

Newsletter of the LCHR

Louisiana Council on Human Relations

James D. Wilson, Jr., Editor
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What Does Healthcare Mean For Black People?

by Hazel Trice Edney, NNPA Editor-in-Chief; reprinted from *The Louisiana Weekly*

It finally passed. The healthcare bill for which President Barack Obama has vehemently fought almost since day one at the White House has finally passed both houses of Congress and been signed into law by the President.

As Congressional Black Caucus Members celebrated the 219-212 vote, the President put the historic moment in perspective on Sunday, March 21:

“Tonight, after nearly 100 years of talk and frustration, after decades of trying, and a year of sustained effort and debate, the United States Congress finally declared that America’s workers and America’s families and America’s small businesses deserve the security of knowing that here, in this country, neither illness nor accident should endanger the dreams they’ve worked a lifetime to achieve.”

He explained, “If you have health insurance, this reform just gave you more control by reining in the worst excesses and abuses of the insurance industry with some of the toughest consumer protections this country has ever known - so that you are actually getting what you pay for.”

“If you don’t have insurance, this reform gives you a chance to be a part of a big purchasing pool that will give you choice and competition and cheaper prices for insurance. And it includes the largest healthcare tax cut for working families and small businesses in history - so that if you lose your job and you change jobs, start that new business, you’ll finally be able to purchase quality, affordable care and the security and peace of mind that comes with it.” President Obama has fought long for the bill, escalating the battle after the death of his friend and former colleague Sen. Ted Kennedy last year. Kennedy was considered the Sen-

ate’s champion for health care. The bill passed the Senate on Christmas Eve.

Still, many will now wonder what it all means for African Americans who suffer the most from low-quality health care and health disparities. Members of the CBC say they believe the bill will make significant impact in the Black community.

“We cast our votes for all those people who deserve health care but simply can’t afford it. We cast our votes for our senior citizens who will see their prescription drug costs go down. We cast our votes for our children and grandchildren, so that they can live longer, fuller and healthier lives. We cast our votes in the memory of those people who didn’t have preventive care and died prematurely,” said a statement from Congressional Black Caucus Chair Barbara Lee (D-Calif.), applauding the passage. “We were vocal advocates for provisions in the bill to combat health disparities, illnesses and diseases that disproportionately affect our community. To those who suffer from those health disparities, our vote tonight carries significance similar to the passage of the Civil Rights Act in that it fulfills a dream that has been elusive for far too long and for far too many Americans.”

According to a CBC document, other key provisions in the legislation that CBC members fought to have included are:

(continued on page 2)

LCHR Board of Directors
Quarterly Meeting
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(continued from page 1)

- Expanded support for community health centers, which play a vital role in expanding access to preventive and other care in our nation's most vulnerable communities.

- Greater support for programs that will increase the racial and ethnic diversity in the nation's health workforce, as well as improved data collection so that we can better measure health inequities and develop solutions to end all health disparities.

- Strengthening the existing Office of Minority Health at HHS, creating new Offices of Minority Health across HHS agencies, and establishes the National Center on Minority Health and Health Disparities at NIH an Institute.

- Inclusion of coverage for resident of the U.S. territories, including a significant infusion of new Medicaid dollars, as well as access to the Exchange so that Americans in the territories will have access to affordable, high-quality health insurance plans.

- Guarantees transparency on rates and enables state insurance commissioners to recommend to the National Insurance Commissioner whether a particular insurer should participate in the Health Insurance Exchange, taking into account excessive or unjustified premium increases in making that determination. This will hold private insurers accountable, ensure affordability and help provide quality coverage for American families,

In addition to significant health care provisions, the CBC also fought for the inclusion of many very important education provisions including:

- Invests \$35 billion over 10 years to increase the maximum annual Pell Grant to \$5,550 in 2010 and to \$5,975 by 2017.

- Invests \$2.55 billion in Historically Black Colleges and Universities and Minority-Serving Institution

- Invests \$2 billion in a competitive grant program for community colleges to develop and improve educational or career training programs.

- Saves taxpayers \$61 billion over by switching to the less expensive Direct Loan program.

