosolowski: Was there also the racial element there too? Because you had mentioned how, because of your circumstance when you went into private practice, you were sent patients who couldn't afford to pay you. Was that an element, or did you feel that that was sort of wrong place, wrong time, in your situation?

Gene-Ann Polk: Well, no. I think that was an element, for one thing, and I had seen other women in practice, that there's a certain instability in being

on your own, and I've seen—it still goes on. A woman who's an OB/GYN, from time to time she's been floating from one job to the next because she can't seem to hold on to anything.

Tacey A. Rosolowski: Let's hang on one second while Carol changes the disc.

[recorder turned off]

## Chapter 28

### *Director of Ambulatory Care Services: A Political Role and How it Ends*

Summary: This chapter begins during a conversation initiated while the recorder was paused. Dr. Polk is explaining her experience with institutional politics. She explains why her Director's role was very political and how she protected herself and her service by careful documentation processes. Next she explains how her role at Harlem Hospital became precarious, given plans to dismantle Ambulatory Care despite the success of its programs. This led to her decision to eventually resign her position. She describes securing the conditions she required in order to leave the position.

Gene-Ann Polk: I'd never really dealt with it before, and I said I didn't want to be political, but you couldn't help but be political in that kind of setting.

[00:54:15]

Tacey A. Rosolowski: Right, right. Were there other instances of activities that you undertook as director that brought you into a political role of that kind? You've described writing the proposal, which was slightly political. What about some other things?

Gene-Ann Polk: Well, I think I had to have many contacts with the community, as well as with the directors of service, which [unclear], but Administration. Hospital administrators changed every two or

three years, and so every two or three years you had to prove yourself, I guess, to them.

Tacey A. Rosolowski: And how did you go about doing that?

Gene-Ann Polk: Well, I guess I was pretty definite about things that I had plans about, and I was very careful to document things because I'd say to my staff, like I said to my family, I said, "It's documentation time, because things are beginning to happen here that maybe we don't want to see happen." And then you get the documentation. You can see from that point. And I never tried to do anything without knowing definitely that I had all the proof that I needed to go ahead, and many times I would go—she left.

Tacey A. Rosolowski: Yes, Carol's leaving. [Carol Penn leaves the interview setting.]

[00:55:54]

Gene-Ann Polk: I would, I guess, write the director of the hospital. Then I'd go ahead and send the letter on down to Health and Hospital Corporation, to whoever was president down there, or send a letter to the Dean's Office at Columbia, make sure that they knew what was going on.

Tacey A. Rosolowski: So transparency and communication were really big for you.

Gene-Ann Polk: I know there was one executive director that—this was towards the end of the time that I was serving in Ambulatory Care, but things were starting to get unsettled there, and I wasn't feeling comfortable about how they were going. My staff was being sent to other places, and staff was coming in from downtown, downtown meaning the corporation. And I just wasn't sure what was going on and I wanted an appointment with the executive director. I made several appointments which he cancelled, finally to the point I said, "I don't think this man really wants to see me."

So I just went over to his office one day and I sat there, told his secretary, "I'll sit here until he's free and I'll see him then." And I sat. I must have sat about three hours, to tell you the truth. Finally, he couldn't avoid seeing me and—

Tacey A. Rosolowski: And this was the executive director of what?

[00:57:36]

Gene-Ann Polk: He was the executive director of the hospital, who was appointed by the downtown administration. I said to him, "You know, something's going on here. I'm not quite sure what it is. It's like you're coming into my house, rearranging the furniture, throwing out my children, and then you ask me, 'Aren't you happy,' and I

said, ‘Hell, no!’” [laughter] And I said, “I don’t know what’s going on.”

At that point, he pulled in the associate dean, who was the liaison between the university and the hospital, and the two of them had to admit that they were making plans for Ambulatory Care to be more or less dismantled. It had always been really a part of Administration, not part of Medicine. The medical staff had to—I guess they had maybe too much going on to satisfy them.

Tacey A. Rosolowski: Now, just so I understand, I didn’t understand that last thing you said. You were taking on more than they wanted you to?

[00:59:00]

Gene-Ann Polk: Well, I don’t know if I was taking on more than—maybe I was taking on more than they wanted me to, but the programs were successful, because later on it was very obvious that the Health and Hospital Corporation wanted to be responsible for the network of primary-care clinics. This was the largest network in the city and probably the most successful one, and they had good reason to take it under their wing and remove it from Columbia, which was going to happen. I knew it was going to happen eventually.

Tacey A. Rosolowski: And what did you feel your fate was going to be under that reorganization?

Gene-Ann Polk: That I would no longer be director of Ambulatory Care Services. I might be considered a medical director or I don't know what, but certainly this was no longer going to be part of my empire. They used to call me the Empress of Ambulatory Care. [laughs]

Tacey A. Rosolowski: So what was your reaction when you heard that news in the office that day?

Gene-Ann Polk: Well, it was obvious that they were going to dissolve the position. There was an agreement they were going to dissolve the position, director of Ambulatory Care Services, because the dean did come down to speak to me and wanted to know—I said, well, I had planned to retire if, if, if.

And he said, “When?”

[01:00:56]

I said, “I'm not quite sure when, but at some point soon I will retire or resign this position.” And I said I wanted to be certain, assured of my salary, wanted to be assured of my university appointment was in the Department of Pediatrics, and I would go back to the Department of Pediatrics, and that tuition benefits

would continue for my children. That was the condition under which I was going to resign.

Dr. Bendicksen kept writing to me, “Are you read to resign yet?”

I said, “Not quite.”

And so finally I did tell him, “Yeah, okay. I’m ready,” and I gave up the position.

## Chapter 29

### *Political Situations: Appointing a Director and Negotiating with Psychiatry*

Summary: In this chapter Dr. Polk gives examples of the political situations she might be involved in (though she avoided them when possible). She first describes the situation of appointing Dr. John Fitzgerald Hollaway to the directorship of Outreach Services, despite the fact that Mayor Koch did not like him. She describes how the political situation evolved, resulting in Dr. Hollaway's termination. Next Dr. Polk describes her interactions with the Department of Psychiatry when that department assumed responsibility for the drug detox programs originally run by Ambulatory Care Services.

Gene-Ann Polk:                    There was one other political, very political situation I was involved with, and that had to deal with the primary-care clinics, because I was looking for a director for primary-care network for our primary-outreach clinics, and we had gone through maybe one woman who was very good, but the board—we had a separate board for that particular network—didn't like her. In the end, I had to let her go.

[01:02:47]

   But then I was ready to recruit a new director. It didn't require a search committee. It was just an appointment that I could make. The person, in the end, who applied and was maybe overqualified, if anything, was Dr. Hollaway, John Fitzgerald Hollaway, [unclear].

Tacey A. Rosolowski: Mm-hmm.

Gene-Ann Polk: Hollaway, who had been—he initially had a laboratory in Harlem. He was internal medicine trained and then he had worked with Congressman Charlie Rangel. That's who he was working with, not Powell. He was with Rangel as his health advisor. And he was, as I say, eminently qualified for that position.

