

Illustration by Erica Aitken

# HAROLD L. MAY, MD

Surgeon, community health pioneer, and family advocate



The May family in 1970. Photos courtesy of Dr. May

*By Richard F. Gillum, MD*

Dr. Gillum (AQA, Northwestern University, 1969), is Professor of Medicine at Howard University College of Medicine in Washington, DC. He was the first African-American Internal Medicine Intern at Peter Bent Brigham Hospital in Boston, and the only African-American in his medical school class at Northwestern University.

In the era of the first African-American United States president, African-Americans remain under-represented among physicians, and especially among medical faculty and researchers.<sup>1</sup> The long career of Harold L. May, MD, MPH, FACS, provides insight into the two-century-long process by which African-Americans struggled to gain improved access to quality education, and strove to alleviate suffering among the poorest and most neglected in the world.

May was born in 1926 in Peekskill, New York.<sup>2</sup> Son of

a Methodist minister from Jamaica, his family moved to Poughkeepsie where he attended high school. Encouraged by his parents to aim high, he applied to Harvard College and was admitted in 1944.

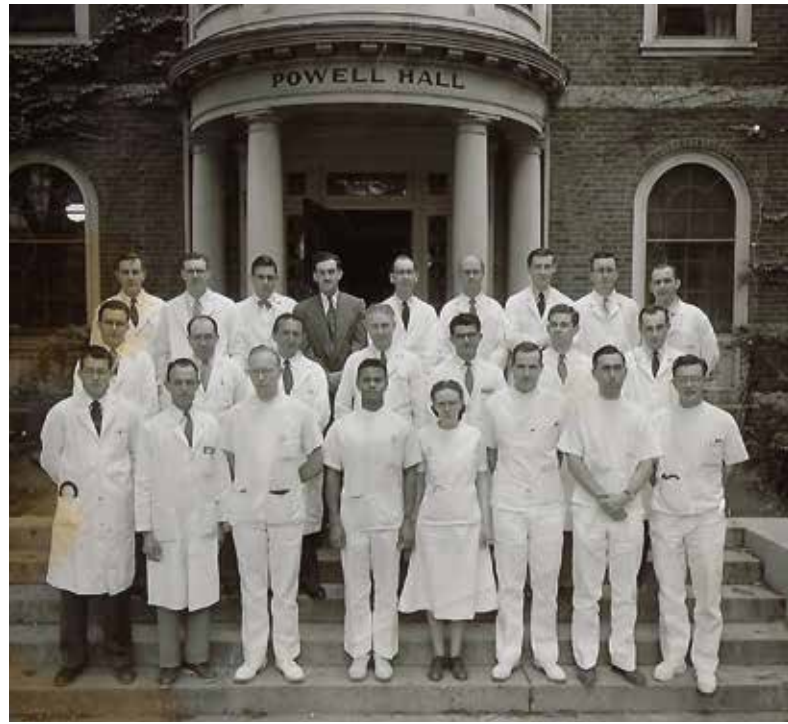
## Tuskegee University

During World War II, May volunteered for military service and was selected for the famous Army experiment in training African-Americans as combat pilots at Tuskegee University in Alabama. Founded in 1881 by the State of Alabama as Tuskegee Normal School for Colored Teachers, Tuskegee Institute (now University) is located in Macon County, about 40 miles east of Montgomery.

A 25-year-old African-American teacher from Hampton Institute in Virginia, Booker T. Washington, was hired as principal. Idolized by many African-Americans including May's father, Washington energetically worked to expand



Dr. May during Tuskegee flight training, World War II.



Dr. May, front row center, with fellow interns, medical residents, and senior medical staff at the University of Minnesota Hospital.

the school from one room in a church to an institution with a \$1.5 million endowment in 1915. He emphasized self-reliance through agriculture and the trades—many campus buildings were constructed by students.

May was still in pilot training when WWII ended in 1945, yet his experience of the Tuskegee concept of self-help and community development remained a life-long influence.

### Harvard Medical School

After the war, May finished premedical preparation at Harvard College, and in 1947 entered Harvard Medical School (HMS), graduating in 1951, one of only two African-Americans among the 144 HMS graduates that year.

