the amount of red blood that the Commissioners have." As a result of this condition, their life expectancy is 8 to 10 years less than the life expectancy of whites in Lowndes County. Dr. Mermann described the effect anemia has on learning and performance levels:

"I have never seen children sleeping in school before—this was a summer program—and these children would be asleep on the floor at 10:00 o'clock in the morning. It explains, I think, some of the fatigue that a woman, the mother of six or eight children . . . has when she is operating on a very very low margin of oxygen-carrying capacity in her blood. It explains the difficulty that a man might have in providing for his family. His inability to work on. I think this has a profound economic impact on the community involved."

Dr. Mermann testified that medical studies suggest that a lack of protein in early childhood has an arresting effect on brain development which is irreversible. He also emphasized the psychological effect going hungry has on a child:

". . . if children are not being fed properly from their earliest days, if the parent cannot feed his child, or her child, as parents feel a child should be fed, this produces a certain apathy and . . . a real distrust of the adult world when those earliest crying infant needs are not being met properly.

"This, I think, has profound influence on the way one sees the world from then on."

The diet of most of the Negroes in Lowndes County consists of salt pork, corn meal and beans. The Negro infant death rate is extremely high: 23 of 265 babies die during the first year of birth. 8% of the children and 15% of the adults had kidney disease and 6% of the children and 18% of the adults had high blood pressure. 90% of the children examined stated that they had never seen a doctor. Lowndes County has two doctors: one practicing in the extreme southeastern corner of the county and one in the extreme northwestern corner. There are no hospitals in the county.

The conditions which Dr. Mermann found to exist in Lowndes County are typical of the situation of the poor throughout the 16-county hearing area: the illness and disease which are the products of their deficient diets generally go untreated because of their lack of money and the absence of free medical services. Alabama does not provide health care services to ADC families. The only medical expense allotted in the budget for an ADC family of four is $1.60 per month for medicine chest supplies. However, since only 50 percent of the family's budget is covered in present ADC payments, it is likely that even this minimal amount is diverted to other purposes.

While each county in Alabama has a public health department, the services provided by these departments are woefully inadequate.[13] Most of the counties do not have full-time public health doctors, with the consequence that very little medical treatment is provided at the health clinic. Immunization shots and birth control devices are available at all clinics. Prenatal and postnatal care of a routine nature are provided, but mothers must make their own arrangements for delivery. Well-baby clinics are conducted by half of the counties but these provide only diagnostic services—not treatment. Full utilization of the services provided by the clinics is hampered by the fact that there is usually only one clinic in a county and some services are provided only on specified days. Thus, in addition to obtaining transportation to the clinic, a person must know on which day the services he needs are provided.

Many Negroes are discouraged from going to the clinics because of the treatment they receive there. The Commission heard testimony that, in many of the clinics, Negroes and whites had separate waiting rooms and that whites were waited on first. Mrs. Helen Randale, a welfare recipient, testified that she was sent to Tuscaloosa by the health department in her county for an eye examination. She had to pay $10 for transportation for the 50 mile trip, and when she got there she was told that she could not be examined that day, even though she understood she had an appointment. She was told to return the next month. Mrs. Randale told the Commission: "[the lady] treated me so cold, I didn't never go back."

Alabama's infant mortality rate is higher than the national average, and, within Alabama, the rate is higher for Negroes than for whites. Dr. Ira L. Myers, the State Health Officer, testified that one of the primary causes of infant mortality, prematurity, is generally the result of inadequate prenatal care

[13] In 1967, Alabama spent $1.70 per capita for general health services—well below the national average. Only six county health departments expended over $2.00 per capita.