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RACE, DEATH, AND PUBLIC HEALTH IN EARLY PHILADELPHIA, 1750–1793

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ABSTRACT: The recent discovery of burial sites associated with Philadelphia's early black community has raised questions about their historical context. This article will situate Philadelphia's African American burials against the backdrop of public health in the 1700s. Public health concerns were omnipresent in Philadelphia as it developed and expanded, and its inhabitants sought to navigate the complex challenges that accompanied such growth. For the black residents of Philadelphia contending with these public health challenges, it was especially difficult given the added burden of their disempowerment in the institutional structure of the city. Thus, before the emergence of African American churches and their accompanying cemeteries in the 1790s, white burial grounds, including churchyards and public lots, functioned as an arena of racial contestation, where members of the black community sought to exercise power within the city. The Free African Society and Yellow Fever epidemic of the 1790s are also considered.

KEYWORDS: public health, Free African Society, African American death practices, Philadelphia, yellow fever epidemic

In 2013 construction workers in the Queen Village neighborhood of Philadelphia found something surprising beneath the topsoil of Weccacoe Playground: a graveyard. The discovery of this graveyard, affiliated with historic Mother Bethel African Methodist Episcopal Church and referred to as Bethel Burying Ground, sparked an interest in neighbors and historians alike. Some neighbors worried that they would lose the community center that existed on the site, and with it a polling place, meeting space, and playground facility; others were concerned with how the space should be administered in order to reflect and honor this newly discovered facet of its past.¹

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Historians, in turn, sought to learn more about Bethel Burying Ground, understanding the events that led to its transformation into Weccacoe Playground and identifying the graves that remain.

Bethel Burying Ground was just one of several gravesites uncovered during recent construction in Philadelphia. Several of these sites were associated specifically with the city's early black community. Among the earliest of these was First African Baptist burial ground at the intersection of 8th and Vine streets, uncovered in 1980; ten years later, archeologists uncovered a second burial ground associated with that church just two blocks away. More recently, in 2018, a burial site associated with Monumental Baptist Church was discovered on Chestnut Street.²

The repeated emergence of these sites, which date back to the early 1800s, raises numerous questions about their history and context; however, scholarly work on the topic has been relatively limited. Some archeological studies have been completed, most notably Lesley Rankin-Hill's *A Biohistory of 19th-Century Afro-Americans: The Burial Remains of a Philadelphia Cemetery*, which employs a biocultural framework to reconstruct the lives of the First African Baptist Church congregation using skeletal remains.³ In 2008 Rebecca Yamin published a more recent archeological history of First African Baptist.⁴ In addition to these studies, archaeologists also completed an initial land survey of Bethel Burying Ground at the Weccacoe Playground in 2013, primarily to ascertain the scope of the cemetery and the feasibility of completing playground renovations rather than to answer these historical questions.⁵ On the subject of early cemeteries more broadly, Dell Upton's *Another City* includes a valuable chapter on the development of graveyards in the urban context, and Aaron Wunsch's research on Laurel Hill Cemetery has provided insight into the rural cemetery movement of the mid-1800s.⁶ However, most scholarly studies have otherwise focused on plantation slavery and the black burial practices that existed in the south rather than on the historical context of urban black cemeteries in particular.⁷

In 1792 prominent black community leader Absalom Jones founded the first black church in Philadelphia, St. Thomas African Methodist Episcopal Church. Two years later, the congregation acquired a plot of land on which to build and dedicate a church and established a burial site there as well. Though the founding of St. Thomas marked the beginning of black religious separatism and the advent of black-owned churchyards, the history of black burial in the city began many decades prior. This article will therefore focus on the earliest examples of burial grounds as sites of exclusion, policing, and

exploitation on one hand, and community building and power creation on the other, situating Philadelphia's black burials against a backdrop of public health in the mid- to late 1700s. Although the idea of public health in this era was an emergent field, typically relating to sanitation, for purposes of this article that phrase will broadly refer to problems related to the body: its health, its sickness, and its death.⁸

Public health concerns were omnipresent as cities developed and expanded, and their inhabitants sought to navigate the complex challenges that accompanied such growth. For the African American residents of Philadelphia, contending with these bodily challenges was especially difficult given the added burden of their disempowerment in the institutional structure of the city. From the early 1700s, the black population of Philadelphia had risen and fallen, as had the relative number of enslaved people compared to the general population, although "free blacks had lived in Philadelphia almost as long as slaves had existed there." In the mid-1700s, the number of free black people was relatively small; in 1765 Philadelphia's black population consisted of 1,500 people, only 100 of whom were free. However, the factors of manumission, the trade of enslaved people out of the city, and death gradually led to the reversal of these numbers until, by the early 1800s, free black people constituted nearly 20 percent of the population of the city. The urban character of Philadelphia's black community led, as historian Gary Nash argues, to the creation of "a shared feeling of group identity."⁹

As time went on, certain individuals gained some measure of wealth and prominence; some of these, like Absalom Jones and Richard Allen, served as leaders with real, earned power, whose actions (if sometimes driven by flawed personal motivations) significantly shaped the development of the community as a whole.¹⁰ Despite the diversity of class, status, and influence among black Philadelphians at this time, they were nevertheless united in the commonality of death. How could they manage the interment of bodies and the administration of graves given their lack of access to and control of the physical infrastructure of burial that white residents enjoyed? Burial thus functioned as a key arena of racial contestation in the period. Almost entirely excluded from white-owned churchyards, black residents were frequently relegated to public burying sites with little upkeep and no protection. Unwilling to accept this situation, they strove to exercise power at these sites through a variety of means, including legal petitions, independent policing, and mutual aid societies. In doing so, black Philadelphians intervened in broader conversations of public health, met the health needs of their community, and,

perhaps most important, created the conditions for black churches to build churchyards where black residents could attend to their dead as they wished.