HMS was founded in 1782 as the third U.S. medical school. Although HMS admitted three African-Americans in 1850, they were soon expelled by Dean Oliver Wendell Holmes in response to protests of the other students. It was not until 1869 that an African-American graduated from Harvard Medical School.<sup>2</sup>

Having overcome obstacles to education posed by race, May faced a new personal challenge that began in his second year of medical school with the emergence of progressive visual impairment caused by keratoconus. He was attracted to surgery but doubtful of the wisdom of pursuing it because of his diagnosis. Instead, with his

vision improved by the use of hard contact lenses, he did a medical internship at the University of Minnesota Hospital. He followed that with a year of medical residency on the Harvard Service at Boston City Hospital. While there, having felt a call to become a medical missionary to the poor in Africa or India, and anticipating the need for surgical skills in an isolated outpost, he applied for a general surgery residency at Massachusetts General Hospital (MGH), despite having been rejected there earlier for a medical internship. Thanks to Chief of Surgery Edward D. Churchill (AQA, Harvard Medical School, 1919), in 1953 May became the first African-American surgical resident since the hospital's founding in 1811.

Midway through his third year of surgical residency, both of May's eyes developed corneal ulcers caused by prolonged use of hard contact lenses. With the ulcers, he was nearly blind. He offered to resign his residency, but Churchill instead gave him an unlimited leave of absence to provide time for his eyes to heal.

During the healing process, May went to his parents' residence, a historic site in Auburn, New York. May's parents lived in the Harriet Tubman Home, which had been willed to the African Methodist Episcopal Zion Church in 1913.

Although he prayed for healing, May was fully resigned to a future as a blind pastor. Of the many articles that his



Dr. May in front of the Albert Schweitzer Hospital, 1957.

father read to him during their months spent together, one caught his interest in a special way, although he could not envision any specific relevance of the article to his personal future at that time. It described a hospital that would soon be opening in Haiti. The Albert Schweitzer Hospital was being built by William Larimer “Larry” Mellon (AQA, Tulane University, 1982, Alumni), a son of the founder of Gulf Oil.

Although corneal transplantation was not widely available at the time, Churchill called May back to MGH in the spring of 1956 to receive a corneal transplant. The operation was a success, and May’s vision was restored in one eye!

During convalescence May accompanied his parents to their birthplace in Jamaica. While there, serving in the Montego Bay Hospital for six months to learn tropical medicine practice, he was deeply moved when he learned of the desperate poverty and lack of health care prevailing in nearby Haiti. He felt an irresistible call to visit Haiti before returning to Boston for his second corneal transplant.

May arrived in Haiti in December 1956, two days after a coup *d’état* had deposed its president.

### The history of Haiti

The island known as Hispaniola was inhabited by the Taino people who called it Haiti (“land of high mountains”) when Columbus ran aground there in 1492 and claimed it for Spain. Later, France claimed the island and Spain ceded the western portion in 1697. The French imported tens of thousands of African slaves who came to outnumber whites ten to one. Triggered by ideas of the

French Revolution, the slaves revolted in 1791, forcing the abolition of slavery in Haiti in 1792. However, the revolt continued. After losing 50,000 troops to war and disease the French withdrew in 1803, and the more than 700,000 blacks declared independence on January 1, 1804, restoring the name Haiti.

In the 19th century, France threatened invasion to extract costly reparations paid until 1947. In the 20th century, the U.S. invaded Haiti, occupying the country from 1915 to 1934. By 1950, Haiti had a population of 3.1 million. In 1957, Francois “Papa Doc” Duvalier was elected president, using dictatorial means to remain in power until his death in 1971.

Exploited by rich countries, bankers, corrupt governments, and a small Haitian elite, Haitians have long suffered from poverty, and Haiti is the poorest nation in the western hemisphere. Malnutrition, lack of access to potable water and latrines, high infant and child mortality, malaria, typhoid, and tuberculosis have been endemic. In 1983, life expectancy at birth was 48 years, and the literacy rate was less than 40 percent.

### A new Haitian hospital

May arrived at the Albert Schweitzer Hospital (Hôpital Albert Schweitzer/HAS) early in January 1957, six months after its opening. The medical staff of the hospital was almost exclusively made up of short-term physicians, with the exception of Mellon. On the day following May’s arrival, three of the five-member medical staff left. When they met, Mellon, with great urgency, asked May to stay and help staff the young hospital. Able to do basic surgery



Pre- and postoperative pictures of an 11-year-old girl with liposarcoma who was a patient of Dr. May.

with monocular vision, May welcomed the opportunity to join the HAS staff.

