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"Loving Mean:" How Systemic Racism Produces Dependence on Homeopathy in Toni Morrison's Home

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Abstract

This paper traces how homeopathy operates along the color line of the 1950s and 1960s among African-American communities, and about how these communities adopted a justifiable distrust of modern medicine, as evidenced in Toni Morrison's *Home*. Specifically, the study explores the background of medical maltreatment through Harriet Washington's *Medical Apartheid*, which maps the medical experimentation of African Americans in the United States since the antebellum period. The focus then shifts to the characters in Morrison's *Home*, particularly the women who treat Cee, the book's protagonist, homeopathically, and who condemn hospitals and conventional drug therapy. Morrison's term, "loving mean," is defined, and it is evidenced how this type of language operates in the clash between homeopathy and allopathy within the black community. French philosopher Michel Foucault provides valuable assistance in his discourse on the objectivity of the patient and, in contrast, how "loving mean" is subjective—the opposite of Foucault's "medical gaze." Where homeopathy is not necessarily better than modern medicine, it is viewed as the solution derived from unrelenting racism, pathologization, and sexualization of the black female body through eugenics. It is argued that self-preservation and the dark history of medical experimentation upon black communities produces homeopathic values among African Americans and works to distance them from embracing modern medicine. The conclusion discusses the continued and systemic racism still prevalent in hospitals and modern allopathy.

Introduction

The scientific advancements of the modern age are built upon a foundation of medical abuse and experimentation on African-Americans. The systemic racism that has ultimately pushed medical progression and the support of allopathy forward is the same systemic racism that has kept (and continues to keep) the African American community from trusting modern medicine, and led them to embrace nonscientific, homeopathic remedies to cure ailments. It is no secret that early medicinal development almost exclusively benefitted white Americans since its origin, but because American medicine has framework so deeply embedded in African-American exploitation, American allopathy almost exclusively operates on the color line that draws a divide between African-American communities and modern medicine.

From this distrust arose an aggressively oppositional force—homeopathic practices within the African-American community as a response to the distrust of mainstream healthcare. Homeopathy, for the sake of simplicity, can be perceived as the opposite of allopathy. Allopathy

seeks to cure an individual's ailments and symptoms through conventional drugs and medicine that zone in on and counter one's specific illness. Homeopathy, however, operates on the idea that "like is cured by like" and that "diseases can be treated by substances that produce the same signs and symptoms in a healthy individual" (Shang et. al, 2005). Where allopathy focuses on the symptom, homeopathy views the body and mind holistically. African-American homeopathic communities are often overlooked in literary criticism and racial studies because mainstream history tends to be taught linearly. Only in recent years has the medical exploitation of African Americans come to light through evidence beyond the Tuskegee Syphilis study in the mid-20th century, which, when isolated as a single experimental barbarity, discredits the centuries of deeply rooted systemic racism that has given rise to a modern distrust of allopathy and the embrace of homeopathy among black communities (Washington, 2006, p. 7). The eugenics movement as well as general feelings of white superiority resulted in historical atrocities such as the involuntary sterilizations—"Mississippi appendectomies"—happening as late as 1961 (Washington, 2006, p. 190) and the aforementioned Tuskegee Syphilis study, among others. Medical racism is multifaceted and should be approached from more than just the clinical perspective to be fully understood. Toni Morrison's 2013 novel *Home* presents the reader with a fictional but very real portrayal of the lingering end of the eugenics movement and the role homeopathy plays in rejecting modern allopathic medicine.

Only a few scholars have discussed the subject of the injustice of modern medicine in *Home*, although the dark history of African-American medical experimentation is trending as a topic in both mainstream and scholarly literature. Maxine Montgomery (2015) briefly mentions both Cee and Frank's experiences with medical racism in *Home*, in her critical piece about the significance of symbolic specters in the text, and how the abuse both characters suffer alludes to

historical tragedies. However, the topics of healing and alternative forms of medicine remain untouched.