EARLY CHURCHYARDS

Like any population of significant size, all residents of Philadelphia had to contend with the reality of death, not only its ubiquity in the disease-ridden city but also the logistics of burial. Especially dangerous in the close quarters of the city, highly contagious diseases including yellow fever, smallpox, and cholera made the prompt interment of potentially infectious bodies of particular concern. In Philadelphia's early years the responsibility for this interment was largely divided between two main institutions: the local churches, managed by white congregants, and the municipal government.¹¹ The way that these institutions approached the burial of black bodies, in comparison to white bodies, illustrates the disparity between those public health services that white residents could access and the ones with which their black counterparts had to make do.

In the mid-1700s, churches played the central role in administering human burials. In doing so, they provided a spiritually significant service to the individuals they buried and their families, and also addressed a central public health need. These churches typically interred congregants in churchyards, the land owned by the church and immediately adjacent to its main building. Frequently, plots were also available for "strangers," people who did not attend the church but who were eligible for burial provided they paid an additional fee.

Before 1792 and the creation of the first independent black church in the city, these churches ministered to free and enslaved black people as well as to white parishioners. This fact may at first seem to indicate that burial services would also have been available to all members. After all, the inclusion of black congregants came in many forms. For example, Christ Church, an Episcopal congregation founded in 1695, implemented several initiatives designed to catechize the black community in the neighboring areas. One such initiative was the formal appointment of a salaried "Catechist to the Negroes" in 1747, tasked with providing spiritual instruction to the church's black neighbors.¹² In 1763 the catechist in question, Reverend Mr. William Sturgeon, came under scrutiny for allegedly failing to catechize a sufficient number of black people during his tenure. This claim sparked a lengthy

investigation concerning his dereliction of duty and illustrates the perceived importance of such missionary efforts. The marriage and baptism registers from Christ Church further support this vision of black enrollment, recording a number of marriages and baptisms in the church between 1709 and 1792. These marriages and baptisms involved both free and enslaved blacks.

Like Christ Church, St. George's Methodist Church, founded in 1769, also included black congregants. Among them were men like Richard Allen, Absalom Jones, William White, and Dorus Ginnings, who would go on to become prominent leaders in their community.¹³ As Allen details in his autobiography, *The Life, Experiences, and Labors of the Rt. Rev. Richard Allen*, such inclusion was not limited to attending services. He also received preaching assignments, which were "given out for me at five o'clock in the morning at St. George's Church" as well as in "the commons, in Southwark, Northern Liberties, and wherever I could find an opening."¹⁴ The diversity in the roles that black congregants could fill and their relationship to white church authorities reveal the extent to which the former were active participants in the life and functioning of these religious institutions.

These examples seem to reveal white churches concerned with the spiritual lives of black Philadelphians and willing to devote money and resources to their religious betterment. One might also assume, therefore, a decent likelihood that they included black congregants in burial rites, the other major service administered by the churches in question. However, such an assumption belies the way in which the inclusion of black congregants (a significant number of whom were enslaved people owned by the church's white parishioners and accompanying them to weekly services) in catechism programs, marriage rites, and baptisms served as a means by which to reinforce white domination in the church. In the urban context, black people had access to the formal religious institutions that their more rural counterparts lacked. Here, efforts to catechize existed as another means for white church leaders to monitor, control, and proselytize black Philadelphians; thus, inclusion frequently also meant constraint. Despite their participation in churches as congregants, marriage and baptism recipients, and preachers, they were *not* buried in the corresponding churchyards. This reality further highlights the racial dimension of white religious control.

The burial registries and records of Christ Church and St. George's provide evidence of the exclusion of black congregants from said churchyards. This reality illustrates the limits of white benevolence and the singularity of burial as a measure of race relations in the Revolutionary period. Christ Church's

burial registry includes only one definitive record of a black person being buried by church officials: William Richards “a negro (belonging to Joseph Richards),” in February of 1742.¹⁵ However, where most burial records for Christ Church’s white parishioners include a location of the individual’s final resting place (typically “Christ Church Burial Ground”), Richards’s merely reads “unknown.”¹⁶ What this means is up for interpretation. One possibility is that Richards was buried somewhere within the churchyard, perhaps in the Richards family plot or on the outskirts of the area and without a grave marker. In this case, Richards’s burial may say more about the desires and influence of his master than an effort toward inclusion by church leaders. As historian Erik Seeman notes, “slaves throughout the New World . . . were largely free to attend to their dying and dead without a great deal of interference from their masters or from the local clergy.”¹⁷ Richards might thus have been the exception that proved the rule: the single enslaved person buried in Christ Churchyard, a rare instance of a slaveowner insisting on a specific service despite burial norms practiced by other slaveowners or even the church leaders themselves. In this interpretation, the lack of location in his burial record may indicate reluctance by these leaders to formally acknowledge the interment of a black body alongside whites, or perhaps a simple lack of concern over the ultimate location of the corpse. A second, perhaps more likely, eventuality is that Richards was not buried at Christ Church at all, but instead received burial rites there before being interred at an alternate site.