He had fallen in love with Haiti and with its people.

After six busy months, May returned to MGH for his second corneal transplant. With his binocular vision restored, he returned to Haiti for six months, then completed his surgical residency at MGH in December 1959.

May returned to HAS in January 1960, to assume the role of Chief of Surgery. He soon met and married Agnes Martens, a Canadian nurse, who had joined the HAS staff in 1959.

Situated in central Haiti in the Artibonite Valley, HAS was a modern, well-equipped hospital where May could perform any operation that he had done at MGH, and more. Since HAS was the last hope for many patients who could not receive the treatment they needed from any other hospital in Haiti, he treated many patients for conditions that he had never seen before. Such was the case with a young patient who had a tumor growing, for many years, on the left side of her face. May was able to perform the long operation that removed the tumor and brought the patient great relief.

May was pleased when Frank Lepreau, an experienced surgeon, joined the HAS staff in 1964. May and Lepreau worked as a team, with Lepreau working as the Medical Director. By 1970, the facility had grown from 80 beds to 133 beds, with an average daily census of 160, providing 60,000 outpatient visits, 3,500 admissions, and 2,500

operations annually.<sup>3,4</sup> One surgeon wrote, “It is like those old open wards at Hopkins, Cincinnati, and the Brigham—no insurance forms, no committee work, just surgery.”<sup>5</sup>

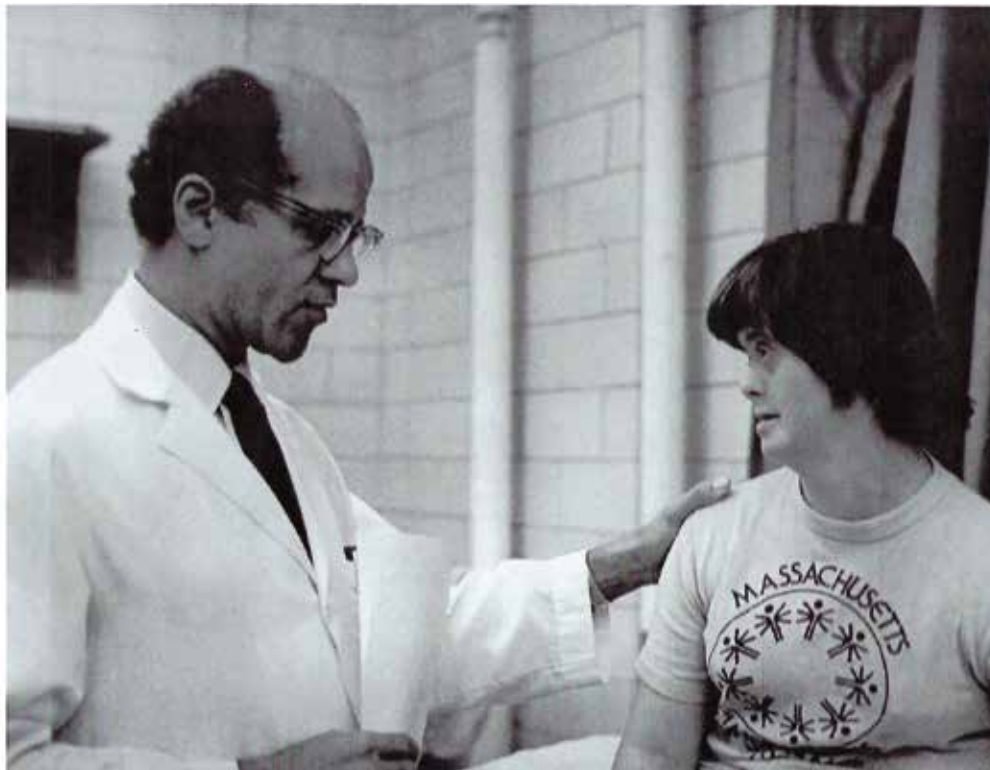
In 1960, when May began work at HAS, the world’s population was about three billion. Today, an estimated five billion of the world’s seven billion people lack access to the basic surgical care May and his team provided at HAS.<sup>5</sup>

### **A community elementary school**

In 1962, May took on an additional role as the lay pastor of the small non-denominational church, primarily made up of HAS employees and members of the local Haitian community. Fully realizing that Haiti’s hopes for its future depended on educating its children and preparing them for leadership roles in Haiti’s development, the church members opened an elementary school, Ecole La Providence. The school started with a kindergarten and first grade, with room for 75 children, but 750 children registered! Plans were made for children who were accepted to help those who were not.

