United States Department of the Interior
National Park Service

National Register of Historic Places
Multiple Property Documentation Form

This form is used for documenting multiple property groups relating to one or several historic contexts. See instructions in How to Complete the Multiple Property Documentation Form (National Register Bulletin 16B). Complete each item by entering the requested information. For additional space, use continuation sheets (Form 10-900-a). Use a typewriter, word processor, or computer to complete all items.

__X__ New Submission ____ Amended Submission

A. Name of Multiple Property Listing

The U.S. Public Health Service Syphilis Study, Macon County, Alabama, 1932-1973

B. Associated Historic Contexts

1. Origins of the Study, 1928-1932
2. The Syphilis Study in its Formative Years, 1933-1947
3. The Syphilis Study in the Post-War Years, 1948-1965

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D. Certification

As the designated authority under the National Historic Preservation Act of 1966, as amended, I hereby certify that this documentation form meets the National Register documentation standards and sets forth requirements for the listing of related properties consistent with the National Register criteria. This submission meets the procedural and professional requirements set forth in 36 CFR Part 60 and the Secretary of the Interior's Standards and Guidelines for Archeology and Historic Preservation. (___ See continuation sheet for additional comments.)

Signature and title of certifying official Date

State or Federal agency and bureau

I hereby certify that this multiple property documentation form has been approved by the National Register as a basis for evaluating related properties for listing in the National Register.

Signature of the Keeper Date
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Provide the following information on continuation sheets. Cite the letter and the title before each section of the narrative. Assign page numbers according to the instructions for continuation sheets in How to Complete the Multiple Property Documentation Form (National Register Bulletin 16B). Fill in page numbers for each section in the space below.

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Name of Repository: Tuskegee University Archives, Tuskegee University

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Introduction

One of the most infamous incidents in the medical history of the United States is the study of syphilis, sponsored by the U. S. Public Health Service (USPHS) in Macon County, Alabama, from 1932 to 1973. It is often called “The Tuskegee Study” because the Macon County seat is Tuskegee and a former hospital at Tuskegee Institute (now university) and the Veterans’ Hospital at Tuskegee were used for some of the medical procedures.

What happened, and did not happen, in Macon County, Alabama, during the syphilis study is of national significance in the history of medicine in the United States. “The Tuskegee Study” holds a central place in our understanding of twentieth-century medicine, science, race, and research,” point out scholars Allan M. Brandt and Larry R. Churchill. They emphasize that since “researchers and writers, ethicists and activists have repeatedly turned their attention to the Tuskegee Study in the last quarter-century. . . the study has become more than an important and tragic episode in the ongoing history of human subjects research.” In fact, Brandt and Churchill conclude that “the study reeks with significance for the most central questions of contemporary medicine and society.”

“The Tuskegee syphilis study,” according to public health scholars Amy L. Fairchild and Ronald Bayer, “has come to symbolize the most egregious abuse of authority on the part of medical researchers.” A multi-disciplinary group of scholars agreed. In 2005, they reviewed the international history of human experimentation in the mid-twentieth century and concluded that the USPHS syphilis study was “one of the most notorious cases of government-sponsored research in American history.” Historian James H. Jones, in a new edition of his authoritative study, Bad Blood: the Tuskegee Syphilis Experiment (1993), argued that “the Tuskegee Study has much to teach us about racism in the United States and the social warrant of medicine in people’s lives.” “For more than a quarter century now,” historian Susan M. Reverby wrote at the end of the century, “the images conjured up by the words ‘Tuskegee Syphilis Study’ or ‘bad blood’ have haunted our cultural landscape.”

References:

5 Reverby, Tuskegee Truths, 1.
The cultural landscape of the approximately 623 victims (adding together the actual study subjects with the “control” group) of the USPHS study, however, remains undocumented and unassessed. The places where the men gathered, where they were tested, and where the majority of them are buried remain in the cultural landscape of Macon County, Alabama. Finding those places and assessing their association with the USPHS study, as well as their role and function within the rural communities of Macon County, are the goals of this report. It is the unknown side of the “Tuskegee Study.” A part of American as well as medical history, this landscape needs to be understood. As Angel David Nieves has recently emphasized, “the physical, social, and intellectual spaces created by African Americans will offer us new forms of historical evidence, methodologies, and analyses.”

I. Origins of the Study, 1929-1932

The U.S. Public Health Service Study began at a time when some medical professionals and public officials were trying to provide more health services for underserved African Americans, especially in the rural South. In 1929 the Julius Rosenwald Fund (JRF) collaborated with the U. S. Public Health Service to make possible better rural health programs for African Americans. The JRF had earlier sponsored a USPHS survey of syphilis in Mississippi, so the federal agency proposed that the Fund help to extend this survey across the region. In November 1929, the Fund approved $50,000 for pilot projects during 1930 in six southern counties, including Macon County, Alabama. In May 1930, Dr. H. L. Harris, Jr., of the JRF visited Macon County and reviewed the process and progress of the demonstration project that was providing treatment for syphilis and yielding positive results. He returned in the fall and recommended the implementation of a comprehensive health plan. But as the Great Depression sunk deeper roots, there was not enough money to implement this recommendation for a real public health program for rural communities.

Lack of funding unfortunately meant that officials lost an opportunity to build upon a program that had gained considerable local support. Fisk University sociologist Charles S. Johnson wrote in 1934 that African Americans in Macon County responded positively to the JRF demonstration project. Johnson also noted that some of the tests and shots were administered at the recently constructed Rosenwald schools of the county. Johnson further emphasized that the 1930 project involved much more than testing and gathering data. He reported:

7 Revery, Tuskegee Truths, 18, 34.
Some 7,500 blood examinations and 3,200 urine analyses were made on those under treatment, and a total of 2,042 prescriptions dispensed during the first year. Apart from this, however, 3,500 typhoid inoculations were given, and 600 children immunized against diphtheria, and 200 vaccinated against smallpox. This altogether, with the Red Cross distribution of seeds for gardens and yeast to be used in combating pellagra, constituted one of the most intense concentrations upon a reconstructive health campaign of any rural section in the South.8

