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Building Bridges, Breaking Barriers:

Nurses crossed racial and socioeconomic boundaries to provide care in early 20th-century Philadelphia

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Editor's note: This is the third installment of *Looking Back*, an occasional column intended as a forum for the study of nursing history and featuring the work of scholars using primary-source visual and textual documents. By focusing on photographs that capture significant moments in the development of the profession, we hope to raise awareness of the richness and relevance of nursing history. *Looking Back* seeks interesting historical photographs accompanied by brief essays that speak to each photograph's context and implications for contemporary nursing. See AJN's author guidelines at <http://ajn.edmgr.com>.

Like many large, industrialized Northern cities in the early 20th century, Philadelphia had an increasingly diverse population as European immigrants and blacks from the South arrived seeking jobs and opportunity. A housing shortage, poor sanitation, and a lack of proper ventilation led to high infant and maternal mortality rates. Many people died from infectious diseases. Mortality rates were particularly high among poor blacks; for example, in 1900 Philadelphia's black residents had two to three times more deaths due to tuberculosis than did white residents.¹ Few people could afford medical services; others chose to remain in their homes during illness out of fear of hospitals or a preference for traditional healing methods. And many hospitals had policies that refused care to blacks or offered care in segregated wards.²

A faltering public health system. Unable to meet public health needs, health officials were often assisted by philanthropic charities that provided health services and social resources.³ Nurses were the primary providers of care, often in patients' homes or in community-based clinics.⁴

Philadelphia's Starr Centre Association, a secular philanthropic organization begun by community activists in 1897, was located in one of the city's poorest neighborhoods. The Starr Centre employed nurses to provide health care and social relief to immigrant and black families. In addition to providing child care programs, reduced-cost lunches for school-age children, libraries, and pasteurized milk, the Starr Centre opened several clinics that offered low-cost medical and nursing care. Nurses also made home care visits, where they both cared for the sick and educated clients on the importance of proper ventilation and sanitation.

Winning trust. Nurses were in frequent contact with community members and some were viewed as trusted resources and confidants. These relationships were not always easily won. Providing care to members of different racial and ethnic groups required nurses to push the boundaries of proscribed societal norms. During a time when cultural standards separated

people according to ethnic, racial, and class affiliations, the Starr Centre opposed many of these practices. Nurses worked particularly hard to extinguish fear and mistrust. The Starr Centre Annual Report of 1901 gives the following quote from a black resident about one nurse's persistence: "I turned the nurse away the first time she came, but she kept coming and we like her so much; she is kind and isn't afraid to touch us."⁵ All of the nurses working for the Starr Centre at the time were white; their ability to transcend racial and socioeconomic differences led to the formation of enduring partnerships with neighborhood residents.

Acknowledgments

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This photograph shows a Starr Centre nurse during a home visit with an early 20th-century inner-city family. It offers a window into the lives of the people and communities where nurses provided care. Photo courtesy of the Starr Centre Association Collection. Barbara Bates Center for the Study of the History of Nursing, University of Pennsylvania School of Nursing. Photo not dated.