The school added one grade every year, with its curriculum expanded from academic subjects to include active engagement in agricultural development on a 55-acre plot of land. Parents were included in the agricultural learning process.

May hoped that as the yearly growth and development of the school continued, it would become an integral part of the hospital’s growing public health and community



Dr. May in the clinic of the Wrentham Developmental Center.

development programs. He envisioned the school and hospital jointly serving as a center for Haiti's sustainable development—a preparatory school for some of Haiti's teachers, doctors, agricultural extension agents, nurses, and future leaders. The Tuskegee Institute was his model, but The Haiti Institute would be uniquely Haitian.

In July 1969, when the first students completed their primary school years, and the school was ready to grow to the next level, Mellon decided that the hospital's charter would not permit the school to grow beyond the primary school level because the hospital's mission focused on health care, not education. The school was moved to a nearby town, and its ownership transferred to a Haitian organization that incorporated Ecole La Providence and its mission as part of their own.

### Going home to Boston

With the well-being of Ecole La Providence and the continuity of care of the surgical patients secure, May turned his attention back to America. In July 1970, he was recruited to serve as the director of the newly formed Peter Bent Brigham Hospital (PBBH) Division of Community Medical Care.<sup>6</sup>

Since the new division was PBBH's prime connection to the community, May learned much about Boston's health care system, from preventive care to emergency care. He

spent equal time supporting the development of the city's newly organized health centers, and focusing attention on Boston's Emergency Medical System.

May was appointed chairman of the Emergency Services Committee of Region VI, including Boston and a number of its neighboring communities. One of his responsibilities was to lead the development and testing of the regionwide medical disaster plan—the forerunner of the disaster plan that was mobilized decades later in the citywide response to the Boston Marathon bombing in 2013. He was the leader of a citywide disaster drill, a simulated plane crash at Logan airport, that took place on Saturday, June 21, 1974—the same day that Judge Arthur Garrity announced his decision to order school busing to desegregate Boston's schools, a decision that unleashed a firestorm reaction in Boston.

He developed and taught an emergency medicine course for fourth year students for which he received the Faculty Prize for Excellence in Teaching twice. He also edited a textbook of emergency medicine.<sup>7-9</sup>

Facilitating his work in the health care system, May obtained a Master of Public Health degree at Harvard School of Public Health in 1974.

### Another calling to care for the disenfranchised

In 1975, May unexpectedly received a call to serve

individuals institutionalized with developmental disabilities. A member of the Home Care Service invited May to rounds at the Wrentham State School.

Opened in 1910, the state facility for the residential care of persons with developmental disabilities had a population of 1,250. In the 1970s, litigation over poor conditions at Wrentham and other facilities in Massachusetts led to a court order for improvement.

From 1975 to 1994, while maintaining his HMS and PBBH (later Brigham and Women's Hospital/ BWH) affiliations, May served as Wrentham's Director of Medical Services, shifting the culture from "warehousing" residents to valuing each individual. He discovered the importance of providing support that helps each individual to achieve his/her potential via individual support plans, and the need for interdisciplinary teamwork to develop and fulfill each individual's plan.

May's advocacy made the Wrentham residents welcome at PBBH.

By 1994, many Wrentham residents had been moved into the community, and the resident population had shrunk to 500.