By the time Johnson wrote his report, however, federal medical professionals had already re-instituted a study of untreated late latent syphilis in Macon County in the late summer and fall of 1932. Initially the USPHS study of 1932 was designed as a short-term (six months) follow-up to the earlier Rosenwald Demonstration Project although it did not reach the same people in Macon County who had been in the Rosenwald project. Dr. Raymond A. Vonderlehr, the USPHS Passed Assistant Surgeon, came to Tuskegee to identify the sample of subjects and later the control subjects to be examined in the project. Dr. Vonderlehr wanted to focus on African American males between the ages of 25 and 60. (Women were never a focus in the study even though the agency understood that untreated, or undertreated, men would continue to pass syphilis to their wives and girlfriends). Vonderlehr soon encountered resistance from the African American communities, as they were convinced that his call for men only over the age of 25 meant that the program was really for military draft physicals. Due to an initial low response, the agency had no choice but to test large numbers of men and women to allay local fears. Since the federal officials earlier had agreed with the Macon County Board of Health’s request to treat individuals not within the survey parameters, the 1932 survey soon took more time and cost much more money than the agency had predicted.9

The USPHS turned to Tuskegee Institute and the Veterans’ Administration Hospital at Tuskegee for assistance with the study. Given segregation in the hospitals of the Jim Crow South and the lack of facilities in Macon County, the USPHS had little choice in medical facilities. Tuskegee Institute officials agreed to cooperate with USPHS in carrying out the initial study in Macon County. On September 17, 1932, the director of the institute’s Andrew Hospital, Dr. Eugene H. Dibble, Jr., had asked institute president Dr. R. R. Moton to support the USPHS. “While this would not bring any additional compensation to our hospital,” admitted Dibble, “it would certainly not cost us any more and would offer very valuable training for our students as well as for the

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Internes [sic]. As Dr. [Taliaferro] Clark said, our own hospital and Tuskegee Institute would get credit for this piece of research work. He also predicts that the result of this study will be sought after the world over.”10 Dr. Moton also heard from the U.S. Surgeon General himself, Dr. Hugh Smith Cumming, who urged the Tuskegee president to cooperate with a project that “offers an unparalleled opportunity for carrying on this piece of scientific research which probably cannot be duplicated anywhere else in the world.”11 Tuskegee Institute provided facilities; control over the study, and decisions on its funding, rested with the U.S. Public Health Service.

Local African American professionals were needed to make the study work. The USPHS hired former Tuskegee nurse Eunice Rivers to be the key community contact person. She was well known to the African American communities of Macon County, starting with her involvement in the Tuskegee Movable School project in 1923. She knew the roads to the local communities and where to meet with the research subjects. Rivers took subjects to medical offices at Tuskegee Institute and at the nearby Veterans Administration Hospital. She served as the liaison between the patients and the medical professionals from 1932 until her retirement in April 1970, almost the entire length of the study. Dr. Jesse Peters, of the Veterans’ Administration Hospital, carried out the x-rays and autopsies of the subjects.

After testing a much larger group than initially planned, the USPHS in 1932 did identify a group of subjects, approximately 400 men, that in its mind had received no or limited and ineffective treatment. The first group of men under the USPHS study received a complete examination, including x-rays and spinal taps (both of the latter procedures were firsts for the great majority of the men). In this initial study, the USPHS had no plans to offer any medical treatment for latent syphilis, which was assumed to be non-contagious, nor did they inform the patients of the nature of the study. When the agency wrote the subjects of the forthcoming spinal tap procedure, they did so in misleading terminology while stating that the procedure was part of a treatment process:

Some time ago you were given a thorough examination and since that time we hope you have gotten a great deal of treatment for bad blood. You will now be given your last chance to get a second examination. The examination is a very special one and after it is finished you will be given a special treatment if it is believed you are in a condition to stand it.

10 Eugene H. Dibble, Jr., to Dr. R. R. Moton, September 17, 1932, R.R. Moton Papers, GC, Box 180, Folder 1516, Public Health Service, Tuskegee University Archives, Tuskegee, AL.
11 Cumming’s letter is cited in Jones, Bad Blood, 102.
II. The Syphilis Study in its Formative Years, 1933-1947

In the spring of 1933, Dr. Raymond A. Vonderlehr wrote his superior, Dr. Taliaferro Clark, who had authored the Rosenwald Fund report of 1930, and was the chief of the USPHS Venereal Disease Division:

At the end of this project we shall have a considerable number of cases presenting various complications of syphilis who have received only mercury and may still be considered untreated in the modern sense of therapy. Should these cases be followed over a period of from five to ten years many interesting facts could be learned regarding the course of complications [from] untreated syphilis. The longevity of these syphilitics could be ascertained, and if properly administered I believe that necropsies could be arranged through the hospital at the [Tuskegee] Institute with the cooperation of the National Institute of Health. A part time social worker should be able to see the cases as often as necessary and the whole scheme could be supervised by one of our officers occasionally. Undoubtedly other interesting points for study could be worked out should this follow-up work be considered seriously. I realize, of course, the difficulties in the way of the projection of such a plan in view of the unsettled conditions and the urgent need for economy. However, it seems a pity to me to lose such an unusual opportunity.13

Dr. Vonderlehr had good reason to think that Dr. Clark would agree that the unusual opportunity should not be missed. The three key federal officials who instituted the Tuskegee study and guided it during its formative years were Dr. Hugh Smith Cumming, the U.S. Surgeon General; Dr. Clark, and Dr. Vonderlehr,. All three medical professionals had taken degrees at the University of Virginia, which according to historians Paul Lombardo and Gregory Dorr “was an epicenter of eugenical thought, closely linked with the national eugenics movement and with the Virginia antimiscegenation movement and tied to the state mental health professionals who promoted eugenic sterilization.”14 Professional, institutional, and personal “links between the PHS and the University of Virginia’s medical school imbued PHS officers in the Division of

12 Brandt, 23.
13 R. A. Vonderlehr to Dr. [Taliaferro] Clark, April 8, 1933, USPHS Division of Venereal Diseases, RG 90, Box 239, Folder 2, Macon County, National Archives, Washington, D.C.
Venereal Diseases with a professional outlook born of a common institutional heritage.” 15 This proved especially true once Vonderlehr succeeded Clark as Chief of the Venereal Diseases Division in June 1933. Sociologist Susan E. Bell pointed out that “over the next four decades the head of the Division of Venereal Disease (VD) is usually recruited from a man who has worked on the Tuskegee Syphilis Study.” 16

Thus, “race-conscious ideology profoundly influenced the intellectual and organizational origins” of the USPHS syphilis study in Macon County. Dr. Vonderlehr in particular wanted “to prove the biological basis of racial difference by documenting race-linked pathology, consistent with prevailing eugenic theory.” 17 His USPHS colleagues agreed that the project—studying untreated late latent syphilis in a large sample of rural African Americans—had too much potential to end. Treatment was far from their minds but not all subjects had symptoms and many received some treatment from aspirin, protiodide (used for syphilis), iron, and placebos. They were not informed as to the nature of the study, its purpose, or its dangers. Since now the project was viewed as a long-term study, rather than a short-term review, Vonderlehr instituted a group of just over 200 men as a control sample.

