

INTERVIEWEE: Joyce Clayton Nichols  
INTERVIEWER: Jessica Roseberry  
DATE: October 31, 2006  
PLACE: Ms. Nichols' home in Durham, NC

NICHOLS INTERVIEW NO. 1

JESSICA ROSEBERRY: This Jessica Roseberry. I'm here with Ms. Joyce Clayton Nichols. She was the first African American female physician assistant. This is October 31, 2006, and we're here in Ms. Nichols' home in Durham, North Carolina. And I want to thank you very much for agreeing to be interviewed today. It's a real pleasure to speak with you. I wonder if I could start by asking you a little bit about your background.

JOYCE CLAYTON NICHOLS: Okay.

ROSEBERRY: If it's all right with you, ask you when you were born?

NICHOLS: That's fine. I was born June 28, 1940, in Person County, in Roxboro, in a little sub-city, rural area out from there called Timberlake, North Carolina.

ROSEBERRY: And did you grow up there?

NICHOLS: I grew up there. My father was a farmer. My mother was a schoolteacher. My mother died when my siblings and I were young, and so my aunt and my grandmother helped my father raise us. We were raised in a household—I had three brothers and one sister, but we were raised up in a household of ten girls and eight boys.

ROSEBERRY: My goodness! Where did you fall in that line?

NICHOLS: I was the oldest.

ROSEBERRY: So was there any helping to raise any of the other kids?

NICHOLS: No, I didn't do that because I chose to work outside in the fields, helping with cutting the wood in the winter, to fire the barn for the tobacco, to do the plowing and preparing the land. But I did it, you know, and everybody in the family was given chores to do, and that's how it worked. Some cooked, some washed, some ironed, some cleaned, so that was how it worked. So I didn't have to help raise the children, because my aunt was the female that made sure that the kids were raised. She raised the children. My uncle and my father and my grandmother were a part of that team, but she was the person who had the most input in the raising of the children.

ROSEBERRY: It sounds like there was definitely a sense of contribution. I mean, everybody--  
(cross-talk; unintelligible)

NICHOLS: Everybody had something to do. Everybody did something. And believe it or not, we had a good time, and didn't have—we didn't have a lot of things that people call luxuries, but we were happy, and we had everything that we needed, because they raised everything. When they went to the grocery store, it was to buy sugar, rice, salt, and that was it, because we raised the wheat and took it to Rougemont to have the flour; the corn, to have the meal done. We raised the cows, the hogs, sheep, chicken, so we had lamb and steak and ham. And during the spring and the summer, for the vegetables, they were canned, so we had our vegetables. And the fruit. You canned your fruits. We made the applesauce, made the tomato juice. We didn't buy a lot of things. My aunt made our clothes, including our coats. Our clothes were—they were in style, they looked good, because she was an excellent seamstress. And I have a sister who actually does sewing for other people, make wedding gowns, that kind of thing. She made my two daughters' wedding gowns when they got married, and the bridesmaids' dresses, so she carried that over from this.

ROSEBERRY: How would you describe your aunt?

NICHOLS: The best woman that I know anywhere. There is no way that I could have ever undertaken that kind of responsibility, to raise that many children, and she was very soft-spoken. She didn't yell or scream, did not allow us to yell or scream at each other. If you were angry with somebody, you had to sit down, and there had to be a mediator. Somebody else had to—it would be either my grandmother or my uncle or my father. She would say, "Now, these two have some problems, and they need to settle it," and that's the way it was done. She was a beautiful person, beautiful person.

ROSEBERRY: You would be doing some trailblazing later on in your life, and I'm wondering what influences gave you the strength to do that.

NICHOLS: First of all, I had gotten married. I was still in school, living in Person County, driving back to school every morning, and my husband at that time was also working in Durham, so I had to come early because he had to be to work at seven o'clock. My class didn't start until eight. Then I'd have to wait that hour to go to class, and then he got off at three thirty. I didn't get out of class until five, so he would have to wait. So we moved to Durham. Then I had one child, and then I got pregnant and had the other child, and he made sure we had what we needed, but he didn't give us the support, so then he—in 1964 I got pregnant again, and he left us, and I was pregnant. I'd never paid bills. I had never paid a light bill, or a water bill, or a mortgage, or anything like this, and I came home from school one day, and there was a padlock on my house, and I didn't know why. And when I found out that they had padlocked it because the mortgage hadn't been paid, and it hadn't been paid in three and a half months—he'd paid all of the things. So, then, here I am, pregnant, two children, and had to find somewhere to move, because I just didn't want to go back. I was too embarrassed to go back home. My aunt and my uncle and my

father said, You can come home, but I just couldn't do that with two children when I'm pregnant with another child. I just couldn't. I had an aunt who was living here in Durham, and she was working at Memorial [Hospital] in Chapel Hill. She was a nurse. And she said, "There's public housing, so let me see what we can do." And she got me into McDougald Terrace, which was a public housing development. And that's where I moved in November of 1964, into that.

So, you know, here I am. I came from a farm with a nine-bedroom house, with a fireplace in every room, what they called the parlor, a formal dining room, and I moved to Durham in my own house, on Chandler Street, in a nice section of town. And here I am, now: two children and another child on the way, in public housing. When I got there, I just could not believe the way people were treated. I mean, you know, you could have a telephone downstairs, but you couldn't have an extension upstairs. I said, What? I just couldn't believe that. And you could have a TV, but only one TV. I just—

ROSEBERRY: These were the rules of the Housing Authority?

