SCHOLARLY REVIEW JOURNAL

E-ISSN: 2996-8380
Published by Leadership & Innovation Lab

WINTER 2025/2026

A Reckoning for Erasure: Putting *Anarcha Speaks* in Conversation with J. Marion Sims' *The Story of My Life*

By Abby Zhu

AUTHOR BIOGRAPHY

Abby Zhu is a Senior at Phillips Academy Andover, MA. She has a passion for the History of Medicine and Science, and hopes to pursue the field with a humanistic lens and focus on uplifting the historically omitted voices.

ABSTRACT

While many historians and medical researchers often refer to James Marion Sims as the "Father of Gynecology," what many fail to recognize is that the field of gynecology, a field dedicated to women, was developed through the nonconsensual vesicovaginal fistula experimental surgeries on enslaved women. The process of Sims' experimenting was recorded in his autobiography, *The Story of My Life*; however, due to the blatant racism, dehumanization, and misrepresentation of its subjects, this paper calls into question the credibility of the autobiography as a primary source for historical research. Instead, the paper turns to Dominique Christina's *Anarcha Speaks*, a poetic reimagining of the surgeries from the perspective of one of the enslaved women, Anarcha, to humanize and challenge what one may refer to as historical fact. This paper argues that putting these two texts, written in entirely different time periods and political contexts, into conversation with each other is crucial to properly reckon with the absence of the victims' perspectives.

Key Words: *Gynecology, Anarcha, James Marion Sims, Historical Accuracy, Slavery and Medicine, Antebellum South, Vesicovaginal Fistula, Racism and Prejudice, Dehumanization and Objectification, Medical Stereotypes, Black Women's Health*

SCHOLARLY REVIEW JOURNAL

E-ISSN: 2996-8380
Published by Leadership & Innovation Lab

WINTER 2025/2026

INTRODUCTION

> "When we talk about women's medicine, as it is performed today, there's blood all over it. There's devastation all over it. And torture underneath it. And so many bodies. It is its own mass grave." – Dominique Christina, author of *Anarcha Speaks*

While historians trace the practice of female physiology back four thousand years ago in the Kahun Gynecological Papyrus of the Twelfth Egyptian Dynasty, the field of modern-day gynecology frequently credits its birth to one man: Dr. James Marion Sims, also known as the "Father of Gynecology," for his treatment of a vesicovaginal fistula (VVF) (Covington Women's Health Specialists, 2022, para. 1). But the path to this discovery was not without casualties – Sims performed over thirty unanesthetized surgeries on each of the (at least) ten enslaved women (Spettel and White, 2011, p. 2424). Though contemporary researchers seem to principally rely on Sims' 1884 autobiography, *The Story of My Life*, and his VVF publication as primary sources for medical education and a historical record of his career, these one-sided accounts entirely disregard the humanity of the women who might just as easily be referred to as "victims" instead of "patients." Gynecology, a field *for* women and dedicated to the betterment of their health, has been historically dominated by and credited to white men, all while advancing at the expense of Black female bodies. In the absence of any account written by any of the enslaved women is a collection of poems called *Anarcha Speaks* by Dominique Christina, published as recently as 2018; it attempts to fill in the gaps of Sims' autobiography by reimagining history through the perspective of one of his test subjects. Despite the ways in which Christina's work uses fiction and metaphor to reckon with true events, her work should be arguably as fundamental and legitimate – if not more so – to our understanding of gynecology and its origins as Sims' own one-sided recollection of his work.

HISTORICAL CONTEXT

I. Medicine in the Antebellum South

From 1619 to 1865, the antebellum South was economically and socially reliant on slavery, and thus, sought to maintain the oppressive institution and the people making up the system. But it was not only Southern culture and economics that benefited from this practice: so, too, did their medicine. Plantation physicians, such as Sims, were an example of the intrinsic connection between slavery and medicine (Vaswani et al., 2024, para. 7). The purpose of these physicians was to maintain the health and "'soundness'" of the enslaved laborers, whom enslavers valued strictly for their capacity to perform hard labor and reproduce (Shende et al., 2024, para. 4). Additionally, scientists and physicians regularly practiced using enslaved people for "medical education and in experimental and radical medical and surgical practice" (Fisher, 1968, p. 45). These so-called educators and medical experts routinely treated Black bodies like objects. And, as Monica Cronin writes in "Anarcha, Betsey, Lucy, and the women whose names were not recorded: The legacy of J Marion Sims," due to