The new USPHS procedures underscored how the study was now a case of human experimentation that ended with the subject’s death. Historian James Jones called the study “a nontherapeutic experiment, aimed at compiling data on the effects of the spontaneous evolution of syphilis on black males.” 18 Medical historian Susan Lederer concluded, chillingly, “the investigators who staffed the study over four decades regarded their African American subjects neither as patients, nor as experimental subjects, but as cadavers, who had been identified while still alive.” 19 Her judgment is confirmed by a July 1933 letter where Dr. O. C. Wenger of the USPHS told Vonderlehr: “we have no further interest in these patients until they die.” 20

17 Ibid., 293, 312.
18 Jones, Bad Blood, 2.
20 O.C. Wenger to R. A. Vonderlehr, July 21, 1933, Center for Disease Control Papers, Tuskegee Syphilis Study Administrative Records, 1930-1980, Box 5, Folder Correspondence, National Archives-Southeast Region.
The USPHS hierarchy pursued autopsies of the subjects as a key part of the project. The officials understood that autopsies would be controversial among any southern rural community. Wenger told Vonderlehr: “if the colored population becomes aware that accepting free hospital care means a post-mortem, every darkey will leave Macon County.”\(^{21}\) They took steps to secure the involvement of Tuskegee officials in the autopsies, made sure that local Macon County doctors understood the importance of autopsies, and found that Nurse Rivers was a crucial person to develop trust with the subject’s families and convince them to proceed with autopsies. Surgeon General Dr. Cummings wrote Dr. R. R. Moton at Tuskegee Institute: “Since clinical observations are not considered final in the medical world, it is our desire to continue observation on the cases selected for the recent study and if possible to bring a percentage of these cases to autopsy so that pathological confirmation may be made of the disease processes.”\(^ {22}\) USPHS medical professionals also convinced Tuskegee Institute to house terminally-ill patients at the institute hospital, making the possibility of autopsy more certain. Dr. Jerome Peters of the Veterans Administration Hospital at Tuskegee conducted the autopsies, with the funding for the procedures coming from the Milbank Memorial Fund, starting in 1935. Families who participated received $50 as a burial stipend.

Nurse Rivers recalled “when I went to, to confirm autopsy I had to explain to them [the subject’s families] what the procedures were. I had to guarantee them that they would not mar that body. They didn’t want the public to know that we had cut that body, the family didn’t. OK. I had to make Dr. Peters promise that we would not mar that body where it would be exposed. And he wouldn’t.”\(^ {23}\) Even so, some families refused to agree with autopsies no matter what Rivers promised and she was unable to secure the necessary permissions.

Dr. Vonderlehr published the first professional paper from the project in a 1936 issue of *Venereal Disease Information*. And the project continued to adapt to a changing medical climate. In 1937 the Julius Rosenwald Fund revived its efforts to treat venereal diseases in the rural South. The JRF sent Dr. William B. Perry, an African American physician from the School of Public Health at Harvard University, to Macon County to establish a syphilis control project. The USPHS arranged to have Nurse Rivers assigned as Perry’s assistant, meaning that in the months of the JRF program, Rivers had an opportunity to screen patients and to ensure that subjects from the USPHS syphilis study remained untreated, although it is unclear whether she took steps to keep men and their spouses from treatment. Vonderlehr took similar steps when the new U.S. Surgeon General, Thomas Parran, launched a major federal program to eradicate venereal diseases. In the spring of 1939, the USPHS detailed staff and loaned one of its mobile

\(^{21}\) Ibid.  
\(^{22}\) Brandt, 23.  
\(^{23}\) Reverby, *Tuskegee Truths*, 326.
units to the Macon County Health Department for the syphilis treatment. Again, Nurse Rivers received the assignment of being the project assistant. She and various federal medical professionals used the car and the mobile unit to conduct tests “on site” at various locations in the county.

In 1939 procedures carried out at the Tuskegee Institute hospital changed. In both the 1932 and the 1933 USPHS projects, medical professionals had taken spinal taps from their subjects, in order to assess the impact of syphilis on the nervous system. But the taps—informed permission was not sought for such an invasive procedure at the Tuskegee hospital—were painful and dangerous. The African American subjects hated them to such an extent that in 1939, Passed Assistant Surgeon Austin V. Deibert asked Vonderlehr if the spinal tabs could end for those subjects that had already been tapped and their results proved negative. “As a consequence of those primary taps,” he told Vonderlehr, “Nurse Rivers has had some difficulty getting patients in when breaking into a new community.”

After the word passes along sufficiently that we are not giving ‘back shots’ they come out of the canebrakes. I hope I know something of the psychology of the negro but at any rate I try my best to send them forth happily shouting the praises of the clinic to their friends at home. . . . The danger of jeopardizing the future of the study by lack of cooperation of the patients far outweighs the importance of obtaining information about the spinal fluid, which information at best would be open to adverse criticism.

Vonderlehr agreed with his colleague, and the use of spinal taps was significantly curtailed.

The voices of skeptics within the agency also grew louder. Some USPHS officials, once Dr. Deibert had conducted comprehensive examinations of the subjects in 1938, realized that the study group was not really one of “untreated” syphilis, but one of “undertreated” syphilis. No one was recommending cancellation of the project, but officials from the late 1930s into the 1960s would periodically revive the contaminated nature of the study and argue that to have good science, the reality of “undertreated” subjects needed to be acknowledged.

With the coming of World War II, the USPHS study had a new threat—the fact that the Selective Service had classified about 256 of the subjects as draft eligible. The agency moved quickly to

24 Jones, Bad Blood, 162.
25 Austin V. Deibert to R.A. Vonderlehr, March 20, 1939, Centers for Disease Control Papers, Tuskegee Syphilis Study Administrative Records, 1930-1980, Box 7, Folder 1939, National Archives-Southeast Region, Morrow, Georgia.
26 Jones, Bad Blood, 178-181; Reverby, Tuskegee Truths, 91-92.
work with the county health department to keep its subjects from entering the military, where doctors would find, and treat, their syphilis. Dr. Vonderlehr explained to the state director of preventable diseases, Dr. D. G. Gill, “this study of untreated syphilis is of great importance from a scientific standpoint. It represents one of the last opportunities which the science of medicine will have to conduct an investigation of this kind.”27 The local draft board and the state agreed—the subjects were not drafted, and the study continued.