NICHOLS: These were the rules of the Housing Authority in 1964. So at that time, Operation Breakthrough and the camp agencies were in the process of teaching people to be self-sufficient, to speak up for themselves. They were doing community organization. They came into McDougald Terrace. John Edwards is now dead. As a matter of fact, he died just a couple of weeks ago. Ben Ruffin, Howard Fuller, that group were organizing people, so they came and said—and I said, "Well, I want us to organize so that we can at least have some kind of—for the women who live in public housing, so that we can have some daycare, some childcare, because I'm struggling with childcare and struggling with trying to get out of school and trying to work." It was just unreal. But anyway, we got organized, what was called a Mothers Club then, to address the issues that we had in public housing. We didn't have an outside light by the door,

where you could turn the light on to walk out at night. Didn't have any of those kind of things. Or a meeting place for us to meet to try to get set up for daycare. And because I was the most vocal person at the meeting, I got elected the president. Well, my first order of business was to go with this list of things that we needed to the administration of the Housing Authority. And lo and behold, three days later I get an eviction notice.

ROSEBERRY: Just you?

NICHOLS: Just me, because I was the only one who was going to them. I didn't name anybody else who was at the meeting, because I didn't think it was any of their business. And the other thing is, I think I was naïve. I was naïve to the point that I wanted to make things better for my children and me, but I wanted other people to benefit as well, and so I'm not so sure if my motives at that time wasn't selfish ones. I did this. I got the eviction notice, so I went to the office to find out what had I done, because now I'm looking at these rules and regulations that I signed when I moved in. I had not violated any of those rules. I paid my rent on time, I kept my apartment clean, I didn't have people in and out of my apartment. So she said she didn't have to tell me. The manager said she didn't have to tell me why I had to move. I had to move. So I got rebellious, and I said, "I'm not moving. I'm not going anywhere."

ROSEBERRY: What time period is this?

NICHOLS: This was in 1965. I stayed there. By March of '65—in December of '64, I had had my baby early, but it was because of the stress, because I didn't move into public housing until November of '64, so my baby was born early. She weighed two pounds and three ounces on the tenth of December, so she stayed in the hospital. She was in the hospital in an incubator, and so I didn't bring her home until March of 1965. And at that time, there was a lady who was keeping the baby for me, but she kept getting one infection after the other, and so the doctor said,

“You’re going to have to keep that baby in, or we are going to take the child from you for neglect.” I was in the laundromat right after they told me, and I was sitting there crying, and this lady came over to me. She said, “What’s wrong with you, Baby?” I just told her everything—what was going—she said, “Well, look, I’ll keep your baby for you for five dollars a week. You bring your baby to me on Monday morning and pick the baby up on Friday. You can come by to see the baby every day.” I said, Now, this is too good to be true. But I’m going to graduate in May, so this is March. If I can just do it for that length of time, then I’ll be able to take care [of] my family.

ROSEBERRY: This was college?

NICHOLS: Yes, at North Carolina Central University. So I did. It was just unreal, because this lady was good to my baby. She was good to my baby. And even up until she died, she stayed in touch with my baby, and my baby stayed in touch with her. And I went by to see this lady every Monday when I got off from work. But to make a long story short, I was in the process of fighting this eviction thing, because they would not give me a reason why I was being evicted. I got a thing--I came home one day, and the sheriff was there to set my stuff outside. I couldn’t let that happen. That’s when John Edwards and a group of people got together and called Floyd \_\_\_\_\_, who got an injunction to allow me to stay there until they got things in court. So that’s how I ended up in a legal battle from 1965 to 1969, because I refused to move when they sent me that eviction, so then we fought that. And as a result of that legal battle, housing authorities all over the country had to give residents a reason for their moving and allow them the opportunity to face their accuser and have a hearing. So I was allowed to have my hearing after 1969, and the lady said that the reason they sent me the eviction notice was because I had used my apartment for immoral purposes. I’d had a baby. My lawyer said, “Now, she moved in in

November of 1964, had the baby December the tenth of 1964. Now, when did she use the apartment?" She said, "Well, when she moved in, I didn't know she was pregnant." He said, "Huh?" Now, that was the kicker, because that was the reason that they—they didn't want to say that the reason they wanted me out of there was because I was making trouble for them. There was a lot of media about what was going on, so they didn't want that kind of publicity, so that would make other residents in public housing feel like that they had rights as well. So they were trying to keep it as low profile as possible. And then, while I'm still in public housing, gotten a divorce, gotten out of—I went to LPN school so that I could get a quick fix for good income, and started working at Duke as an LPN. And I was on Long Ward in the beginning, which was a public ward, and that's the year that they opened up the CCU: the cardiac intensive care unit. And Joanne McClease was the head nurse on Long, and they chose her to be the head nurse on the CCU. And she chose the people that she wanted to work with her, and so I was one of those people. As a result of that, I got to meet the corpsmen who were working over there also, and these were medical corpsmen that were—because that's when Dr. [Gene] Stead had started the physician's assistant concept, and they were using medical corpsmen to train them as physicians' assistants. I applied, because I enjoyed being an LPN on the CCU. I was learning things, but I knew that that was just it. There was no way for upward mobility. There could be lateral mobility, but there could never be any upward mobility with just that, so I said, I'm going to do it.

