Hello, I’m Elizabeth Schexnyder, curator of the National Hansen’s Disease Museum in Carville, Louisiana. I’m going to be speaking today about our exhibits, about what you can see when you come to the museum. Let’s start in our main exhibit room. This building was originally the staff cafeteria at the leprosy hospital. Our main exhibit area is tiled—because it was originally a cafeteria. This is where staff did the cooking. We have a couple of exhibit platforms. The platforms were built on top the footprint of two walk in coolers. After the coolers were removed, it left bare concrete floor. Instead of trying to duplicate the tile, we built a ten inch (10”) high platform on the footprint of each cooler. The platforms are about eight (8’) by fifteen (15’). We’re going to start today by talking about “Patient Life” here, and the artifacts we display to tell that story.

I’ll give you some highlights about how patients lived. I’ve selected non-medical artifacts to begin with. My reasoning is that when this functioned as a quarantine hospital the balance of patients’ time here was not spent in medical treatment. Of course that was the primarily reason they were here, because they had been diagnosed with leprosy or HD. But, the way that I start my highlights tour is by answering the question “how did patients spend their time when they were not in treatment?” There were lots of sports and leisure activities available. A whole culture developed around Carville and the physicality of the property which was three hundred and fifty acres (350) large. The patients, who were under quarantine, were not allowed to leave the grounds. So they had to figure out, considering their condition, their age, their interests, and where the property lines began and ended, what they going to do with their time.

Let me paint you this picture of what’s on display; I have this very cool red motor scooter. For those of you who know something about Cushman, it’s a Cushman scooter from 1946 on loan from the Berlin Kling family. Mr. Kling worked here. He purchased this scooter from one of the patients and it was in complete running order when it was loaned to the museum years ago. It gets “ooh’ed and aah’ed” over regularly by visitors who know something about Cushman scooters. Many patients owned these in the ‘40s, ‘50s, and ‘60s, (forties, fifties, and sixties) and they formed a club that would ride around the property. I’m sure riding around the lake was a highlight. They don’t go too fast, 35-40 mph, but they would have been the thing to have if you were a patient here back 50-60 years ago.

5:30 Other artifacts on display—we have a small Mardi Gras float. Now you might be thinking “how could you have a Mardi Gras float on this platform?” It might be the smallest Mardi Gras float you’ve ever seen. It seats one person. And it fits over an electric wheelchair. That’s what moved the
float forward. Mardi Gras was probably the very favorite holiday for everyone here, even though our patients came from all over the US and some were foreign born, Mardi Gras was a real unifier.

Patients had lots of clubs, organized around their interests or religious practices, and each club would put forward a name to be king of the Mardi Gras. Then the patients voted on “king”. Once a king was selected, he would choose his queen and then the rest of the court would follow. The thing about Mardi Gras here, it was very competitive. It involved lots of preparation and secrecy.

This float is called “Chinese New Year” and it looks like a dragon. Its predominant colors are gold and red. This was back sometime in the 90s and I think Chinese New Year fell close to Mardi Gras one year. The other interesting thing, besides the size, and that it uses a wheelchair, is the materials that the dragon is made of. It’s made of casting material. As in the kind of cast you have on a broken arm. So it was built out of hospital supplies. The PT department sponsored a Chinese-American patient with this float. So it’s a very Carville-centered artifact. The size of the float matters here because on the patient-side of the grounds—the dormitories, the infirmary, the recreation center, all of those buildings are linked together with covered walkways. The walkways are about eight (8) feet wide. So anything that goes through those walkways has to be small enough to fit. And it has to be small enough to fit through the double doors of the recreation center, too. 8:12

Right beside the Mardi Gras float are loud speakers. Very old-fashioned looking loud speakers. I guess about a foot and a half (1½) in diameter and they came right out of our softball park. We had our own softball diamond and bleachers. Softball was very popular here. If patients were healthy enough they were encouraged to take part in sports. And at some point in our history, especially the 40s, 50s, 60s, we had many young patients here who wanted to play ball. The other thing is the patients’ team was voted into the River softball league. They were voted in by the local healthy teams. From what I’ve been able to gather, the River League included teams from Baton Rouge to around Donaldsonville. The “healthy” softball league said “hey, we want to play the Carville Indians” -- and they agreed to let the patients play all home games. I like to ask, my young visitors in particular—why did they get to play all home games? Well, it was because they were quarantined. So, the status of quarantine did give patients an edge in softball. The Carville Indians, were River League Champs, in the ’50s and in the ’60s. They were a great team, according to all who saw them play. We have several of their trophies on display.

I meet local people who were kids at the time the Carville Indians were playing. But, because they were under sixteen (16) they weren’t allowed on the grounds to watch the game. They had to
watch from the other side of the fence. Or, they’d go up on the Mississippi River levee and watch the games from there. I often meet people who participated in some of the hospital activities, even if they were on the other side of the fence. 10:47 We also have some great photos of the softball teams and the local teams who came in and played them.

Next door to the softball loudspeakers we have a couple of bicycles. One is a small, blue child’s-sized two-wheeler, and the other is a red three-wheel bike with a big basket on the back. Mr. Simeon Peterson gave us the blue bike. He rode his bike from his dormitory room to the museum every day for several years, when he worked as a tour guide. Several years ago, when he left Carville and moved to Baton Rouge he donated his bike to the museum. We have lots of great images of Mr. Pete on his bike riding to and from the museum.