By the time World War II ended in 1945, the medical profession had also reached a consensus that penicillin was an effective treatment for syphilis. The USPHS did not end the study and treat its subjects. In fact, during the following year, USPHS officials published the second and third reports of the study in the journals of Venereal Disease Information and the Journal of Venereal Disease Information. Four years later, the first summary report of the entire sixteen-year study appeared in the American Journal of Syphilis, Gonorrhea, and Venereal Diseases.

III. The Syphilis Study in the Post-War Years, 1948-1965

The spate of publications led to re-evaluation of the study at USPHS. Some officials questioned the value and the reality of the scientific data. Dr. Wenger in 1950 offered a strident defense of the study, emphasizing, as his colleagues had before, “this is the last chance in our country to make an investigation of this sort. . . . again let me emphasize the importance of this quiet undertaking and urge that steps be taken so that it doesn’t slip through our fingers.” Yet the moral question remained about continuing the study in an age of penicillin—Wenger did not duck the issue: “Remember, these patients wherever they are, received no treatment on our recommendation. We know now, where we could only surmise before, that we have contributed to their ailments and shortened their lives. I think the least we can say is that we have a high moral obligation to those that have died to make this the best study possible.”28

The debate within the agency remained on the side of continuing the study. Historian James Jones explains:

   The new generation of senior officials who took charge of the experiment, men such as Dr. Theodore J. Bauer (director, 1948-52), Dr. James K. Shafer (director, 1953-54), Dr. Clarence A. Smith (director, 1954-57), and Dr. William J. Brown (director, 1957-71) had grown to maturity in the PHS with the Tuskegee Study. Many of them had been

personal friends and protégés of the study’s organizers. Most had conducted roundups as junior officers or had at least heard their supervisors deliver papers on the experiment at professional meetings. A closely knit group of career officers, they had watched the study become a living tradition. In short, the study had become routine and they had grown accustomed to it.

Thus, the transfer of power to new senior officials in the late 1940s and on through the 1950s posed no real threat to the Tuskegee Study. Unable to look with new perspectives, the health officials who inherited the study could not review it objectively. Familiarity had co-opted them before they assumed command.29

Many of the procedures involved with the USPHS Syphilis Study in Macon County had been centered at the Tuskegee Institute’s John A. Andrew Hospital and the nearby Veterans Administration hospital. Starting in c. 1947, however, many of the medical-related procedures took place at the Macon County Health Department. But the study also continued to touch almost every African American rural neighborhood in Macon County through annual “roundups” of subjects conducted by USPHS officials and staff.

Taking the study to subjects on-site—the “roundups” mentioned by Jones above--became common after World War II. Using online photographs from the National Archives, apparently from the 1950s, Center for Historic Preservation Research Fellow Betsy Snowden documented that meetings would happen at crossroads, local schools, churches, and stores. One subject stated: “Sometimes they would just take the blood sample and give us some medicine right there at the school, under the oak tree where we met at Shiloh.”30 In 1932, 1938, 1948 and 1952, the men were brought to John A. Andrew Hospital in Tuskegee for more complete examinations. Nurse Rivers noted that subjects were sent to the VA hospital for more specialized exams. The 1952 examinations even gave USPHS officials another reason to continue with the project—the subjects could provide significant information about aging and heart disease. The 1952 examinations also involved a major USPHS initiative to identify former subjects who had moved out of Macon County. Dr. Theodore J. Bauer of the USPHS “furnished state and local health officials across the country with the names and addresses of subjects in their vicinities and asked his colleagues to bring the men in for examinations. He sent each health officer an examination kit and in some instances arranged for PHS officers to bring the

29 Jones, Bad Blood, 180-81.
30 Digitized images from NARA show Rivers and several doctors drawing blood at a number of locations, including an unidentified building that resembles Shiloh church. These images are probably from the 1950s and can be found at http://www.archives.gov/research/arc/index.html. All of the digitized materials can be pulled up using search term “Tuskegee Syphilis Study” but individual items of interest can be pulled up by ID number: 956091, 956107, 824600, 956126, 956102, 824607.
subjects to the clinics and hospitals."31 Since this MPS is focused on Macon County, the authors have made no efforts to identify the locations outside of Macon County where tests of subjects took place. In his history, James Jones notes that “good cooperation” came from Chicago, Cleveland, Detroit, and New York.32

The “roundups” in rural Macon County were popular training exercises for USPHS professionals, especially once the improved county roads of the post-World War II era made the trips easier and faster to complete. Nurse Rivers talked about the difficulty of the on-site visits and transportation to an interviewer in 1977: “I used my new Chevrolet with the rumble seat to bring these people in. And the roads were very, very poor then. . . . I did at least two trips a day in the early days and sometimes it’d be three.” Where there were concentrations of subjects, Rivers would send them a notice to meet at a central location to be picked up for testing. She explained: “we would send them a notice and they would come to their center and where they were, we originally picked them up.” Interestingly, Rivers believed that the men gained confidence and some community standing by being involved with the project; in fact those who lived in the truly isolated corners of the county treasured the opportunity to come to Tuskegee, the county seat, and the Tuskegee Institute. “There were many men who had never been to Tuskegee,” she recalled.33 Historian Susan L. Smith believes that Rivers’ involvement with the communities was what kept rural African Americans engaged in the medical project.34

The later roundups of the 1950s were popular with young USPHS professionals. Jones explained:

Long after the public had become disturbed over racial injustices in the South, the PHS still had staff members who were eager to conduct the roundups in Alabama. . . . Most were young doctors with little clinical [sic] experience. The trips to Tuskegee gave them a chance to sharpen their diagnostic skills by observing the complications of late syphilis. Thus, in addition to collecting blood samples and stimulating the subjects’ interest, the roundups served as a training program for young officers.35

A memo from the USPHS to the study’s subjects across the county dates to 1955 and details where these roundups between test doctors and USPHS officials took place. The memo stated

31 Jones, Bad Blood, 184.
32 Ibid.
33 Reverby, Tuskegee Truths, 323, 324.
35 Jones, Bad Blood, 186.
“The Government doctor will be here next week. Be sure to meet him at the time and place listed below that is nearest your home.” It next listed the places that the doctors would visit from November 1 to 4, 1955. The rural locations were a combination of churches, schools, and crossroads stores while the last day of the study took place at the Macon County Health Office in Tuskegee.

