



## The Unwanted Help? Enslaved African Americans and their Aging White Masters

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### Abstract

This essay explores whether or not the enslaved African American provided caregiving to their aging white 'masters' and other elderly whites in early America. Although there is plenty of historical mention of the 'house slave', housework, and caregiving for the children of slave owners, there been very little mention of eldercare across racial lines before the 20th century. This essay does not provide any new historical data. Instead, it sketches out the possible issues involved in the racialization of care and suggests options for its potential historiography.

*Keywords:* American Slavery, Race, Aging, Caregiving

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# The Unwanted Help?

## Enslaved African Americans and their Aging White Masters

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### Introduction

Aging and the business of caregiving bring to the foreground the nature of family and social relationships, and that most sacred American value—the self-made individual, autonomous and independent to the bone. Against this backdrop is a competing sentiment, one that idealizes the traditional bonds and emotionally charged ‘kinships’ that keep society together. In this vein, the real fear is not so much that society is breaking apart, but rather that no one really cares about your wellbeing when you reach old age—not your doctor and quite possibly not even your adult children. In this context, caring about caregiving is just another political slogan. Who then is providing the care work?

In this essay, I float the idea that enslaved African Americans provided caregiving to their aging old white masters, but since it was such a taboo subject, not much has been accounted for in the historical archives. Eldercare is still predominantly found in the family, but today more and more people are living longer and developing conditions, such as Alzheimer’s, that require further hands-on and incessant care. For many of the elderly residents in these long-term care facilities, this means being washed, bathed and fed by a non-family member, and quite possibly as the anecdote goes, by someone (primarily female) with a darker shade of skin. The racialization of care is not something new, but it has evolved in complicated ways bridging the Global North and South in a political economy that devalues caregiving and sometimes (ironically) the recipients of care. In her book on the devaluation of care work, sociologist Evelyn Nakano Glenn points out that, “gender, class, race and citizenship status are central axes in the social organization of caring” (Glenn 2010, 184), and that two types of coercion have come to shape care work. The first type of coercion is status obligation pertaining to the role of women as dutiful mothers, wives and daughters. Glenn refers to the second type as “racialized gendered servitude” (Glenn 2010, 7). What I want to focus on here is a consideration of the caregiving relationship between particular people, or rather that relationship as a structural feature in the social, economic, and historical context of American Slavery. By looking through the racial double mirror of today, and turning our attention to history, this essay will formulate a set of preliminary heuristic responses to the following question: Did enslaved African Americans provide caregiving to their elderly and aging white slaveholders?

There has been much written about the kinds of domestic work and unpaid labor the enslaved African Americans had to perform in the slave economy. Allen argues in a revisionist way that the ‘mutual helping tradition’ from Africa—uprooted and planted in ‘Black America’—gave rise to what is better known today as caregiving (Allen 1999, 2). Yet, there is a seeming lacuna in the historical accounts of certain kinds of intimate work. Quite simply, there is a dearth of evidence suggesting that interracial eldercare occurred from the early colonial period of America through to the early 20th century.

## Betwixt and Between, the Silent Proximity of a Taboo

Being destitute and elderly was a harsh reality for many in early America. If, “The history of old age in the United States has been shaped largely by the search for economic security” (Fleming et al 2003, 919), then enslaved African Americans who had the fewest resources were the most vulnerable. According to Kruger, “Slaves were considered to be too old for the slave trade at age thirty-six to forty” and that a “receipt given to the captain for his cargo of 290 blacks states that a group of impartial men had judged 89 of them to be over thirty-six years of age and that therefore ‘three of them must be counted for two’” (Kruger 1985, Chapter 9). Many enslaved African Americans, however, continued to work well into old age; some were given menial jobs while others were sold, hired out or simply abandoned. President George Washington writes in his will that, “there may be some [slaves] who from old age, or bodily infirmities and others who on account of their infancy, that will be unable to support themselves, it is my will and desire that [they] be comfortably cloathed and fed by my heirs while they live [...]” (see Washington’s Will). This gesture, however historically defined, did not typify the fate of older enslaved African Americans. Reginald Allen reminds us that, “During the slavery epoch, the label of ‘quadruple jeopardy’ was characterized for elderly African-American slaves [as]: 1) being old; 2) African; 3) poor; and 4) as a slave” (Allen 1999, 43).