The three-wheeled bike, next to Mr. Pete’s, belonged to a patient named Johnny Harmon. Johnny was a young patient here back in the 1930s-40s. Johnny was very talented in the arts. He became the art director at the patient magazine that was called The STAR. Later on, he became the official photographer for The STAR. 12:23 Quite a few of the black & white photos on display in the museum are by Johnny. In the 1950s, (nineteen fifties) Johnny and his wife, Louise Anne, tested negative for the disease and moved out. They moved back home to Vacherie, Louisiana where Johnny started a photography business. Johnny wasn’t shy of publicity, and he let his neighbors know who he was, where he had been and what he had been treated for—and he was accepted into the community. I still meet people who loved Johnny back in Vacherie and knew his story. When Johnny 13:11 and Louise Anne moved back to Vacherie, they were reunited with their two children. Later on, as aging adults they moved back to the hospital. That’s when Johnny wrote a book, his autobiography. He called it “King of the Microbes”. Before you get excited, we don’t have copies for sale. This book was self-published and Johnny used to sell copies out of the basket of his 3-wheel bike. He’d ride around Carville with an advertisement on the back of his bike—it said “Read My Autobiography King of the Microbes”. 14:09 I do have a copy of Johnny’s memoir you can read on display. He was quite a character, as many people here were.

I might add that bicycle were the preferred mode of transportation for patients, and many staff here as well. It was a great way to get around the hospital grounds. Later on staff had golf carts, some patients as well—but before that everyone had a bicycle. If you were capable of riding, you had a bike. So you can imagine how busy our corridors and sidewalks were, with 400 patients and some 200 bikes. A very busy place.
Next to Johnny’s three-wheel bike we have an upright piano. When I got here 20 years ago, I think there were maybe three or four (3 or 4) pianos, just like this one, scattered throughout the hospital. One hundred (100) years ago pianos were not uncommon in a school or home setting. We had many musical patients as well as some of the Daughters of Charity. One in particular, Sr. Laura. Sr. Laura was actually a pharmacist, but she was also a music teacher. I read a story in our archives about Grace, who was a young Chinese American patient. Grace was having trouble with her fingers, one of the effects of Hansen’s disease is atrophy, so her fingers were stiffening and the doctor encouraged her to exercise her hands and suggested she take piano lessons. So she did. She took piano lessons from Sr. Laura. And that started a craze. Sr. Laura ended up teaching at least one hundred (100) patients to play piano. I’m sure that’s one of the reasons we had so many pianos around. Very good for the spirit but also good for the muscles and tendons of the hands.

Behind the piano I’ve displayed a hand-painted, homemade “Wheel of Fortune”. When you spin it, it makes that “click-click-click-click” sound as the wheel spins around. There’s a piece of leather that makes contact with the nails as the wheel spins and then it finally stops on a number. This wheel was used at our festivals and fundraisers. We were always celebrating something here and we had a lot of clubs. I was lucky enough to inherit the wheel of fortune. My goodness, I should probably create some kind of Carville trivia game and use the wheel of fortune. That sounds be fun.

In front of the Wheel of Fortune, I’m looking at one of our newest artifact, it is a bingo set-up. If I spin the wire cage you would hear the wooden balls going a round and round. Finally, one of the little wooden balls will fall out. Someday I would like to host bingo games in the museum. I think it would be a lot of fun to use the old bingo cards—I have inherited quite a few. Bingo has to be the all-time favorite activity here. I knew most of the patients as elderly folks and they would gather for regular bingo games. This is not our only bingo set-up. We had a big electric board, too. All of the bingo cards that I have, about 40 or 50 (forty or fifty), have some handwritten notes like “good luck to you” written on the backsides. I’m sure everyone had their favorite cards. I look forward to one day having bingo games here, as part of a tour, where we talk about leisure activities.

Also on display around the platform are large format black and white photographs, photographs that Johnny Harmon took. They illustrate patients at different activities. I have one of the Mexican Club. Another of the 40 & 8, a veterans group who benefited the patients from the 1940’s onward—they’re all posed in their uniforms. There’s another photograph of The STAR Magazine print shop. The STAR Magazine was printed by patients, for patients and doctors and had a worldwide distribution. I think a
high point in the circulation was about 80,000 (eighty thousand) subscriber. These subscribers were in about 100 (one hundred) different international locations. All of those STAR Magazines, the back issues, are now available online. We have a link on our website. They’re on the web in the LOUIS Digital Library collection, and they’re a great source of information for researchers. 
http://louisianadigitallibrary.org/islandora/object/lsuhsc-p15140coll52%3Acollection

Another photograph on display is about Patients Enterprises. And with that I’ll introduce my last but not least artifact—a barber chair from the 1940s (nineteen forties). There were twice as many men here as women. The doctors are still not sure why. So many patients, who had to leave behind their families when they came here—were primary breadwinners. The government covers the cost of a patient’s room, board and treatment. But in order to have money to send home, patients were encouraged to open their own business. If they had a skill like in the case of the barber, the government might buy the barber chair to help them get started. Then the patient barber would cut other patients’ hair and got paid for his labor. We had a patient drycleaner; a souvenir shop for postcards and photo supplies. There was also a seamstress, and a radio repair shop here and a beauty parlor. The government also offered about one hundred (100) part-time jobs like orderly, lab assistant and even elevator operator. There was a patients’ federation that would actively raise money to support indigent patients. Several outside organizations did the same thing.

The artifacts left behind by the patients, the oral histories and memoires they’ve written tell us that there was a community to belong to here at the hospital. I also know that it can be a very lonely, isolated place to be, and everything in between.

So with that I’m going to wrap up this podcast. Next time I’m going to tell you about some of the medical aspects of life here at the National Leprosarium. This has been Elizabeth Schexnyder, podcasting from Carville, Louisiana, Signing out. Bye y’all. 21:12