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Grave robbing in the North and South in antebellum America

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The transition in medical education from the apprenticeship model to formal medical courses in eighteenth and nineteenth century America required a supply of cadavers for anatomic dissection. By the 1850s, all American medical schools required anatomy courses as a prerequisite for a medical degree, all of them facing the difficulty of acquiring the needed cadavers. Early colonial laws forbade dissection, although later the use of cadavers of convicted criminals was permitted. Still, the demand for cadavers greatly exceeded the supply.

Grave robbing thus became a commonplace but highly illegal activity. Victims were often poor, criminals, or black. Outcries against the practice came especially after corpses from families outside the indigent poor group were taken. The most notable events were the “resurrection” riots of 1788 in New York City, and of 1824 in New Haven, the term referring to the ghoulish task of exhuming corpses from graves.

This article reviews the changing laws regarding cadaver procurement and grave robbing in antebellum American history, notable episodes of public outcry, and investigate the men who were responsible for supporting this burgeoning illegal trade and the social makeup of grave robbing victims in antebellum America.

Grave robbing and anatomy legislation in antebellum America

Colonial American medical education in the eighteenth century, based on an apprenticeship model, still considered practical anatomy essential to complete medical education. Formal courses in anatomy began to form, and by the 1850s, all American medical schools required anatomy courses as a prerequisite for a medical degree. The schools needed a steady supply of instructional material—frankly, cadavers.¹

In the colonial era, the procurement of cadavers and the practice of dissection were regulated by British law. Dissection was viewed as the ultimate punitive action. A 1752 British Parliamentary Act required posthumous dissection of murderers’ bodies, so that “further Terror and peculiar Mark of Infamy might be added to the Punishment of Death.”² After Independence several states passed laws that allowed judges to sentence criminals—and in Massachusetts, those who participated in duels—to execution and dissection. However, no national laws regulating dissection were enacted.³

As new medical schools formed in the early nineteenth century, state legislatures began to pass acts outlawing the disinterment of bodies, beginning in New Hampshire with the chartering of Dartmouth Medical School. In 1815, Massachusetts outlawed even the unauthorized possession of a dead body, which was quickly followed by the rest of New England by 1818.⁴ These laws did not change the required bodies to supply anatomy courses. Legal barriers did not deter professional grave robbers, students, and the faculty and employees of medical schools from stealing bodies.

Grave robbing flourished as new medical schools formed during the early years of the Republic. The public generally turned a blind eye to the goings-on because, as noted by historian Warner, bodies filched were mostly from “groups whose aggrievement was least likely to incite wide public protest: Criminals, African Americans, [and] paupers.”³ The victims were the most powerless in society, in unmarked graves in potter’s fields next to almshouses, with family and friends too poor to spare the time or money to provide for and protect their remains. Upper classes, devoted to the scientific and medical progress, were deaf to the concerns of those whose family members’ graves were being desecrated, so long as their bodies were not among the dissected ones. The rare occasions when grave robbers happened to snatch a corpse from an upper class family often created a public outcry.

At least twenty “anatomy riots” occurred from 1788 to 1857 in the United States. Most were sparked by stealing “the wrong kind of body.”³

These incidents underscored the need for a legal and morally acceptable means of procuring bodies for dissection. By the
late 1850s, several states passed anatomy acts allowing the dissection of the bodies of the indigent poor. Still the growth of new medical schools and the popularity of anatomy courses outpaced the new legal supply of cadavers. Thus the body trade remained active, especially in states that had no legal means of acquiring bodies for dissection.

New York City

Samuel Clossy, an Irishman, offered New York’s first formal anatomy course in the mid-1760s. He performed dissections on two young females, one black and one white; however, he was unable to obtain a body for his third scheduled dissection. Because of his growing notoriety, “we could not venture to meddle with a white subject, and a black or Mulatto I could not procure,” he wrote. While unable to complete his curriculum, Clossy still was later appointed as the first professor of anatomy at King’s College.