The marked disparity between the apparent frequency with which black marriages and baptisms occurred and the scarcity of corresponding interments is even more striking when one follows what few leads are available in the Christ Church burial registry. Attempting to identify the burial records of black congregants baptized or married at Christ Church leads to only a few speculative results and no definitive answers. Investigating the participants in black marriages, which would seem to suggest an active and ongoing involvement in church life, yields the names of thirteen free and enslaved black people. However, none of these individuals possess corresponding burial records, either under their own names or, for women, under their married names.¹⁸ This dearth of records indicates a situation similar to that of William Richards, wherein these black congregants were allowed and even accepted into church programs, but were not permitted burial in the churchyard. These cases are illustrative of just where white church officials drew the line with regards to the inclusion of black people in religious life: burial.

Similarly, though St. George's church records include membership entries for black and white parishioners, the burial records do not. Unlike the Christ Church burial registry, which recorded all burial services performed by church officials, St. George's records note only the sales of funeral plots to specific individuals or families.¹⁹ Because of this, it may be the case that such records present a less complete vision of the range of burials conducted at St. George's. That being said, it is nevertheless significant that these burial plots were sold only to white congregants, whether because of overt racism or because only white families were in a financial position to afford the plot fee; in either case, the dearth of records reveals that burial was in some sense a distinct category among the services offered by early Philadelphia churches. Furthermore, the exclusion of black congregants from these churchyards represents only one element of a broader exclusion from public health services. This is particularly evident in the case of the potter's field.

THE POTTER'S FIELD

For those (like, perhaps, William Richards) denied the privilege of burial in a churchyard, Philadelphia's potter's field served as their last option for burial. The potter's field, today known as Washington Square, was a functional public lot located in the southeast quadrant of today's center city. Also referred to as the "Stranger's Burial Ground," the potter's field is often cited as the final resting place for people too poor to afford the burial fee in private churchyards, prisoners who died from illness or execution while incarcerated, and unclaimed bodies from the streets or the city hospital. Burial in the potter's field met a public health need in the growing city, providing a burial space for those bodies that could not be easily interred elsewhere. However, for the black residents of Philadelphia, the potter's field not only served the displaced stranger. It also served as the final resting place for their community. The material consequences of burial in the public lot would have been felt differently—and more keenly—by black residents than by their white counterparts. Excluded from white churchyards, black residents faced additional segregation in the potter's field; they were buried only in a segregated section there, forbidden from being interred with white bodies. The potter's field was the only form of burial available to them, one that embodied exclusion and signified a continued lack of control over the bodies of their relatives. Therefore, burial in the potter's field meant that their dead remained outside

of their control and vulnerable to the graverobbers and body-snatchers seeking to exploit them.

The unique character of the black section of the potter's field is evident in early accounts of the space and illustrates the ongoing connection between Philadelphia's living black community at the time and their dead beneath the soil. Reports from the early 1700s describe how black residents used their section of field, referred to in oral histories as Congo Square, as a public gathering space where they could hold celebrations, gather in public, and pay their respects to the dead.²⁰ White Philadelphians who lived near the square and commented on these proceedings noted that the actions of the enslaved Africans who congregated in the potter's field had distinctly spiritual elements. John Fanning Watson, in his *Annals of Philadelphia*, described this use of the site:

It was the custom for the slave blacks, at the time of fairs and other great holydays, to go there to the number of one thousand, of both sexes, and hold their dances, dancing after the manner of their several nations in Africa, and speaking and singing in their native dialects—thus cheerily amusing themselves over the sleeping dust below! An aged lady . . . has told me she has often seen the Guinea negroes, in the days of her youth, going to the graves of their friends early in the morning, and there leaving them victuals and rum!²¹

The potter's field then, at the most basic level, provided a burial site for the dislocated. However, the unique use of Congo Square as a gathering place for black Philadelphians reveals that the importance of the plot far exceeded this pragmatic function; it also meant something special for black residents. As described, the fact of the bodies in the segregated section of the field granted the living members of the community some claim to the use of the land, enabling them to honor their dead to an extent impossible elsewhere. Though black Philadelphians sought to make use of the site in what ways they could, the knowledge that they had been relegated to the same burial ground as paupers and criminals likely only heightened their sense of alienation from the public health infrastructure that most white Philadelphians enjoyed. Furthermore, despite their efforts to utilize the site, their claims over the space were negligible so long as the land remained in the control of the city. This reality reveals the limits of the ability of black residents to directly confront public health issues without the presence of legal or physical

institutions of power. Despite this, they would go to some effort to exercise control over the burial sites through alternate means in order to protect and proactively assist members of their own community.

The complexity surrounding these attempted claims to the potter's field is evident in records dating from periods as early as the 1730s. The minutes of the City Council, extracts of which appear in Watson's *Annals*, record repeated attempts by council members to leverage legal methods to limit black people's ability to gather there. Citing "the frequent and tumultuous meetings of the Negro Slaves, especially on Sunday, Gaming, Cursing, Swearing and committing many other Disorders, to the great Terror and Disquiet of the Inhabitants of this city," council members in 1738 resolved to curtail this practice of assembly.²² The same year, a city ordinance was issued "for the better regulation of the more Effectual suppressing Tumultuous meetings and other disorderly doings of the Negroes, Mullatos, and Indian servts. and slaves within the City and Liberties thereof."²³

In 1741 they passed an additional resolution that criticized the "many disorderly persons . . . and great numbers of Negroes and others [that] sit there with milk pails, and other things, late at night, and many disorders are there committed against the peace" and ordered that groups disperse within half an hour of sunset or risk being arrested.²⁴ Although such censorious behavior did not succeed in fully preventing black people from congregating in their section of the potter's field, it nevertheless reveals that black Philadelphians claimed and contested this space for use by their community. The policing of black presence in Congo Square, a site defined by its status as a burying ground, both reflects black Philadelphians' lack of access to formal avenues of power and anticipates how conflicts over control over the land and the bodies therein would play out in succeeding decades.