That said, *Home* gives evidence to the implicit and explicit racism that existed in 1950s and 60s America and how homeopathy operates along this color line in the African-American community. *Home* traces the story of Frank Money, Korean War veteran, who wakes up in a psychiatric hospital robbed blind and shoeless, and his young, naïve sister Ycidra “Cee” Money, whose body is subjected and reduced to a medical experiment by her employer—an atrocity that ultimately destroys any chances of her having children. She is saved from her near death first by Frank and then by a group of women from Lotus, her hometown, who live by a set of conservative philosophies and values that embrace comfortable homeopathy over the white walls and clinical gaze of a hospital room—an idea put forth by Michel Foucault’s *Birth of the Clinic*—even if their home remedies may not always be effaceable or scientifically sound. The values of this homeopathic community of women are the result of traditions and attitudes passed down as a means of protection from the horrors of medical malpractice, dating back to slave-era abuse. Self-preservation from the dark history of medical experimentation is seen to produce homeopathic values among the black community, such as the one portrayed in *Home*, and is seen to distance African Americans from embracing modern medicine.

In another article, Montgomery (2012) examines Cee’s life among the women who heal her—women who, through simplicity, altruism, and homeopathy, make Cee a whole person again after she survives Dr. Beauregard Scott’s botchy eugenics experiments. She adapts herself to the communal, agrarian lifestyle of these women and finds comfort in the culture she tried to push away for so long (p. 331). Although Montgomery highlights the importance of homeopathy in Cee’s ultimate feeling of completeness, the subject is not elaborated on, and instead, she tends to

focus on Cee and Frank's spiritual healing and wholeness that results in both characters returning to their hometown.

This essay explores how homeopathic African-American communities operate in the cultural narrative of systemic racism and the rise of modern medicine in the 1950s and -60s. First, this paper traces the African-American mistrust of allopathy, briefly from its origins in medical abuse for the progression and advancement of medical procedures (mainly for the benefit of the white population), to concealed neglect African Americans are subjected to within the U.S. healthcare system from the 1950s and -60s. Next, this paper defines homeopathy in terms of the women in Morrison's *Home* and how they heal Cee by providing her with the physical and spiritual support that the racist medical system did not. Finally, it provides a close analysis of Morrison's term, "loving mean," and how that type of language operates among the women who heal Cee, as well as how the term clashes with Michel Foucault's discourse in *Birth of the Clinic*.

The Roots and Groundwork of African-American Medical Abuse

Much of the literature produced about African-American medical abuse stems from a recent cultural shift, because much of any past presentation of medical racism has been considerably overlooked. Furthermore, any mention of this type of medical malpractice has been, until now, deemed "episodic" because history has presented it as an experimental anomaly rather than the norm (Washington, 2006). Moreover, medical history is almost exclusively written by medical professionals themselves, who speak from a privileged, institutionalized point of view. The other side of medical advancement—the side of the abused victim—has traditionally been in the form of oral histories. The unequal distribution of power between the doctor and the black patient has resulted in almost complete obliteration and disregard of African-American oral

histories, causing their repression in both medical literature and popular literature until recently (p. 9). Harriet Washington, author of *Medical Apartheid* (2006), recalls Churchill's warning that "history is written by the victors," as well as a Nigerian proverb that cautions "don't let the lion tell the giraffe's story" (p. 8). Medical abuse at the hands of white doctors has been stifled by the weight of injustice—in the days of the antebellum south, for example, slaves were forbidden to learn to read (p. 10), so they relied heavily on oral tradition to preserve their history, which, unfortunately, led to a Western literary bias against it (p. 9).

Take the case of Dr. James Marion Sims. He is remembered by history as a brilliant, renowned doctor as well as the father of modern gynecology. Once the president of the American Medical Association, he also opened the very first women's hospital and has many medical centers named after him today (Washington, 2006). His achievements almost overshadow the dark, gruesome means that helped get him there. What historians leave out of discourse about Sims is his inconceivably horrific abuse of female slaves. Without administering any anesthesia, for example, Sims would perform experimental surgeries on women as they were forcibly held down, sometimes by fellow slaves if the other male doctors in the room fled the scene when they could not bear to watch anymore (p. 2). More broadly, Sims and his contemporaries would purchase slaves solely for the purpose of medical experimentation. Sims' slaves served as the subjects for most of his early medical texts, which, if proved successful, remained credulous and undisputed (p. 55-57). When he moved to New York in the early 1850s and founded the New York Women's Hospital, Sims depicted all the women in his writings as white, and kept the real identities of his subjects a secret (p. 67).