Exactly when the USPHS “roundups” ceased is difficult to determine by USPHS records. In the 1960s to April 1970, Nurse Rivers drove to locations to pickup subjects and bring them to the VA hospital or the Macon County Health Department for testing.37

Despite the questions at the beginning of the decade, the study produced its largest amounts of scientific publications during the 1950s. In 1953, Eunice Rivers, Stanley H. Schuman, Lloyd Simpson, and Sidney Olansky produced the seminal report of the project to date, “Twenty Years of Followup Experience in a Long-Range Medical Study” in Public Health Reports. The authors detailed the project and in one section of the report, explained how the outreach to subjects in the rural communities took place.

The annual blood tests and the surveys were always scheduled at “slack” times, between fall harvest and spring planting. The patients congregated in groups at churches and at crossroads to meet the nurse’s car in the morning. As the newness of the project wore off and fears of being hurt were relieved, the gatherings become more social. The examination became an opportunity for men from different and often isolated parts of the county to meet and exchange news.38

From 1954 to 1956, six more professional articles were published in the journals Public Health Reports, the Journal of Chronic Diseases, and the A.M.A. Archives of Dermatology. Little wonder that in 1958, the USPHS was in a self-congratulatory mood. The U.S. Department of Health, Education, and Welfare awarded Eunice Rivers its highest commendation, the Oveta Culp Hobby Award. The USPHS also gave each of the surviving subjects an official Certificate of Appreciation along with $25, representing $1 for each year the subject had been part of the syphilis study.39

36 Public Health Service to Dear Sir, October 18, 1955, CDC Papers, Tuskegee Syphilis Study Administrative Records, 1930-80, Box 16, Folder Alabama-Misc., National Archives, Southeast Region. Also cited in Reverby, Tuskegee Truths, 102.
37 Reverby, Tuskegee Truths, 103.
39 The certificate is reproduced in “The Tuskegee Study” web-based exhibit,
By the 1960s, the USPHS recognized that Nurse Rivers’ standing and reputation in Macon County was not enough to guarantee consistent cooperation among the subjects as they got older. The novelty of trips to Tuskegee, and a free lunch, was not enough. The agency approved giving each subject a nominal amount—$1 no more than $2—to continue in the project. It also changed the times for the roundups from the winter to the summer so everyone could benefit from better weather; the subjects were old men now and earlier concerns about interfering with work were no longer significant.40

“As times passed officials simply assumed that the study would continue until the last subject had died,” noted historian James Jones. “It was as though the PHS had converted Macon County and the surrounding areas into its own private laboratory, a ‘sick farm’ where diseased subjects could be maintained without further treatment and herded together for inspection at the yearly roundups”.41

But the mid-1960s also witnessed the slow awakening of the medical community to the inherent abuse of the USPHS syphilis study. In 1965, USPHS officials received their first letter of protest, from a physician, Irwin J. Schatz, from the Henry Ford Hospital in Detroit. The agency’s response was to suppress the letter, and to ignore it. Dr. Anne R. Yobs told her colleague Dr. E. J. Gillespie on June 15, 1965: “This is the first letter of this type we have received. I do not plan to answer this letter.”42

IV. A Controversial End, 1966-1975

The study continued, even as a San Francisco-based sexually transmitted disease investigator (Peter Buxtun) questioned the worth and the morality of continuing the study in 1966. Buxtun’s questions and memos are the first known evidence within the agency of internal dispute about the syphilis study. After he left the agency, Buxtun continued to question the study. By February 1969, USPHS convened a panel of experts (which did not include any African American physicians) to consider the future of the study. A majority of the experts confirmed the need for the study but Dr. Gene Stollerman of the University of Tennessee Medical College objected and strongly recommended that the subjects be given immediate treatment, and be

[41] Ibid.
[42] Anne R. Yobs, M.D. to Dr. E. J. Gillespie, June 15, 1965, CDC Papers, Tuskegee Syphilis Study Administrative Records, 1930-80, Box 8, Folder 1965, National Archives-Southeast Region.
considered patients not just subjects. The ad hoc committee recommended that the study continue.43

With the new endorsement, USPHS also contacted officials in Macon County and at Tuskegee Institute to reaffirm their support for the study's continuation. Later that year, USPHS officials met with the Macon County Medical Society and received a strong endorsement from the local medical community to continue the survey. It also reconnected with Tuskegee officials at the John A. Andrew Hospital in April 1970. Hospital officials agreed to conduct X-ray exams for the subjects at the facilities in their new hospital wing.44

By the end of the summer of 1970, the USPHS syphilis study, despite the internal debate over the past year, had gained new momentum, even though staff now admitted that the first four decades of the study had been marred by several instances of bad science. On September 10, 1970, Dr. James B. Lucas, the assistant chief of the USPHS Venereal Disease Branch, concluded that “it must be fully realized that the remaining contribution from this study will be largely on historical interest. Nothing learned will prevent, find, or cure a single case of infectious syphilis or bring us closer to our basic mission of controlling venereal disease.” But, like his colleagues, Lucas still recommended that the study "may be continued along its present lines with periodic clinical observation and serologic surveillance."45

A 1972 memo from Dr. Don W. Printz of the Center for Disease Control’s Venereal Disease Branch to Nurse Elizabeth M. Kennebrew of the Macon County Health Department (Kennebrew succeeded Rivers as the primary public health nurse involved with the study) underscored how little the study had changed over 40 years of activity. Dr. Printz told Nurse Kennebrew that 80 percent of her work week needed to be devoted to the Tuskegee subjects since the federal government was sponsoring her position at 100 percent of her work week. Printz wanted Kennebrew “to make personal contact with every patient being followed in the Tuskegee area at least once every 2 months. The excellent rapport which Mrs. Laurie [Nurse Rivers’ later married name] had with these patients cannot be achieved overnight, but I believe a regular system of visitation will aid you in doing this.”46

43 Jones, Bad Blood, 194-196.
44 Ibid., 199.
46 Printz to Kennebrew, April 27, 1972, CDC Papers, Tuskegee Syphilis Study Administrative Records, 1930-80, Box 12, Folder Personnel Arrangements, National Archives-Southeast Region.
In the summer of 1972, however, Peter Buxtun provided an Associated Press reporter with details about the story, and the resulting news stories provoked outrage across the country. In the Oakland (CA) Post of November 26, 1972, Augustus Hawkins called the study "a demonstration of utter brutality and noncompassion." In the Memphis Tri-State Defender, Benjamin E. Mays concluded: "The Negroes were influenced to take part in the study by the U.S. Public Health Service by promising the Blacks the basic needs; food, clothing, shelter, and a "decent" burial. The officials of the Public Health Service have admitted that this dastardly deed is morally wrong. Those who are responsible should be tried for murder if they are still alive." The Washington Post called the study "a new medical mystery in several aspects. A chiller in its effect on any reader. And perhaps a murder story, by some allegations—allegations hotly denied by doctors who were involved." By the end of October, the U.S. Department of Health, Education, and Welfare called for the immediate end of the study. It would not end, however, until the following March 1973.