ROSEBERRY: Were there other opportunities for upward mobility, or was this kind of the one— (cross-talk; unintelligible)

NICHOLS: This was just the one that—there were other—because they had the program where LPNs could go back to become RNs. You could work twenty hours a week and be paid for forty

hours a week, as long as you were in school with something that was connected to whatever your position was when you had—when you was there. As long as it was an upward mobility kind of thing, an educational kind of thing. So I applied '67. I applied in '66,'67. And so finally I said—you know, Jim Mau was the admissions person at the time, so I went to him, and I said, “Look, why is it that I have been turned down each time?” He said, “Well, Joyce, it’s not just two years’ experience in giving health care. Now, you have to have had some college.” And I said, “That’s all?” He said, “Now, not technical school, some college.” I said, “Oh, okay.” “And we need your transcript.” “Oh, okay.” So I went to Central. The lady said, “Well, you know, we can’t give you your transcript. They have to request it, and we have to mail it to you.”

ROSEBERRY: So they hadn’t requested it.

NICHOLS: They hadn’t requested it. So I begged, and I pleaded, and this lady said, “Don’t make me lose my job.” So she gave me my transcript with the seal on it and everything, and I hand carried it to Jim Mau on a Friday before classes were to start on Monday. He came—by this time I had transferred to Cardiology, which was the less intense care, but still there, and it just so happened that I was scheduled to be working evenings. Edith Aiken was the nursing supervisor, so when she came on that evening after Jim had come up to tell me that I could start class on Monday, I said to her—I said, “You know, I’ve been accepted. I just found out. Here is my letter. And I need to be able to come in a little bit later than three o’clock, because I (unintelligible), and I won’t get out of class until four thirty.” She said, “Okay, I’ll let the nurse know, so that you won’t get docked, and I will okay that additional time for you.” Then she said, “Well, do you know about the twenty/twenty program?” And I said, “What is that?” So she told me that I could work twenty hours a week and get paid for the whole—as long as I was in the program. I said, “No, I didn’t know that.”



ROSEBERRY: So you're getting paid for forty hours.

NICHOLS: She said, "I'll help set it up so that you can." So what she did was, I would work eight hours—when I got out of class on Friday, I would work eight hours on Friday, get off at eleven thirty and come back at seven o'clock that next morning, and work until eleven thirty that next night, so that I could get my twenty hours in for the week. And that's how I did it. In September 1970 I came out of the PA program. It was just a number of—it was things that said you can't do it that made me want to do it. Or I decided, this is what I want to do, and I'm going to take whatever flak there is and do it. And that's what I did. And while I was in school, I had tried to find some jobs, some potential jobs so that I would be able to have somewhere to work. Well, the thing called PA was a new entity. You know, it had just started in '65, so it was only five years old. This is just 1970. It wasn't something that physicians were really interested in hiring people. So Dr. Harvey Estes asked me what I wanted to do when I got out. I had had what they called an outside rotation with a physician in Garland, North Carolina, which is twelve miles from Clinton, in family practice. He had a private family practice. And that was just great. I remember how hard it was to get my grandmother from Timberlake to Duke, and we were out in the rural area, and I said, "I'd like to see a rural health clinic." And he said, "Really?" I said, "Yeah." And he said, "Give me the goals and objectives, and we'll see about that." So, I mean, you know, Dr. Estes is so none of so many. I mean, you know, he'd say things, and you would think, Well, this man don't really mean what he is saying. So I gave it to him. And in February of 1970, he said, "I have the money, and now you need to get some people to do surveys to find out what kind of things they want." I said, "Huh?" So now I'm backed up against a corner, because I really didn't believe that he was going to do it. I just didn't believe it. So then I found some people who worked during the summer doing the surveys, putting together an advisory

board for me in Rougemont, Bahama, and an advisory board in Braggtown. Got that together, and then I would meet with them on the weekend. By this time, then, I didn't need to continue all of the work, because they had given me a stipend from their physician's assistant program, and then I was getting this pay from the grant to get the clinic set up. So I had the income to keep me going. And my husband was really good, because by this time—in '67 I got married again. My husband stood by me through all of this stuff. Helped me with the children. When I had to go to these meetings, he cooked and cleaned and ironed clothes and combed girls' hair, so it was a good thing. I got the clinic started, and it was the first rural health clinic in North Carolina. We had the rural health clinic and the urban clinic. It got some good reviews from what we were doing. The residents were very pleased with it. But in 1972, in June 30 of '72, the funds ran out, because we were funded by the Robert Wood Johnson Foundation, so we didn't have any more funds. Applied to the feds for the 314E money, to do health care. They said they already had that money coming into the city, and it was coming to Lincoln Community Health Center.

ROSEBERRY: What is that money? I'm sorry, I don't know the 314—

NICHOLS: The 314E money was—it was the title for the federal funding of neighborhood health centers, so that's what it was called: the 314E money. So Lincoln Community Health Center was already getting that money. So Dr. Estes and I met with the administrators and the board at Lincoln Community Health Center to see if they would do an extension grant or a substitute grant and take on the responsibility of those clinics. They did. They got the funding and took on all the staff, and that's how I ended up at Lincoln Community Health Center, where I stayed for twenty-three years. I still kept a teaching position in the Department of Community and Family Medicine as a clinical instructor for the physician's assistant program.