In addition to medical experimentation, medical neglect and malpractice also holds its origins in the US slave era. The antebellum south was breeding ground for all types of pathogens:

hookworm, yellow fever, and numerous strains of malaria came from all parts of North America, Europe, and Africa (Washington, 2006 p. 7). The introduction of these pathogens combined with primitive medical treatment meant that early types of medical care involved techniques such as purging (e.g. vomiting and diarrhea, the violent release of bodily fluids from consuming poisons, such as arsenic and mercury) or bloodletting. While both blacks and whites were subjected to this type of technologically disadvantageous treatment, African-American slaves suffered the consequences at a much higher rate. The level of medical disparity was further evidenced by the fact that white slave owners were in better health than their slaves because they had access to better nutrition, better living conditions, and were obviously not overworked, which gave them time to heal (Washington, 2006, p. 29).

Furthermore, even after slavery was outlawed in the United States, systemic oppression and racism that disadvantaged African Americans kept them from seeking medical treatment even if they wanted to, because most could not afford it (Wasserman, Flannery, Clair, 2007 p. 178). Segregation from the end of the Civil War to the mid-1960s made it even harder for African Americans to access quality allopathic healthcare because black hospitals, such as Provident Hospital, the first black hospital opened in Chicago in 1893, were severely lacking in funding (Washington p. 156). All but two of these hospitals shut down by 1924. The alternative—getting free medical care at a primarily white teaching or university hospital—meant they would be subjected to demonstrative procedures and potential medical abuse or malpractice (Wasserman, Flannery, & Clair, 2007).

Even community programs, which were seemingly created for African-American assistance, existed for the benefit of the eugenics movement. For example, Margaret Sanger, known to history as the women crusader who fought for reproductive rights and opened the first

Planned Parenthood in 1916, was a huge proponent of eugenics. Sanger pushed for the legalization of birth control mainly to provide poor women, and by extension, black women, a low-cost contraceptive option that would slow down African-American birth rates in the United States (Washington, 2006, p. 195-198). Even safe spaces where black women were supposed to get better health care were problematic. It is evident that black Americans had historically been disadvantaged from all sides.

These disadvantages, along with exploitation and humiliation, discouraged and continue to discourage African Americans from seeking healthcare in the allopathic system. Systemic racism in American healthcare systems, then, produced distrust in allopathy, and pressed African Americans to embrace a form of alternative medicine, one that fosters a greater sense of community and heals through compassionate and personal means. Homeopathy, specifically in Morrison's *Home*, personifies this ideology.

The Shift to Alternative Healing

'Misery don't call ahead. That's why you have to stay awake—otherwise it just walks on in your door' (Morrison, 2013, p. 122).

Home tells the story of Frank Money, who, through a series of letters, finds that his sister has been working for a doctor with a questionable ideology. He journeys to Dr. Scott's residence to find Cee in a mutilated, critical state due to Scott's medical experimentation. He takes Cee back to Lotus, to a group of women who live communally and abide by a strict set of values. The women who treat Cee take her healing very seriously and personally, because each of them had their own stories to tell of the hardships they endured under the white-dominated medical system. These women, like Miss Ethel, who is presumed to be at the center of the homeopathic community,

follow a strict, conservative lifestyle that is somewhat outdated in its values, even by the standards of the 1960s. For example, the women knit together. They work in the gardens together. They pray together. They heal Cee together, and they also reject hospitals and doctors together. The homeopathic, tight-knit group of frigid women that modern medicine has neglected is most evident in the tactics they use to cure Cee, as well as the dialogue Morrison includes to reveal their attitudes toward allopathy.

First, there is the practice of bloodletting to stop Cee's bleeding. Then, drinking an herbal remedy to fight the infection and fever. Finally, there is the "repair" that involves Cee sitting naked with her legs open to the sun, because "the burning is the healing" (Morrison, 2013 p. 121). While their methods and techniques leave nothing to the reader's imagination about Cee's suffering and humiliation during the homeopathic healing process, the women believe what Cee allowed herself to be put through is much worse; further, it reinforces and feeds into the inequality of power between the white doctor and the black patient (specifically the black female patient). The women's general attitudes toward doctors and hospital-sanctioned treatment reinforces the idea of implicit and explicit racism that has surrounded allopathic medicine.