Anatomy instruction resumed at the school, newly renamed Columbia College, with the end of the Revolutionary War. In the 1780s, an estimated fifteen percent of the New York City population were blacks, but bodies of blacks from the city’s Negroes Burying Ground were the major supply for corpses for dissection. Free blacks and slaves petitioned the New York City Council against the violation of black graves in 1787:

[It] hath lately been the constant practice of a number of the young gentlemen in this city who call themselves students of physick, to repair to the burying ground assigned for the use of your petitioners, under cover of night, ... to dig up the bodies of the deceased friends and relatives, carry them away and ... mangle their flesh out of a wanton curiosity ... your petitioners are well aware of the necessity of physicians and surgeons consulting dead subjects for the benefit of mankind, ... your petitioners humbly pray your Honors ... adopt such measures as may seem meet to prevent similar abuses in the future.1

But no action was taken in response to the petition. Though the black community continued to protest, the Negroes Burying Ground continued to be the primary supply for Columbia’s anatomy classes. (The lower Manhattan site is now the African Burial Ground National Monument.)

Students and suppliers also pilfered churchyards. One such incident sparked the most infamous incident, the April 1788 Doctor’s Mob. Accounts differ, but begin with the story of medical students taunting boys playing outside their dissecting rooms by waving a dissected arm, claiming it was their recently deceased mother’s. The families checked, and one mother’s grave was indeed empty. Whatever sparked the incident, all accounts then concur that, as reported in the New Haven Gazette, “a number assembled and broke into the hospital where tis said some mangled bodies of the dead were fonnd [sic], in consequence of which a considerable dust was kicked up and sundry doctors and others were considerably mauled.”2

After sacking the school, the mob captured four medical students. The mayor and sheriff arrested the students, in effect rescuing them by placing them in protective custody in jail. Undeterred a mob of five thousand marched on the jail the next day. Governor Clinton ordered the state militia to action. The Gazette reported that “the militia fired on the populace, and killed four men and wounded several others.”3

The Doctor’s Mob showed that the public would no longer tolerate grave robbing. Recognizing the need for anatomy material for legitimate medical education, the New York legislature passed a 1789 anatomy act that made grave robbing illegal but allowed judges to add dissection after execution to the sentence of murderers, arsonists, and burglars.4 Despite the new law, there still were not enough “legal” bodies to dissect, so the practice continued. There were so many violations that the state legislature in 1819 classified grave robbing as a felony with a sentence of five years in prison. However, going without punishment were the anatomists who purchased bodies from the growing ranks of professional grave robbers.

Grave robbers were willing to risk arrest due the large payoff—from $5 to $25 per body in an era when skilled workers earned $20-25 per week. The correspondence of Harvard anatomy professor, John Collins Warren, confirmed the shady relationship between anatomy professors and grave robbers. Harvard faced shortage of bodies in the 1820s, so Warren wrote to acquaintances in nearby cities. He was referred to New Yorker James Henderson, “a trusty old friend and servant” who could “obtain the articles you desire” and “take upon himself all charge of procuring, packing and forwarding to any designated address.”5

After unsuccessful attempts by the ruling Whig party to control the practice in 1851-1853, they finally met success when New York legislature finally passed the “Bone Bill” in 1854. The Whigs, supported by the growing middle class, introduced the “Act to Promote Medical Science and Protect Burial Grounds” that had the support of county medical societies and the medical colleges, both of which lobbied for its passage. Proponents argued that medical knowledge gained by dissection would lower mortality and morbidity rates and thus benefit all of society, including the urban poor. There would be a direct financial benefit as well. Better supplied, medical schools would attract more students, thus strengthening the state economy.6

The ethical justification advanced by supporters of the act reasoned that being a body for dissection was an opportunity for criminals and the poor to pay for their misdeeds, ignoring that being poor was not a crime nor an affront to society. One advocate wrote

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[Having] either afflicted the community by their misdeeds, and burdened the State by their punishment; or having been supported by public alms—by offering up their bodies, to the advancement of a humane science they will make some returns to those whom they have burdened by their wants or injured by their crimes.2

Democrats, most from New York City and largely immigrants, opposed the bill. Most vocal were Irish and German newspapers and societies, as their countrymen were frequent victims of illegal grave robbing. They argued the lower class was already condemned and victimized by society. The act would further exploit them by turning their bodies into a commodity to be traded.