BODY SNATCHING

Black residents were unable to fully exercise control over the bodies in the potter's field; as such, people buried there remained vulnerable to a form of medical exploitation gaining prominence in the period: body snatching. The 1760s were the beginning of a decades-long expansion of the medical field as a legitimized profession, both in the United States and abroad. Against the backdrop of this professionalization, anatomical dissection both contributed to the growth of the field and was itself "the subject of a mania"

that led to an increased demand for anatomical lectures and educational dissections for medical students.²⁵ William Shippen, a prominent Philadelphia doctor, was among the first to provide educational courses on anatomical dissection. In 1762 he began offering courses of sixty lectures “in which the Situation, Figure, and Structure of all the Parts of the Human Body will be demonstrated on the fresh Subject; their respective Uses explained, and their Disease, with the Indications and Method of cure, briefly treated of.”²⁶ Necessary to the execution of these courses was the presence of a “Human Body” to examine and dissect. Typically, the bodies on the dissection table had died by suicide or capital punishment. The moral norms of the period considered these people already sullied by virtue of the crime that led, directly or indirectly, to their deaths. Thus, the general population deemed their dissection morally inconsequential in comparison to those who died of other causes.

As interest in the health field grew, so did the demand for anatomical courses and thus anatomical subjects. As Shippen and his ilk quickly came to realize, though, bodies from acceptable sources were in short supply. Faced with the realization that the courses (and the six pistole-per-person fee that accompanied them, a cost of between about \$1,200 and \$1,800 today) could not continue without bodies, Shippen turned to body snatching as a new practice that could streamline the process of acquisition.²⁷ Defined as the “practice of illicitly disinterring or stealing corpses” from a gravesite, body snatching was a means through which anatomists could acquire bodies in bulk without having to wait or to go through established channels, for example, waiting for an execution to occur and then acquiring the body from the city prison.²⁸ Effective body snatching required a careful calculus: what burial sites were easily accessible? From where could bodies be taken without attracting notice or generating uproar? For Shippen and other medical professionals in Philadelphia, the answer was the potter’s field.²⁹

Body snatching by necessity targeted marginalized groups who were more susceptible to exploitation than their nonmarginalized counterparts; furthermore, it served as a means of exercising power over and contributing to the ongoing marginalization of these populations, crippling their ability to control bodies and space. The potter’s field served as an arena where the dead of marginalized people could be stolen. Public response to the practice of body snatching enforced this norm. In 1765, a group of sailors, suspecting Shippen of having “taken up” bodies from a churchyard, converged

as a mob at his home.³⁰ Publishing a defense in the *Pennsylvania Gazette* in response to the outcry, Shippen wrote:

It has given Dr. Shippen much Pain to hear, that notwithstanding all the Caution and Care he has taken, to preserve the utmost Decency in opening and dissecting dead Bodies, which he had persevered in, chiefly from the Motive of being useful to Mankind, some evil minded Persons, whither wantonly or maliciously, have reported to his Disadvantage, that he has taken up some Persons who were buried in the Church Burying Ground, which has distressed the Minds of some of his worthy Fellow Citizens. The Doctor, with much Pleasure, improves this Opportunity to declare, that the Report is absolutely false; and to assure them, that the Bodies he dissected, were either of Persons who had willfully murdered themselves, or were publicly executed, except now and then one from the Potters Field, whose Death was owing to some particular Disease; and that he never had one Body from the Church, or any other private Burial Place.³¹

This publication, which includes both the charge against Shippen and his defense, makes clear that the broader public considered the potter's field as a public site, fair game for body snatchers. In his lectures Shippen disavowed the idea that he used bodies from churchyards or other private burial sites. Instead, he claimed that he only dissected bodies from suicides, from executions, and "now and then," from the potter's field. Because he made this appeal in a public newspaper, Shippen clearly anticipated it having traction among those concerned with his actions, justifying his methods and assuaging their fears. Shippen took advantage of the fact that the dead buried in the potter's field existed in public land, over which family members had no control. In doing so, Shippen leveraged their lack of legal claim to the land to justify his involvement in the cadaver trade. The city college needed cadavers for anatomical lessons, his argument went, and so the bodies in the public potter's field were fair game.

The guarantee Shippen outlined is one that other medical professionals would echo over the years, frequently assuring the public that the bodies of their loved ones were not in danger of dissection. However, such reassurances were largely employed to appease white people concerned with the fate of their family members. In reality, medical professionals had few practical qualms about practicing anatomy on Philadelphians buried in the potter's

field, black and white alike. Though Shippen claimed that he only used bodies from the potter's field "whose Death was owing to some particular Disease," and it was true that individuals who died from rare diseases were particularly in demand, the reality was that "any body might be requisitioned, any graveyard quarried."³²

It is important to note that Shippen and other medical professionals in the period did not specifically or solely target black bodies in their quest to provide sufficient cadavers for dissection. However, the black community did bear a particular burden as the practice of body snatching gained traction in the Philadelphia area. The potter's field, though characterized at its core by its status as a burial site, was a multiuse space with a particular meaning to black residents of the city. Although this group did make use of their space within the potter's field, they lacked the formal power to protect the bodies buried beneath the soil, which left them particularly exposed to the threat of body snatching. Body snatchers reflected "a pervasive cultural system that identified manual laborers, petty tradesmen, the illiterate, [and the] 'unwashed' poor" in contrast to "the governmental apparatus, and church, social, and intellectual elite."³³ That dichotomy served to justify the mistreatment of the underclass in the name of the progress of scientific knowledge. The public status of the burial ground, rather than a specific racial motive, spurred on the practice of body snatching; therefore, white bodies as well as black bodies were co-opted from their resting places to fuel the cadaver trade.³⁴