I knew that there was some question. I wasn't quite sure what it was. There was something that they—apparently the mayor didn't like him for some reason or other. I guess that was not too obvious to begin with, but knowing that this might be a political appointment and that half of the salary was being provided by the corporation and half by the affiliation, I went to both of them and said, "This is what I want to do, but I won't do it unless you agree to it." And they both agreed, both sides agreed on this proposal, so I appointed him.

[01:04:51]

Well, he served about two months. Now, when you appoint somebody, you've got to go through the medical board and then through Administration, and they send the papers down just for signature. Anyway, so two months later, his papers arrived down at the corporation for signature, and things exploded. I got a call. It was in the middle of the night. I was in Philadelphia visiting

Carol—Carol was sick—and that call came from one of the associate deans there at Columbia saying, “You’ve got to fire Dr. Hollaway.

Tacey A. Rosolowski: Oh, my gosh.

Gene-Ann Polk: And I said, “What’s this all about?”

And when I got back to New York, it was, “The mayor doesn’t want him.” Apparently, at some point the two of them had gotten into an argument, and I think Hollaway may have called Koch a little pipsqueak or something like that, something simple, you know.

[interruption]

Gene-Ann Polk: The doctors union for the city got involved with this. They said, “This can’t happen.” And, of course, everybody up at the hospital was in arms about this, that it shouldn’t be happening.

That’s when I got to know the wedding chapel downtown at the corporation. No, it wasn’t the corporation. The wedding chapel at City Hall. That’s where we had our meetings, because one of the deputy mayors called to take care of the situation, called the meetings in the wedding chapel.

[01:07:41]

So in the end, what happened was that the city dried up their portion of the salary, his salary, and I couldn't get a full salary for him from the affiliation. The affiliation sort of wiggled with this one. They kept saying we hadn't gone through affirmative action, and I said, "Yes, we did go through affirmative action."

"They didn't do this."

"Yes, we did do this."

In the end, Dr. Hollaway had to leave, and then I got a letter from the dean saying I should establish another search committee for this position. But I wrote back to him that it didn't require a search committee, that this was an appointment that I could make, and he agreed. And I said, "Well, then give me the parameters for making the appointment."

[01:08:40]

A letter from one of his assistants, from the dean's assistant, said, "You can do anything except hire Dr. Hollaway."

And I said at that point to [unclear], I said, "We can go to court on this one."

He said, "No."

The only other real fight I had was with the director of Psychiatry. We were spinning off things. The first thing we did was spin off the emergency room. I said it deserved a service of its

own. It should be a service of Emergency Services, you know, Department of Emergency Services. It shouldn't be under Ambulatory Care.

And then the drug programs, the detox and the programs were all going to Psychiatry. Well, the director of Psychiatry, first thing he wanted was a count of the narcotics that we had, you know, because we had to keep methadone. We had a big, big safe, and we had a pharmacist that was involved with dispensing from the safe, and he wanted a count.

The day that he asked for the count, he said he wanted it that day. It happened to be a Jewish holiday, and I said, "I'm not going to call the pharmacist back in. It's his holiday."

He says, "Either you call him back in, or I'm going to blow up the safe."

So I did call the executive director and I said to him, "Say something to this man."

[01:10:39]

So he says, "Everybody tells me I should have told him to go ahead and blow up the safe, and I'm sorry I didn't say that."

[laughter] But he was just making my life difficult, and there were several other little things, just tried to annoy me.

## Chapter 30

### *Reflections on Administrative Roles and Leadership at Harlem Hospital*

Summary: In this chapter, Dr. Polk shares stories that show her style of leadership at Harlem Hospital. She observes that any conflicts she encountered in her administrative roles arose from the nature of administration itself, not from any tensions created because of her race or gender. She tells an anecdote that demonstrates the territoriality of different departments and the trust that she had earned in Harlem Hospital. She then explains that she was able to get departments to work together on the need for budget cuts. She attributes her skills to her mother, who always told her to “be a lady.” Dr. Polk observed that she always picked her fights and that she was not what people in Harlem called a “gutter fighter.”

Tacey A. Rosolowski: How did you feel your working relationships were with people in the executive management of the hospital and also with the city?

Because it sounds like you had a lot of connections both within the hospital and outside. How did that all work? And did you feel that there were issues that arose because of being a woman, because of being a black physician, an administrator?

Gene-Ann Polk: I felt that there were issues that arose because I was in the position I was in, for one thing, maybe. But I think these issues were going to arise anyway, so I didn't concentrate on whether I felt it was a—I know there was some feeling about—there was one other female director of service—that was Pediatrics, and I know when it came to the emergency room, the director of Surgery was very unhappy

that I appointed an internist to be in charge of Emergency Services. He said, “This has always been under the Department of Surgery.”

I said, “Right now what we need is an effective director,” which is what we needed, and I appointed one who was effective.

[01:12:27]

It’s funny, one day in the medical board meeting, I had the director of Medicine saying, “As the most important director of a service in the largest service here in the hospital,” da, da, da, da, da, and this director of Surgery said, “As the director of the most important and largest service in the hospital, I think—,” this and this and this.

And I looked at them both and I said, “They don’t know that I’ve got the largest service in the hospital.” Because at one point I requested staff appointments. Not staff appointments. I could appoint physicians at the clinics and at the Emergency Services or anything that we were operating.

But it was an internist. I wanted the approval of the Department of Medicine and I wanted a joint appointment. So I requested joint appointments with the director of Surgery and the director of Medicine. They weren’t too happy about that, but finally they gave in and said, “Okay, we’ll do it because we trust you, but we don’t know if we’d trust anybody in the future.”

But shortly thereafter, the mandate came from central office that all physicians working in Ambulatory Care should have joint appointments. It was a requirement. So we were ahead of the game on that one.

Tacey A. Rosolowski: Also a nice vote of confidence for you that they said they trusted you enough to do that. That's enormous.

[01:14:18]

Gene-Ann Polk: I was really in their way, but they didn't know I was in their way.  
[laughter]

Doing budgets for each of the hospitals, I think it was important always to try and cut as much as you could from everybody's budget. I realized that each department was more or less asked to cut a few staff or make some changes in the budgets, and I had suggested to the directors of service, said, "Maybe we need to meet on our own, because they're pulling us apart one by one." I said, "If we stick together and know what's going on, we can make our own proposals when it comes to what are we going to do in order to meet this budget."

So the first time they asked us what we were going to do, I said, "We'll dissolve one of the programs. And the director of Ophthalmology agreed that we could use his program as bait, so I

said, “Okay, we can make the budget if we give up the whole Department of Ophthalmology.” That was all there was to it.

Tacey A. Rosolowski: It’s pretty amazing that you were able to get collaboration from everybody like that.

[01:15:57]

Gene-Ann Polk: We did.

Tacey A. Rosolowski: Was that unusual that people worked together?

Gene-Ann Polk: It was.

Tacey A. Rosolowski: So how did that atmosphere come about?

Gene-Ann Polk: Well, we had started working together, remember, to get the primary-care clinics up and running and found out we could work together. One person who wasn’t quite sure was the director of Surgery, but he wasn’t there all the time anyway. He came in line with the rest of us.

