Introduction

The 1619 Project, inaugurated with a special issue of The New York Times Magazine, challenges us to reframe U.S. history by marking the year when the first enslaved Africans arrived on Virginia soil as its foundational date.

The United States Public Health Service begins the Tuskegee Study of Untreated Syphilis in the Negro Male, with 600 subjects, approximately two-thirds of whom have syphilis. The subjects are told only that they are being treated for “bad blood.” Approximately 100 die from the disease. It is later revealed that for research purposes, the men were denied drugs that could have saved them.

In the selection by Yaa Gyasi, the author uses several literary techniques to advance the central idea of the long term psychological and societal ramifications of medical experiments such as the Tuskegee Study on the attitudes and fears of African American toward doctors, health care, and the medical field. After completing the lesson introduction, teachers can choose to do activity 1 or 2 based on which they feel would be more beneficial for their students.

Standards

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<tr>
<th>Standard(s)</th>
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<tr>
<td><strong>RL.1</strong> Cite strong and thorough textual evidence to support analysis of what the text says explicitly as well as inferences drawn from the text, including determining where the text leaves matters uncertain.</td>
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<td><strong>RL.2</strong> Determine two or more themes or central ideas of a text and analyze their development over the course of the text, including how they interact and build on one another to produce a complex account; provide an objective summary of the text.</td>
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<td><strong>RL.3</strong> Analyze the impact of the author’s choices regarding how to develop and relate elements of a story or drama (e.g., where a story is set, how the action is ordered, how the characters are introduced and developed).</td>
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<td><strong>RL.4</strong> Determine the meaning of words and phrases as they are used in the text, including figurative and connotative meanings; analyze the impact of specific word choices on meaning and tone.</td>
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<td><strong>RL.5</strong> Analyze how an author’s choices concerning how to structure specific parts of a text (e.g., the choice of where to begin or end a story, the choice to provide a comedic or tragic resolution) contribute to its overall structure and meaning.</td>
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### Student-Facing Agenda

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<tr>
<th>Standards &amp; Text:</th>
<th>% of Lesson</th>
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<tr>
<td>• Standards: RL.1, RL.2, RL.3, RL.4, RL.5</td>
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<td>• Text: “Tuskegee Syphilis Experiment” by Yaa Gyasi (at end of this document) or on p. 68 of the <a href="https://www.1619project.org/texts/tuskegee-syphilis-experiment">1619 Project Full Text</a></td>
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### Learning Sequence:

1. Introduction of Lesson Agenda
2. Activity Idea 1 OR
3. Activity Idea 2 OR
4. Activity Idea 3

### Materials

Text: “Tuskegee Syphilis Experiment” by Yaa Gyasi

### Learning Sequence

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<tr>
<th>How to Use the Learning Sequence</th>
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<td><strong>Symbol</strong></td>
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### Introduction of Lesson Agenda

- Review standards RL.1, RL.2, RL.3, RL.4, and RL.5.
- Hand out the text, “Tuskegee Syphilis Experiment” by Yaa Gyasi. (found at end of this document) or on p. 68 of the [1619 Project Full Text](https://www.1619project.org/texts/tuskegee-syphilis-experiment)
- Read and discuss the introduction to the text from the 1619 Project:

  **1932: The United States Public Health Service begins the Tuskegee Study of Untreated Syphilis in the Negro Male, with 600 subjects, approximately two-thirds of whom have syphilis. The subjects are told only that they are being treated for “bad blood.” Approximately 100 die from the disease. It is later revealed that for research purposes, the men were denied drugs that could have saved them.**
Do Activity 1 OR 2

Activity 1: Reading and Discussion Idea 1

Read the text aloud or in groups. Discuss questions below. Possibly assign students questions using Jigsaw Protocol.

Introduce vocabulary. (Based on class, determine the vocabulary to be used).

- What words and phrases stand out, and why?
- What emotional reactions do you have, and why?
- How does the author use form and language to communicate a point of view?
- What is the overall tone of the text? How does the author create that tone?
- How does the author’s word choice contribute to the text’s sense of time and place?
- What is the cumulative impact of the author’s specific word choices on the text’s tone?
- What is the cumulative impact of the author’s specific word choices on the text’s meaning?

Activity 2: Reading and Discussion Idea 2

1. What words in paragraphs 1-4 help illustrate the mother’s state of mind in the story?

   In the first paragraph, the mother’s frantic upset is vividly shown through the author’s use of words such as, “snatched,” “rushing,” “scrubbed,” and “crying.”

   The allusion to her past bouts of hypochondria in the fourth paragraph shows that she has been emotionally frail in the past, and now the birth of her son has made her more fearful as she tries to protect him.