The plight of old age and kinship (both real and fictive) surrounding eldercare, especially within the enslaved community, contributed to a sense of morality and responsibility. For Frederick Douglass, neglect of the elderly even became an abolitionist theme. Douglass tells us of his old grandmother in his well-known narrative. When she was found to be of ‘little value’, her slaveholders “took her to the woods, built her a little hut, put up a little mud-chimney, and then made her welcome to the privilege of supporting herself there in perfect loneliness; thus virtually turning her out to die!” (Douglass 1998, 2021). Douglass goes on to say, “If any one thing in my experience, more than another, served to deepen my conviction of the infernal character of slavery, and to fill me with unutterable loathing of slaveholders, it was their base ingratitude to my poor old grandmother. She had served my old master faithfully from youth to old age” (Douglass 1998, 2021). The plight of old age was not lost on the whites, but it took on a decidedly harsh reality for the enslaved African Americans. There are some accounts of loyal slaves who were freed in old age or accorded some level of gratitude. In a published and archived interview with Mary Henry, a slave and nurse to Mrs. Julia Dent Grant (wife of General U.S. Grant), the reader is told that Mrs. Dent wrote a letter and enclosed a sum of money for Mary Henry on her death bed. According to the interview, “[Mary Henry] is calmly awaiting the end, buoyed and consoled by the religion “Old Boss” and Mrs. Dent gave her [...] She wants to die, as she says, to join “Old Boss and Miss,” and to be buried in the same lot and in the same soil in the cemetery where rest their bones” (St. Louis Globe-Democrat 1900).

One might be tempted to assume that since enslaved African Americans were working not only in the field but also as nursemaids, midwives and house servants, there had to have been instances of eldercare. Given that the enslaved African Americans most likely sympathized with senescence and the plight of old age for the whites, was there a functional-cum-emotional human connection being created between enslaved African Americans and their aging white masters? If so, did this arise from the intimacy and nature of a nascent caregiving relationship? Did enslaved African Americans take care of old slaveholders and their aging white family members?

There are documented instances of deathbed scenes where enslaved Africans were called upon to pray for and sit with their masters. In one moving and comical account, former slave Mary Gladdy recalls a story told to her by her grandmother, Edie Dennis, about an enslaved African American named Chuck. In this story taken from the Work Projects Administration (WPA) collection of former slave narratives, Chuck—a religious and industrious enslaved African American—prays for his ill-stricken and atheist master. We are told that, “Chuck then went to his Master's bed side [...] and the white man recovered, was converted, joined the church, and became an evangelist. He also freed Chuck and made an evangelist of him. Then the two got in a buggy and, for years, traveled together all over the country, preaching the gospel and saving souls” (Works Project Administration 2007, 23). Slave narratives often mention that enslaved African Americans did most of the housework, especially women who cooked and took care of the masters’ and overseers’ families. Ellen Brass, a former ‘slave’, says rather bluntly near the end of her session with an interviewer that, “white folks ain’t got no reason to mistreat the colored people. They need us all the time” (Federal Writers’ Project 2001). For Bankole, “Africans were active participants in the care and treatment of illness/disease; and in assisting Whites in maintaining their own general health care” (Bankole 1998, 141). Yet given the paucity of primary 18th century records, more research needs to be done to explore the extent to which enslaved African Americans were allowed to interact with their old white masters and mistresses. Were they allowed to provide direct caregiving in the sense of ‘bed and body work’, or were their services only warranted in the deathbed scenes of annals past?