ROSEBERRY: At Duke?

NICHOLS: Yes, until 1986, because that got to be a bit much, working at Lincoln as well, and so—and that's where I stayed, and that's it.

ROSEBERRY: That's quite a story, quite a story.

NICHOLS: But it's just something I had to do, what I wanted to do. I did it, and now I feel good about it.

ROSEBERRY: If you don't mind my asking what your degree was in when you were in college.

NICHOLS: I didn't get it, believe it or not. I don't have a degree. I do not have a degree. I was the only non-degreed person teaching in the Department of Community and Family Medicine.

ROSEBERRY: So they were—

NICHOLS: It wasn't until Dr. Brodie came on that he questioned what I was doing, and I said, "I never told anybody I had a degree." And they looked, and they saw, and I never did.

ROSEBERRY: So you said that the physician assistant program required some college—

NICHOLS: Some college, at least two years of college.

ROSEBERRY: I see.

NICHOLS: And I had two years of college.

ROSEBERRY: Okay.

NICHOLS: As a matter of fact, I had three.

ROSEBERRY: Okay. Tell me about the LPN program.

NICHOLS: I went to Durham Tech, in the LPN program. I was living in public housing then. I had to do something that was quick, and it was only a twelve-month program, so that I was able to do that and get out. The easiest class I ever took was the LPN program. It was very easy. And I had had a neighbor who was also in that program. We studied together. We lived right

next door in public housing, so it was nice, and she was a nice person, because she was married. Her husband was working at American Tobacco, so he was making some good money, and so she would help me out by when she went to buy a grocery, she'd buy stuff and sort of sneak it to me. And it got to the point that it wasn't sneaking, because she'd tell her husband, "Will you take that over there to Joyce for me?" And she would buy milk by the case for my baby. And so LPN school was a good thing, and it was a stepping stone for after I got out of that slot of being in the thing with the Housing Authority, sort of helped me get over and get to doing something that was positive instead of being depressed. And that kept me from being depressed, because I had something else to do and move forward. And I think that helped me to realize that I had to do. Because if I didn't, people who gave me the opportunity to do, I would let down. And not thinking about, I would let myself down. I was thinking I'd let somebody else down. Then I thought about it. It's me that I would let down. It wouldn't be the other people. They opened the door, and it was up to me to take advantage of it. And so that's what I did. So that was a good thing. That was a stepping stone.

ROSEBERRY: What were you doing as an LPN?

NICHOLS: I worked at Duke on Long Ward, and that's when I came with Joanne McCleese from Long to the CCU, when they started it. They started the CCU, and I was one of the first nurses that they had, one of the first LPNs with the thing. As a matter of fact, Dr. Steineman, who was at Duke—he was an intern resident then, and the nurse on that floor, Judy Kreps, is his wife now. He married her, and they've been married all these years. We worked together. We had a good working relationship. My work relationship at Duke was good. It was just moving upward that was stymied. Because when I came along, there was only one black head nurse at Duke. They were using the term "black" then; they weren't using "African American." I mean,

you know, we've gone through this big thing, so--. And I said, "Even if I go back to get a degree in nursing," because I could have done that, "I don't see any possibility to move forward." Not knowing that there would have been, but I didn't know that then, so that's why I chose to do the physician's assistant route. And the other reason was to prove to them that females could do just as well as anybody else, and that I could learn as well as my classmates. They just couldn't believe—and I think when they gave me the opportunity, they gave me the opportunity with the understanding—they picked me as the female to enter the program because they would be able to say, We allowed a female to enter the program, and she didn't make it, so we're going to keep it male. And that was the wrong thing to do. They didn't come out and say it in so many words, but there were innuendos that said it, that kind of thing, because in my class there were thirteen students. The class was set up for twelve, and I was that thirteenth person, so supposedly by the end of the first phase, I would have flunked out. Didn't happen that way. And my classmates and I—we made a pact that everybody in that class would graduate. There would be nobody in that class who did not graduate. And then I realized—they would go to the pub on Wednesday to study and drink beer. I couldn't go because I'm a married woman with these three children at home, and so I said to my husband, "If I ask the guys to come here to study, would that be okay?" And he said, "Yes." So on Wednesdays, when we got out of school, they came to my house. We studied in my living room on the floor. I didn't have enough chairs for everybody to sit in. And we went over everything from that Thursday up to that following Wednesday. Anybody who didn't understand what was done, they knew what it was before we left that night. There were people who had areas of ex—Roger Lamb was the expert in lab, because he was a lab technician. Roger Whittaker was the expert in anatomy. So we all had areas of ex-- and my thing was EKGs. I knew how to read EKGs at one side and down the other. So everybody had