Tacey A. Rosolowski: How do you think you were able to effect the atmosphere that brought that collegiality about and willingness to collaborate?

Gene-Ann Polk: I think there's probably—I remember my mother always said, “Be a lady. Whatever you're doing, always be a lady.” So when I first went off the first day, I went off on my internship and I said, “Mom, I'm wearing these high heels. What do you think?”

She says, “Be a lady.” [laughs]

So from then on, that's what I remembered. I picked my fights, for one thing. I didn't try to fight with anybody that—

[interruption]

[01:17:33]

Gene-Ann Polk: At certain levels, you know, in a place like Harlem, or I guess any big city, you've got what they call “gutter fighters.” I didn't know how to do gutter fighting, so I never tried. I tried, I know, one time, and they tried to get me into a situation that I said, “I just won't do it. I won't do it.” So I only tried to propose what I thought I could deal with and what I was willing to deal with. Like the Hollaway situation was a lot of fun, actually.

## Chapter 31

### *Resigning from Ambulatory Care and Retiring from Harlem Hospital*

Summary: In this chapter Dr. Polk explains how she ended up resigning as Director of Ambulatory Care Services. She returned to the Department of Pediatrics, where she was tasked with developing a quality assurance program. She worked again with Dan Cook and developed a system that was eventually copied by the central office. Next Dr. Polk explains the situation leading to her retirement from Harlem Hospital in 1994.

Tacey A. Rosolowski: Really? Yeah, I bet. Well, is there anything else you wanted to tell me about Ambulatory Care and your time there, or do you want to talk now about retirement and what you did afterwards?

Gene-Ann Polk: Well, after I left Ambulatory Care, I went back to Department of Pediatrics, and I was trying to see just where I would fit, you know, just what niche, because I had been the director of Pediatric Ambulatory Care Services, but there was somebody already doing that.

Tacey A. Rosolowski: What was the year that you resigned from Ambulatory Care?

[01:19:04]

Gene-Ann Polk: In '87 or '88. It may have been even a little bit later. I don't know. It's on the—

Tacey A. Rosolowski: Let me take a quick look, since we're—

Gene-Ann Polk: Another four years in the Department of Pediatrics.

Tacey A. Rosolowski: Oh, yeah, '87.

Gene-Ann Polk: Eighty-seven. I worked well with the director of Pediatrics. And the programs for HIV and AIDS were just getting started. They had a full staff for that and a very competent staff, so I didn't see a place for me doing that.

The one thing that the director proposed to me was quality assurance. She said, "We've been trying to do quality assurance. Nobody seems to want to do it and do it right. Will you take that on?"

[01:20:07]

So that's what I took on as a major responsibility. I mentioned Dan Cook before. We had to come up with some programs whereby you could measure quality assurance, so I said to Dan one day, I said, "I think maybe the only thing we might be able to measure is [unclear] admissions within thirty days." So that's when we started that particular program, tried to determine [unclear] admissions within thirty days. With the computer, he was able to match up things for me, and we had quite a good program going there.

Some of the other directors wanted to know how to get involved with that and they came up from the city, from central office, and said, “Can we copy this?” So I gave them a copy of it. I understand that’s what everybody’s doing now, [unclear] in thirty days. That seems to be a measure that’s being used in most hospitals. I said to Dan, again, I said, “Well, I guess we should have written this one up and made a little bit of money.” [laughter]

Tacey A. Rosolowski: Patent that program.

Gene-Ann Polk: Yeah, you’re right. But who knows?

Tacey A. Rosolowski: It happens.

Gene-Ann Polk: Mm-hmm, it does happen. For him I would have—but he went on to develop a very successful business, left the corporation.

Tacey A. Rosolowski: It sounds like he really had a flair for it and knew the system from the inside as an M.D. too.

[01:22:07]

Gene-Ann Polk: Mm-hmm.

Tacey A. Rosolowski: So what other projects did you work on or was that really your main focus?

Gene-Ann Polk: That was the main thing I did, because after that I began to taper my time. I went from full-time to half-time and then I started giving up a few hours here and a few hours there. I said, "One of three things is going to make me retire. Either I'm going to get stuck in the elevator again," because I did get stuck between thirteenth and fourteenth floors once and had to—well, it took about an hour before they rescued us, had to go from one elevator to another elevator, you know, [unclear] down. "Or I'm not going to be able to find a parking space for my car," because as a director of service, I had a parking space. "Or the traffic's going to be so bad trying to get across the George Washington Bridge that I'm going to say, 'No more.'"

[01:23:27]

So it was the traffic that got me in the end, and at that point, I was only going from ten in the morning until three in the afternoon so I could avoid most of the traffic problems.

Tacey A. Rosolowski: So that was in 1994 that you retired?

Gene-Ann Polk: I was ready to retire, ready to give it up.

## Chapter 32

### *Establishing the Susan Smith McKinney Steward Medical Society*

Summary: In this chapter, Dr. Polk tells the story of co-founding a society dedicated to helping young black women enter medicine, the Susan Smith McKinney Steward Medical Society. This occurred in the late 1960s, and she describes the first, very successful, project with black medical students from New York medical schools. She then talks about a fundraiser held to honor black women who had been in medical practice for fifty years. She explains how the meetings worked, the numbers of attendees, and also notes that the older members provided support for each other as well as for younger women. Dr. Polk explains that the Society fell apart as more women began entering the medical profession. She notes that all the papers from the Society are now held at Drexel University's Legacy Center Project.

Tacey A. Rosolowski: Well, I do want to hear about what you did after retirement, but we haven't talked yet about the Susan Smith McKinney group, which I believe you worked on much earlier. You want to tell me about that group? Because you were one of the co-founders, isn't that correct?

Gene-Ann Polk: Mm-hmm.

Tacey A. Rosolowski: Do you want to take a break before we do that? Because we've actually been chatting for almost an hour and a half. Do you want to take a little break?

Gene-Ann Polk: Okay.

Tacey A. Rosolowski: Yeah, let's just—

[recorder turned off]

[01:24:26]

Tacey A. Rosolowski: Okay, so I'm just recording. So, again, it's Susan Smith—

Gene-Ann Polk: McKinney Steward, who was the first black female physician in Brooklyn or maybe in the city of New York somewhere in the 1800s. I'm not sure quite what year. But anyway, yeah, I was one of the co-founders.

When I talked about mentoring the doctors who would come from Howard University, the young women, we looked around the hospital, and there were a fair number of black women doctors who didn't seem connected to anything. There were three or four of us who were older, who felt the need to establish a group that could somehow work with these young doctors. We were interested and we asked them, and they were interested, and the interest was not just from Harlem Hospital, from throughout the city, other hospitals involved.

So one of the first projects we took on was the mentoring project with medical students. Not medical—yes, they were medical students from the different medical schools there in New

York City, and each year we would have—oh, for quite a few years we did this. We'd have one program where we would at least introduce them to one or two of the older physicians, who talked about their practice and what they were doing, but then there was a time to socialize and to talk with each other about just what the practice of medicine was all about, and that was quite successful. We had students coming from, as I say, all of the medical schools, and the usual problem was finding a place large enough to do this.