Since I am arguing that it is reasonable that the enslaved African American did take care of their aging and old masters, let me now set forth some conjectures. To begin with, perhaps there is an historical silence, signaling another reality where the enslaved African American did not provide any substantial caregiving to the elderly whites. Geriatrician Kevin C. Fleming claims that from 1650 to 1850, the number of elderly Americans was small, consisting of less than 2% of the population (Fleming et al 2003, 914). High birth rates and mortality meant that old age (and mainly for the whites) was commonly defined as life after the age of 60. Few survived to old age, but old age was not a defining factor for work or social life in early America; birthdays were accorded no special observance until the latter half of the 19th century (Chudacoff 1989). Furthermore, some elderly African Americans continued to work as sharecroppers well into old age—even after the emancipation proclamation. They lacked property rights and were thus prone to indigence and dependence. In the agricultural economy of preindustrial America, the standard of living for young and old alike was bleak. The price of labor mirrored the cost of living, and so people in general did not save much for their declining years.

There is insight to be gleaned from investigating what aging meant culturally and socially for the majority of whites before the industrial turn and the onset of poorhouses. For example, Carole Haber asserts that some (white) elders did in fact enjoy great power and prestige. But this was not because they were afforded special status simply by being old, but rather these elders were able to participate in society, and to maintain certain authority over valued assets (Haber 1983). For some, old age contributed to their high status as venerable elders. Haber suggests that even into advanced years, and in light of the fact that two decades could separate the birth of one’s first and last child, elders retained their parental roles and responsibilities. Additionally, David Hackett Fischer contends that during the colonial period, gerontocracy existed, and that the old regulated social norms and behaviors (Fischer 1977). For Fischer it was ultimately the changing cultural beliefs, religion, political theory and philosophy more than economics that signaled the end of gerontocracy and the beginning of gerontophobia. Between 1770 and 1820 Fischer found that the revolutionary generation sought a world as a young republic founded on revolutionary ideas, which removed elders from their thrones. In other words, “Republican principles of equality and liberty served to displace virtues of old age.

With [white] people of any age free and equal, there was little reason to reproduce the hierarchy of age" (Haber and Gratton 1994, 5).

Of course the story is not so simple. There are instances where some elders were in fact able to command respect and honor from their control of resources, but they did not always command affection or sympathetic understanding. The usual line of argument posits that the elderly did not conform to the spirit and culture of self-improvement. In other words, they were an embarrassment to the cultural regime of self-control and self-sufficiency. Moreover, aging whites in colonial America were supposed to detach from the world. They were to be somber, temperate and fixated on withdrawing from the quotidian world in order to prepare for salvation.

Therefore, who exactly were these old aging white masters and mistresses that the enslaved African Americans could have cared for, and what constituted their attitudes towards aging? Paula Scott argues that many Americans in the 18th and 19th century believed that God had set the age of man firmly at 70 years (Scott 1997). Scott draws upon 18th and 19th century books, poems, plays, almanacs, and newspapers to ascertain ideas on aging and the American elderly. Scott found that old age in its religious context was not a time of repose or relaxation, but of serious and unrelenting soul searching. Old age was a time of fortitude, a didactic modelling and a season of preparation for another world. God intended this season to test the old, pushing them toward spiritual betterment—so goes the ideology. Scott quotes Cotton Mather saying, "A trifling and childish and frolicsome sort of carriage, all buffoonery in an old man is very disagreeable" (Scott 1997, 33). Meanwhile, medical narratives professed something similar to the religious discourse at the time. Dietary restrictions and temperance could offer better control of one's health and longevity. But just how much foothold did religious attitudes and medical prescriptions have toward aging is still not very clear.