This fact should not be taken to mean that the black community was not unduly affected by the practice; to accept such a reality uncritically is to overlook the racial dimensions inherent to the existence of the potter's field. Black burials there were in many ways distinct in character from the white burials there. Black people overall had few, if any, alternatives for interment, meaning that a disproportionate number of free and enslaved black people in Philadelphia were present among the graves. Furthermore, living members of the black community had an ongoing connection to the bodies of their relatives buried in potter's fields that the white community lacked. Unsurprisingly, then, the black community was outraged by the practice of body snatching, feeling that it targeted, perhaps not outwardly but implicitly, a group that already experienced exclusion from the opportunity to bury their dead in churchyards.³⁵

As such, they quickly sought to protest the practice, attempting to leverage legal petitions and independent policing to protect the dead in the potter's fields from body snatching. In 1782 six black men in Philadelphia,

James Oronoko Dexter (an activist and ex-slave), Jon Black, Samuel Saville, Cuff Douglass, Aram Prymus, and William Gray, submitted a petition to the state government to build a fence around the perimeter of the section of the potter's field used for black burials. Though the success of the petition, which "humbly craveth liberty to fence in the Negroes Burying ground in the Potters field," would not have granted them legal ownership of the land, it would have given them *de facto* legal permission to protect the bodies buried within the field from body snatching through the fortification of the perimeter of the space.³⁶ The proposed fence would have represented more than just a physical structure; it would have bounded this vernacular practice as a formal site, making a legally public space functionally private. It would have thus represented a social demarcation of the spatial dimensions of African American autonomy, as well as a statement against the practice of body snatching, which targeted and exploited black bodies because the public aspect of their burial site allowed it to do so. Finally, the creation of the fence would have served as a practical means of distinguishing the black section from the rest of the site. The city denied the petition.³⁷

The Free African Society, a benevolent society founded by prominent black Philadelphians, submitted another petition in 1790, this time to lease the segregated area of the potter's field and convert it into a proper black burial ground administered by the society. The petition, signed by the eight men that constituted the society's oversight committee, told of their desire "to have the said burial-ground under the care of the said Society, and [their willingness] to pay the same rent that hath been offered by any other person, and a year's advance as soon as the said ground is enclosed, and they are put in possession thereof." Like the 1782 petition eight years earlier, the Free African Society sought to work within the legal structures of the city to secure their right to administer the burial ground; also similar was their desire to formally enclose the lot, further emphasizing the idea of a wall or fence as both a physical barrier, a means of making private, and a social symbol of black authority over space. Unlike the 1782 petition, the proposal by the Free African Society also included an endorsement by white supporters of the Society:

We the subscribers having for some time past been acquainted with several of the members of the [Free African Society], do certify that we have informed ourselves of the rules and order established by the said society, and approve of their institution, and can therefore recommend the members thereof, as well as their humane design, to the

notice and attention of their fellow citizens, they being worthy of a degree of confidence and encouragement.³⁸

Signed by prominent white men such as Dr. Benjamin Rush, Reverend Samuel Magaw, political economist Tench Coxe, and Quaker activist and abolitionist William Savery, this endorsement reveals that there were white allies to the concept of black public health promotion, willing to support efforts to partition Congo Square. Despite this, the city also denied this petition.

These petitions illustrate not only the vested interest these black men had in protecting their dead and the land in which they were buried, but also their participation in a broader movement of urban improvement. The control of urban space and the control of bodies went hand in hand and yet these men did not solely attempt to control the ground but also to physically develop it to the standards of contemporary principles of social and urban improvement. The vestry minutes at Christ Church, for example, note several parallel efforts, both to erect a similar fence around the churchyard and, when the fence became dilapidated, “a brick or stone wall to go round and enclose in.”³⁹ Their efforts to meet the public health needs of their community went beyond mere utility. Instead, these individuals were leading a movement of urban improvement, both seeking to legitimize their own efforts to provide for and administer their section of the potter’s field and positioning themselves as valuable actors in the fabric of the developing city.

Stymied in their attempts to exert control through these legal petitions, the black community turned to independent policing—essentially vigilantism—to prevent the ever-present threat of body snatching. In doing so, they prevented body snatching and indicated their willingness to resort to extralegal means to provide for themselves when institutional pathways like legal petitions yielded no progress. A 1787 letter from William Shippen details both the lengths to which these individuals would go to protect their dead and their success in hampering those who would exploit them:

The negroes have determined to watch all who are buried in the Potters field—the young men [body snatchers] have been twice driven off by arms, once fired on and two wounded, with small shot, on Saturday night with the assistance of six invalids with muskets they beat off the negroes and obtained a corps[e]. I lodged it in the Theater. The resolute impertinent blacks broke open ye house stole ye subject and reburied it.⁴⁰

As described here, the African American community established a rotating guard tasked with keeping watch over the field and, when necessary, using force to prevent the exhuming of bodies or to retrieve a stolen corpse. These actions illustrate that, though they did initially turn to legal means in an attempt to control the land of the potter's field, they were not dissuaded by white proscription. Instead, when faced with the repeated violation of their spaces and their dead, they were willing to use violence to ensure that such exploitation did not continue, despite the risk of arrest, imprisonment, or worse. These successful efforts helped to defend the black community against body snatching, exercising control of the potter's field and over burials that they had long been denied. However, as the medical field continued to expand over the next several decades, body snatching and the question of how to protect against it would continue to be a concern for the community until the late 1800s.

