HISTORICAL PERSPECTIVES

First African-American to hold a medical degree: brief history of James McCune Smith, abolitionist, educator, and physician

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Submitted 22 June 2018; accepted in final form 11 February 2019

Lujan HL, DiCarlo SE. First African-American to hold a medical degree: brief history of James McCune Smith, abolitionist, educator, and physician. Adv Physiol Educ 43: 134–139, 2019; doi:10.1152/advan.00119.2018.—Dr. James McCune Smith, the first African-American to obtain a medical degree, has a remarkable legacy of historical proportions, yet his immense impact on society remains relatively unknown. He may be most celebrated for his effectiveness in abolitionist politics, however, his pioneering influence in medicine is equally remarkable. As examples, McCune Smith pioneered the use of medically based statistics to challenge the notion of African-American racial inferiority. He scientifically challenged the racial theories promoted in Thomas Jefferson’s Notes on the State of Virginia (Jefferson T., 1832), and he was a harsh critic of phrenology (study of the shape and size of the cranium as a supposed indication of character and mental abilities). Furthermore, notwithstanding being denied entry to America’s universities and medical societies because of his race, McCune Smith became a giving physician to orphans, an accomplished statistician, medical author, and social activist who worked to end slavery. His pioneering work debunked doubts about the ability of African-Americans to transition into free society. Specifically, he used his training in medicine and statistics to refute the arguments of slave owners and prominent thought leaders that African-Americans were inferior and that slaves were better off than free African-Americans or white urban laborers. Frederick Douglass, narrator of the Anti-Slavery Movement, cited Dr. James McCune Smith as the single most important influence on his life. Dr. McCune Smith, along with Frederick Douglass, Gerrit Smith, John Brown and other intellectual pioneers of the time, was instrumental in making the elimination of slavery possible.

African Free School; anti-slavery movement; colored orphan asylum; Frederick Douglass; University of Glasgow

INTRODUCTION

No man in this country more thoroughly understands the whole struggle between freedom and slavery, than does Dr. Smith, and his heart is as broad as his understanding.

Frederick Douglass, Douglass’ Monthly (15)

James McCune Smith (1813–1865) (Fig. 1) was the first African-American to obtain a medical degree, and the medical profession was McCune Smith’s intellectual proving ground. He ran a medical practice and pharmacy in New York City, treating both white and black patients and served as chief physician at the New York City Colored Orphan Asylum. McCune Smith was an abolitionist, educator, and physician. He, in collaboration with Harvard-educated physician and statistician Edward Jarvis, pioneered the use of medically based statistics to refute notions of African-American inferiority, and he exposed scientific flaws in the racially biased U.S. Census of 1840. His work sharply challenged racist views about the ability of African-Americans to transition into free society, and he refuted arguments that slaves were better off than free African-Americans or white urban laborers. McCune Smith’s statistical analysis clearly established that there were greater physical and mental differences within a race than between the races (58). He also edited several black abolitionist newspapers, including The Colored American and The Anglo-African Magazine, and was the New York correspondent for Frederick Douglass’ Papers. McCune Smith, along with Frederick Douglass, Gerrit Smith, John Brown, and other intellectual pioneers of the time, was instrumental in making the elimination of slavery possible. In fact, Frederick Douglass, narrator of the Anti-Slavery Movement, cited Dr. James McCune Smith as the single most important influence on his life, and McCune Smith authored the introduction to Frederick Douglass’ influential text My Bondage and My Freedom (16, 17).

Early Years

I advance it, therefore, as a suspicion only, that the blacks, whether originally a distinct race, or made distinct by time and circumstances, are inferior to the whites in the endowments both of body and mind.

Thomas Jefferson, Notes on the State of Virginia (23, 25)

The view of humanity that allowed for slavery is difficult to comprehend in our time. Yet consider that James McCune Smith was born when people could be owned like goods and property. McCune Smith was born a slave on April 18, 1813, the son of a “self-emancipated bond-woman” (17). Before his birth, in 1799, New York passed a Gradual Emancipation act that freed slave children born after July 4, 1799 but indentured them until they were young adults. Thus McCune Smith lived “free” in New York City (children of slave mothers were born free but had to serve an indenture until early adulthood). The Emancipation Act of New York freed all slaves on July 4, 1827.