All in all, this is a longwinded way of saying that slaves might have provided caregiving for their aging white masters, but in a quite different way than we think, because caregiving was not about elongating life and battling disease, but about spiritual caregiving and salvation. Did the enslaved African American have a direct role in the meaning and exigency of old life and death in the white Christian world? Since many of the black family members were sold and scattered throughout various plantations, they were not afforded the luxury of having nuclear family households. Furthermore, if we take it that the elderly were culturally and religiously expected to wean themselves from worldly and quotidian concerns, then (re)assigning house servants to care for the elderly might have been too much of a real world reminder and intervention.

Another major issue soon arises, namely, that the slaveholder's brand of paternalism was used to regulate and justify a system of exploitation (for more see Genovese and Fox-Genovese 2011). It was the slaveholder's romanticized and 'compassionate' rationalization of 'Christian slavery' that led enslaved African Americans to be considered children and property that needed to be looked after. One distinguishing point, however, has to do with the status of the female house slave. Much has been written about the mammy stereotype. The mammy cooked, cleaned and above all else raised the master's children. McElya argues that the ambivalence and assertions of black people's contentment with servitude alleviated white fears on the one hand, but reinforced racial hierarchy on the other thus perpetuating the mammy stereotype (McElya 2007). Moreover, Sharla Fett suggests that, "African American Midwives sustained their calling by joining their skills as birth attendants to an astute consciousness of both intimate and public forms of power in antebellum slave society" (Fett 2006, 65).

These midwives crossed lines of class, community and race in fascinating ways. Stacey Close argues that while women house servants formed a link between slaves and their slave owners; they also exerted small acts of resistance (Close 1995 and Close 1997). For example, they taught the slave owners' children superstitions, how to count in an African language, and aided runaway slaves. Yet even in this light, and despite the fact that the mammy was often regarded as being closer to the white family than her counterparts in the field, did she and was she allowed to provide eldercare in the master's bedroom?

Another reason why there might not be any explicit evidence regarding how enslaved African Americans cared for their aging white masters, centers around the notion that caring for the elderly was not just a religious and spiritual matter but also a medical one. Sharla Fett argues that there existed a cultural divide between two different models of health, the body, and medicine in southern slave plantations. The power dynamics involved in these regimes might have dissuaded such caregiving instances. According to Fett, "Enslaved African Americans were not passive victims of medical malice, nor were they helpless dependents on white health care. Instead, communities in slavery nurtured a rich health culture, a constellation of ideas and practices related to well-being, illness, healing and death that worked to counter the onslaught of daily medical abuse and racist scientific theories" (Fett 2002, 2). It is not a surprise that slave owners subjugated African Americans under regimes of control; the enslaved African American's overall state of health was by extension related to his/her wealth in the marketplace. Furthermore, Glenda Sullivan discusses the "sick house" as a place where slaves received medical care on larger plantations (Sullivan 2010). Enslaved African Americans were distrustful of white physicians and their medical institutions. The sick house functioned as a space where masters and plantation mistresses could supervise their slaves' progress and convalescence. In other words, institutional/white medical care were sites of disciplinary power and control tools over their 'financial investments'. On the flip side, black healers grounded their healing work in notions of spiritual power, human relationships and community resourcefulness, addressing a wider range of healing and cosmic exigencies than the slave owners found legitimate. Fett goes on to say that, "Self-reliant traditions of African American doctoring countered these objectifying definitions of slave health with an original and compelling view of human well-being. Unlike southern planters, enslaved men and women did not assume that they shared mutual health interested with their enslavers" (Fett 2002, 198). Not only were competing views of personhood being articulated through white and black medical systems, but the hierarchal nature of slave society made it hard for whites (even if they wanted) to accept forms of caregiving that were holistic and what we might describe today as person-centered care. If elderly whites constituted their own practices, is it reasonable to assume that the enslaved African American still found a way to integrate themselves into a system – which shaped illness experience and end of life care/support?