THE FREE AFRICAN SOCIETY

Founded in 1787 by Richard Allen and Absalom Jones, the Free African Society was the first black benevolent organization in the city. From the beginning, its activities were oriented toward providing public health services to the black community. One such activity, as stated, was their 1790 petition to lease and enclose the black portion of the potter's field. Although denied, the petition's existence is nevertheless indicative of these men's understanding that care of the dead was a central part of their mission. Examining the actions of the Free African Society in the 1790s can provide insight into how its very character was tied to public health concerns. Furthermore, doing so can serve to contextualize the emergence of black churches, not solely as religious organizations but also as institutions designed to continue carrying out the public health efforts of their predecessors.

Although some scholars have characterized voluntary associations as merely black imitations of white benevolent societies, such a depiction ignores the unique circumstances from which groups like the Free African Society emerged. Historian Robert Harris Jr., in his discussion of early black benevolent societies, describes them as the linchpin of black community life. Emerging in the wave of civic organizations that sprung forth in the aftermath of the Revolution, the Free African Society sought to meet the "challenges of freedom" that confronted a community facing the possibility

of institution-building for the first time. Given the importance of the Free African Society as a voluntary association, then, it is particularly notable that so many of its early actions focused on addressing issues of public health, including “sickness and disability benefits, pensions for deceased members’ families, burial insurance, funeral direction, [and] cemetery plots.”⁴¹

With this public health focus in mind the Free African Society existed within a national and even a trans-Atlantic conversation concerning public health. This conversation originated in the earliest days of the city, with its disease and population influx, but had hit a crescendo by the 1780s. Shippen’s anatomical lectures were one such part of this international phenomenon and, despite the Free African Society’s opposition to his particular method, they, too, took part, conditioned by and yet distinct from the concerns of their white counterparts.⁴² This is particularly evident when examining the organization’s founding documents, which place an emphasis on the moral character of its members. Its preamble, for instance, specifically prohibited “drunkards or other disorderly persons from membership.”⁴³ Bound within its perceived responsibility to provide funds and support to its members was a moral imperative to ensure their good behavior and conduct. This imperative reflects a broader concern with morality that conditioned discussions of public health internationally in the period.

In *The Contagious City*, historian Simon Finger notes that generations of Philadelphians took part in a “positive program to promote collective well-being that was connected to broader political goals of polity, security, and economy.” Tracing the development of this program, Finger comes to focus in part on Pennsylvania Hospital, originally founded by Dr. Thomas Bond in 1755. As Finger argues, the hospital represented the way that Philadelphians combined public concerns with private gains to create a workable model of public healthcare that melded both sources of funding. Modeled in part on Britain’s voluntary hospitals, Pennsylvania Hospital was designed to address the public health needs of the city’s sick and dying while also connecting the city to the broader network of medical improvement developing globally.

Central to Finger’s argument is the idea that Pennsylvania Hospital *was* embroiled in this larger world of medical improvement. By following the British model of voluntary hospitals—private, nonprofit organizations that were neither publicly owned nor designed to generate a commercial profit—Pennsylvania Hospital departed from earlier charity models that already existed in the city. As stated, one vital public health need in the city, burial, had historically been met by a combination of private churchyards and the

public potter's field. To address other health needs, however, the city's "institutional landscape" also contained an almshouse, a quarantine lazaretto, hospital, workhouse, and jail. In adopting this new model of a hospital, the staff of Pennsylvania Hospital was able to institute a pragmatic system for the maintenance of public health. However, such pragmatism had its downsides, particularly when it came to the poor. Finger emphasizes that the primary beneficiaries of the hospitals' services were those poor people whose conditions were such that medical care could render them well enough to work, and who, given the opportunity, *would* work in order to repay their debts. Finger paints a stark picture of the reality of medical care at the hospital: "Medical benefactors [were] haunted by the specter of choosing the wrong objects for their largesse: those who would not fulfill the reciprocal obligations that came with the gift the hospital offered. That assistance was not a Christian obligation, but a contractual one, offered not to all of the poor but to the virtuous alone." The only way for the almshouse model to work was if patients could be counted on to pay their debts whenever possible.

The staff at Pennsylvania Hospital considered virtue an essential prerequisite for medical aid, in part because hospital benefactors needed clients who would be willing to work to pay back some measure of the cost incurred by their treatment. Though it may seem a cold calculus, the reality was that the previous almshouse model lacked the scale and the resources to provide effective healthcare to the entire city. However, the benefits associated with the voluntary hospital model also had their downsides, many of which played out in these very questions of virtue. Finger argues that Pennsylvania Hospital was intended to "instill in the poor patients a sense of obligation and subordination to their benefactors. . . . Similarly, the policy excluding most venereal cases as immoral suggests that the managers included among their tasks the promotion of a particular social order."⁴⁴

The Pennsylvania Hospital, then, served broadly to promote both public health, through a blend of private and public funding initiatives, and a schema in which the poor who received medical care knew their place in society. An initial comparison reveals the ways in which this model preempts the actions of the Free African Society, whose constitution clearly articulated the moral requirements of membership. Members were forbidden from drunk or disorderly conduct, and would only be given aid insofar as their circumstances were "not brought on them by their own imprudence."⁴⁵ Rather than being a purely charitable organization, the Free African Society, with its focus on sickness benefits, health and burial insurance, and funeral services

as well as its moral dimension, bears a certain similarity to the voluntary hospital model. Rather than take these cases as entirely analogous, however, it is instead helpful to consider the Free African Society as one part of a national and even trans-Atlantic network of institutions attempting to balance community care, costs, and social order as they conducted their services.