His mother, believed to be Lavinia Smith, achieved her freedom later in life. His father, thought to be Samuel Smith, was a white merchant and his mother’s master (1, 29, 34). McCune Smith’s father’s name was obtained from Glasgow University’s Matriculation Album for 1832, which listed...
James McCune Smith, MD (April 18, 1813 to November 17, 1865), was America’s first African-American university-trained physician. He graduated from the University of Glasgow in Scotland. Engraving of James McCune Smith by Patrick H. Reason. [From Examination Days, The New York African Free School Collection. With permission from the New York Historical Society, https://www.nyhistory.org/web/africanfreeschool/bios/james-mccune-smith.html.]

"James M'Cune Smith" as "filius natu maximus Samuelis, Mercatoris apud New York," [first natural son of Samuel, merchant, New York] (1, 29). McCune Smith, like other African-Americans, lived in fear of slave-hunters who raided homes to recapture fugitive slaves (19). McCune Smith recounted those days as marred by "constant apprehension and jeopardy" (19). McCune Smith characterized himself as, "the son of a slave, owing my liberty to the emancipation act of the State of New York, and having kindred in a southern State; some of them slaveholders, others slaves ..." (42).

Around the age of 9 yr, still legally a bondman, McCune Smith enrolled in the African Free School no. 2 on Mulberry Street in Manhattan, where he excelled (3). The African Free School was headed by the white educator and reformer Charles C. Andrews (58). McCune Smith came under the tutelage of Rev. Joseph Curtis, Rev. Frederic Schroeder, and Rev. Peter Williams, Jr (18, 34). At age 11 yr, he made his first abolitionist speech, with the visiting Marquis de Lafayette in attendance. Lafayette was an influential ally in the struggle for emancipation of slaves. Smith addressed General Lafayette by exclaiming:

Here, Sir, you behold hundreds of poor children of Africa sharing with those of a lighter hue in the blessings of education; and, while it will be our great pleasure to remember the great deeds you have done for America, it will be our delight also to cherish the memory of General Lafayette as a friend to African emancipation and as a member of this institution (55).

After remarkable academic success in the African Free School and on graduation, McCune Smith applied to Columbia University and Geneva Medical College in New York State. However, although New York was significantly more progressive than the South, its academic institutions were not prepared to accept the reality that children of slaves could master the intricacies of medical science and practice medicine along side white doctors (30). Consequently, McCune Smith’s abolitionist benefactors, Rev. Williams and others, encouraged McCune Smith to attend the University of Glasgow in Scotland and provided McCune Smith with money for his trip abroad and his education. Accordingly, McCune Smith matriculated at the University of Glasgow and advanced his education in Scotland.

McCune Smith received his Bachelor of Arts (1835), Master of Art (1836), and Medical Doctor (1837) degrees from the University of Glasgow (1). While in Glasgow, he was also trained in the emerging science of statistics, and he joined the Glasgow Emancipation Society, collaborating with activists in the Scottish and English abolitionist movement (60). In fact, the Glasgow Emancipation Society enrolled him as an Honorary Member on June 15, 1837 (32). Frederick Douglass (16) wrote,

Educated in Scotland, and breathing the free air of that country, he came back to his native land with ideas of liberty which placed him in advance of most of his fellow citizens of African descent. He was not only a learned and skillful physician, but an effective speaker, and a keen and polished writer. A brave man himself, he knew how to esteem courage in others.

After graduation, Dr. McCune Smith sought additional clinical training in Paris before returning home to New York (4, 31, 32).

In New York City, McCune Smith practiced medicine and was the resident physician at the Colored Orphan Asylum in Manhattan for nearly 20 yr. The asylum was founded in 1836 by Anna and Hannah Shotwell and Mary Murray, Quaker philanthropists (35). As a compassionate physician practicing in New York City, Dr. McCune Smith offered a variety of services to his patients, including "bleeding, tooth-drawing, cupping, and leeching," as well as Shaker’s Herbs from his drugstore (5, 30). He also taught spelling, reading, writing, arithmetic, and geography in his home (30) and became the first African-American to own and run a U.S. pharmacy (59).

Medical Author

Nations which are pleased to term themselves civilized, have one sort of faith which they hold to one another, and another sort which they entertain towards people less advanced in refinement. The faith which they entertain towards the latter, is very often treachery, in the vocabulary of the civilized.