SCHOLARLY REVIEW

SCHOLARLY REVIEW JOURNAL

E-ISSN: 2996-8380
Published by Leadership & Innovation Lab

WINTER 2025/2026

the widespread misconception that Black people, compared to white people, had greater thresholds for pain, the practice was not only common and lawful, but also considered less morally objectionable at the time (Cronin, 2020, p. 11). This harmful stereotype would outlive the antebellum age of the South: as recently as 2016, a study reported that medical students and residents mistakenly understood African Americans to have "lower sensitivity to pain" (Wailoo, 2018, p. 1530).

II. Dr. J. Marion Sims and *The Story of My Life*

Nineteenth-century medical education consisted of far less intensive and rigorous programming. Born in 1813 in Lancaster County, South Carolina, Sims began practicing medicine after completing an internship, a three-month medical course, and a year at Jefferson Medical College. It was there that his first two patients, both of whom were babies, died (likely due to the insufficient treatment at this time), leading Sims to start fresh in Montgomery, Alabama, where he ended up building a strong reputation for himself as a plantation physician (Shende et al., 2024, para. 4).

According to Durrenda Ojanuga, author of the article "The medical ethics of the 'Father of Gynecology,' Dr J Marion Sims," in the early 1800s, the field of gynecology did not formally exist and VVFs, a "serious problem," according to past records of the Women's Hospital of New York, were misunderstood and left largely untreated (Ojanuga, 1993, p. 28). Even Sims showed initial hesitation toward treating women with this condition due to insufficient knowledge of the condition (Ojanuga, 1993, p. 29). But in 1845, after Sims accidentally discovered how to orient a patient to better see the vagina, he began formally experimenting on enslaved women with VVFs.

Out of the many women with VVF he experimented on, only three names are recorded in his autobiography: Anarcha, Lucy, and Betsey – each around seventeen- to nineteen-years-of-age. Over the course of the next four years, having logged around thirty operations on each woman, Sims would develop a consistent surgical method to repair VVFs (Savitt, 1982, p. 345). Within this same timeframe, Sims invented several medical instruments, many of which gynecologists still use today, such as the Sims speculum and Sims sigmoid catheter. He also developed a position known as the "Sims' position," which placed women on their side with one knee brought toward the chest (Shende et al., 2024, para. 9).

A number of contemporary doctors and historians contend that Sims' actions, though unethical, were acceptable for his time and context (Ojanuga, 1993, p. 30). However, according to Seale Harris' 1950 biography of Sims, *Woman's Surgeon: The Life Story of J. Marion Sims*, amidst Sims' experimentations in 1849, "all kinds of whispers were beginning to circulate around town – dark rumors that it was a terrible thing for Sims to be allowed to keep on using human beings as experimental animals for his unproven surgical theories" (Harris, 1950, p. 99). Evidently, people living within the same timeframe and social context acknowledged that human

SCHOLARLY REVIEW

SCHOLARLY REVIEW JOURNAL

E-ISSN: 2996-8380
Published by Leadership & Innovation Lab

WINTER 2025/2026

experimentation, regardless of status, was wrong. *The Story of My Life* contains written accounts from Sims up until – and including – 1863 (the remaining twenty years before his death in 1883 are shown through a selection of letters sent and received by Sims during that time). Due to Sims' death, his son, Harry Marion Sims, ultimately compiled his letters and edited the published version. The lengthy autobiography dedicates only one chapter to his VVF experimentation. By the time the book was published, around forty years after his first encounter with VVF, the country had changed medically and politically – doctors commonly used anesthesia and slavery was abolished (Cronin, 2020, p. 9). There is no way of knowing how accurate or inaccurate the reflections in Sims' autobiography are.