Though both Pennsylvania Hospital and the Free African Society shared certain commonalities, it is important to note that the position of each organization's leaders influenced how their respective forays into the promotion of particular social orders differed. As outlined, Pennsylvania Hospital, conceived by Thomas Bond at its foundation and supported by prominent white Philadelphia men like Thomas Stretch and Benjamin Franklin, was in part designed to uphold the existing social order. Poor recipients of medical care were made acutely aware of the generosity of donors and expected to pay back their debts wherever possible. When this proved impossible, managers turned to other sources of revenue, including charging medical students for access to the patients or permitting city dwellers to pay a small fine for the privilege of seeing the "lunaticks" kept within locked wards. In these ways, the administrators at Pennsylvania Hospital were forced to contend with the "impossibility of uncoupling medical decisions from the profoundly social context that surrounded them and the political implications that flowed from them."⁴⁶

Though the Free African Society doubtlessly encountered similar problems with regards to executing the goals of the organization against the backdrop of white hostility and institutional racism, their entry into the world of mutual aid and moral proscription did not carry with it the efforts to preserve the social order in precisely the same way. First, there is the fact of the deep religious beliefs both Allen and Jones held, which may have manifested in the society's preamble and constitution. Although it was an ostensibly secular society, historian Gary Nash argues that the strong religious beliefs of its founders and board led to the Free African Society being at least quasi-religious in character from its inception. Thus, the requirements for temperance and good moral behavior among members of the Free African Society may have stemmed from these religious values.⁴⁷ Second, Allen and Jones were elites within the black community, committed to what can be seen as the dual aims of the Free African Society: to help fulfill the needs of the black community and, by doing so, to legitimize the existence and efforts of the society itself. Given this reality, their efforts to ensure a certain moral standard among their members was in part a way of ensuring that the second aim of the benevolent society would remain intact.

Furthermore, Harris notes that a popular argument among proponents of slavery at the time was that free black residents were a drain on society, unable to support themselves and destined to end up in jail or the almshouse.⁴⁸ Pro-slavery groups employed this depiction of black dependency to minimize both the independence of the black community and erase slavery's own role in creating the conditions under which black residents needed charity. Furthermore, this narrative may also have served as a new way to control black bodies in an era when slavery was in decline and apprenticeship was becoming more common. Understanding this context puts the Free African Society's ban against untoward public conduct in a new light. Attempting to regulate public behavior may have been a way for the Free African Society to ensure that their efforts towards intracommunity support would not go to waste. By making mutual aid contingent on good behavior, the society attempted to prove that black members were not the drain on resources as they were so often characterized; instead, they were a group of responsible, dedicated, and enterprising citizens, working to better themselves and their community in spite of their difficulties. In doing so, they not only addressed the stigmas surrounding the free black community, but also materially lessened the public health burden on the city, doing so as active participants in the international sphere of health promotion during this time.

THE 1793 YELLOW FEVER EPIDEMIC

Perhaps the first and most significant testing ground for the Free African Society's ability to respond to public health needs—both inside the black community and outside it—was Philadelphia's 1793 yellow fever epidemic, which peaked between August and November of that year, leaving over 5,000 people dead and leading to the eventual closure in 1795 of the potter's field due to overcrowding. At the beginning of the outbreak, some medical professionals (including Benjamin Rush, a prominent abolitionist doctor who nevertheless prescribed to an environmental understanding of medicine that reasoned that race directly dictated one's susceptibility to various illnesses) believed that black people were immune or resistant to the illness. They were therefore particularly well suited to serve as nurses during the outbreak. Allen and Jones, along with many other black citizens, answered the call, serving as nurses for the vast population of the sick. The significance of this service is threefold. First, it emphasizes the Free African Society's commitment to combatting

this public health crisis. Second, it illustrates the connectedness of the society to broader conversations about public health. Third, and perhaps most important, it provided the arena for Jones and Allen to justify and defend the Free African Society as an institution, setting the stage for further institution-building within the black community in Philadelphia.

At first, black Philadelphians perhaps believed the rumors that they were truly immune from the disease; however, as time went on, it quickly became apparent that they contracted yellow fever at the same rate, if not a higher rate (due to increased exposure), than whites. They thus had, as one Philadelphian observed, ample reason to think that “the circulating report of their being incapable of taking the infection, was but a finesse or stratagem of the whites, to facilitate the attainment of their assistance.” This idea of reports of black immunity being a trap to garner more workers may have seemed particularly likely as the outbreak worsened, and medical officials in the city continued to advise that black “nurses and laborers” work in fever service despite increasing awareness that they were not resistant. Against the decades-long backdrop of hostility broadly and medical exploitation—body snatching and dissection specifically—it would hardly be out of the realm of possibility that white medical officials in the city had recommended black medical service as a “finesse or stratagem.” Though it is difficult to determine whether such a conspiracy has any basis in historical fact, reports of black immunity is nevertheless illustrative of the degree to which “scientific” racism invaded the medical field and led to widespread malpractice in the period. Despite the evidence that they did not have an innate immunity to yellow fever, black residents, Allen and Jones first among them, continued to serve as nurses in the aid of public health throughout the epidemic, indicating their commitment to combatting the worst of this public health crisis.

