

**A Cole Case:** Her family had been enslaved, oppressed, denied both a decent living and medical care. She became a physician.

Dr. Rebecca J. Cole (1846 -1922) was born in Philadelphia the second of five children all listed as “mulatto” in the 1880 U.S. census. Their ancestry was a mix of European and African. Her parents’ names are not known but it is known they were able to provide their children with excellent education for the time and their place in that time. Education allowed them to obtain work other than domestic service or manual labor, as conventionally ascribed for their people.

Rebecca received her secondary education at the prestigious Institute for Colored Youth located in Philadelphia (Cheyney University) the first co-educational high school established for blacks by Quakers to train black youth to become teachers and scholars. It was one of the more rigorous of the black schools of the time. Rebeca completed its curriculum that included Latin, Greek, and Math and graduated the year the Emancipation Proclamation was signed.

Rebecca was truly a pioneer black female of her time to enroll in medical school. Upon graduating from the New England Female Medical College in 1864, she became the first formally trained black female doctor in the United States. She then received her second medical degree from the Woman’s Medical College of Pennsylvania in 1867 as its first black graduate.

Her training in all-female institutions administered by women helped her overcome barriers for all women as well as racial barriers for black women. The Women’s Medical College, founded in 1850, also by Quakers, was the world’s first medical school for women. It became part of Allegheny University now under Drexel University.

Dr. Cole was appointed a resident physician at the New York Infirmity for Women and Children Hospital owned and operated by Dr. Elizabeth Blackwell the first woman to earn a M.D. degree. In 1866 Blackwell instituted the Tenement House Service, the earliest practical program of medical social service in the United States.

The service promoted health in overcrowded slums, populated by poor--mainly black--people, by sending out a "sanitary visitor" to teach basic hygiene and child care. Dr. Cole was one of the first "sanitary visitors" and worked in this capacity for many years. It was a demanding job, considering the rising population of New York City at the time and its attendant rise in poverty.

Some suggest it was a demeaning job, an example of the white medical establishment providing little more than rhetoric to the black community rather than true access to medical treatment. It was a position that could be fulfilled easily by one with less education and skill than Dr. Cole. A nurse or a nurse's aide could provide basic hygienic education.

Whether relegated to this role because of her race or because she truly desired to provide this service is unclear. But it is clear Dr. Cole remained in her position for many years. It is also clear that the social medicine aspect of the sanitary service appealed to Dr. Cole’s desire to make health care available to everyone, particularly the disenfranchised.

In the early 1870s Dr. Cole practiced medicine for a short time in Columbia, SC, returned to Philadelphia, opened a private practice in south Philly, and served as

superintendent of a shelter for the homeless until 1873. Then, with fellow physician Dr. Charlotte Abbey, she opened the Women's Directory Center providing legal and medical services to women and children.

In Philadelphia Dr. Cole became active in the Black Women's Club Movement that was burgeoning across the nation. These clubs provided black women with an outlet for social, philanthropic, and political activity at a time they were doubly ostracized--for being black and for being women. Many clubs founded then exist today, some formed national organizations, i.e., the National Association of Colored Women.

At the same time, white women formed clubs. Many focused on women's suffrage, some were strictly social. Because of her prominence as a physician and as a public advocate for social medicine, Dr. Cole was sought-out by white clubs as a representative of the black community.

In 1876 she served on the Philadelphia Ladies' Centennial Committee planning the local celebration of the 100th anniversary of the Declaration of Independence. She was asked to form a separate Colored Ladies Subcommittee to support the white organization. When she learned their work would be limited solely to the black community, she wrote to the local newspaper in protest saying that she and her group "resented being placed in a proscribed light" and declared her group would work in common as American women, not as 'colored Centennial women.' She argued that colored women should be asked to join to work in common with the committee, not relegated to a separate auxiliary. Thanks to her, black women worked side by side with white women on the committee.

Dr. Cole was an advocate for the poor most of her medical career. In 1899, she was appointed superintendent of a home operated by the National Association for the Relief of Destitute Colored Women and Children in Washington, D.C.

She was a sought-after lecturer on public health who spoke out in public or in writing to protest what she viewed as injustices or ignorance. Her involvement with the poor led to a well-publicized dispute with the prominent scholar, W.E.B. DuBois about his research stating he believed blacks were dying of consumption because of their ignorance of proper hygiene.

After thirty years of experience in the social medicine arena, Dr. Cole took offense with his conjecture. She boldly countered that statistical errors and the testimony of slum landlords lead DuBois to a flawed conclusion, and that the individuals in the slums were not solely to blame for the high death rate.

She wrote her rebuttal in an article published in "The Woman's Eye," a clubwoman's journal, and argued that the spread of disease within the black community was due to the unwillingness of white doctors to take proper medical histories of black patients, and blamed the high rates in large part on overcrowding caused by "soul-less landlords."

Dr. Cole was a tireless advocate for medical rights for black Americans basically ignored by the medical world, most exclusively the domain of white male doctors. Practicing black physicians numbered 909 of which only 115 were women in the 1890s. By the last decades of Dr. Cole's career the number of black female physicians declined dramatically.

Coeducation resulted in the closure of scores of women's schools and training facilities. Black male doctors weathered better as they had access to a number of black medical schools and hospitals. The 1920 U.S. census lists 3,885 black male, but only

sixty-five black female physicians.

Dr. Cole had fought incredible odds to train and work as a doctor. She was part of the first wave of black women physicians. After nearly half a century as a community-based physician working ceaselessly for the medical rights of black women, children and the poor, her death on August 14, 1922, closed a Cole case.



A drawing as no pictures survived

Dr. Rebecca J. Cole.

Sources:

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