As soon as Cee's fever subsides, she recounts to the women what happened to her at the doctor's house. Following her confession, she is met with verbal abuse and disdain—the women cannot understand how she could have been so naïve to believe that a doctor could be trusted—and, Morrison writes, "[N]othing made them change their minds about the medical industry" (Morrison, 2013, p. 122). When Cee asks how she could have possibly known that Dr. Scott was abusing his power over her, one of the women replies, "[M]isery don't call ahead. That's why you have to stay awake—otherwise it just walks on in your door" (p. 122). With this, the woman recalls the grueling history of resistance against the brutality of institutionalized medical racism. She

scolds Cee for not knowing the well-known—to the medical industry, whether it is for a doctor working for a hospital or a dishonest, abusive man like Dr. Scott, white medicine always comes at a heavy price for African Americans. The woman tells Cee she needs to “stay awake” and understand that no matter how nice anyone is to her, the medical industry will never operate in her favor, and that it does not exist for her benefit. Cee, like all African-American women in the 1960s, must stay awake and push against the abuse for the sake of self-preservation.

Although by the 1950s and 1960s, the eugenics movement against the African-American community had slowed down significantly, doctors like the fictional Dr. Scott did not let it die altogether. While he is an extreme example of medical malpractice, other medical professionals overtly discriminated against African Americans in the field. Instances of these are sprinkled throughout the novel—Frank, for example, wakes up in a mental asylum with all his money gone, and Lenore (Frank and Cee’s stepmother) overtly states that only street women and prostitutes would give birth in a hospital. After decades of this type of oppression, the hospital remains a place where black people go to die, and where allopathy only speeds up the process. Perhaps the women ridiculed Cee relentlessly not only because they viewed her tears of pain as a waste of time, but also because she had turned her back on her cultural roots and chose the side of allopathic medicine, which ultimately led to her irreversible infertility. It was not considered scientifically sound even in the 1960s, yet women like the ones who treated Cee refused to jump on the bandwagon of modern medicine. This distrust of allopathy was so strong at that point, any visitation to a hospital (such as when Lenore mentions childbirth) was considered a taboo and disgraceful. The conservative cling to homeopathy that sprung from institutionalized racism, then, created an atmosphere that not only centered around serious work ethic and full body and mind recovery, but also the disdain for white doctors and hospitals that, at the very least, neglected the

black community's well-being, and, at its worst, tortured victims like Cee for pseudoscientific progress.

“Loving Mean:” Holistic Healing versus the Medical Gaze

Cee was different. Two months surrounded by country women who loved mean had changed her. The women handled sickness as through it were an affront, an illegal, invading braggart who needed whipping. They didn't waste their time or the patient's with sympathy and they met the tears of the suffering with resigned contempt. (Morrison, 2013, p. 121).

Morrison depicts the healer women who cure Cee as the women who “loved mean.” This is significant in that the phrase is an oxymoron—separately, they are opposites—yet they work together to produce an image that exemplifies the homeopathic dialogue in the black community. To ‘love mean’ suggests a kind of compassion that is followed by a lesson, and the women who loved Cee mean teach her the lesson that heals her both physically and mentally, even though the methods employed may be questionable. The women ridicule Cee relentlessly for getting involved with Dr. Scott, and they ridicule her when she refuses to open her legs to the sun in her final stage of recovery. Yet they refuse to give up on treating her, and, as a collective, they focus all their energy on healing her from the inside out. The women did not care for Cee's cries, and they treated her sickness as an unwanted intruder that needed to be flushed out with the same ailments it arrived with, as is traditional in the world of homeopathy. Even though the women “whipped” the sickness away violently, through everything, they never forgot that Cee was a human girl who needed the emotional trauma as well as the physical trauma expelled from her body. The homeopathic appeal lies in its subjectivity and humanness; allopathy does not spare room for humanization and

compassion. Where homeopathy centers around the patient with the illness, allopathy focuses solely on the illness living inside the patient. It is important to note that the language surrounding homeopathy and allopathy plays a large role in the objective or subjective assessment of the patient. French philosopher Michel Foucault breaks down this medical objectivity and epistemology in his work, *The Birth of the Clinic*, first published in 1963.