James McCune Smith (37)

Dr. McCune Smith authored the first case report ever written by an African-American physician in America, entitled, "Case of ptyalism with fatal termination" (7, 21). However, because of his race, he was not allowed to present the case before the New York Medical and Surgical Society as the society noted: "lest it might interfere with the ‘harmony’ of the young institution" (44). Dr. John Watson, who consulted with McCune Smith on the case, read it before the Society. Subsequently, he authored the first medical scientific paper published by an African-American physician in America, discussing five cases of women who experienced cessation of menses coincident with the use of opium (41). The cases were published in the New York Journal of Medicine (41). McCune Smith drew on his experiences in Glasgow where he noted that the discontinuation of opium lead to the return of regular menstrual cycles. Smith speculated, "It may also be worth the inquiry, whether opium, in skillfully regulated doses, may not be used..." (30).
as a means to bear women safely through the critical disturbances which occur at the ‘change of life’” (41).

In an 1848 article in The Annalist (43), Dr. McCune Smith provided a statistical reexamination of data by William K. Lothrop, claiming that homeopathic treatments had led to a lower death rate among children in New York orphanages. His expert analysis of the records of the orphanages, critique of the figures in the original paper, and revision of mortality statistics to include only those children who had been under continuous homeopathic treatment highlighted the importance of controlled comparison in medical research and provided a scathing statistical critique of the false claims (52). McCune Smith concluded that Lothrop’s statistics were contrived; “A custom of quietly thrusting away the very sick children, in order that they may die elsewhere ... at least such will be a natural impression until the two-hundred and odd children, sent away without record, are more satisfactorily accounted for.” Smith ended his statement with, “May the regular practitioner of medicine battle against the most deadly quackery that curses the nineteenth century, in the form of Homeopathy” (43).

In public lectures, McCune Smith exposed “the fallacy of phrenology.” Phrenology was used to “prove” that black people were innately inferior, based on the size and shape of their heads. McCune Smith used skulls, statistics, and anatomy to refute the racist claims that the size, shape, and capacities of the brain could be determined by the external contours of the skull (20). McCune Smith’s early lectures on phrenology are not extant. However, in his series “Heads of the colored people,” a collection on every day, working-class black individuals that revealed the dignity of their labor and the universality of the black experience, McCune Smith alludes to the pseudoscience of phrenology, and “heads” is a nickname that black people still use for each other (49). It is worth noting that, despite his remarkable scientific achievements, Dr. McCune Smith was never admitted to the American Medical Association—despite his remarkable scientific achievements, Dr. McCune Smith was never admitted to the American Medical Association or to any local medical society. He was, however, a member of the American Geographic Society (58).

Scientific Freedom Fighter

Emancipation has taken place here, (in the free States), yet the blacks are worse off than the slaves of the South—not being so well clothed, fed or so happy.

Rev. Orville Dewey, National Anti-Slavery Standard (42)

Refuting racially biased statistics was Dr. McCune Smith’s vocation, talent, and passion (30). McCune Smith used his training and expertise in statistics to challenge Rev. Orville Dewey’s claim that free African-Americans were worse off than the slaves of the South (42). Rev. Dewey was referring to the 1840 census, citing the high insanity and mortality rates among free African-Americans (22). Slave owners used the 1840 census to claim that African-Americans were inferior, and that slaves were better off than free African-Americans or white urban laborers. U.S. Secretary of State, John C. Calhoun, also rejected the idea of freedom for African-Americans based on the 1840 census. However, Dr. McCune Smith, in an uncommonly sophisticated statistical analysis, documented that Northern African-Americans were living longer, achieving scholastically, and attending church more frequently, while suffering less often from insanity, in comparison with their enslaved Southern counterparts (30, 39, 42). In 1844, Edward Jarvis published a rebuke of the 1840 census (2, 22, 27), noting the many errors. In his analysis, McCune Smith debunked the deceptive use of higher mortality rates in the North to justify slavery (30) and noted that the 1840 census failed to correct for age or annual mortality rates (6, 52).

Abolitionist

First. We are a minority held in servitude by a majority. Secondly. That majority simulate a Republican form of Government. Thirdly. We, the minority held in servitude, are distinguished by a different complexion from the majority who hold us in thrall.

James McCune Smith (58)

Dr. McCune Smith’s thoughtful writing and public lectures had a profound impact on local and national abolitionist politics (37, 38, 42, 51). One of his most impactful and influential acts as an abolitionist was a historical debate with the racist, anti-abolitionist Roman Catholic Archbishop John Joseph Hughes. Archbishop Hughes believed that abolitionists were wrong, arguing that the lives of Northern “starving laborers” were worse than those of slaves in the South (12, 26, 33). Through his writing and public lectures, Smith exposed the hypocrisy and cruelty of the anti-abolitionist thesis.

