



Library Notes

by *Bill Ludwig*

There is this thing called Black English, or what is also called Black Dialect, Black Idiom, Ebonics or just plain Black Talk or Nigger Talk. Whatever the label, people know what I mean. For example:

- "Can't nobody never do nothin' in Mr. Smith class."
- "Dem dudes always be doin' day thang."
- "They daddy in the house."
- "Man, your ride really bad."
- "Yo mamma . . . yo daddy too."

Recently there's been a lot of discussion about Black English and Black communication, particularly by educators who are trying to figure out just what they should do about it or with it. Some claim it should be ignored, others that it should be educated out of a person, still others say it is a legitimate dialect and should be preserved. If you want to get a good conversation going at your next coffee break or cocktail party, just bring up the subject, like the use of the word "nigger", and watch the fireworks fly.

But this unique communication among Blacks has been an historical reality, which until only recently has been a closed circuit program. There is little doubt that its roots are African and its necessity has been due to slavery. Although there is considerable controversy about such language, even within the Black community, the truth is that it's part of the richness of our multi-cultured America, and most Blacks, regardless of class or occupation, become bi-lingual.

It might be fun to find out just how much Black English you use or know, since many people here in Las Vegas do not use the "hard core" dialect. The following questions are taken from Geneva Smitherman's book entitled "Talkin and Testifyin":

Fill in the blanks with the Black English form of the words "is" or "do":

1. The principal _____ in his office now.
2. They ain't left, _____ they?
3. Where _____ they _____ at every day?

Express the following sentences in correct Black English:

4. He failed me last semester.
5. Mr. Smith's dog was killed.
6. Scientists are inventing many things.
7. There's five kids in my family.
8. Looks like everybody and their mamma was there.
9. Nobody wants this car.

Complete the following sayings:

10. Grits ain't groceries, eggs ain't poultry and . . .
11. If I'm lying, . . .
12. The blacker the berry, . . .
13. What goes around . . .
14. Study long, . . .
15. Let the door hit you where . . .

If you have answered all the questions correctly (the answers may be found on page 9), it does not mean that you cannot or do not speak good standard English; it does mean that you have a common bond of communication with most Blacks in this country.

The full heritage of Blacks is alive and well at the West Las Vegas Library. Come in and investigate it; find out how much of it is a part of your daily life and where it comes from; learn how your increased awareness will increase your ability to operate in the larger world. And if I don't understand what you're saying in Black English, I have many willing interpreters around to help!

Happiness Through Health

by *Otto McClarrin*

SUCIDE IS THE SECOND LARGEST CAUSE OF DEATH AMONG CHILDREN: . . . "Suicides among school-age children are the second biggest killer of children," said Dr. Peter Fanning, director of special education for public schools in Wichita, Kansas. Accidents are the biggest cause of children's deaths.

In Kansas during 1972 to 1976, seven youngsters ages 10 to 14 and ages 15 to 19 committed suicide, according to statements by representatives of the Kansas Department of Health Environment's Vital Statistics. Kansas ranks 22nd in the nation for the total number of suicides.

During 1975, the most recent year for which data are available, 170 confirmed in child suicides, according to the American Association of Suicidology in Houston, a group interested in suicide prevention. In 1954 0.3 percent of children 10 to 14 committed suicide. By 1975 the figure increased to 0.8 percent.

The figures for children ages 15 to 19 increased from 2.4 percent per 100,000 persons in 1968 to 7.6 percent in 1975. A number of national experts believe that there would be more child suicides if young children had the skill to carry them out.

"Younger children aren't as adept (as older children) to take their lives in a way that would appear accidental," said Dr. Calvin J. Frederick, of the National Institute for Mental Health in Rockville, Md.

The nation's highest suicide rate is still ages 45 to 65. No figures are available for children below age 10. Kansas statistics compiled by the National Center for Health Statistics in Chevy Chase, Md., indicate 1975 was a typical year. The 19 suicides in the 15 to 19 age group were committed by whites, 17 were boys.

Firearms and explosives caused the deaths of 11 boys. Three boys and two girls from hanging, strangulation of suffocation. Three boys poisoned themselves. Poisons include drugs. Experts say children commit suicide for three reasons:

- * Families have increased mobility that separates children from their roots and supportive relatives.
- * More divorces and both parents working away from home can result in a breakdown in the family structure.
- * Some parents pressure their children to excel and to become independent at an early age.

These usually involve some sort of loss to the individual, like love, security, ambition, status, image or hope.

DRUG FOR EPILEPSY APPROVED FOR PATIENTS IN U. S. : The Food and Drug Administration recently approved an anticonvulsive drug that experts predict will help more than a half million victims of epilepsy, some of whom are incapacitated by seizures.

The drug, valproate, has been available in Europe for a decade and has been the subject of a campaign by the Epilepsy Foundation of America to win approval for its use in the United States. Valproate will be marketed in this country by Abbott Laboratories of Chicago under the brand name Depakene.

The drug agency said that it found valproate to be effective treatment for petit mal epilepsy, a form of brain disorder that causes momentary loss of consciousness. The Epilepsy Foundation predicts that at least 560,000 epilepsy patients who suffer more than one seizure a year and who are not controlled by other drugs can benefit from valproate.

COUNTY COMMISSION MEETING TUESDAY, APRIL 4, 1978 in the City Hall, CONCERNING NEW REDISTRICTING AREAS. 9:00 A.M. PLAN TO ATTEND!!!



V. I. P. Corner

by *Kenneth Carson*

Hello VOICE Readers:

I attended two meetings in the past week; Operation PUSH, which was very enlightening; and Las Vegas Improvement Association, (LVIA).

Operation PUSH, along with the National Headquarters, will have a televised TELETHON in the near future.

Mrs. Johnson, a Las Vegas teacher, spoke on the Parent-Teacher problems.

LVIA is to work to aid the unemployed in West Las Vegas.

These two fine organizations are concerned with the community and its problems. It is time the community got behind both programs and participated in both of them.

I feel that if we live in a community, we should help build the community; and aid all programs, because we ARE the community! I have heard so many people say they would not give or help anything in West Las Vegas, but we know that at least once a week, or a month, we know these same people are on the Westside either visiting their friends or relatives, or just passing through to go to work, so why not work together to make this a place people would like to enter?

Let us work together to beautify our area, and make our people proud of this area. Why should people have to pass through a bad area in order to get to a good area?

King, The Meat Man



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EDUCATION

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it necessary for them to obtain information in order to regain their balance.

Students tend to be motivated by being in classrooms that are, for the most part, predictable but in which they always have something "to look forward to." Teachers thus can have some effect on motivation, not on a spur-if-the-moment basis, but rather, by providing a slight element of the offbeat or unexpected in every learning situation. Pupil failure is much less likely in this type of classroom than in one where the known, familiar, and predictable are the order of the day.

Teachers must be able to identify the specific areas of strength or deficiency that individual students have, and knowing these strengths or deficiencies, should then take specific teaching action, rather than general action, to bring about learning that would prevent failure.