an area that they were proficient in. So we made sure that everybody understood what was going to happen. And all of us graduated, every last one of us. Nobody was left behind, simply because we studied together. It was not easy in the beginning, because—I had a classmate from Alabama, who was a redneck. I have to say this. We were doing behavioral science, and he said, “Negroes don’t understand anything unless you yell or curse at ‘em.” And I went ballistic, and I said, “Look, I don’t like to be yelled at. I don’t like for people to talk down, and I think that you’re talking about how we act. If you say something like that again, you will find out just how we act.” Michael Quirk was the peacemaker, and he was a peacemaker all the way through class. I mean, you know, it had nothing to do with—that was part of his makeup. And he said, “We’re classmates. We’re in this trailer. We’re in close proximity. We have to get along, and we can’t be derogatory towards anybody.” And it was smooth sailing after that. The hours were long, the work was hard, but it was enjoyable. I was fortunate enough to have twelve young men—because I was the oldest in my class—who really gave me respect, and even today we still—we see each other, we call each other, so that was really a good experience. And being a PA has been a rewarding experience for me, because I was able to do a lot of things that a lot of people didn’t do. And I think I had the best of two worlds, because I had the clinical as well as the academic part of it, so I was able to keep up, teach, and—and it just allowed me to do a lot of different things. It was great. After I got to Lincoln, Dr. Schmidt was very—was an excellent CEO, because when I decided that I wanted to do a foot clinic and a hypertension clinic and a diabetes clinic and a weight control clinic, I just wrote up my guidelines and gave her the proposal. And she said, “Check with your medical director or your chief, and if he”—or she, whichever one it was at that time—“says okay, it’s fine with me.” And during those times was when neighborhood health centers had health promotion kind of things. Health centers would

get awards for having the best innovative health prevention program. Even today you can go to Lincoln and look on the walls, and Lincoln has the award for our weight control program, for our hypertension program, and for our foot care. Because when I got ready to do foot care, I didn't know anything about feet except the anatomy of the foot, and so I said, "I want a clinic," and Dr. Schmidt said, "Well, you can have it, but you got to learn how to do it." So I found a podiatrist, John Ardale. I will never forget him, because when I met him, John Ardale was the best-looking white man I'd ever laid my eyes on. I mean, he was a good-looking white man. So I said, "I need to learn how to take care of feet." He said, "Well, you go to school." And I said, "I need to learn to do it for the diabetics and for the elderly." He said, "Well, it'll take you twelve weeks. Can you stay away from your job that long?" I said, "I think so." And he took me for twelve weeks and trained me to take care of the elderly and the diabetic foot, and the foot clinic got rave reviews, and it did very well. I had a list backed up for six months for people to get into there, the foot clinic, because I just did it once a week. Because I had the other clinics that—you know, I did my diabetic clinic, my hypertensive clinic, and my weight control clinic. Then I had to see some patients. (chuckles) And then when the homeless shelter came, when they got the funds for that, I served as the medical coordinator for the homeless shelter health teams, and did that until I left. My career ended in 1995. But now I'm still doing some things, because I do some substitute teaching at Mt. Zion Christian Academy. I have to admit, I like the sciences, and I like math, so I can do that, and I do that. Right now I'm trying to get some funds for Lincoln Community Health Center, because the staff—as a matter of fact, I just wrote a letter to—because I'm going before the county commissioners. I just finished correcting it and faxed it, what needed to be—you know, from the typed part, and it will be put on my stationery. But I'm going before the county commissioners on the sixth of November to request funds for Lincoln.

Now, I'm a consumer, and I don't want to see Lincoln go down the tube, not because I'm working there, because I don't get paid from there; it's because with the kind of care that they give, there would be a lot of people who would suffer if Lincoln go down the tube, and unless they can get a quick fix, things are going to. They've already had to cut some services. The orthopaedic clinic have been cut, the cardiology clinic, the surgical clinic, the nephrology clinic. There's only one half-day a month. So there are too many services, and I just don't want to see that.

ROSEBERRY: Why are they suffering?

NICHOLS: Because there has been an increase of uninsured and underinsured patients over the years, because if you look at from—and the other thing is when—the fund there is the Human Health Services, the 330 grant. Some health centers get \$272 per uninsured, registered client from the center; Lincoln gets only \$145. The reason they get only \$145 is because they are partnered with Duke for the Hillside Wellness Center, Walltown, and with Calvary. So that makes them—it appear that they have, but they don't have that money. Last year, there were—Lincoln has increased by 10,297 uninsured patients, or sixty-three percent since June 30 of 2006. And 16,323 are uninsured, as opposed to what they had before. So with a sixty-three percent increase in uninsured and underinsured, and Lincoln can't turn down anybody—you know, you can't keep—you don't have something coming in, and you keep taking stuff out. You end up being in a deficit, and that's where they are now. They're in a deficit. And I just felt like that as a consumer, as somebody who lives in the community, as somebody who's benefited from it, from health care to my livelihood; my family has benefited from it—it's time for me to do something, and so that's what I'm doing.

ROSEBERRY: So what can the county commissioners do? Would they provide funding?