In his essay on “Citizenship” in 1859 (45), Dr. McCune Smith challenged the Dred Scott decision. (As a reminder, the Supreme Court of the United States, in 1857, ruled that “a negro, whose ancestors were imported into [the U.S.], and sold as slaves” could not be an American citizen and therefore had no standing to sue in federal court, and that the federal government had no power to regulate slavery.) In effect, the Dred Scott decision denied the right of citizenship to African Americans and called unconstitutional any attempt to limit the expansion of slavery. According to Jefferson Davis, a United States Senator from Mississippi, the Dred Scott case was merely a question of “whether Cuffee should be kept in his normal condition or not” (14). At that time, “cuffee” was a term commonly used to describe an African-American (9). Parenthetically, the 14th Amendment to the Constitution was ratified on July 9, 1868, and granted citizenship to “all persons born or naturalized in the United States,” which included former slaves recently freed.

Dr. McCune Smith was also a powerful and persuasive voice on immigration and the racially charged New York City draft riots. Importantly, he always insisted on rational behavior, seeking to prevent self-destructive violence (45, 46, 51). McCune Smith sought to block retaliation against white slaveholders (48). To overcome slavery and oppression, people of color must refute the principle that “might makes right,” by showing that “right makes right” (50).

Early writings and public lectures (37, 38, 40, 42) on the injustice of slavery brought Smith to the attention of the national abolitionist crusade, and he became director of the Colored People’s Educational Movement, where he was involved with many aspects of the anti-slavery drive (8, 36, 53). As examples, he was one of the key organizers of resistance in New York City to the newly passed Fugitive Slave Act, which required states to aid federal law enforcement in capturing escaped slaves, and he aided refugee slaves through the Underground Railroad. During the mid-1850s, McCune Smith

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worked with Frederick Douglass to establish the National Council of Colored People. He and Frederick Douglass emphasized the importance of education and urged the founding of more schools for African-American youth. Importantly, McCune Smith tempered the more radical people in the abolitionist movement, and he insisted on arguing from facts and fought to block retaliation against white slaveholders (48).

McCune Smith urged “the physically harmless, but morally omnipotent, weapons of truth and righteousness” in the fight against slavery, adding that, if physical means were employed, he “would be among the first to resist them” (58).

The questions of emigration and colonization were dividing issues that provoked vehement debate among free African-Americans. Should free African-Americans stay in the United States to promote abolition or move east across the Atlantic (or elsewhere) to support the colonies for freed slaves established in West Africa or Canada? The debate and struggle had the potential to divide abolitionists, because white abolitionists and slave owners supported colonization. Smith was a reassuring and constructive voice in the debate, as he opposed the emigration of free African-Americans to other countries. McCune Smith emphasized that remaining in America was more effective than emigration in the battle against slavery. McCune Smith’s friend, Gerrit Smith, was a wealthy abolitionist who, in 1846, gave 120,00 acres of land to 3,000 poor African-Americans (40 acres each). He hoped that his gift would enable African Americans to establish a self-sustaining community. The settlers called the land “Timbucto.” Timbucto provided an alternative to emigration. Gerrit Smith asked McCune Smith to serve as his principal trustee to distribute deeds to recipients (10, 38, 56, 57). Gerrit Smith’s humanity strengthened McCune Smith’s belief in “the eternal equality of the Human race” and the “first principle” of racial equality. For equality to be attained, there had to be a shift in American consciousness. “The heart of the whites must be changed, thoroughly, entirely, permanently changed.” He believed that Gerrit Smith, in giving his wealth to blacks and seeking to “make myself a colored man,” as Gerrit often said, had in effect acquired a black heart (57).

McCune Smith’s Contributions to the Field of Physiology

Science reflects history as society influences science.

H. L. Lujan and S. E. DiCarlo (28)

McCune Smith published no book during his lifetime. However, he published many essays and delivered many lectures. His essays and lectures were published on cheap newsprint, making them difficult to save and pass down to future generations. Sadly, his papers were never collected, making his writings difficult to find and access (58).

McCune Smith’s greatest contribution, we believe, was to repudiate Jefferson’s written comments that “blacks are inferior to the whites in the endowments both of body and mind,” (24, 47). Thus, of his many contributions to the field of physiology, exposing bias, fraudulent data, and noting that “race” is not a biological reality are McCune Smith’s greatest achievements. He documented the influence of society on the generation of fraudulent data used to justify slavery. Specifically, as noted above, McCune Smith exposed scientific flaws and noted multiple errors in the racially biased U.S. census of 1840, documented “the fallacy of phrenology,” illuminated the hypocrisy and cruelty of the Archbishop John Joseph Hughes anti-abolitionist thesis, and exposed the racial biases regarding the reported physical differences between the races.