The official end of the USPHS Syphilis Study in Macon County, Alabama, did not end the controversy, either at the local or national level. HEW established a special investigation panel in the summer of 1972, but the HEW assistant secretary limited the questions that the panel could investigate and also only gave them a few months (first ending in December 1972 and later extended to March 1973) to complete the investigation. During the extension, Congressional hearings took place, and the depth of the scandal gained wider public knowledge. Testimony by Charles Pollard, a member of the Shiloh Missionary Baptist Church, was especially effective and moving.

By the time the ad hoc committee announced its findings in the spring of 1973, the medical profession was fully engaged with what was known as the Tuskegee Study. The committee was scathing in its criticism of USPHS and the study. The panel concluded: "the scientific merits of the Tuskegee Study are vastly overshadowed by the violation of basic ethical principles pertaining to human dignity and human life imposed on the experimental subjects."

48 Augustus Hawkins, "It is Too Genocide," Oakland Post, November 26, 1972.
49 Benjamin E. Mays, "My View: Planned neglect caused VD Death," (Memphis) Tri-State Defender, August 19, 1972;
52 Reverby, Tuskegee Truths, 136-141.
53 Jones, Bad Blood, 210-211; quotation from Reverby, Tuskegee Truths, 171.
Reactions within the American medical profession were mixed. Dr. R. H. Kampmeier of the Vanderbilt University School of Medicine asserted in the *Southern Medical Journal* that the “hue and cry” was really little more than a “tempest in a teapot.”54 But the majority of physicians agreed that the study was immoral.

The subjects also sued the federal government for damages, with a lawsuit filed by attorney, and civil rights activist, Fred Gray in July 1973. By the end of 1974, the lawsuit was settled, with a $10 million out-of-court settlement, giving $37,500 to each surviving subject, $15,000 to the heirs of any deceased subject, $16,000 to the surviving controls, and $5,000 to the heirs of deceased controls.55

But the debate about the legacies of the USPHS study in Macon County continued to the end of the century. In a ceremony at the White House on May 16, 1997, President Bill Clinton offered the remaining victims an official apology from the federal government:

> Medical people are supposed to help when we need care, but even once a cure was discovered, they were denied help, and they were lied to by their government. Our government is supposed to protect the rights of its citizens; their rights were trampled upon. Forty years, hundreds of men betrayed, along with their wives and children, along with a community in Macon County, Alabama, the City of Tuskegee, the fine university there, and the larger African American community. The United States government did something that was wrong—deeply, profoundly, morally wrong. It was an outrage to our commitment to integrity and equality for all our citizens.56

The debate over the legacies of the USPHS syphilis study continue today, led by the forum created at the National Center for Bioethics in Research and Health Care at Tuskegee University, an initiative announced by President Clinton in his official apology of May 16, 1997.

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56 Ibid., 163-164.
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F. Property Types

Cemeteries

Cemeteries associated with the U.S. Public Health Service Syphilis Study are potentially eligible historic cemeteries if they contain the burials of subjects listed in Gray’s *Tuskegee Syphilis Study*, 6-9, and if they retain their historic integrity to the time of the burial of the subjects. As detailed in the narrative, the Tuskegee Study subjects were significant at the time of their death. Most of these cemeteries are associated with historic church congregations. They may be assessed as places of reconciliation and memorial due to the burial of subjects of the study. Before 1973, no one knew that the individuals associated with the study would have significance. Thus, early grave markers are often unadorned in appearance. Later grave markers, after 1973, may serve as memorial markers about the victims of the study.

Below is a list of potentially eligible cemeteries—assessed in that manner due to the fact that subjects are buried at these cemeteries. These cemeteries, outside of Shiloh Community Cemetery, Mt. Pleasant Baptist Church Cemetery, Creek Stand Church Cemetery, and Cooper Chapel Church Cemetery, have not been assessed for integrity.

Ashdale Cemetery, 901 Wright Street, Tuskegee

Shiloh Community Cemetery, Highway 80 at Pistol Range Road. This historic cemetery has been closely assessed and would be a potentially eligible property. The historic sections of the cemetery are apparent by design, with graves beginning in the late 19th century. Charlie Pollard is buried in this cemetery.

Saint Paul Missionary Baptist Church Cemetery, 14650 County Road 2

Macedonia Baptist Church Cemetery, 1260 County Road 10

Bethlehem Cemetery, County Road 14, Notasulga vicinity

Damascus Baptist Cemetery, 4407 County Road 19, Hardaway vicinity

Nebraska Baptist Church Cemetery, 3005 County Road 13

Mt. Nebo Baptist Church Cemetery, 7677 US 29S

Spring Hill Cemetery, Morgan Russell Road off US 29
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St. John Baptist Church, 515 Saint John Church Road, Notasulga,

Rising Star Baptist Cemetery, 2603 County Road 53

Mary Magdalene Church Cemetery, 4294 Cross Keys Road, Shorter vicinity

Mt. Pleasant Baptist Church Cemetery, 7670 Red Road, off County Road 26

Creek Stand Church Cemetery, Slim Road off County Road 10.

Cooper's Chapel Church Cemetery, 11535 County Road 10

Shady Grove Missionary Baptist Church Cemetery, Shady Grove Road, Tuskegee vicinity

Reeltown Church Cemetery, 18564 Highway 49 S

Simmons Chapel Cemetery, 6601 County Road 37

McCray's Chapel Cemetery, Notasulga vicinity

Medical Facilities

Medical facilities are defined as buildings where testing and examinations of the study subjects took place or where the autopsies were performed. Medical facilities associated with the U.S. Public Health Service Syphilis Study include buildings both at Tuskegee University and the adjacent historic Tuskegee Veterans Administration Hospital, 2400 Hospital Road, in Tuskegee.