NICHOLS: That's what I'm asking them to do. To give us—give Lincoln a quick fix. Staff hasn't had—October, starting in October was the third year the staff at Lincoln has not had a raise. And they're losing—I talked with Dr. Schmidt last week. They're losing people, good people, because they can go somewhere else and get jobs. When morale go down and good people start leaving, I mean, you have to hire what you can get with what little money you have, and you can't get the top-quality people. It decreases productivity. No salary increase decreases morale, and [low] morale in itself decreases productivity. So without the productivity, you don't have the income, and it's a vicious cycle. So I just think that if you get with that quick fix, you'll be able to get up until you can—because they started a new system: the electronic medical records, so getting it up—that in itself also caused a decrease in productivity, because the providers had to learn how to use the thing. I don't know how many of them were like me, because I was computer illiterate. Still am. But don't have to learn. (laughs) Don't have to learn. But it's up and running now, and it look, from last month to this month, it look as if they have increased productivity there about six percent, which isn't a whole lot, but it is a lot to show that there's an upward trend to what's going to occur. So if we can just get something to tide us over until then. And I keep saying “us” as if I'm working there, but it's not—it's “us” because Lincoln has been in this community for thirty-five years. In September, thirty-five years it was in this community. It has been a service to the medically indigent, and they have gotten quality health care, with dignity, and I'd like to see it stay there. I'd like to see my children's children be able to go to Lincoln if they would like to—I mean, you know, to have some choices.

ROSEBERRY: Of the places that you have worked, does Lincoln feel like a place that you identify with maybe more than some of the others?

NICHOLS: It's kind of hard to separate them out, because at the same time I was working at Lincoln, I was also working at Duke. Duke gave me my foundation, I suppose, in learning to trust and to know that there are some good people out there, and not being so harsh with—because Dr. Estes really made it possible for me to understand that people care. If you are capable of doing the job, that you can have the opportunity to do that job. I didn't have the master's or the Ph.D., but I have accomplished more than some of those folk. And I'm not bragging about it, but it's a fact. I mean, you know, the record speak for itself. And I don't feel bad about my career at all, not at all. And I don't feel bad about the time that I spent at Duke, nor the time that I spent at Lincoln, because I think that even though Duke has some areas in which they can improve in, I was able to go into the area that I wanted to go in. It wasn't easy, but I was able to do it. You know, I think about the fact that when I went there—you know, we had to eat in the basement. You couldn't eat in the cafeteria--black folk. And so it has come a long way, but it still has a long way to go, but I think they'll get there. And if you're willing to work at it. You have to be willing to work at it, and you have to be willing to prepare for what it is that you want to do. You just can't do it without preparation.

ROSEBERRY: Were you there when Duke integrated the wards?

NICHOLS: Yes.

ROSEBERRY: Can you tell me a little bit about that?

NICHOLS: I was there, but I wasn't—you see, where I was—when they started to integrate the wards, I was already on the CCU, the cardiac intensive care unit, so we had already integrated that part. Because if you had a heart attack and had the money, you got on the CCU. I mean, you know, it was—so I wasn't out in the perimeter where they were having all of these things. I didn't have to go through—I didn't go through that, not at all. I was even at Duke when Adam

Clayton Powell [Jr.] had what they thought was a heart attack, and I won't say what it was that it was, because I don't want that—but we had to have security to get on the ward. Go to lunch, you'd have to get back on the—because he was on the CCU. Adam Clayton Powell was a black congressman, so the CCU was already—if you had money or if you had clout, position, status, you got on the CCU, so I didn't play a part in that, because I was already aware it was—I heard what was happening, but hearsay and actually being there are two different things, so I didn't go through that part of it.

ROSEBERRY: Was the CCU just beginning when you—

NICHOLS: Yes, it was.

ROSEBERRY: So it started—

NICHOLS: It started. Joanne McCleese took us from Long Ward, which was the public black ward, to the CCU.

*CD 1 of 2 ends; CD 2 of 2 begins.*

ROSEBERRY: This may be kind of a strange question, but in terms of kind of proving yourself, was there a sense that you were proving yourself more as a woman, or as a physician assistant, or as an African American, or as a combination of all of those?

NICHOLS: I was proving myself as an individual. None of those other things had anything to do with it. My ethnicity had nothing to do with it. My gender had nothing to do with it. I was an individual. When I went to Jim Moore and asked him, when I applied that last time for the PA program, and I asked him—I said, “Are you getting federal funds for this program?” And he said, “Yes.” I said, “Well, you know they say you can't discriminate against gender.” They expected me to say something else, but gender is the only thing. “You can't keep females out. We can have a press conference and discuss this.” And they didn't like that, but I did not—no.

It had nothing to do with gender or ethnicity; it had to do with me as an individual, to show that you can do anything you set your mind to do if you're willing to work at it, but you have to work. You cannot pussyfoot around and get it done. You can't do it.

ROSEBERRY: Do you feel like that's a lesson that came from that Housing Authority experience?

NICHOLS: That's a lesson that came from the Housing Authority thing. That's what got me started, because they taught me that if you want something, you have to work for it, and that's what I did. It did. And now I tell—I even told my kids, I don't think anybody should allow themselves to be so taken care of by an individual, that they get caught up like I did. Because had I known that you had to pay rent, and had to pay mortgage, and light bill, and water bill—we didn't have to pay the water bill; we had to pay the light bill and the mortgage—then I wouldn't have got put out of my house. I never lived in an apartment. I always lived in a house. When I came from the farm, we had—our house was a nice house. It was one of these old-fashioned, big white houses with the white column posts. Every room had a fireplace in it, including the kitchen. And I lived over on Elmira, which is a nice section of Durham, and then moved to public housing. I don't think women need to have to go through that, so you need to learn to take care of yourself. That's what I think you need to be taught in school: basic life skill. That's what I call it, basic life skills. You don't need nobody you don't have to depend on—you depend on folk, but be able to do some things on your own, and know whether or not they're doing you right.