House Majority Whip Jim Clyburn (D-S.C.) also applauded the long-awaited passage. “Despite deafening protests from the other side, the nonpartisan Congressional Budget Office said the reforms included in this bill will reduce our deficit by \$143 billion in the first 10 years and \$1.2 trillion in the second 10 years. This bill will also create jobs, 400,000 good-paying jobs, reliable jobs, for every year and for small businesses. Small businesses will get a tax break on their healthcare premiums that will free up money for them to hire 80,000 more employees,” he said in his floor speech. “Mr. Speaker, we have debated this issue for several generations. The time has come to act. This is the Civil Rights Act of the 21st century. Tonight, we will take a significant step to move our country forward.”

Tea Party Protesters Scream “Nigger” at Black Congressman

Days prior to the passage of the health care bill, demonstrators outside the U.S. Capitol, angry over the proposed legislation, shouted “nigger” at U.S. Rep. John Lewis, a Georgia congressman and civil rights icon who was nearly beaten to death during an Alabama march in the 1960s.

Protesters also shouted obscenities at other members of the Congressional Black Caucus, spat on at least one black lawmaker and confronted an openly gay congressman with taunts.

“They were shouting, sort of harassing,” Lewis said. “But, it’s okay, I’ve faced this before. It reminded me of the 60s. It was a lot of downright hate and anger and people being downright mean.”

Lewis said he was leaving the Cannon office building to walk to the Capitol to vote when protesters shouted “Kill the bill, kill the bill,” Lewis said. “I said ‘I’m for the bill, I support the bill, I’m voting for the bill’,” Lewis said.

A colleague who was accompanying Lewis said people in the crowd responded by saying “Kill the bill, then the n-word.” “It surprised me that people are so mean and we can’t engage in a civil dialogue and debate,” Lewis said.

Rep. Emanuel Cleaver, D-Mo., said he was a few yards behind Lewis and distinctly heard “nigger.” “It was a chorus,” Cleaver said. “In a way, I feel sorry for those people who are doing this nasty stuff - they’re being whipped up. I decided I wouldn’t be angry with any of them.” Cleaver’s office said later in a statement that he’d also been spat upon and that Capitol Police had arrested his assailant. The statement praised the police, who Cleaver said escorted the members of Congress into the Capitol past the demonstrators. “The man who spat on the congressman was arrested, but the congressman has chosen not to press charges,” the statement said. “This is not the first time the Congressman has been called the ‘n’ word and certainly not the worst assault he has endured in his years fighting for equal rights for all Americans,” the statement said. “That being said, he is disappointed that in the 21st century our national discourse has devolved to the point of name calling and spitting.”

Protesters also allegedly used the anti-homosexual slur “faggot” as they confronted Rep. Barney Frank, D-Mass., an openly gay member of Congress. Frank told the *Boston Globe* that the incident happened as he was walking from the Longworth office building to the Rayburn office building, both a short distance from the Capitol. Frank said the crowd consisted of a couple of hundred of people and that they referred to him as ‘homo.’

“I’m disappointed with the unwillingness to be civil,” Frank said. “I was, I guess, surprised by the rancor. What it means is obviously the health care bill is proxy for a lot of other sentiments, some of which are perfectly reasonable, but some of which are not.”

“People out there today, on the whole, were really hateful,” Frank said. “The leaders of this movement have a responsibility to speak out more.”

Thousands of demonstrators gathered outside the Capitol in the days before passage of the bill as the House Democratic leadership worked to gather enough votes to enact a health care overhaul proposal that has become the centerpiece of President Barack Obama’s domestic agenda. Most were affiliated with so-called tea party organizations that originally

(continued on page 4)

sprang up during last summer's protests of the health care proposals.

Heated debate has surrounded what role race plays in the motivations of the tea party demonstrators. During protests last summer, demonstrators displayed a poster depicting Obama as an African witch doctor complete with headdress, above the words "OBAMA-CARE coming to a clinic near you." Former President Jimmy Carter asserted in September that racism was a major factor behind the hostility that Obama's proposals had faced. The claim brought angry rebuttals from Republicans. Republican National Committee Chairman Michael Steele, who is black, accused Carter of playing the "race card."