[01:27:05]

Tacey A. Rosolowski: Really? Well, two questions. First of all, when did you establish the group?

Gene-Ann Polk        It was—I don't know.

Tacey A. Rosolowski: I don't think it was on there.

Gene-Ann Polk:        I'm trying to remember. I was still working in Pediatrics at the time.

Tacey A. Rosolowski: So you were assistant director from '62 to '67, and then chief from '68 to '75, and then acting director, '75 to '77. So, someplace in there.

[01:27:49]

Gene-Ann Polk: It was somewhere, and I can tell you when it was, somewhere in the early seventies or late sixties. I remember because one of the first fundraisers—we needed some money—was to have a luncheon, and the luncheon was to honor women who had been in medicine for over fifty years, and three of them happened to come from New Jersey—I knew those three; I'd known them growing up—and one from Brooklyn and one from Manhattan. There were five. I don't think there were any more. There may have been six, five or six women in that category.

I remember the date because I wasn't at the luncheon, but I had proposed what we should do, and I had made contact at least with the New Jersey doctors, who were Myra Smith Kearse, my godmother, E. Mae McCarrol, who was a graduate of Women's Medical College and was doing public health in Newark, and the third one was Lena Edwards. She was board certified. She got that by [unclear] in Jersey City.

They all had three different personalities. My godmother was sort of placid and easygoing, and Mae McCarrol, she was really a glamour girl. She was a very attractive woman, dressed elegantly, and was good to know. Lena Edwards, on the other hand, was really tough. She was one of these tough female doctors, and she had to make her way in OB/GYN because they didn't want to give

her that residency, but she did it at an older age. Eventually, she ended up getting a Medal of Honor from the President of the United States for establishing a clinic in one of the Indian reservations. But those three were from New York.

Mae Chin may have been one of the first—she was one of the first black interns at Harlem Hospital. She's in that picture of the first interns. And the other was an ophthalmologist from Brooklyn. I can't think of her name. Levy was her last name, and I can't remember what her first name was.

But I recall the date because, as I said, I wasn't at the luncheon. That was when I made my first trip abroad, 1971. So the organization was established, I would say, the late sixties.

[01:31:23]

Tacey A. Rosolowski: The second question I wanted to ask was, you said it was hard to find a space large enough. How many people attended these meetings?

Gene-Ann Polk: Oh, it varied. Sometimes we'd get—well, the organization itself had grown. The Susan Smith McKinney Steward organization grew all over not only New York, New Jersey, and I think we had a few women from Connecticut. They came from Westchester, Long Island. We were a group of thirty or more, and then you get the medical students, you might have another thirty.

[01:32:25]

Once we met in the Studio Museum of Harlem, had a nice tour there, and then we met in the medical boardroom there at Harlem Hospital. That's when we didn't have enough room. Several times we would meet up at Columbia University and that was when we had the students, but the other times, for the most part, initially we were meeting in each other's homes, and I think, more or less, we sort of settled on the medical boardroom at Harlem Hospital in the end.

[01:33:18]

Tacey A. Rosolowski: It sounds like the group was established to really provide the support to young women, but were you also providing support to each other?

Gene-Ann Polk: Very definitely.

Tacey A. Rosolowski: What impact did that have?

Gene-Ann Polk: It was good. We needed the contact. We needed to hear about each other's problems and successes, and we shared. We shared experiences and then we worked together easily, certainly in terms of meeting with the medical students.

[01:34:00]

Some of the other things we did was to—one thing. I know the International Year of the Child, we held a conference on children. International Year of Women, I think we had a conference on women, and then I remember we had one on fathers or young boys. We had at least three conferences which were open to the community and really were quite successful.

And then I guess the group sort of fell apart as we got older, and there were many more black females appearing that didn't quite need the same kinds of supports we had needed.

All of the papers from Susan Smith McKinney Steward are deposited at the Legacy Center there at Drexel, so I turned all the records over to them, plus some records from other female physicians who had retired and didn't know what to do with the things.

Tacey A. Rosolowski: Well, it sounds like such an important group, and mentoring is still such a topic of conversation among all professionals who are concerned about getting more women into all of these fields.

Gene-Ann Polk: Mm-hmm. Well, one of the things we realized, the National Medical Association did have a group of—I think they started out, first of all, with a luncheon just for the women [unclear]. There weren't that many women physicians. Then that group kept

expanding and now it's quite large, quite large. So the point, I guess they don't need the supports that we needed before.

[01:36:28]

## Chapter 33

### *Women in Medicine and Advice to Young Women and Men*

Summary: Dr. Polk begins this chapter by noting that women bring gentleness, resilience, stamina, and a drive to succeed to medicine. She talks about the great satisfaction she has derived from her medical career and says that she would advise a woman to plan for childcare and supportive husband and family if she wants to succeed. She says that she would advise young men to have respect for women. She tells an anecdote about surprisingly sexist comment made to her by one of her husband's friends. She also observes that, from her perspective, a woman's toughest competition comes from other women, who are often quick to diminish one another. she talks about the importance of feeling secure and confident.

[01:36:28]

Tacey A. Rosolowski: Do you feel that women physicians and women in other professions in medicine bring something different to the practice of medicine than men do?

Gene-Ann Polk: Oh, definitely. I mean, one thing, we've got a gentleness that they don't, and, I think, a lot more tolerance, as women in general do. And then I think the women who go into medicine have a certain resilience and stamina and they want to succeed. And where some of them can be ultra aggressive, and I've dealt with aggressive women physicians, but for the most part, I think they do—it's a different touch. That's all, different touch.

Tacey A. Rosolowski: What about in administration?

Gene-Ann Polk: Administration is something different and new. There are women who are doing hospital administration. As far as, you know, departments of service, heading up departments of service, they're still sort of pushing their way into that. I think women are doing most—they decide what they want to do and they go ahead and do it, for the most part. If you really want to do it, you just go ahead and do it.

[01:38:32]

Tacey A. Rosolowski: What advice have you given and would you give to young women now who are looking at careers in medicine? What do you feel they really need to know about establishing themselves and getting ahead?

Gene-Ann Polk: I think medicine can be a most satisfying profession. I certainly enjoyed what I was doing and feel that maybe it made a little difference. But certainly, as far as I was concerned, I don't know that I could really see myself doing anything else at this point. Here again, the main concern with many women is, "Well, if I get married and want to have a family, how am I going to juggle this?" And that's still a main concern: childcare, understanding husband, a supportive family. And I think they want to know that this is

possible, and it is. I mean, it's not easy. It doesn't just—and you have to work for it. That's all. You have to work for it.

Tacey A. Rosolowski: What advice would you give to young men about what they would need to do to help women around—

[01:40:09]

Gene-Ann Polk: I would say respect is the first thing. As I said earlier, when I was talking about being paid, “Oh, you've got a husband who'll take care of you.” And it was one of my husband's friends, best friends, who said the same thing to me when I said, “Now I'm retiring from private practice and going into—.” “Oh, you don't need to practice. You've got a husband who'll take care of you.” I was surprised to hear that from him, really I was.