ROSEBERRY: Is that farmhouse still in your family? Do you mind my asking?

NICHOLS: The land is still in our family. The house got burned down.

ROSEBERRY: Oh.

NICHOLS: But, now I have two brothers who are already out there. They have built houses and are living out there. I have one brother who had retired from General Motors, and he and his wife are building their house on the farm, so they will be back in Person County. And he's coming from Atlanta. They've lived in Atlanta for thirty years, and they are coming, too. As a matter of fact, the house should be ready for them to move into Christmas. And they're building a log cabin. But the land has stayed in the family, because our father and uncle fixed it so that—he knew that—there were eighteen of us to share in nine hundred acres of land, okay? The only way the land could be sold is that all eighteen of us agree to sell it. Now, you tell me how you're going to get eighteen children, ten women and eight men, to agree to sell something. You can't do it. They knew that. Six of my cousins and one of my siblings wanted to sell, and they were going through the court and all this kind of—and we realized it was eating up the proceeds, so what we did, we asked them—we had a meeting, a family meeting, and said, You'll get—  
(doorbell rings).

ROSEBERRY: Shall I put it on pause?

WOMAN: Anybody home?

NICHOLS: He's back there. That's my daughter.

ROSEBERRY: Hi.

NICHOLS: And I'm doing an interview, so—

WOMAN: (unintelligible)

NICHOLS: Okay. Bye. (laughter)

ROSEBERRY: Let me go ahead and restart this.

NICHOLS: So we got together, and we had a meeting, and we asked the six who wanted to sell to get an appraiser, to see how much the land would be, how much you could get for it if you

sold it, put it on the market. So they did. And then we divided that up in eighteen ways, and then gave them their one-eighteenth, those of us who decided to keep the land, because they'd never wanted—my parents and my grandparents, my uncle—they never wanted the land to leave the family, so they wanted it to be a perpetual kind of thing. They believe in giving to your children and your children's children and your children's [children's] children. So that's what we were able to do.

ROSEBERRY: That's great.

NICHOLS: So those six got their little stuff, and the other of us—we still have the land there, and they are building, so—I mean, you know, we did the land—we put it in a soil bank, so that you don't have to worry about somebody else having—because none of us wanted to farm. I did not want to farm, and I want a garden, and that's what my brothers do. They have gardens, and we can go get our vegetables and stuff out of there, but I didn't want to farm. But now that they're getting older and they're retired, they're going back to their roots. They aren't going to be farming, but they will be living where they were raised. But with all the creature comforts of the city. (laughter)

ROSEBERRY: Best of all worlds.

NICHOLS: The best of all worlds: all of that space, but still have the comforts. And one of them is doing a solar—

ROSEBERRY: Oh, wow.

NICHOLS: Yes.

ROSEBERRY: Good.

NICHOLS: A solar house, with the panels and the whole bit, with two acres around your lot. You know, it makes it just very interesting. And that's it. That's me.

ROSEBERRY: I wonder—you talked a little bit about some discrimination that you faced. I wonder if there was any—you said you received some flak.

NICHOLS: It was more subtle than overt. You'd have to really be able to sort it out. And I was one for speaking up. If you did something to me, I just told you, outright. But it happened. It still happens. I mean, all you have to do is go to Duke now and just stand on the wards, on the floors, and look at patients who are there, and look at how ethnicity make a difference in how you're treated. Now, I've been fortunate that—my husband has been in and out of the hospital multiple times in the last two years, and I have been fortunate enough that they have treated him very well, but there were other people that they didn't. I can't say that I had real bad experiences, because I didn't. But that doesn't mean that it doesn't happen. It was good for me.

ROSEBERRY: Because there were quite a few people who were willing to work with you.

NICHOLS: There were a lot of people who were willing to help to make things—

ROSEBERRY: Based on your merit.

NICHOLS: Yes, to make things happen for me. Like I said, I don't know whether that was their strategy, to say, Well, we gave her all of the support that we could, and she didn't make it. But that support they gave me was nurturing. It was enough to keep me going. It had all the vitamins and the minerals in it that I needed. It was good.

ROSEBERRY: I know that sometimes there have been, maybe, some tensions between nursing and physician assistants, kind of as a profession. Is that an accurate statement?

NICHOLS: Yes, it was, it was, because—it was an accurate statement. However, the ease came when the nurses realized that the physicians' assistants are not here to take your place; they are here to augment the team, and if you look at it from a team perspective in health care, rather than somebody taking somebody else's place or somebody being subservient to, it makes a difference.