The heroism of the black community prompted a conflicted response among the broader public who saw the most vocal critics unjustly accusing them of greed and malpractice. These critiques, despite their callousness and inaccuracy, served as an opportunity for Allen and Jones to defend their actions, emphasize the morality and ability of the Free African Society, and legitimize the further creation of black institutions like churches in the coming years. Though many Philadelphians were grateful for the actions the black nurses took during the epidemic, others inundated them with “complaints of malfeasance, malice, and incompetence.”⁴⁹

The most notable critique came in the form of a best-selling pamphlet published by Mathew Carey in 1793. In it Carey accused black nurses of

exploiting the chaos and tragedy of the epidemic for their own financial gain, overcharging desperate patients when no other nurses could be found, and even stealing from the homes of the sick people they visited.⁵⁰ As historian Phillip Lapsansky notes, Carey's polemic reflected the familiar pro-slavery rhetoric of free blacks as immoral hangers-on. It characterizes the nurses as greedy and malicious in order to rebuke a group that had by every measure made significant sacrifices in order to serve the public during the outbreak. Especially striking is the fact that Carey otherwise committed to the cause of abolition. Despite his "seemingly impeccable anti-slavery credentials," Carey's virulent critique of black citizens' charitable action during the epidemic, like Rush's initial assertion that black people were immune to the effects of yellow fever (Carey also contended that blacks were safe from the disease), reveals the limits of white benevolence and alliance and underscores the complexity of the relationships between these groups.

In response to Carey's pamphlet, Allen and Jones published a response: *A Narrative of the Proceedings of the Black People, During the Late Awful Calamity in Philadelphia, In the Year 1793*. This served to emphasize the sacrifice black nurses made in caring for the fever-ridden sick, and to express the sense of the black population as a real community, with values that institutions like the Free African Society helped to enact. *A Narrative* represented the first published account of the free black community at work in the city, as well as the first "polemic" in which black community leaders sought to defend themselves, challenge an accuser, and create rhetorical space for themselves on the public stage.⁵¹

The defense offered by Allen and Jones was thorough, detailing a comprehensive account of the events of the epidemic and justifying their actions throughout: "Thus were our services extorted at the peril of our lives yet you accuse us of extorting a little money from you." Carey's critique was not only unfounded, they argued, but especially insensitive and callous given the great risk the black community had undertaken in order to save lives. The publication also emphasizes the keen sense of injustice felt by Allen, Jones, and their fellows, so sharply condemned in spite of the great efforts they underwent and risks they assumed by working in the fever service: "We feel ourselves sensibly aggrieved by the censorious epithets of many, who did not render the least assistance in the time of necessity, yet are liberal of their censure of us for the prices paid for our services." Allen and Jones thus called attention to the hypocrisy of those who would offer criticism without having provided any aid in the midst of the outbreak. They also emphasized

the responsibility the black nurses felt to help their suffering fellow citizens: “We found a freedom to go forth, confiding in him who can preserve in the midst of a burning fiery furnace, sensible that it was our duty to do all the good we could to our suffering fellow mortals.”⁵² Implicit in this statement is a rebuke against the whites in Carey’s camp, especially poignant given that the publication concludes with a letter urging white residents to “tear [their] hands from slaves.” The juxtaposition of the sacrifice and goodness of the black Philadelphians, who had risked life and limb to help their oppressors in a time of plague, and the white Philadelphians, ungrateful and complicit, drives home both the moral dimensions of the defense and the impermissibility and inhumanity of slavery.

A Narrative is a document that expresses years of experiences of exclusion, exploitation, and condemnation from white Philadelphians. From these experiences came an “intensified commitment to build the black organizations that helped integrate their rapidly growing population into a community.”⁵³ This document, then, illustrated the feeling of empowerment and the “intensified commitment” that may help to explain the growth of institutions, in particular, the black churches growing directly from the Free African Society and emerging in the following decades. In writing this publication, Allen and Jones did not merely defend themselves against the unjust charges raised by Carey; they were also taking a larger stand for the black community at a time where many aspects of the black effort toward independence were coming to a head. In 1793, when the epidemic struck, one black church was already in its nascent stages. In the aftermath, dozens more would emerge, drawing on the legitimacy established by the actions of the black community as they in general, and the Free African Society in particular faced a crisis that served as the test not only of their institutional strength but also of their commitment to public health.

CONCLUSION

From its inception, the black community in Philadelphia sought to “work collectively to secure a place of dignity and security in white American society.”⁵⁴ In the mid-1700s, this work was informed by the necessity of addressing public health needs in the city, as they related to burials and the status of black health and black bodies in life and death. Excluded from burials in white-run churchyards and unable to control the potter’s field except by

force, black residents were vulnerable to exploitation by doctors who sought to requisition the bodies of their dead in the name of medicine. Despite this institutional disempowerment, black Philadelphians nevertheless exercised agency in matters of public health, demonstrating their commitment to addressing community health needs, creating the platform for this commitment to be further institutionalized in the form of the Free African Society and black churches. Understanding the way that public health conditioned and catalyzed black community action in this period is necessary not only to understanding how these events unfolded, but also to contextualizing the emergence of black churches in the 1790s as inherently tied to these public health concerns.

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NOTES

This article is by the 2019 winner of the Pennsylvania Historical Association's William A. Pencak Award, Jubilee Marshall of Villanova University, and a senior there when she wrote this paper. Her history professor, Whitney Martinko, nominated her. It was part of her undergraduate History Capstone and Honors thesis. The 2019 Pencak Review Panel felt it merited the award as Ms. Marshall managed to tease new information out of existing primary sources such as church records and utilize cemetery information to make a powerful statement about race and health in Philadelphia. The Pencak Award carries a cash prize and recognition in this journal. We wish Ms. Marshall all the best in her future endeavors. This article also appears on the PHA website at: pa-history.org. For information on the 2020 Pencak Award, see the call for nominations elsewhere in this issue and on the PHA website.

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