I think men have to respect women, whatever profession they're going into, whether it's law—and women have to know that—well, you asked me what advice to young men now. I'm not saying to be protective, but just to be supportive of women who want to do this. You can protect them in one way or another, but it's the support that they need and the respect that they need, and know that they are deserving of getting proper attention if this is what they really want to do.

Tacey A. Rosolowski: You'd started a thought about what women. You said, "Young women need to—," and then you stopped yourself.

Gene-Ann Polk: I stopped myself?

Tacey A. Rosolowski: You started a thought a little earlier. You said, "And women need to—." But then you said, "No, you wanted me to answer about young men." But what was your thought about what young women need to—do you recall what you were going to say?

[01:42:07]

Gene-Ann Polk: Well, you know, I think that the toughest competition that women have is with each other. That's what I've found to be true, that there's always somebody wanting to push you in one direction or another, or trying to, as I say, diminish what you're doing in one way or another.

Tacey A. Rosolowski: Really? You found that with women?

Gene-Ann Polk: I did find it with some women. There were those, you make a suggestion that you thought was pretty good, and the conversation would go on for a little while, and they'd come back with the same thing, "I think that this is what we—," the same thing that you had proposed or whatnot.

I think you've got to feel secure with yourself, within yourself, that's the first thing, and not let anybody diminish you. As I said, I felt very secure with what I was doing. I thought that what I was doing, for the most part, was the right thing. At least I thought it was right. [laughs] Maybe everybody else didn't, but for me it was the right thing. Most of the time it proved to be right. I mean, I was wrong a lot of times, but—

Tacey A. Rosolowski: Is there anything, as you look back, that you would have done very differently?

[01:43:51]

Gene-Ann Polk: I don't know, but if I'd had the opportunity to take a salaried position earlier, I would have done that. That's the only thing that I would have done differently. And I realized how important it was, I mean even if it had been part-time, you know, just knowing that there was some security in what you were doing, and certainly if you're out there, a woman on your own, you've got to have that knowledge.

Tacey A. Rosolowski: Yeah, particularly if you have family relying on you, for sure.

Gene-Ann Polk: Oh, yeah.

Tacey A. Rosolowski: Do you want to take a little bit of a break right now?

Gene-Ann Polk: Yeah, I'll take a little bit of a break right now.

[recorder turned off]

## Chapter 34

### *“Another Life” Before and After Retirement*

Summary: Dr. Polk describes the interest she kept up with before retiring and found more time to enjoy after retirement: being a mother, music, travels, church activities, entertaining. She tells anecdotes about her involvement in her church’s soup kitchen project, where she earned the nickname, “Salad Lady.”

Tacey A. Rosolowski: Okay. We’re recording again, and we were going to talk about your other life, your other life after retirement.

[01:44:52]

Gene-Ann Polk: I did have another life before retirement.

Tacey A. Rosolowski: Well, do you want to tell about that too? I’m surprised you had time for another life before retirement. [laughter]

Gene-Ann Polk: Well, you know, with children, you have to have another life because they’re not part of your professional life.

Tacey A. Rosolowski: Do you want to talk about that?

Gene-Ann Polk: Oh, I can, yeah. That’s part of my other life, being a mother. But also I’ve already talked about a need for childcare. But I had another name. My children were named—last name was Horne,

and so it was sort of confusing for some of those friends who happened to be patients of mine, “Your mother is Dr. Polk. She’s not Mrs. Horne,” you know, this kind of thing. And I guess they got used to it.

Tacey A. Rosolowski: I was going to ask you, was it an unusual decision at the time for you to keep your own name?

[01:46:01]

Gene-Ann Polk: No, I don’t think so at all. I know initially my godmother used her name, her maiden name professionally and it’s only after she retired that she threw in the other name.

Now, most people know me as Gene-Ann Polk Horne now, those from my other life. If I hear “Dr. Polk,” it’s somebody who only knew me as—at one of my retirement dinners, Ed was sitting next to the fellow who was directing the Emergency Services, and we both knew him, you know. And then he said, “That’s your wife? I didn’t know you were married to her.” This is how many years later? [laughs]

And then there were others of his friends who said, “Oh, I know, we can get over her. She’s easy. We can get over on her.”

He said, “Oh, no, you can’t. She’s not that easy.”

And my kids found that I did have a tougher side to me. They found that I wasn’t that easy. “Whatever you do, don’t hit my

mother's last nerve, because she'll come at you," and that's the way they perceived me.

Now, all along while I was in private practice, I mean, I did have other things that I was doing. Music was always one of my main interests, and I played at any number of different kinds of groups. When I retired, I played in the orchestra, the Northern Valley Orchestra.

Tacey A. Rosolowski: Did you play cello?

[01:48:00]

Gene-Ann Polk: Played cello. That's all. Played cello in all of those. Played in a couple of chamber music groups. I was really playing cello with other people. I liked the companionship. Piano, I could play by myself, you know. And I had hoped my kids would be interested in music, but they really weren't. They took their share of lessons and that was it.

But then I guess the other major thing that I was doing was, as part of my spiritual life, I was keeping up my church affiliations, and then, as I said, I had changed from one church to another. When I retired, the Methodist church had—our church had an after-school program, and so two days a week I would go and help children with their homework and whatnot. And then they had a feeding program once a month. I was known as “the salad lady.” I

did not bake cakes; I did not fry chicken; I did not make pies or whatever. I did make pies, by the way. Didn't make cakes or cookies and I didn't do much other kinds of cooking, but I was great at salads and I always fixed the salad exactly the way I'd fix it for my family, which meant that I'd tear the lettuce into bite-size pieces; didn't use a knife. I would rinse it a couple of times, let it dry and put it aside.

[01:50:16]

The first time I had volunteered to help with the food service, two little ladies from church were sitting there cutting carrots [demonstrates], taking forever to cut these carrots into pieces. I said, "Well, I can do better than that. I can at least put them in the Cuisinart and shred the carrots, see, and same with the cucumbers. I can slice cucumbers in the Cuisinart." So I told them they didn't have to cut carrots anymore. [laughter] But I did the salad and I did good salads. That's one thing.

Tacey A. Rosolowski: Did the kids actually eat them?

Gene-Ann Polk: Mm-hmm.

Tacey A. Rosolowski: Good.

Gene-Ann Polk: My kids ate salads, yes. They still eat salads, and they sometimes ask me, up until recently, you know, “Mom, will you make the salad?” “I guess.”

Tacey A. Rosolowski: You really are the salad lady.

Gene-Ann Polk: I was the salad lady. And then as they had church dinners, you know, “Oh, she’ll bring the salad,” because I wasn’t going to do anything else. I had a good friend who was a great baker. She made the best cakes. I said, “Okay, Elaine, you make a cake for me, I’ll do the salad for you.” [laughs] That’s some of the involvement I have with my church.

## Chapter 35

### *Involvement with Alpha Kappa Alpha*

Summary: In this chapter Dr. Polk describes her involvement with the black women's sorority, Alpha Kappa Alpha. She talks about working to begin a chapter in Burgin County (chartered 1970). She notes with pride that a book written about the chapter she founded was dedicated to her.