On Saturday, Frank, however, said he was sorry Republican leaders didn't do more to disown the protesters. Some Republicans "think they are benefiting from this rancor," he said.

House Majority Whip James Clyburn, D-S.C., said Saturday's ugliness underscored for him that the health care overhaul isn't the only motivation for many protesters. "I heard people saying things today I've not heard since March 15th, 1960, when I was marching to try and get off the back of the bus," Clyburn said. "This is incredible, shocking to me."

He added, "A lot of us have said for a long time that none of this is about health care at all. It's about extending a basic fundamental right to people who are less powerful."

Patricia Rickels Bequest \$5,000 to the LCHR

It was announced at the LCHR's January quarterly board of directors meeting that Dr. Patricia Rickels had bequested \$5,000 to the organization to be used in any manner that the board sees fit. Rickels, long-time corresponding secretary of the LCHR, passed away on September 15, 2009 at the age of eighty-two.

**The LCHR / BRCHR is Online at:
www.brchr.org**

Louisiana Sues Its Own Death Row Prisoners

In early February the Louisiana Department of Public Safety and Corrections sued every inmate on death row, in an effort to block any one of them from challenging the state's lethal injection procedures. Each of the eighty-four prisoners in the "death house" at Angola State Penitentiary was personally served papers in the suit, said Nick Trenticosta, who has represented numerous clients on Angola's death row.

Trenticosta, who is also director of the non-profit Center for Equal Justice in New Orleans, knows of no other instance in which a state sued its death row inmates en masse over legal questions relating to their execution. "I've been hanging around death penalty cases for twenty-five years," Trenticosta said in a phone interview, "and I have never seen anything like this."

The Corrections Department's litigation is a countersuit, filed in response to an earlier lawsuit claiming that Louisiana's lethal injection procedure is in violation of state law. That suit was filed by the Capital Post Conviction Project of Louisiana (CPCPL) on behalf of death row prisoner Nathaniel Code. It stated that Louisiana had not met the requirements of its own Administrative Procedures Act in creating guidelines for execution by lethal injection. The state procedure ought to specify exactly what drugs should be used to kill prisoners, the CPCPL argued, rather than simply calling for the administration of drugs. Without such stipulations, Trenticosta said, "They're saying if we want to pour boiling oil into your veins, we can do it."

On January 8, a state district court in Baton Rouge dismissed Nathaniel Code's suit, which would have halted all executions in Louisiana until the Corrections Department brought its procedures in line with state law. Attorneys for the state argued that Louisiana's three-drug lethal injection protocol was not subject to the Administrative Procedures Act; the judge agreed, and threw out the suit.

All this happened the day after Gerald Bordelon was executed by lethal injection in Angola's death chamber for the murder of his twelve-year-old stepdaughter. The execution on January 7 was the first to take

place in Louisiana for eight years, and proceeded after Bordelon chose to waive post-conviction appeals. According to the Associated Press, the hearing on Code's suit "was purposely scheduled the day after Gerald Bordelon's execution," because Bordelon's attorneys had told the judge "he did not want anything to disrupt his execution."

Nathaniel Code's attorneys said they would appeal the judge's ruling to Louisiana's First Circuit Court of Appeal. "The law is being violated. It was violated yesterday," CPCPL director Gary Clements said, referencing Bordelon's execution.

The state of Louisiana, however, has already initiated offensive maneuvers against further challenges to its methods of execution. Immediately after the ruling in Code's suit, the Corrections Department filed its countersuit against all death row inmates. The department's attorney, Wade Shows, told the *Baton Rouge Advocate* that Louisiana was asking the court "to formally declare—'once and for all'—that the state's lethal injection protocol is not subject to the Louisiana Administrative Procedure Act." Such a ruling, Shows said, "means you don't have to go through the rule-making process It's sort of an internal management decision."

Similar challenges in other states have yielded mixed results. According to the AP, "Courts around the country have split over whether states should have to follow the administrative procedures in adopting a lethal injection protocol." Courts in Maryland, Nebraska, California, and Kentucky have ruled that the procedural requirements do apply to the execution method. In these states, executions were suspended while proper procedures were carried out, often including public hearings. Courts in Missouri and Tennessee have ruled that the procedures do not apply. Only Louisiana, however, has dealt with the issue by suing the residents of its own death row.