Foucault's discourse emerged from the French shift in medical perspective from examining the disease as separate condition to the perspective of the patient and the disease as a holistic system, between 1770 and 1850. French doctors began to connect the body more closely to the disease—rather than studying the disease itself—which gave rise to modern pathology. Foucault focuses mainly on the epistemology of medical writings and how the change, in both text and practice, altered the way medical science treated patients (Oldman, 1975). Foucault's notion of the medical gaze (Foucault, 1975), or the perspective through which the medical practitioner diagnoses and treats his patient, provides some insight into the racial imbalance and rise of empirical medicinal practices. The medical gaze symbolizes the dehumanization of the patient, reducing her to a body with a sickness that can be healed and studied through isolation and manipulation. Foucault argues that scientific advancement in the medical field focuses strictly on what is objective and observable, and that “the gaze is passively linked to the primary passivity that dedicates it to the endless task of absorbing experience in its entirety, and of mastering it” (p. 15). To Foucault, gaze made one the center of attention—a living being different from the shapes in the background. But when the gaze is on the subject, he or she becomes recognizable as a human with human body parts, one that serves to “stand out against a background of objectivity” (p. 15). This medical perspective gives the patient a backseat to treatment, and the treatment or cure for the illness is only incidental to the observation.

This type of objectivity that Foucault proposes about modern medicine opposes Morrison's language of "loving mean." Homeopathy, as she exemplifies through the Lotus women, is subjective and humanizing. Each of the women in the novel are said to have their own unique methods to heal the body, and each do what they know to improve Cee's condition. The women recognize her as a person and not only heal her body, but heal her broken spirit as well. Once her body recovers, Cee's restlessness subsides and she chooses to live—finally at peace with herself and with the direction of her life—in her hometown of Lotus.

Allopathy, in turn, is rejected. The women and Cee choose a more unreliable technique to heal the body rather than subjecting themselves to dehumanization, the objectifying medical gaze, and the overt inequality of the healthcare system that is so deeply rooted within the groundwork of modernized allopathic medicine.

A Broken System, Yet to Fully Recover

Homeopathy is still revered as a viable option for healthcare as a result of centuries of abuse at the hands of the allopathic system. Homeopathic values are not an idea left in the past, and heavy racial disparities in hospitals are still very prevalent. Presently, white women are more likely to receive more direct beneficial care, and the inequity burden, in turn, falls heaviest on African-American mothers. A survey conducted between 1999 and 2002 collected information from 50,974 women across the United States who had cesarean section deliveries (Butwick et. al, 2016) and found that black women are statistically more likely to be administered a general anesthetic, as opposed to the preferred neuraxial anesthetic. Previous clinical studies have shown that the maternal mortality rate decreases by half when the mother is administered the neuraxial anesthetic because it lowers chance of infection and any postpartum hemorrhaging (2016). In

addition, African-American maternal mortality rates were found to be four times higher than the average among white women, and African-American women are more likely to die anesthesia-related deaths than white women (2016). The study does little to explain for these disparities, and claims that the etiology of this correlation is “unclear.”

In *Medical Apartheid* (2006), Washington recalls a chilling conversation with an African-American ward clerk in the nephrology unit of the hospital she worked at, who looked at her with skepticism and said, “Girl, black people don’t get organs; they give organs” (p. 15). The woman, a long-time hospital employee who was informed and educated on hospital protocol, admitted to Washington that she would never get a procedure done at that hospital because, to the doctors, “[I]f you’re black and poor, you’re nothing but a guinea pig” (p. 15). While Washington knew that this speculation about the hospital in the 21st century may have been more than a little exaggerated, she saw that the fundamental attribution given to the hospital as a place where African Americans go to die continues to be a ruminating pattern among the community, and the only way to improve relations between African Americans and the dominantly white medical community is to stop denying the existence of systemic medical racism.

Despite efforts to eradicate injustice in the allopathic system, homeopathy continues to be prevalent among the African-American community in the United States. African Americans tend to seek less medical care than whites and are far less likely to participate in medical research than any other ethnic group in the U.S. (Washington, 2006). Washington, like the woman in Morrison’s novel, asks African Americans to “stay awake” and be wary of current medical research and abuses, but to also embrace medical research to push back against the static ideology of the “sickly enfranchised blacks and those of healthy, long-lived whites” (p. 387). As a nation, we have come a long way since the horrific James Marion Sims experimentation on African-American women,

but we still have miles to go to uproot and break down the systemic racism on which allopathy is built and homeopathy rejects (Washington, 2006).

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