And Dr. Estes, Dr. Stead, Bob Harwood, and that group of people were able to do enough PR to get that sentiment changed. And if you look at it now, you have nurse practitioners and PAs working side by side on the same time in the same facility, and get along very well. You'll notice Duke's PA program went from a certificate program to a BS program, from a BS program to a master's program. It hasn't made any difference in the little letters that you have behind your name as to how proficient you are when you get out and [and are] doing the job, because the director of the PA program now—I taught her. She will tell anybody—Justine will tell anybody that I was an excellent instructor. She has since asked me if I would come back and do some teaching. I go back twice a year to the graduating class and to the freshman class, but that's it. So it has nothing to do with whether or not you have the degree to be proficient, because what you learn as a PA has nothing to do with that other stuff that you learn. If you want to write and publish, you need to have had some training there, but I did learn to write when I was in high school. (laughter) I mean, you know. And that was because I had an aunt who was an English teacher, and she was very, very strong in knowing, making sure that you knew how to write, and so I could do that. And I published. I'm okay. I've done fine without all of those little letters, and I don't advocate not getting them, so please—because I want all of my children to have degrees. Now my daughter, that one that just came in, runs a group home.

ROSEBERRY: Oh, wow.

NICHOLS: This one—

ROSEBERRY: I've got a photograph here. "District court judge."

NICHOLS: Yes, she's—

ROSEBERRY: (unintelligible).

NICHOLS: Yes.



ROSEBERRY: “Anita Smith for district court judge.” Oh, wow.

NICHOLS: And my son is a maintenance supervisor for the Housing Authority, and my baby is a minister.

ROSEBERRY: Wow. They’ve done very well.

NICHOLS: I was fortunate enough to get a second husband when my children were young, and just like you heard her say, “I’m going back there where my daddy is.” He’s not her biological father, but when we got married, she was still young. I was in school, and he combed hair and cooked and cleaned, the whole bit. And they see him as their father and will not say—they don’t refer to him as their stepfather, not at all. And he don’t refer to them as his stepchildren.

ROSEBERRY: Good.

NICHOLS: I’ve been blessed. I’ve been truly blessed. So I don’t have any—the only complaint I have is that I didn’t learn to make money. (laughter) I made enough to live, but not to be independently wealthy. I think the richness that I can be proud of is my children. I have four grandchildren and five great-grandchildren. I have a grandchild who will be graduating from A&T in May, with honors. So even though I didn’t do it, I have made sure that—it’s important that you get your education. That is very important, so that you can move forward. So they have adhered to that, and I’m pleased.

ROSEBERRY: Some women feel the struggle between work and home and career. Did you have—was that—

NICHOLS: No, because my husband was very supportive. Sometimes I would even—because if I didn’t get home to start dinner and he was here, he’d start dinner. And so sometimes I would deliberately—(both laugh)

ROSEBERRY: Is this a true confession? (laughter)

NICHOLS: I would deliberately be late coming home so that he could start dinner. That's just the way it was. I mean, he would wash. Just like those clothes are hanging on the rack now. Now, he won't go out and hang clothes on the line, but he'll put them on the portable rack. He washed them yesterday, and he put them on the portable rack. That helps keep the moisture in the house so that it doesn't dry out, so that's fine. So we had that—no, so I didn't feel that—no. Didn't feel that way at all. And now I like doing things, so that Tim can get going. I get up—I was up at six thirty this morning. We did all the morning stuff. We read our Bible and, you know, those kind of little things that's precious to us. So that's what we—

ROSEBERRY: The physician assistant as a profession—it sounds like it's afforded a lot of various kinds of opportunities.

NICHOLS: For me.

ROSEBERRY: For you.

NICHOLS: Yes.

ROSEBERRY: Is there something unique about that?

NICHOLS: As an LPN, I could not have been able to do that, because the credibility would not have been there. As a physician's assistant, that terminology itself said that you are qualified, because you've been through this training. You were a Duke graduate, so that says something. If you got through the Duke program, that put you in a different cat—and I'm serious: it put you in a different category. Because they'd know how intense the program is, and so that in itself qualifies you, to say where you came from. And then the fact that I got the Duke alumni award, the president's award for my—because once I got into the profession, I was into the profession. I got into it in its early years, when it was forming. I ended up being one of the incorporators for the national professional association, for the state professional association, so I got in on the

ground floor, and I actually worked. You know, I did the work. I wrote the bylaws, the first bylaws for the national and for the state. I served on the boards for both of them. I served as the treasurer for the North Carolina Academy for a while. The profession has allowed me a lot of latitude, and then that opened the doors for some other things that I ended up doing. It was a good thing. It was a good thing.

ROSEBERRY: I have just a couple more questions.

NICHOLS: Okay.

ROSEBERRY: Can you tell me a little bit more about that teaching at Duke in the Department of Community And Families?

NICHOLS: I taught physical diagnosis, that's all. That was the one class that I taught: Introduction to Physical Diagnosis.

ROSEBERRY: Was that for physicians' assistants?

NICHOLS: For physicians' assistants.

ROSEBERRY: Okay. And also, I wanted to ask you: You've done all kinds of things for underserved populations, for people who need—like, in Lincoln and in homeless shelter. I just wanted to ask you to comment on that.

NICHOLS: It's a need. I've been there. I know what it's like, and I don't want to see anybody else there, and if you are, give them a hand up. That's all I can say about that. And it's my only reason, because there's no money in it. (laughter) So that's it.

ROSEBERRY: Was there any question that I haven't asked you that I should have asked you?

NICHOLS: No.

ROSEBERRY: Anything else you'd like to—

NICHOLS: No, that's it.

ROSEBERRY: Well, it's been a real pleasure talking with you.

NICHOLS: Thank you.

ROSEBERRY: I really appreciate it.

*end of interview*