After heated debate the act passed by a single vote and became law on April 3, 1854. Unclaimed bodies and the dead too poor to pay for funeral costs were given to medical schools, their bodies treated as those of criminals. Though the law was not perfectly enforced, New York’s medical schools finally got the bodies they needed. Grave robbing declined, but the city was still a source schools in other states that had not passed similar legislation.

Augusta, Georgia

When the Medical College of Georgia (MCG) opened in 1829, there was no legal supply of cadavers and the practice of dissection was illegal. At its third meeting in 1834 the faculty charged the dean and anatomy professor with the task of finding a “resurrection man” to supply bodies for dissection. In 1839 the school paid $100 for cadavers from New York. The anatomy professor had to go to Baltimore to procure cadavers in 1842. MCG accounts from 1848 to 1852 show purchases of 64 bodies from a number of “resurrectionists.”

They were able to find most bodies from local sources, but others came from neighboring towns. Records allude to controversies surrounding the practice. For example, records from 1851 note additional expenses of reinterring of bodies already purchased. Some might have been the “wrong kind of body,” outraged surviving family members demanding their reburial.3,8

In 1852, MCG contrived a solution that was unique even in the antebellum South. As recorded in their minutes the “faculty… purchased a slave named Grandison for seven hundred dollars” at the slave auctions of Charleston.9 Officially Grandison Harris was a “porter” but his real duty was grimmer: He was to obtain bodies. Living in Augusta’s black community and its cemetery, he would have ready access to the main source of MCG’s cadavers. Probably unaware, he would also be a convenient scapegoat for the illegal collaboration.10
Harris’s situation was privileged for a slave. He was paid for his work and he had leave to travel about town and to visit his family in Charleston. Moreover, the grateful faculty gave him blankets, a mattress, clothes, whiskey, board, and “sundries,” all duly noted on its account ledgers. The frequent to trips to Charleston got to be costly, so the faculty decided to reunite him with his family, a luxury rarely afforded to slaves. The 1858 faculty minutes recorded one more eyebrow raising decision: “[It] was noticed that the Dean be authorised to purchase Grandison’s wife and child on account of the faculty.” The Grandison family was together.

Not only providing bodies from local cemeteries, Harris also acted as MCG’s agent in purchasing them. His responsibilities expanded to all facets of dissection at MCG, including preserving the bodies in whiskey (an expense noted in faculty accounts), laying out bodies for dissection, and finally disposing of them. The last task was especially delicate, as dissection was illegal in Georgia until 1887. As his expertise grew, he acted as a teaching assistant in the anatomy lab (Figure). He learned to read and write (illegal for slaves at the time), and communicated through written letters to the faculty. Though still a slave he was de facto a free man under contract to MCG. His duties interrupted when MCG closed during the Civil War, Harris was promptly rehired when the school reopened after Appomattox. Later a judge in South Carolina, he never gave up his franchise at MCG.

Harris discarded many cadavers in the basement of the old Medical College, covered with saltpeter to conceal the odor of rotting flesh. Excavations for building renovations a century later in 1991 uncovered the bodies. Study of the remains revealed the racial and societal make-up of the victims of the grave robbing activities of Harris and the MCG faculty. Robert F. Blakely, a forensic anthropologist specializing in urban archeology, mobilized his anthropology class to study the remains. They found that 79 percent of the bones were black, with black men the most common group, followed in order by black women, white men, and white women. The distribution was a statistically significant overrepresentation of blacks among the MCG remains in comparison with the concurrent Augusta census at the time, when blacks represented 42 percent of the Augusta population. Blakely concluded that the disproportionate number of blacks was the “result of accessibility, selectivity, or both.”