[01:51:41]

Gene-Ann Polk: And then there was my sorority involvement. I had been a member of my mother's sorority, my godmother's sorority, my aunt's sorority, my sister's sorority, and Gloria's sorority, and it was after I had finished my residency that I got involved again. I think my mother and my godmother asked me, "Just join the chapter. That's all."

I said, "Well, that's all I can do," because I was still seeing patients in Roselle at the time that I joined the chapter, but I wouldn't take too active a role. If they had a conference, a professional careers conference or something like that, I'd participate.

Tacey A. Rosolowski: Why did your mother and godmother want you to get involved with the chapter at that time?

Gene-Ann Polk: Because they thought that—well, because I wasn't doing anything, they thought. [laughter] Certainly I wasn't doing anything as far as the sorority was concerned, and they thought, "Well, you can be an officer. You can—."

I said, "No, I just don't have time and I don't have the interest." I really didn't. I said, "I'll be a good member, that's about it, pay my dues and do the best I can."

[01:53:19]

The year was 1970, I guess, when I was approached by what was some regional director, in terms of getting a group going in Bergen County, getting an interest group going. At first I sort of delayed, but then after a while I said, "I think I have time. I can do this." And I knew a few of the sorority members who are in the area, not affiliated with any chapter. And so that began my involvement with my sorority.

It took us about two years to get organized, so '70 was the year that we were finally chartered, and I was the first president of that group. I had played the instrumental part in getting the group together, holding it together, and making sure we did all the right things we were supposed to do, and I continued to work with that sorority up until, I guess, a year ago, maybe two years. They recently wrote a history of the chapter.

Tacey A. Rosolowski: Yeah, Carol showed me the book yesterday.

Gene-Ann Polk: I was pleased that they had dedicated the book to me. Did she show you the chapter book?

[01:55:12]

Tacey A. Rosolowski: Mm-hmm, she did.

Gene-Ann Polk: Not my mother's chapter; mine.

Tacey A. Rosolowski: Oh, no, I don't think she did.

Gene-Ann Polk: She showed you my mother's chapter.

Tacey A. Rosolowski: Mm-hmm.

Gene-Ann Polk: My mother had been a charter member of her chapter. My chapter did dedicate their book to me, which I thought was really very nice. And just recently they told me that they were endowing a foundation, an educational advancement foundation endowment for me in my name, which pleased me very much. But I really put blood, sweat, and tears to get that chapter going and keep it going, and it's going. It's going actively. So that took a lot of my time, but I didn't mind. I enjoyed that.

## Chapter 36

### *Travel and a Family-Oriented Retirement*

Summary: Dr. Polk begins this chapter by explaining the origins of her fascination with travel. She sketches some of the most important trips she has taken, including the last trip she and her husband took the eastern Mediterranean. She also notes that her life has always been very family-oriented (much like the family she grew up in) and it is still that way.

Gene-Ann Polk: Another interest was travel. Whenever I could, I would travel. When I was in grammar school, I remember reading *Our Hearts Were Young and Gay*, Cornelia Otis Skinner. She and a good friend, they must have been just out of their teens, took their first trip abroad and they were describing the wonderful time that they had. I said, "This is something I've got to do," and I started saving my money at that point, because I was going to make my first trip to Europe before I was twenty. Didn't make it, though.

[01:57:27]

After that, whenever I could, I traveled, and I've got a long list of places I've been. I've been I can't tell you how many times to Europe and I do have a German sister, which is another story altogether. I've been to the Orient three times, been to Africa I don't know how many times. I've seen most of Europe, most of Africa, most of the Orient.

Tacey A. Rosolowski: What does travel do for you? Why do you find it so satisfying?

Gene-Ann Polk: I'm fascinated by new things or old things which are new to me. And whenever I can, if I'm with a group, I'll take off and go off on my own and I'll take local transportation and go to a museum. The first time I was in Berlin, I wanted to see the bust of Nefertiti at the Charlottenburg Palace. Well, that was not part of our scheduled tour, so I just took off one day and took the streetcar to—we had been by the Charlottenburg, I knew where it was. I went in to see Nefertiti, which pleased me no end. I think later on I did take Ed once when he was in Berlin to see her.

[01:59:20]

But I liked seeing new places, different places. I really always wanted to see the world and I wanted to see as much of it as I possibly could. So if there was a meeting, foreign meeting scheduled, certainly you could travel with the medical groups, which made it easy. I took many of my trips with medical groups, as I said, but most of the time I was by myself. Sometimes I'd ask Ed if he wanted to go. If he said no, I'd just go on by myself. And that's the way I went around the world, you know, I told you.

I had some what I called really major tours, the world trip. The day after I turned fifty-one is when I started that one. Then we took a group of six of us, my family and a couple of friends, and

we went to visit my sister, who was a Peace Corps recipient in Namibia. We more or less worked out that routine with the travel agent. We wanted to see all of southern Africa, so it was Namibia, Zimbabwe, South Africa, Swaziland. What else? [unclear]. I had done East Africa and an East Africa safari several times, and I went to West Africa many times.

Egypt was my favorite country. I guess a year or so after Carol and Ken got married, they said they had enough travel points to take us anywhere in the world and I could go with them. In his job he has been able to accumulate points, and then I think the final thing was when they got married and I had the reception for them and the hotel expenses and all the rest I put in their name, so they got all those points. So they said, “Where do you want to go, Mom?”

I said, “I want to go back to Egypt.”

[02:01:59]

“Okay, we go to Egypt.”

So it was a wonderful trip, just the four of us. I had a great time. I said, well, I hadn’t been down to Abu Simbel first time and I wanted to do Abu Simbel, and I hadn’t done the Nile cruise and I wanted to do the Nile cruise. So those were the only two things that I requested of them in terms of—but I did the planning for that trip, just like I did the planning for the South Africa trip.

Tacey Rosolowski: Did you like the planning part?

Gene-Ann Polk: Mm-hmm. There were certain things that I wanted to do and see, and I didn't have to wait for somebody else to do it. The last trip we took was a little over four years ago, just before I got sick. Ed and I went to the eastern Mediterranean, did an eastern Mediterranean cruise, and that's places where I had never been and always wanted to go. So that included Bosnia, and in Egypt, the stop in Egypt was Alexandria, which I had never done before because I had always gone to Cairo, and then we had two stops in Israel.

[02:03:31]

I had planned to make a trip to Israel later on in that year, did not, but I got to Israel, Jerusalem and Nazareth, and, oh, several stops in Greece and several in Turkey. We ended up in Athens and spent a couple of days there, and I said, "Well, I really want to go to Istanbul." So before we came home, we went to Istanbul for a couple of days.

It was a great trip, seeing all the ancient world which I had not seen before. I had seen other parts, most of Europe. I guess I did see most of Europe, and I made numerous trips to Scotland because I had a friend who was—my German sister was living in

Scotland with her new husband. But every time she had a birthday or a celebration of some sort, it would be in Germany, so it was either one way or the other, and we made frequent trips together on that.

I never got to Australia, did get to Alaska, didn't get to the South Pole, but I saw enough of the world to feel I had seen something.

Tacey Rosolowski: Very neat.