2. Read the last sentence of paragraph 7.

   “She knew that the doctor would just tell her to trust him, but she also knew that when the worst happens in this country, it often happens to them.”

   How is the author’s cultural experience reflected in this sentence?

   The mother’s fears are based on the historical malpractice of doctors dealing with black Americans. She remembers growing up in Alabama and hearing about the wrongs perpetrated on black male patients through the Tuskegee Study.
3. **How does the author use creative writing to address historical events?**

The author uses creative writing to discuss the Black community’s lingering feelings of distrust and resentment for the medical establishment, engendered because of discrimination and malpractice. She uses the main character’s memories of growing up in Alabama to detail the horrific treatment of black, male patients who were part of the Tuskegee Study. These memories likely helped shape the character’s current state of mind and fear for her son’s health.

4. **In paragraph 8, what is meant by the phrase “Bad blood begets bad blood?” How does this phrase from the text best state the central idea of this piece?**

The phrase refers to both the tainted blood caused by the syphilis and also the fear and distrust that the black patients came to feel for the medical establishment. The “bad blood” was a catchall term used to describe syphilis and other blood borne diseases from which people suffered. When patients went to Tuskegee thinking they were getting free health care, they instead suffered as the doctors denied them medicine in order to observe the stages of the disease. The treatment of this literal “bad blood” is also a figurative cause (“begets”) of the distrust (“bad blood”) born of the doctors’ actions. The phrase echoes the central theme of the piece as it creates an image of both the sickness and the Black community’s distrust of doctors.
1932: The United States Public Health Service begins the Tuskegee Study of Untreated Syphilis in the Negro Male, with 600 subjects, approximately two-thirds of whom have syphilis. The subjects are told only that they are being treated for “bad blood.” Approximately 100 die from the disease. It is later revealed that for research purposes, the men were denied drugs that could have saved them.

Upon closer inspection, the leaf her 2-year-old was attempting to put in his mouth in the middle of the playground on that lovely fall day was in fact a used tampon. She snatched it from him and pursed both of their hands before rushing them back to their apartment on Dean. She put him in the bath and scrubbed, and by the time her husband found them, they were both crying.

“We have to leave New York,” she said after he put the baby to bed.

“Let’s move back home.”

“There are tampons in Alabama,” he said, and then, “What’s the worst that could happen?”

It was the question they’d played out since graduate school, when her hypochondria had been all-consuming. Back then, chasing into her fears, describing them, had given her some comfort, but then they had Booker and suddenly the worst looked so much worse.

“The could get an S.T.D., and then we’d be the black parents at the hospital with a baby with an S.T.D., and the pediatricians would call social services, and they would take him away, and we’d end up in jail.”

“OK,” he said slowly. “That would be bad, but it’s statistically very, very unlikely. Would it make you feel better if we called the doctor?”

She shook her head. Her husband only used the word “statistically” when he wanted to avoid using the words “you’re crazy.” She knew that the doctor would just tell her to trust him, but she also knew that when the worst happens in this country, it often happens to them.

She comes by her hypochondria and iatrophobia honestly. When she was growing up in Alabama, people still talked about their grandparents, fathers and brothers who had died of bad blood. That was the catchall term for syphilis, anemia and just about anything that ailed you. The 600 men who were enrolled in the Tuskegee Study were told they’d get free medical care. Instead, from 1932 to 1972, researchers watched as the men developed lesions on their mouths and genitals. Watched as their lymph nodes swelled, as their hair fell out. Watched as the disease moved into its final stage, leaving the men blind and demented, leaving them to die.

All this while they knew a simple penicillin shot would cure them. All this because they wanted to see what would happen. For years afterward, her grandmother refused to go to the hospital. Even at 89, perpetually hunched over in the hues of an endless cough, she’d repeat, “Anything but the doctor.” Bad blood begets bad blood.

She’s more trusting than her grandmother, but she still has her moments. Like many women, she was nervous about giving birth. All the more so because she was doing it in New York City, where black women are 3 times as likely to die in childbirth as white women. And in that very statistic, the ineluctable impression of Tuskegee. The lingering, niggling feeling that she is never fully safe in a country where doctors and researchers had no qualms about watching dozens of black men die—slowly, brutally—simply because they could. When she held Booker in her arms for the first time and saw her grandmother’s nose on his perfect face, love and fear rose up in her. “What’s the worst that could happen?” her husband asks, and she can’t speak it—the worst. Instead, she tries to turn off the little voice in her head, the one that wants to know: How exactly do you cure bad blood?

By Yaa Gyasi