In his essay, “On the Fourteenth Query of Thomas Jefferson’s Notes on Virginia,” which first appeared in the Anglo-African Magazine, vol. 1, no. 8 (August 1859) (47), McCune Smith addressed Jefferson’s contention “that there are physical, moral and mental distinctions between the negro and the white man—distinctions which must ever prevent them from an equal and harmonious participation in the blessings of democratic freedom” (47). McCune Smith wrote, “The physical differences which are urged as existing between whites and blacks are: first, those which relate to the bones of the body; secondly, those which relate to the muscles; thirdly, those which relate to the texture of the hair; and fourthly, the color of the skin.” McCune Smith deftly exposed the fallacy of these arguments. He smartly documented that there was more difference within a race than between races. Furthermore, he clarified that complexity, for example, depends on climatic and environmental changes. Accordingly,

The black complexion of the negro race is not a distinctive mark separating them from the rest of mankind, but is, on the contrary, a result of the combined influence of the hot climate and low, marshy soil, on which they or their ancestors resided in Africa (47).

Similar conclusions were drawn regarding the bones and muscles of the body, and the texture of the hair. Specifically, McCune Smith noted,

The skulls selected from the white race for this admensuration [measurement] were rather above than below the usual admeasurement; whilst the skulls selected from the blacks were extreme cases of acuteness of this angle or flatness of the forehead. They constituted the exceptions. That there are cases amongst the whites in whom the facial angle is equally acute will be evident to anyone who will take the trouble to look at a profile of Henry Clay, General Lafayette, or at most of the heads found on French and Spanish coins of the latter part of the last century. This is sufficient to destroy the general conclusion that there is less difference between the facial angle of the ape and the black than between the angle of the latter and the white.

McCune Smith went on to state, “There is no reason to infer, from the structure of the skeleton, that there are distinctions and permanent differences between the framework of the white and black races” (47).

Following completion of the human genome project in June 2000, President Bill Clinton declared,

I believe one of the great truths to emerge from this triumphant expedition inside the human genome is that in genetic terms, human beings, regardless of race, are more than 99.9 percent the same (11).

Francis Collins, who led the Human Genome Project, echoed President Clinton; “I am happy that today, the only race we’re talking about is the human race” (11). Thus “race” is not a biological reality but a myth. Today, in the 21st century, few Americans seem to understand that fact; however, James McCune Smith understood and personified this truth in the 19th century.
Legacy

The great hindrance to the advancement of the free colored people is the want of unity in action. If we were to unite in the pursuit of any one object, I can imagine no possibility beyond our power to compass. But we are not united as a people; and the main reason why we are not united is that we are not equally oppressed. This is the grand secret of our lack of union.

James McCune Smith, Frederick Douglass’ Papers (54)

After his return to New York, he established his medical practice in Lower Manhattan in general surgery and medicine. In the early 1840s, McCune Smith married Malvina Barnet, a “free woman of color” who was a graduate of the Rutgers Female Institute (34). Both McCune Smith and his wife were of African and European ancestry. They had 11 children, and 5 (4 boys and one girl) survived to adulthood. After the 1863 draft riots, McCune Smith and his family moved to Brooklyn (a separate city at that time) because he no longer felt safe in New York. Dr. McCune Smith passed away of congestive heart failure on November 17, 1865 (34).

The 1870 census noted that Malvina and four of their children were living in Ward 15, of Brooklyn. James W. Smith, the fifth surviving child, was living in a separate household and working as a teacher. Malvina and the five children were classified as white. Their four surviving sons married white spouses; his unmarried daughter lived with a brother. To escape racial discrimination, his family passed into white society.

McCune Smith’s legacy may have gone unnoticed, in part, because his children refused to promote their father’s legacy and shunned their African-American heritage. It was not until 1958 that McCune Smith’s legacy began to be recognized and celebrated. In 1958, Dr. McCune Smith was honored with a special issue of the medical journal The Journal of the American Medical Association. This special issue acknowledged McCune Smith’s contributions to medicine and highlighted his legacy as an African-American physician.

DISCLOSURES

No conflicts of interest, financial or otherwise, are declared by the authors.

AUTHOR CONTRIBUTIONS

H.L.L. and S.E.D. prepared figures; H.L.L. and S.E.D. drafted manuscript; H.L.L. and S.E.D. edited and revised manuscript; H.L.L. and S.E.D. approved final version of manuscript.

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