Finally, there is the thorny issue of touch and intimacy. Perhaps the sight and thought of a black hand on an old white body was taboo, inhabiting an uncomfortable space of abjection. It might have been the case that having an enslaved African American wash, bathe and assist with toileting proved too much of an affront to an old slave-owner's sense of self-professed dignity. If acts of intimate caregiving did occur, they were certainly not out in the open or readily talked about. Enslaved African Americans and elderly whites signified two vulnerable groups, two interdependent pariahs which might have come into brief contact, sparking a liminality that put care before the juridical, women before men, old before young, and black before white. Approaching death and losing their positions in society, white elders 'faded into blackness'. Caregiving depends on degrees of trust. The issue is not one of betrayal, but rather would caregiving have undermined the nature of power and the forms of legitimacy the whites had over the enslaved African Americans? Sociologist Viviana Zelizer describes certain facets that obtain when people give and receive care in intimate settings.

For Zelizer, “Everywhere and always intimates create forms of economic interchange that [...] reproduce their relations, and distinguish those relations from others with which they might become confused: Are you my mother, my sister, my daughter, my nurse, my maid, or my best friend, [my slave]?” (Zelizer 2012, 277). Taken at face value, the intimacy embedded in acts of caregiving would have called into question relations of servitude, power, and control. It is thus likely that people thrown into situations where labor and intimacy collide, “draw on available cultural models, and they use power and persuasion to negotiate unequal social relations” (Zelizer 2010, 277). Ultimately, “care in intimate settings raises the fundamental questions: Who are we, and what do we owe each other?” (Zelizer 2010, 277). Thus, it is quite possible that the enslaved African American was distanced from these intimate and vulnerable care sites, especially if one recognizes that subtle acts of resistance threaten to undermine (even just momentarily) the ideology of paternalism.

## Conclusion

Rather than argue conclusively that enslaved African Americans did or did not provide caregiving for their aging white masters and mistresses, I have tried to point out some possible perspectives and the issues at stake. There are also some theoretical points that need to be taken up and elaborated. For one thing, how does a sociological theory such as social stratification situate itself in the context of slavery and cross-racial caregiving? Does caregiving for the elderly cut across social stratification in a way that carves out an intimate space that is too taboo to abnegate or even to think about? If there was in fact elder caregiving going on between slaves and their aging masters, how were their relations informed by the available emotional regimes of the time (Reddy 2001)? In other words, a theoretical treatment of the interactions between specific emotional capacities and the unfolding of historical and changing social circumstances could cast caregiving in a new political light. Antislavery sentiment and what Reddy calls emotives, or rather intersubjective emotional negotiations, could come to reframe our understanding of particular (and relational) histories. We need to know more about just who these aging masters were and whether or not enslaved African Americans in the north differed significantly in their interactions with elderly whites than their brothers and sisters in the south. Finally, how was the life course valued alongside the nature of work during slavery and even in the postbellum period? From Africa, the enslaved African Americans brought with them “[...] their beliefs about the universe, their views on death and dying, their conception of human existence, and a tenacious reverence for the aged” (Pollard 1965, 228). Old age was a ‘time approaching power’, and “old folks” were afforded honorable status with the trappings of wisdom, experience and ancestral views (Close 1997, Wimberly 1997).

In the end, we are left with an uncomfortable situation, which is most likely, a racist holdover from the past. One can find a handful of elders scattered across communities in America who still refuse to be cared for by attendants who are ‘darker skinned’. Slavery might be a sin of the past, but the intimacy of touch and its racialization means that for some people, those with black skins and white masks will always be unwanted, even if they are ‘the help’. It is true that slavery as an economic institution no longer exists in the United State, but informal racial segregation still does. Some whites and blacks have learned to ignore each other for different reasons, but because of the growing crisis in care and aging, those ‘racialized worlds’ will no doubt collide. By uncovering and investigating certain historical gaps, we can look squarely at how our conditioned habits of thought and relations come to inform our current practices, such as caregiving, in the hopes of doing away with prejudices once and for all.

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