The John A. Andrews Hospital at Tuskegee University was built in 1912 and then experienced significant expansions in 1930, 1940, and 1946. It closed in the 1980s. The building was later renovated in 2006 into the National Center for Bioethics in Research and Health Care. This major renovation and remodeling left little of the hospital's defining features from its period of significance intact, except for the exterior of one section of the building that has been renovated into a museum and archives.

The Tuskegee Veterans Administration Hospital was established in 1923 on 300 acres donated by Tuskegee Institute. The campus experienced significant expansion and renovations c. 1946, c. 1962, and c. 1990. In 2009, officials began the process of renovating Building 62, one of the initial buildings at the hospital, for future residential use. Several additional historic buildings from the period of significance are extant, but have not been assessed for their architectural and

**Residences associated with prominent persons.**

These residences must be significantly associated with individuals who are significantly involved as important officials or community leaders associated with the USPHS Syphilis Study in Macon County. These individuals would include Eunice Rivers, Dr. Jesse Peters, and subjects who testified in the Congressional hearings of 1973: Charles Pollard, Herman Shaw, Carter Howard, and Lester Scott. If such residences exist, they must, as the NPS guidelines state, be “most closely associated with a person’s productive life.” In this MPS, that would mean that the residences must be the dwellings where Rivers, Peters, Pollard, Shaw, Howard, and Scott lived the majority of the years 1932 to 1973, the time-span of the study.

**“Roundup” Centers.**

Roundup Centers are extant historic schools, churches, and sites (crossroads) where USPHS officials met subjects to transport them to the Tuskegee Institute for testing or where USPHS officials carried out blood tests and general examinations in the field. For the purposes of this multiple property study, a 1955 USPHS memo detailing locations for “roundups” has been used to identify these locations in Macon County. The locations include churches, two schools, a railroad depot, and lodge buildings.

In the summer of 2008, members of the Shiloh Community Foundation together with faculty and staff from Tuskegee University and the Center for Historic Preservation at the Middle Tennessee State University surveyed each of the locations listed in the memo. In conducting the survey, several of the locations retain their building(s) from the 1950s and exhibited historical and architectural integrity. These locations are:

**Shiloh Missionary Baptist Church and Shiloh Rosenwald School, 7 Shiloh Road, off Alabama Highway 80.** Listed in the 1955 memo. This exceptional property contains two buildings that are both associated with the USPHS syphilis study. The church building is a gable-front frame building with a frame bell tower serving as a prominent landmark along the highway. The building has been sided in vinyl, c. 1990, but the interior of the building retains its c. 1916 appearance, complete with decorative painted graining on doors, pews, wainscoting, and other defining features of the building. The Rosenwald School, built c. 1922 and remodeled c. 1936, retains its historical and architectural integrity from the 1930s when a New Deal agency expanded the industrial room and made other interior and exterior changes. Both buildings have been listed in the Alabama Register of Landmarks and Heritage.
Cooper's Chapel AME Zion Church, 11535 County Road 10. Listed in 1955 memo. This brick gable-front building, with distinctive brick buttresses, dates to 1950. It stands at a prominent crossroads of county roads 5 and 10 in the eastern part of Macon County. It exhibits exceptional sense of association, place, materials, design, and workmanship.

Creek Stand AME Zion Church #1 and Cemetery, Slim Road off of County Road 10. Location listed in 1955 memo. The congregation established a church and cemetery in this isolated rural location in 1895; the present church building was remodeled to its current appearance as a gable-front, concrete-block veneer building c. 1950 with a later 1995 entrance addition. Historic trees surround the church and the cemetery contains a strong sense of historical integrity.

St. Paul Missionary Baptist Church and Armstrong School, 14650 County Road 2. Location listed in 1955 memo. St. Paul Baptist Church is a brick-veneer gable-front building that fronts County Road 2. Armstrong school is one-story frame school building that dates to the 1910s, and was probably a pre-Rosenwald Fund school building. A small cemetery adjoins the property. The location and buildings exhibit exceptional sense of association, place, materials, design, and workmanship.

Ft. Davis Passenger Depot, Alabama Highway 2 at US Highway 29S. This frame, gable-roof building, c. 1920, may have been a gathering place as it is the village's primary landmark.

Mt. Nebo Missionary Baptist Church and Mt. Nebo #511 Masonic Lodge, 7677 US 29S. Location listed in 1955 memo. The brick church (1908), with a prominent brick bell tower at its gable entrance, and the square two-story concrete block lodge, both date to the historic period of the USPHS study and stood in this location at the time of the 1955 memo. The church building has been expanded with additions to the rear and it has new windows and other remodeling from c. 2000. The two-story, metal hipped roof concrete lodge (c. 1950) retains a high degree of historical and architectural integrity. It retains its bracketed roof while brick lintels define its symmetrical casement windows. According to residents, and judging from the use of casement windows, the lodge building dates c. 1950. Both buildings stand at a prominent crossroads, where US Highway 29 connects with County Road 47 that carried traffic east to the Macon County Training School. Official USPHS photographs from c. 1950 show subjects gathered at a local store, named Davisville, which no longer exists, but once stood at this crossroads.

Mt. Pleasant Missionary Baptist Church, 7670 Red Road, off County Road 26. Location listed in 1955 memo. This congregation dates to 1870 and the present building is a c. 1950 concrete block building that received a major remodeling with a new concrete wing in 1990. There is a
central bell tower above the entrance. The historic cemetery has identified burials of subjects from the USPHS study, such as Fred Simmons.57

Simmons Chapel AME Zion Church (1939, 1976), 6601 County Road 37. Location listed in 1955 memo. This concrete block, gable front church dates to 1939. Although remodeled in 1976, at the end of the period of significance for the USPHS study, the setting and sense of association retain a strong sense of time and place at this rural location on County Road 37. Large trees frame the lot, which contains a historic cemetery that wraps around two sides of the church.

Mt. Zion AME Zion Church (c. 1950), 3140 County Road 37. Location listed in 1955 memo. The twin entrance towers, dual arched entrances and concrete buttresses made this concrete block building a prominent sacred landmark in mid-century Macon County. A historic cemetery lies to the immediate east of the building. It exhibits exceptional sense of association, place, materials, design, and workmanship.