[02:05:15]

Gene-Ann Polk: And my kids have the travel bug also. My granddaughters, I mean, this past year, Jessie, the younger one, went to Ethiopia and then she went to China. I don't know what she's planning for next year. The other one has been to South Africa, Ireland. She's on her way to Costa Rica after Christmas. Everybody in the family likes to travel. We want to see what goes on in the rest of the world.

Tacey Rosolowski: Is there anything else you'd like to tell me about your retirement time outside of travel? Sounds like you did a lot of traveling. What else did you do?

Gene-Ann Polk: Oh, I've done a lot of traveling, but most of it before—oh, a lot of it before I retired; most of it, I guess, before I retired. What else

did I do in retirement besides playing in the orchestra and doing my church work and my sorority work and my travels? I'm trying to think what else I did.

Well, for one thing, we were very much family oriented. My mother was. She herself only had one brother who had no children, so she didn't have much of a family, but my father had a large family and they always had large picnics and reunions and whatnot. Gloria and her husband would join us once a year when we had what we called Father's Day picnic. Remember Gloria?

Well, we put a pool in our backyard in 1970. The kids were both deep-water swimmers at that point, and from then on, oh, every summer, every weekend, we had family and crowds, and we'd get my nephews and my nieces together. They talk about, "Oh, we remember," you know, and they've got pictures and pictures of—you know, we'd get a group picture and said, "Oh, I remember so-and-so. Look, who's that little baby down there?" And they're looking at—going back.

[02:08:06]

We still have family reunions of sorts. For the last couple of years, the family has been going to Brigantine for a week. We'll just take a large house and we'll spend a weekend at Brigantine, which is close enough to Philadelphia so that we can go back and forth if necessary. We didn't have to, but Carol and her husband

sometimes had to go back to Philly, and the girls, their daughters, would go back and forth and maybe bring a friend for overnight one night.

Tacey Rosolowski: It sounds like you kind of are recreating that scenario that your mom created, where—

Gene-Ann Polk: Absolutely.

Tacey Rosolowski: —it's that happy house for people to come and bring their friends.

[02:08:53]

Gene-Ann Polk: That's what it was. And Carol started to do that same thing now, which is good, "Shall we go here or there?" No, we go to her house. She's got a large house, a big yard.

## Chapter 37

### *Preserving the WPA Murals at Harlem Hospital*

Summary: In this chapter Dr. Polk explains that when she was a member of the Cultural Affairs Committee at Harlem Hospital, she began to advocate for preserving the WPA murals. She describes some of the murals, tells a bit of their history, and notes that she took people on tours of them. Dr. Polk then explains that the murals were restored and eventually moved to a new building, the Mural Building, where there is a plaque honoring her efforts to preserve Harlem Hospital's history. Next Dr. Polk talks about the Schaumberg Library, a repository for material on black history that originally had not information on Harlem Hospital. This fact led Dr. Polk to give them many of her records. She talks about donating a photograph taken at Harlem Hospital in 1950 by Moneta Sleet, a photographer who traveled with Martin Luther King.

Tacey Rosolowski: Yesterday, Carol showed me that book about the murals in Harlem Hospital.

Gene-Ann Polk: Oh, yeah.

Tacey Rosolowski: Weren't you very involved in preserving them?

Gene-Ann Polk: Oh, I forgot to tell you. Yes, while I was—

Tacey Rosolowski: Tell me about that.

Gene-Ann Polk: Well, while I was director of Ambulatory Care, I was chair of several committees for the medical board, one being the Pharmacy

and Therapeutics Committee, which was pretty cut-and-dried, kept the detail folks from putting free samples in the clinic, told them they couldn't do that anymore, and they had to then meet the doctors at lunchtime, you know, out in front of the cafeteria, no longer coming into the clinics.

Tacey Rosolowski: I'm sorry. That was the Pharmacy—

Gene-Ann Polk: Pharmacy and Therapeutics. The P&T Committee. And then the other thing was the Cultural Affairs Committee. That's how I got involved with the murals.

[02:10:12]

Tacey Rosolowski: So tell me about that. What about the murals at Harlem Hospital?

Gene-Ann Polk: The Cultural Affairs Committee had, from what I could see was in the bylaws, the responsibility for naming buildings and different areas of the hospital for people who died, not when still living. And so we did that. But then I said, "We need to be doing something more than that," and that's when I started collecting the history of Harlem Hospital. I said, "We need to start collecting history and getting as much as we can before some of the older doctors have passed on." And they did; they gave me many photographs and lots of information.

[02:11:07]

I knew about the murals at Harlem Hospital, I knew about them because in the entrance to one of the buildings [unclear] there was the Women's Pavilion, there were two murals. They were facing each other. They were getting—I know I enjoyed looking at them, but I could see that they were beginning to deteriorate.

I also remember that when I was pretty new on staff that we had the doctors' dining room and there was a mural in there. The doctors' dining room became the payroll office, and so they'd talk about a mural found in the payroll office. No, it was in the doctors' dining room, and I have to make sure I correct them on that thing.

These were WPA murals. The director of the hospital at that time sort of objected to—he did, he objected to some of the murals that were being proposed, because he said, “These are all about colored people, black people, and this may not always be a predominantly black or colored hospital,” which Harlem was at the time. But they were able to override him.

And so there were some murals in the old Nurses' Home and these are the ones that they told the story from slavery—no, from before slavery, from life in Africa before slavery and then through the Industrial Age, then on into the Renaissance era in Harlem. I

don't know if you saw all the pictures, but it's in a beautiful set of murals.

[02:13:24]

And then there were several others that were lost. I know there were two that were in the old Pediatrics Building that was torn down, but they were painted over long before, and one wall was torn down anyway, so those two would be lost.

I knew the murals were there. As I told you, administrators changed every two or three years, and the staff changed as well, so they didn't know the murals were there. And then the first time I took the director of the hospital over to see the murals, she was just amazed.

And I conducted a few tours of WPA murals. We had a group came up from the United Nations one day, wanted to see the murals, and this was before I had retired because I think after I was no longer on staff, I was still collecting history, but I didn't have anything more to do with the murals. But they knew they were there, and several times they had been restored. I have a TV video during one of the restorations because the TV reporter spoke to me and asked about the murals, and I told him about it in that recording.

Tacey Rosolowski: So how were you involved in preserving, or were they moved to a new building?

[02:15:12]

Gene-Ann Polk: I knew that the two that were facing each other were painted on canvas, and somewhere along the line, I had seen a reference to these murals, that if the building was going to be destroyed, that the murals would be taken down and placed in the Schomberg Library across the street, and that I always knew. That was always in the back of my mind, and every time they talked about tearing down the building or putting up a new building, I would say, “You know, it’s time to move the murals.”

It got to the point where finally one executive director said to me, “I don’t want to hear anything more about those murals,” you know.

So after I left the hospital, it’s just a couple of weeks ago when I was able to make that tour, what they now call—a new building called the Mural Building. I was amazed to see how they had restored and the work that had been done to appropriate these things over. The placement of them is just perfect in terms of how they had been originally, and they’re still working on one of the murals. I still think that the two that were facing each other are sort of—they were brighter originally. They’ve got to work on those a little bit and brighten them up.

