

United States: Medical exploitation of Black people in America goes far beyond the cells stolen from Henrietta Lacks that produced modern day miracles

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Medical exploitation is an often overlooked part of Black history and partly explains the mistrust that members of the Black community have for the medical industry.

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In a case that revealed the [exploitation of a Black woman](#) beginning in the 1950s and extending for 70 years, Thermo Fisher Scientific Inc. settled a lawsuit that the estate of [Henrietta Lacks](#) had filed against the biotech firm for its role in what the lawsuit called “a racially unjust medical system.”

In 1951, Lacks was diagnosed with cervical cancer at Johns Hopkins Hospital in Baltimore, one of the only hospitals in the area that would treat African Americans at the time. During her treatment, a sample of her cancer cells was taken without her [knowledge or consent](#). In the lawsuit, Thermo Fisher was accused of unjust enrichment and illegally profiting from Lacks’ genetic material. “Black suffering has fueled innumerable medical progress and profit, without just compensation or recognition,” the lawsuit said.

Henrietta Lacks’ cells, known as [HeLa cells](#), have had a profound impact on medical science since they were first taken from Lacks in 1951. Those cells have contributed to [the development of the polio vaccine](#), [research into cancer](#), studies on the effects of radiation and toxic substances, gene mapping and countless other [scientific pursuits](#).

But nearly all of these advancements happened without her and her family’s approval – or compensation.

Lacks is one of the most well-known examples of medical exploitation on a Black body. It is far from the only example.

Medical abuse is a part of Black history

In 2020, [the American Public Health Association](#) declared [racism a public health crisis](#).

The declaration, while important, speaks solely to present inequities and plans to advance racial equity in the future. But minimal attention has been afforded to the deep historical roots of [anti-Black racism](#) in the medical industry.

Medical exploitation and intentional abuse of members of the Black community is an often overlooked part of Black history. But understanding the issue is critical in order to better analyze [today's mistrust](#) of the medical profession by many in the Black community.

As a Black scholar who uses [critical approaches](#) to study [culture](#), [communication](#) and [health](#), I have my own experiences and [peer-reviewed research](#) that reveal various ways the Black community experiences racism within the health care industry.

The [Tuskegee experiment](#) is one of the most well-known examples of medical exploitation in the Black community. The federal government from 1932 to 1972 lied to around [600 men](#) about receiving treatment for syphilis. They were studying the effects of syphilis in the men, but did not, in fact, treat it in 399 of the men.

Many are shocked to find out [that the study lasted 40 years](#).

The cautionary tale of the flawed Tuskegee experiment revolutionized [how research was conducted](#) and had various [implications](#) for the Black community.

But as revealed in medical ethicist Harriet A. Washington's groundbreaking book "[Medical Apartheid](#)," the medical exploitation of the Black community extended far beyond Tuskegee.

Grave robbing in Black communities

The [18th and 19th centuries](#) ushered in a new method of medicine focused on increased anatomical knowledge and dissections.

In turn, more cadavers were needed, but the demand for cadavers far [exceeded the supply](#). Moreover, at the time, social attitudes toward dissection and dismemberment of a corpse were not positive; they were primarily perceived [as punishment for the most heinous criminals](#).

The solution at the time was [grave robbing](#).

People would steal not only [the bodies of the enslaved](#) who had died but also [the corpses](#) of Black men, women and children from their graves and sell them to medical schools.

At the turn of the 18th century, most of [New York City's](#) dissection tables were full of Black bodies, despite members of the Black community's accounting for only 15% of the population at the time.

This practice was also extremely common in [Maryland](#) and [Virginia](#). In fact, [Virginia Commonwealth University](#) officially apologized for this practice [in September 2022](#).

But in early 2023, [Virginia lawmakers failed to pass a resolution](#) formally acknowledging and apologizing for this inhumane treatment in their commonwealth.

Unethical experiments on the incarcerated

From the 1950s through the 1970s, [Philadelphia health officials](#) allowed the prominent researcher [Dr. Albert M. Kligman](#) to conduct dangerous experiments on incarcerated people, most of whom were Black.

Kligman repeatedly and purposely exposed Black men to dermatological, biochemical and pharmaceutical experiments. One of the most significant was testing dioxin, [the toxic chemical in the biochemical weapon Agent Orange](#).

The city of Philadelphia and related institutions [officially apologized](#) in October 2022, but the apology does not remedy the lifelong scars and lingering health impacts from the experiments.

This practice is not only a relic of the past.

Incarcerated individuals in Arkansas [were given a cocktail of drugs](#), including Ivermectin, to treat COVID-19. It is important to note that Ivermectin was not and has not been approved by the FDA for treatment of COVID-19.

After suffering [a long list](#) of side effects, the men were informed that one of the drugs they received was Ivermectin, a drug usually used to [treat cows and horses](#).

This abuse of Black bodies who were incarcerated did not affect just men. Black women experienced abuse and exploitation in a different form.

They were often [forcibly sterilized](#) without their consent.

Between 1909 and 1979, [California forcibly - and legally - sterilized](#) around 20,000 women, most of whom were Black women and other women of color who were incarcerated or under state guardianship because of some perceived incapacity.

In [North Carolina](#), sterilizations were also used against Black women in state institutions [to “weed out any feeble-minded.”](#)

Why it matters

Acknowledging the full history of America’s medical industry is crucial to better understanding and combating [race-based health disparities](#) in the Black community.

A member of the AIDS Coalition To Unleash Power protests against stigmatizing people who tested positive for HIV. Erik McGregor/LightRocket via Getty Images

It is also important to show how racism is still prevalent in contemporary medicine and public health.

[Black women continue](#) to die during childbirth more than others. Black men have [the shortest life span](#) of any U.S. demographic represented in current data, and the Black community overall has the shortest survival rate of [any racial group for most cancers](#).

Systemic racism and negative attitudes from medical personnel are often to blame. Black men are often [viewed negatively by doctors](#). Many Black cancer patients [are not offered the opportunity](#) to participate in clinical trials that could help them.

A [groundbreaking study](#) published in Psychological and Cognitive Sciences in 2016 revealed a somber truth: Some medical professionals still believe there are biological differences between Black and white patients.

In turn, they are less likely to treat [Black patients for pain](#). The study further found that nearly half of the medical students in the study believed Black people have [less sensitive nerve endings](#).

It's my belief that [revealing the dark history](#) of medical racism is key to making sure that past injustices do not recur.

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Deion S. Hawkins, Ph.D., serves as an Assistant Professor of Argumentation & Advocacy and the Director of Debate at Emerson College in Boston, Massachusetts. Once a licensed high school English teacher committed to using debate as a tool for social change and civic engagement, Deion is now a critical scholar whose qualitative work centers on underserved, under-resourced and historically marginalized communities that are typically absent in academic research. As an expert in Critical Race Theory (CRT) and health communication campaigns, Deion studies the health disparity of HIV in the Black community. Additionally, his work analyzes the intersections of communication, race, police brutality, and trauma. Deion proudly identifies as first-generation, Black, and Queer; he wholeheartedly believes professors should use their academic privilege and social position to advocate for social change and communicate with the general public for the greater good. In 2021, he founded S107 Solutions, LLC; named after his high school debate classroom, S107 offers a range of DEI & racial justice trainings, team building workshops, academic coaching, and strategic plans to help organizations advance their mission.

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