On a larger scale, execution by lethal injection—which is used in thirty-five states—has faced several legal challenges in recent years, on the grounds that it violates the Constitutional ban on cruel and unusual punishment. These challenges were propelled in part by several horribly botched execution attempts, in which prisoners were stuck with IV needles numerous times over periods of up to two hours, and in a

few cases returned to their cells when attempts failed. Opponents have also argued that the later drugs in the three-drug protocol may cause excruciating pain, which dying prisoners cannot express because the initial drugs have paralyzed them.

In April 2008, the U.S. Supreme Court ruled 7-2 that lethal injection was not unconstitutional; it is the "method of execution believed to be the most humane available," Chief Justice John Roberts wrote in the majority opinion. "If administered as intended, that procedure will result in a painless death." The decision put an end to a de facto six-month moratorium on death by lethal injection, but some states have yet to resume their execution schedules.

Louisiana seems determined to have the choice to execute if and when it wants to, without interference from prisoner lawsuits alleging administrative technicalities. This despite the fact that in recent years, the state has shown relatively little zeal for carrying out executions, compared to neighboring Texas. While Angola's death chamber has been made famous by the films *Dead Man Walking* and *Monster's Ball*, only three executions have been carried out there in the last ten years.

Angola Warden Burl Cain, who oversees all executions in Louisiana, has indicated that it causes him pain to put prisoners to death. But Cain, famously, appears more focused on heavenly justice than on the earthly variety. Cain executed his first prisoner in 1995, and later said, "I felt him go to hell as I held his hand." He told the *Baptist Press*, "I decided that night I would never again put someone to death without telling him about his soul and about Jesus."

If executions were ever to resume in Louisiana at the rates common in the 1980s, heavenly justice might be all that's available to some of the inmates on death row. According to the *New Orleans Times-Picayune*, "Since the United States reinstated the death penalty in 1976, Orleans Parish juries have condemned thirty-eight defendants to death. But a recent tally by attorneys for death-row inmates calculated that courts have found errors in twenty-five of those sentences, or nearly two-thirds. In some cases defendants were retried, resulting in convictions on lesser charges, while in others defendants were released."

Newsletter of the BRCHR

Baton Rouge Council on Human Relations

Tamikia Y. Jones, Assistant Editor

Volume 45, Issue 2

BRCHR Holds Public Forum: “Community at Work / Taking Responsibility”

The Baton Rouge Council on Human Relations held a public meeting with a panel of speakers at the CAWSC Center on March 3. The group was welcomed by Ms. Tamikia Y. Jones, Acting President, BRCHR. After a meditation by Fr. George Lundy, Ph.D., S.J., Immaculate Conception Parish, a panel of speakers was moderated by Dr. Albert L. Samuels, Political Science Professor at Southern University. Dr. Holley Galland, a family physician, spoke on health care; Mr. Eric B. Lewis, President, Baton Rouge Black Chamber of Commerce, spoke on small business economics; Mr. Ernest Stephens, Assistant to the President, Louisiana AFL-CIO spoke on employment, Ms. Tara W. Wicker, Baton Rouge City Council member, substituting for Ms. C. Denise Marcelle, spoke on politics; and the Rev. William Davis, Sr., First Baptist Church of Richmond Park, spoke on the role of religion.

The BRCHR produced a printed program for the meeting, with well-thought out comments on the subject of “Community at Work/Taking Responsibility.” Portions of the printed program are reproduced here:

“Why are people in certain communities able to join forces and get a handle on their problems while others are not? This is what we mean by a community working. The community faces a host of problems. Some of the problems grow out of a weakness in a community and then further undermine the sense of community. There are multiple causes, and no one institution or group within a community can solve the problems.

“People are troubled by a discrepancy between what is happening to their community and what they think should be happening—yet there is no agreement

about what should be done. How do we look at pockets of poverty that persist even in the midst of prosperity? Why are there troubling gaps in the academic achievement levels of students? How can we help to repair health care and prevent transmittable disease such as HIV/AIDS OR THE H1N1 Flu Virus?