Nebraska Missionary Baptist Church. 3005 County Road 13. Location listed in 1955 memo. This large rural property has two church buildings. The one-story, unadorned frame, metal gable roof building with a brick pier foundation dates to the period of the USPHS study. It was built c. 1900. The later brick building (1980) is outside of the period of significance. The historic building is one of the oldest church buildings in this survey and retains an exceptional sense of association, place, materials, design, and workmanship. The setting of the lot, with large mature trees and a historic cemetery, adds to the significance of the site.

Mt. Zion AME Zion Church at Chesson, 237 Chesson Plantation Road. The 1955 memo listed Chesson as a “roundup” location. Once a large plantation, this c. 1960 concrete block, gable-front church building is the only prominent community landmark extant. Its large lot, with mature trees, retains a strong sense of place and association to the time of the USPHS study. Whether the church was the “roundup” location remains to be determined and needs additional field research.

Pinkston’s Store, Old Federal Road, Shorter vicinity. Location listed in 1955 memo. This frame, gable front, metal roof, rectangular-shaped store building dates to c. 1920. Directly fronting the highway, the building retains a strong sense of association, place, materials, design, and workmanship.

Bethel Grove Missionary Baptist Church. 3481 County Road 30. Location listed in 1955 memo. This small frame, gable-front vinyl-sided church is located in a prominent curve of the county road, making it visible from either direction from some distance away. The setting of the lot, with large mature trees, adds to the significance of the site. An adjacent Rosenwald school, also named Bethel Grove, was moved c. 1980 to the lot of the Bradfords Chapel Methodist Church and is now used for Sunday School classes.

Macon County Training School. County Road 16. Listed as “Cross Roads” in the 1955 memo. A historic photograph from the National Archives, ARC identifier 956150, shows a subject standing in front of the c. 1950 section of the school complex. Today the school is closed but it retains its 1950 sections as well as later additions from c. 1970. The school complex stands at a prominent rural crossroads and the setting of the property retains a high degree of historical integrity.

Pine Grove AME Zion. 3217 County Road 22. Listed as Cotton Valley in the 1955 memo. The property contains two buildings: a concrete block, gable-front church that dates to c. 1965 and a two-story, frame Masonic Lodge, c. 1920, that has a metal gable roof and a brick pier foundation. These two properties mark the remnants of the Cotton Valley community; the nearby Rosenwald school burned c. 1990. A strong sense of association and place distinguishes this property. Interviews with church members and residents at the church in 2008 determined that the church and the lodge, not the school, was the “roundup” location in the 1950s and 1960s.

Registration Requirements

The property types for Medical Facilities, Residences, and “Roundup” Centers are most often eligible under Criterion A under the themes of Ethnic Heritage: Black, Health/Medicine, and Social History. To meet Criterion A eligibility, the property must be directly associated with significant historical events and/or pattern of events in the history of the USPHS Syphilis Study in Macon County, Alabama.

Cemeteries also are a property type eligible under Criterion A under the theme of Ethnic Heritage: Black due to the fact they are in many cases the only extant historic property associated with an individual subject. They also serve a commemorative role for the local African American community in regards to the victims of the study and their memory.

To meet Criterion B eligibility, the property must be associated with a prominent person in the history of the history of the USPHS Syphilis Study in Macon County, Alabama and the property
must be associated with that person during their period of significance in the syphilis study. It should also be the primary property associated with the individual and his/her period of significance.

**Integrity**

Properties may meet registration requirements if they possess sufficient character and integrity to retain their sense of time and place from their period of significance during the U.S. Public Health Service Syphilis Study. If the property lacks the significant distinguishing features from its period of significance, no matter how just and well intentioned those renovations may be, the property no longer possesses integrity for that period of significance.

Key questions to raise about the integrity of property types in this nomination are:

- **Location.** Is the property situated on its historic lot from its period of significance during the syphilis study?
- **Association.** Is the property located at the place of its construction at the time of its significance in the syphilis study?
- **Setting.** Is there an intact historic setting for the property during its association with the syphilis study intact? Do substantial modern intrusions, such as highways, commercial development, and modern outbuildings, sites, and structures, exist? Are these intrusions located on the property or on immediate adjacent property? Are the modern intrusions so distracting that they lessen, or eliminate, the sense of time and place conveyed by the historic property?
- **Feeling.** Does the property and its lot retain an ability to convey a sense of time and place from its period of significance during the syphilis study?
- **Design.** Are the design qualities— as represented by its distinguishing significant architectural elements and features—from the property’s period of significance during the syphilis study still extant and apparent? Many of the properties are significantly associated with the syphilis study as “Roundup Centers” and their design qualities from the late 1940s to the early 1960s should be extant.

Cemeteries with a majority of gravemarkers dating after 1973 are not potentially eligible for listing in the National Register since they do not retain their integrity to the period of significance of the U.S. Public Health Service Syphilis Study.
G. Geographical Data

The survey for this multiple property submission included properties associated with the U.S. Public Health Service Syphilis Study, 1932-1972, within the boundaries of Macon County, Alabama.

H. Summary of Identification and Evaluation Methods

In the summer of 2008, staff from the Center for Historic Preservation at Middle Tennessee State University worked with officials from the Shiloh Community Foundation and Tuskegee University conducted field surveys to identify (1) potential historic properties associated with the syphilis study not already listed in the National Register (2) document extant properties detailed in a 1955 memo on “roundup” locations in Macon County and (3) identify cemeteries which contained burials of study subjects. The fieldwork led to additional documentary research on the syphilis study and its associated properties, and was completed by June 2009.
I. Bibliography


Center for Disease Control Papers, Tuskegee Syphilis Study Administrative Records, 1930-1980, Box 5, Folder Correspondence, National Archives-Southeast Region, Atlanta.


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Moton, R.R., Papers, GC, Box 180, Folder 1516, Public Health Service, Tuskegee University Archives, Tuskegee, AL.


Tuskegee Syphilis Study, HEW Report Documents, Bound Book II, Tuskegee University Archives, Tuskegee, AL.

U.S. Department of Health, Education, and Welfare, Tuskegee Syphilis Study Ad Hoc Advisory Panel, Box 2, Ad Hoc Committee Folder, MSC 264, National Library of Medicine, History of Medicine Division, Bethesda, MD.

USPHS Division of Venereal Diseases, RG 90, Box 239, Folder 2, Macon County, National Archives, Washington, D.C.