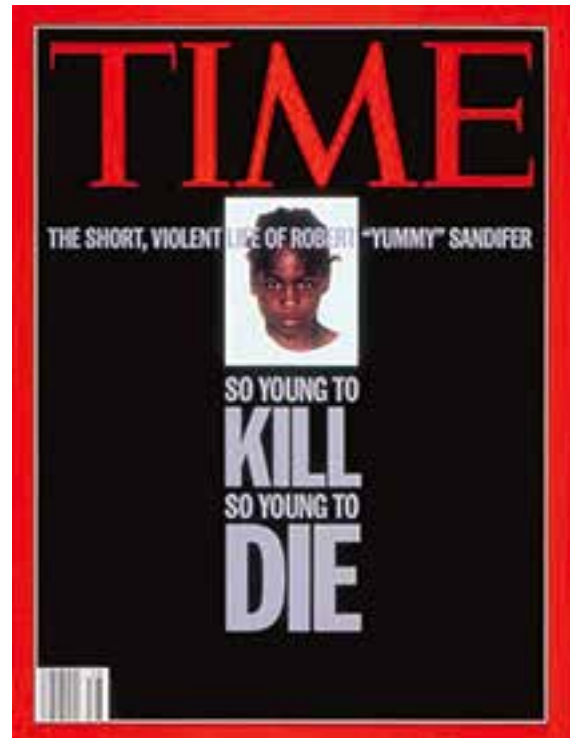
### Transforming social services

After 19 years of service at Wrentham, May retired on September 1, 1994. The next week, he read a one-page article in the September 12th issue of *Newsweek* reporting the death of an 11-year-old boy who had allegedly been shot and killed by fellow members of the Black Disciples gang in Chicago, several days after the boy had shot and killed a 14-year-old girl.<sup>10</sup> The story was also featured in *Time Magazine*, with the boy's face on the cover.<sup>11</sup>

The first paragraph of the *Newsweek* article captured May's attention:

In 1986, a child-abuse worker at a Chicago hospital said something that made Robert Sandifer (Yummy) snap. "F--- you, you bitch!" the boy shot back. He then grabbed a toy knife and put its blade to the woman's arm. "I'm gonna cut you," he warned. At the time, Robert was less than three years old.<sup>10</sup>

As May read the article, and the *Time Magazine* article one week later, he learned about Yummy's drug-addicted mother, his father who was jailed on drug and weapons charges, and about Yummy's troubled life of petty crime. The articles indicated that Chicago's human services, justice, and education systems struggled to provide the supports that Yummy and his family



*Time Magazine*, September 19, 1994.

needed, and many didn't start soon enough. When the hospital care-givers learned that the teenage mother already had two sons, the first of whom was born when she was 15-years-old, did this information not serve as a red flag? What is society's role in protecting innocent babies by assuring the development of support systems?

The answers came to May: all of the systems of society—health care, education, economic, political, justice,—should work in harmony, as do the systems of our bodies. The way to align all of these systems is to surround each of society's babies and their families with the support systems they need for healthy development. And these supports should start for each baby at the beginning of life.

Since May had no expertise in child development, he met with T. Barry Brazelton (AQA, Columbia University, 1943, Alumni), a pediatrician, and one of the world's foremost authorities on child development. Brazelton provided May with some of his writings on family systems and child development—articles in which he points out that from the moment of birth human life is a progression from one level of development to another. As it is with each baby, so it should be with society.

### We are FAMILY

Several months later, May realized the biological fact that we are one family, the organizing system of all healthy societies.

FAMILY (Fathers And Mothers Infants eLders and



Dr. May and his daughter, Alison May, MD, on the cover of the Harvard Alumni Bulletin, Spring 2001.

Youth) was incorporated in 1997. In 2000, a FAMILY Liaison to establish supports for children and their families, starting with the kindergarten class, was established in the Lucy Stone School, an elementary school in the Codman Square section of Boston.

The program grew, working in close partnership with Wheelock College. A Family and Community Coordinator position was developed and subsequently adopted by 15 elementary schools.

When the Lucy Stone School was closed five years later because of its small size, the senior FAMILY liaison, who was working for the city program, was promoted to a senior position of leadership in a large nearby elementary school, which accepted all of the Lucy Stone School students.

During this time, May also established the FAMILY Global Positioning System as the organizing system for all healthy societies—from the smallest to the largest—based on the maxim:

Always act as though we are all members of one family—because we are. FAMILY's mission is to create an environment in which all children and families can thrive.

### **A life of commitment to the underserved**

May overcame the tremendous barriers posed to an African-American seeking top-quality higher education in the 1940s and 1950s. He graduated from Harvard Medical

School, and became the first African-American surgical house staff member at Massachusetts General Hospital.

His desire has never been to achieve wealth or fame, but to serve the human family in Haiti, Boston, the Wrentham Developmental Center, and all communities.

A lifelong learner, May believes that the poor, the mentally challenged, and all families deserve the best care and life opportunities available regardless of their socioeconomic status. At the age of 91, May continues to serve the underserved, working as the volunteer director of FAMILY.

His is a passion that knows no bounds.

### **Acknowledgment**

The author is pleased to acknowledge the assistance of Harold L. May, MD, MPH, FACS, and Kristen D. Dodd.

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