Tacey Rosolowski: What's the name of the new building?

Gene-Ann Polk: The Mural Building.

Tacey Rosolowski: The Mural Building. Oh, so that's just what it's called.

[02:17:08]

Gene-Ann Polk: That's what it's called.

Tacey Rosolowski: Okay. Cool.

Gene-Ann Polk: Right now it doesn't have another name. It's known as the Mural Building.

Tacey Rosolowski: How neat.

Gene-Ann Polk: It's a beautiful building, because on the outside, you can pass by at night and you can see somehow—this is, again, technology—they've been able to light up, and it looks like the whole façade is one of those murals.

Tacey Rosolowski: Oh, how neat.

Gene-Ann Polk: It's just mind-boggling. If you ever get to Harlem, you've got to go see it, because everybody can see and wonder, "What's inside there? Look at the outside." But the way they've built it, showing it, you can see from the outside that they're in there, also that there's a room that was set aside for old photographs and whatnot, many of which I had provided to them. And that's where they have a plaque with my name on it.

Tacey Rosolowski: And the plaque says what?

[02:18:17]

Gene-Ann Polk: Oh, I don't know. It says something about me. I'll give you a copy of it.

Tacey Rosolowski: It's in the book, yeah. I can look it up. Let me pause the recorder.

[recorder turned off]

Tacey Rosolowski: Okay, we had just about a minute break, and Dr. Polk said that she was given the plaque in honor of her work to preserve the history of Harlem Hospital.

Gene-Ann Polk: I don't know if you're familiar with the Schomburg Library.

Tacey Rosolowski: No, I'm not.

[02:18:55]

Gene-Ann Polk: It's probably one of the larger, if not largest, repository for black history and black archives, and it's right across the street from Harlem Hospital. So in trying to find out more about the hospital, there weren't any real records that anybody had held on to, so I went to the Schomburg, and they said, no, they didn't have anything at all about Harlem Hospital, "The hospital right across the street from you, and nothing?" That's when I said, "Well, if Harlem does not want to preserve their own records, so whatever I have, I'm going to give to the Schomburg." And I had boxes and boxes and boxes of stuff, which I gave to them. I think the curator finally got through. It took about two years to go through those boxes.

Tacey Rosolowski: I bet.

Gene-Ann Polk: I have a small collection still to give to her. But now that Harlem is interested in their own history, I'm getting ready to give them this gold key, for one thing, and I have a picture over here, taken by a relatively famous photographer. He was the photographer who followed Martin Luther King all around.

Tacey Rosolowski: Oh, wow.

Gene-Ann Polk: His name was Moneta Sleet, M-o-n-e-t-a S-l-e-e-t. One day going through the Schomberg, they had a collection of his photographs. I saw this one. It said “Harlem Hospital.”

[02:20:56]

Tacey Rosolowski: So it really is taken at Harlem Hospital. Do you mind if I snap a quick picture?

Gene-Ann Polk: Oh, go ahead. It’s got a copyright, but I guess it’s all right. But this is mine. I paid for it, so since I paid for it, I guess anybody that I want to give a copy to—

[interruption]

Gene-Ann Polk: The woman in there is—and this must have been, I figured, 1950—Grace James, Dr. Grace James, who was a pediatrician and probably the first black on staff at the University of Louisville, I think. But she’s in the emergency room taking care—suturing this patient.

So when I asked Moneta, I said, “How can I get a copy of it?” he said, “You can’t get a copy of it, but I’ll sell you a copy. I’ve got a copyright on this.”

Tacey Rosolowski: It's a beautiful photo.

Gene-Ann Polk: So I said, "Okay." So I'm going to give this to the hospital as well.

Tacey Rosolowski: That's wonderful.

[interruption]

[02:22:32]

Gene-Ann Polk: I have a few other things that I'm going to give them, some other pictures like the one I showed you of my internship. And as I said, since Harlem has decided to hold on to their history, then I'll help them with that.

## Chapter 38

### *Joining the Foundation for the History of Women in Medicine and Final Comments*

Summary: Dr. Polk begins this chapter by describing how she came to join the Foundation. She notes that she joined because of her interest in the history of black women in medicine. She ends with the comment that telling her story has been on her “bucket list” and she is glad to have the opportunity to participate in an interview.

Tacey Rosolowski: Well, it’s a great thing to do. I wanted to ask you, too, about working on the board, joining the board of the Foundation for the History of Women in Medicine. You joined the board in 2006, if I recall correctly.

Gene-Ann Polk: Was it 2006 or 2003?

Tacey Rosolowski: I think it was 2006. The date on the form you filled out was later, but—

Gene-Ann Polk: Sure. I thought it was—it was certainly before we had moved here. I guess I went one day to—it must have been—or had gone to a reunion. No, there couldn’t have been a reunion because I’m the only one in my class who ever showed up for the sixtieth reunion. But Vicki had a—I guess she had a notice somewhere that women were invited to hear something about, I guess, the

Foundation, and I went. That's where I met Christie and we became rather good friends.

[02:24:08]

Tacey Rosolowski: I don't know Christie.

Gene-Ann Polk: Christie Huddleston, who's a member of the board. And I told Christie that I was interested in preserving the history of black women in medicine. That was my main interest these days, and still is, and that's the main reason that I joined the board. I said I wanted to make sure that the history of black women was being preserved.

Before we moved here, I gave, again, the Legacy Center, along with the archives from Susan Smith McKinney Steward, what I had on black women, and I still have some things to turn over. I said I joined because of that interest, and it's still my major interest.

I think they talk about—I said there's a group of Latino women in medicine now that need to try and recruit, but certainly a group of Asian women in medicine. Not trying to separate the different groups, but we've got to be sure that we preserve our own history. That's all. And I've been a collector and a preserver for years.

[02:25:43]

Tacey Rosolowski: Well, I don't have any more questions and I know it's getting a little later in the afternoon, so I don't want to overtax you. Is there anything else that you'd like to add as we bring the interview to a close?

Gene-Ann Polk: No, I think we've covered just about everything. I've got a few other stories I could tell you. [laughs] But that's all right.

Tacey Rosolowski: Okay.

Gene-Ann Polk: We can move on, yeah.

Tacey Rosolowski: All right. Well, would you like to finish for today, then?

Gene-Ann Polk: I'd like to finish for today, I really would.

Tacey Rosolowski: Okay. Well, it's been such a pleasure to talk to you, Dr. Polk, and I really appreciate it. It's been great.

[02:26:24]

Gene-Ann Polk: Well, as I said, this was the end of my bucket list. [laughs] I'd hoped somewhere along the line I'd be able to tell my story to somebody, and the request came and I was just so happy that I was able to do it.

Tacey Rosolowski: Well, I'm glad. Well, tell me now if there's any other story you'd like to put into that bucket. [laughter]

Gene-Ann Polk: No, I think I've told you the best of them.

Tacey Rosolowski: All right. Well, it's been a real pleasure. Thank you very much.

Gene-Ann Polk: Well, thank you for being here.

Tacey Rosolowski: Well, I'm turning off the recorder at twenty-five minutes after two.

[End of December 10, 2014 interview]