Southern slaves, being the most marginalized group, were the most vulnerable for exploitation. Slave owners sold and donated the bodies of their slaves to medical schools. Free blacks buried in rural cemeteries were also at risk, especially if they were interred outside community churchyards and graveyards that were more visited and watched.

Dissection and society in antebellum America

Several factors led to the use of bodies of the black and poor for dissection. First, their bodies were easier to obtain. Slaves and the poor could not afford time or money to ensure that graves of friends and relatives were secure during the first crucial days when bodies were relatively fresh and grave robbers were known to strike. Furthermore, their gravesites generally were remote and outside the fenced protection of a churchyard. Megan Highet, anthropologist at the University of Alberta, says, “The theft of bodies was essentially segregating in death those who had been marginalized in life;” death offering no escape from institutionalized racism.

The white society chose to overlook the practice so long as their graveyards went unspoiled. The desecration of the graves to the blacks and the poor was “less noticeable and less objectionable among middle and upper class society,” according to Highet. In 1838, the English travel writer, early feminist, and perceptive social observer Harriet Martineau said, “In Baltimore the bodies of coloured people exclusively are taken for dissection because the whites do not like it, and the coloured people cannot resist.” Blacks and the poor had little power to block the practice.

Objections to the grave robbers’ activities, when they did arise, were often the result of extreme provocation.” Free blacks did object to the desecration of the Negros Burying Ground, but their 1787 petition to the New York City Council had no effect. Similarly representatives of the Irish and German poor failed in their opposition to the Bone Bill of 1854.

Finally, white medical schools used the bodies of blacks and the urban immigrant poor because they could. Edward Halperin at the University of Louisville said, “Anatomical dissection served as a means for a ruling class to exert social control over the weak, the marginalized, and criminals.” Dissection after death was a hideous act that served as a deterrent against both crime and poverty. The debates surrounding the Bone Bill revealed some of the prevailing attitudes toward poverty: If dissection did not drive the poor to support themselves during life, then their bodies could be used for dissection to further medical progress and repay their debt to society. Thus dissection became a form of punishment, criminalizing poverty and institutionalizing racism.

In the antebellum South, some slaveholders used the threat of dissection to maintain control of over slaves. Black slaves grossly outnumbered whites and slave uprising was constantly feared. Black folklore is replete with stories of the “night doctors,” who kidnapped and murdered blacks for dissection. As in the North, southern medical schools had the same requirements for cadavers. The faculty at MCG was unique in owning a slave as its agent, Grandison Harris, in conducting the grim task. Truly a curiosity, Harris was a man set apart and entirely unique in the medical history.
Blacks were exploited for dissection in both the North and South. There was a shift to poor immigrants in large Northern cities in the later antebellum period. As northern states passed anatomy acts in the 1840s, the urban poor became a legal supply of cadavers. In the South, slaves and free blacks were illegally dissected and even lauded as anatomical supply by medical schools of that time. The use of the poor and blacks as an unobjectionable source of dissection material reinforces the deep racism and rigid classicism of antebellum America, both North and South.

References
9 Record book #1 of the Faculty of the Medical College of Georgia: Oct 1833- Nov 1853; pg 151. Transcription of handwritten minutes. Medical College of Georgia Archives.
11 Record book #2 of the Faculty of the Medical College of Georgia: Dec 14, 1852-April 14, 1879; pg 178. Transcription of handwritten minutes. Medical College of Georgia Archives.

Legend
Faculty and students of the Medical College of Georgia, 1877. Grandison Harris stands at the far rear.