“This meeting is held to set before the people issues of concern to the community, to stimulate action and improve the quality of life. It is also being held to make people better informed, more understanding of other viewpoints, and to help enable them to make more intelligent decisions. The dialogs embody the idea that ‘to understand is to act.’ With every change in an individual, every public forum nibbles away at the polarization and grandstanding that can dominate our public life. We want the community to join forces and get a handle on its problems. We would like the community to make collective decisions and develop productive relationships so that the diverse people in the community can act together in ways that gives them greater control over their common fate.”

(An Editorial from the *BR Advocate*)

Our View: Long Bus Rides Too Common

When a state representative with years of service representing north Baton Rouge gets on a city bus for the first time, that tells us something about the lack of interest in bus transportation in Louisiana.

We hope Rep. Regina Barrow, D-Baton Rouge, wasn't shocked by the hour-and-forty-minute ride from LSU Earl K. Long Medical Center to Our Lady of the Lake Regional Medical Center. That included one transfer, a particular difficulty in an infrequent bus schedule.

Anyone without a car who is working at either hospital, or almost anywhere else, faces a daunting commute every day, both ways.

New Book: *Black Rage in New Orleans*



Barrow made the trip from Airline Highway to Essen Lane to make a point that bus travel is very difficult from the site of the old charity hospital that officials plan to close in a few years. Inpatients, a relatively small percentage of the charity hospital's patients, would be served at the Lake through a new public-private partnership.

While the issue of transportation of patients to the new hospital is a serious one that hospital officials pledge to address, another issue is made obvious by the Barrow trip: Baton Rouge does not have a practical bus service. Practical in the sense that somebody who needs to be at work on time can use it every day.

The new chief executive officer of the Capital Area Transit System, Brian Marshall, told the Metro Council recently that the waits between buses make life difficult for working commuters.

"You can't operate a system where you have to wait 50 minutes for a bus," Marshall said. "It just doesn't work."

Marshall has pushed a temporary increase in the number of buses on several routes, as a sort of demonstration project. However, without significant new state and local financial support, that's just not practical for the vast majority of bus routes in the city. Fares are already at the higher end of similar cities' services, so ultimately — as everywhere else — bus services must be supported by general tax revenue.

Until then, the main constituencies of CATS — the poor, disabled or elderly who can no longer drive — are on their one-hour-and-forty-minute routes, counting a transfer.

In *Black Rage in New Orleans*, Leonard N. Moore traces the shocking history of police corruption in the Crescent City from World War II to Hurricane Katrina and the concurrent rise of a large and energized black opposition to it. In New Orleans, crime, drug abuse, and murder were commonplace, and an underpaid, inadequately staffed, and poorly trained police force frequently resorted to brutality against African Americans. Endemic corruption among police officers increased as the city's crime rate soared, generating anger and frustration among New Orleans's black community. Rather than remain passive, African Americans in the city formed antibrutality organizations, staged marches, held sit-ins, waged boycotts, vocalized their concerns at city council meetings, and demanded equitable treatment.

Moore explores a staggering array of NOPD abuses—police homicides, sexual violence against women, racial profiling, and complicity in drug deals, prostitution rings, burglaries, protection schemes, and gun smuggling—and the increasingly vociferous calls for reform by the city's black community. Documenting the police harassment of civil rights workers in the 1950s and 1960s, Moore then examines the aggressive policing techniques of the 1970s, and the attempts of Ernest "Dutch" Morial—the first black mayor of New Orleans—to reform the force in the late 1970s and early 1980s. Even when the department hired more African American officers as part of that reform effort, Moore reveals, the corruption and brutality continued unabated in the late 1980s and early 1990s.

Dramatic changes in departmental leadership, together with aid from federal grants, finally helped professionalize the force and achieved long-sought improvements within the New Orleans Police Department. Community policing practices, increased training, better pay, and a raft of other reform measures for a time seemed to signal real change in the department. The book's epilogue, "Policing Katrina," however, looks at how the NOPD's ineffectiveness compromised its ability to handle the greatest natural disaster in American history, suggesting that the fruits of reform may have been more temporary than lasting.

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