

## The Ghost of Tuskegee and the Persistent Distrust of the U.S. Healthcare System by African Americans

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### Abstract

The lessons learned from human tragedies, such as those borne of disregard and maltreatment, often become diminished and marginalized over time. The memorials built in their honor and ceremonial remembrances can come to serve more as photo-ops for politicians and political leaders than as an actual joining of hearts and minds in paying respect to those who have suffered and in forging a way forward to prevent similar failures of conscience, common sense, and human decency from recurring. The following paper serves as a reminder of a historical tragedy and what happened to innocent African American men in Tuskegee, Alabama and what could happen to people of any sex, race, or creed if society becomes careless or indifferent.

**Keywords:** African Americans, Bad blood, Healthcare inequality, Syphilis, Tuskegee

### Introduction

In the autumn of 1932, fliers were distributed in Macon County, Alabama. The fliers promised black people a special treatment for what was called “bad blood”—a term used to describe syphilis, fatigue, anemia, and other conditions prevalent in that area at the time. The fliers appealed to people’s desperation in getting cured of the “bad blood” disease. One such flier read: “Free blood test; free treatment, by county health department and government doctors, you may feel well and still have bad blood. Come and bring all your family”.

The community “health program” initially involved 600 black men: 399 with syphilis and 201 without the disease as a control group. The patients were promised free meals, free physicals, and free burial insurance. The flier never told them that they were part of an experiment for untreated syphilis in the Negro male.

In subsequent decades, the disparity in healthcare between Caucasians and African Americans in the U.S. has grown considerably. Access to healthcare among African Americans remains lower than their Caucasian counterparts. A look at historical precedents can shed light on why-and-how such disparities have yet to diminish.

### Discussion

The history of slavery in the U.S. haunts the way healthcare is distributed among its black population. The Tuskegee Syphilis Experiment is viewed as a significant factor in the awkward relationship between the U.S. healthcare system and a large segment of the population,

African Americans, it is called to serve. The Tuskegee Syphilis Experiment has cast a dark cloud over the way black people view public health initiatives in the U.S.

However, the fear and distrust held by black people regarding the U.S. healthcare system was not born out of the misguided, careless, and callous experiment at Tuskegee, but stemmed from a long tradition of oral tales told throughout generations in the black community. Such tales disclosed stories of “night doctors” who were believed to kidnap and kill black folks at night and take their bodies to hospitals to be used for experiments. In the late 1800s, grave robbing rings operated out of Philadelphia. According to historian David C. Humphrey, these “body snatchers” provided corpses to medical schools for cadaver anatomy lessons.

Black physicians in the early 20<sup>th</sup> century protested the use of black patients as guinea pigs by their white compeers. Circa 1895, Dr. Nathan Francis Mossell, the founder of the Frederick Douglas Hospital in Philadelphia, described how black patients in the South were given poor care and placed in inferior wards where the treatments they received were experimental and beneath the standard at the time.

The Tuskegee Syphilis Experiment was conducted without informed consent, and the participants were denied appropriate treatment (even after a cure for the disease was available in 1945). The original Tuskegee study was to last six months, but it was extended for forty years. Testimonies from survivors, collected by James H. Jones in his book “Bad Blood: The Tuskegee Syphilis Experiment”, retells the stories of those hopeful African American men, and how they were duped into thinking they were receiving free healthcare. One of the survivors, Charles Pollard, recounted his experience as follows: “So I went over, and they told me I had bad blood, and that’s what they’ve been telling me ever since. They come around from time to time and check me over and they say, ‘Charlie, you’ve got bad blood.’” Mr. Pollard was never told he had syphilis.

In July 1972, an Associated Press article revealed the wrongdoing of the study and exposed the forty-years experiment to the public. This revelation came about by whistleblower, Peter Buxtun, who leaked the story to the Associated Press after several attempts on his part to raise concerns about the ethics of the experiment. The ensuing public outcry led to the establishment of a nine-member panel, in the fields of medicine, religion, law, education, health administration, and public affairs, to thoroughly investigate and determine what went wrong in Tuskegee and how to prevent such a horror from being repeated. The panel concluded its investigation by asking for the termination of the study as it was determined to be “ethically unjustified”.

Americans of all colors can imagine how such a tragedy and injustice could adversely impact the relationship between the African American community and their government and the U.S. healthcare system. Although constructive changes have been made to the healthcare system through legislation, the Tuskegee Syphilis Experiment still reminds black Americans that their lives have always been devalued by a large segment of white society, which in turn is reflected in their relationship with the medical profession as a whole.

Numerous studies and publications have validated this persistent distrust by African Americans of the U.S. healthcare system. The American Medical Association’s Council on Ethical and Judicial Affairs acknowledged that racism could influence the practice of medicine. However, in 2005, the *Journal of the National Medical Association* refuted the basis of Tuskegee as a historical precedent for the mistrust by blacks.

Many years after the deranged syphilis experiment at Tuskegee, the data still reflect a grim reality. The U.S. healthcare system doors do not open to African Americans in the same way they do for other Americans. The Tuskegee study proved to blacks that they are not woven into the social fabric and support systems of America [1-7].

### Conclusion

The sequelae of slavery and Jim Crow pervade in domains like healthcare. Racism remains a relentless factor in how people of color are treated in our medical facilities. The Tuskegee Syphilis Experiment has cast a long and longstanding shadow of distrust by many African Americans of the U.S. healthcare system, seeing it not as an angel guiding them to the gates of a healthcare “heaven” but as a ghoulish dragging them through a hell of sickness and disease until a suffering death.

Such historical tragedies, as occurred in Tuskegee, should not be forgotten, so they will not be repeated. Americans are constantly reminded that they are a government “of the people, by the people”; they should also be reminded that the American healthcare system should be “for the people”—all people.

### Conflict of Interest Statement

The authors declare that this paper was written in the absence of any commercial or financial relationship that could be construed as a potential conflict of interest.

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