III. Dominique Christina and *Anarcha Speaks*

Published in October 2018, six months after the removal of the J. Marion Sims statue in New York City's Central Park, Christina's *Anarcha Speaks* serves as a testament to ongoing efforts to reevaluate the types of historical figures society has memorialized – namely, white men (Domonoske, 2018, para. 1-3). Before writing *Anarcha Speaks*, Christina had never heard of Sims or his operations. In an interview with Beacon Broadside (2018), she admitted that she had stumbled across the historical figure of Anarcha accidentally, but unsatisfied with how Anarcha appeared as a "mere footnote," felt inspired to offer Anarcha a "reckoning" ("At Last, Anarcha", 2018). As she conducted research for the book, Christina pursued "Anarcha's humanity amidst Sims' clinically distant reporting" and consulted books on medical experimentation during chattel slavery ("At Last, Anarcha", 2018).

Anarcha Speaks consists of two halves: "She Is a Woman Therefore She Remembers" and "The Juxtaposition of Experience." In the first half, Christina depicts Anarcha's life and internal dialogue as a pregnant enslaved woman. The second half of *Anarcha Speaks* reimagines the surgeries from Anarcha and Sims' contrasting perspectives. Although including Sims' perspective was not Christina's original intention, she explains that the juxtaposition "amplifies Anarcha's experience and reveals who J. Marion Sims really was – not a conquering hero but an opportunistic exploitation artist" ("At Last, Anarcha", 2018).

THE EXPLOITATION OF SOCIAL CONSTRUCTS TO ADVANCE GYNAECOLOGY

I. The Vesicovaginal Fistula

A VVF is an "abnormal communication" between the bladder and vagina, resulting in involuntary and continuous urinary discharge (Sims, 1852, p. 236). The physical and mental symptoms of a VVF are excruciatingly painful and challenging to live through (Medlen & Barbier, 2023). Women with VVF uncontrollably leak urine, which may lead to the vagina becoming "inflamed, ulcerated, encrusted with urinary calculi, and even contracted" (Sims, 1852, p. 236). Today, VVFs are typically diagnosed post-gynecological

SCHOLARLY REVIEW

SCHOLARLY REVIEW JOURNAL

E-ISSN: 2996-8380
Published by Leadership & Innovation Lab

WINTER 2025/2026

surgery (i.e. hysterectomies). However, in the mid-nineteenth century, VVFs were "a frequent complication of childbirth, particularly among the indigent in whom delivery was accomplished without the aid of instruments or anesthesia" ("James Marion Sims (1813–1883)," 1962, p. 786). VVFs were especially common among poor immigrant women, and in the South, enslaved women, "due to poor nutrition, lack of prenatal care, and births at an early age, were [especially] at risk of VVF[s]" (Ojanuga, 1993, p. 28-29). Contrary to what many believe, however, Sims was not the first to successfully repair a VVF (Andrei, 2013, para. 3). People often mistakenly refer to Sims as the first because his paper, "On the Treatment of Vesico-Vaginal Fistula," received great attention ("The Statue of Dr J. Marion Sims in Bryant Park," 1894, p. 689).

II. Racism and Patient Prejudice

Woven into the fabric of society, racism played an integral role in permitting Sims' scientific exploration. By the early 1840s, Sims had already established himself as a competent surgeon and family practitioner, receiving cases daily from around the country (Sims, 1884, p. 226). Even so, whenever any woman consulted him with medical issues related to the uterine system, he refused because they were "out of [his] line'" (Sims, 1884, p. 226) and upon seeing his first case of VVF in Anarcha, he described the situation as "hopelessly incurable" (Sims, 1884, p. 227). However, despite his acknowledged discomfort in fields beyond his medical expertise, Sims immediately addressed the case of Mrs. Merril, a white woman who had fallen off a horse and landed on her pelvis (Sims, 1884, p. 230), claiming that "'this poor woman was in such a condition that [he] was obliged to find out what was the matter with her'" (Sims, 1884, p. 231). Though Sims had never dealt with a uterus retroversion before, he justified performing a digital examination with his duty to alleviate her pain. Following this procedure, Sims began freely experimenting on subjects with VVF – though notably, none of the women were white (Savitt, 1982, p. 345). Sims' deliberate decision to prioritize the care of a white woman reflects a larger systemic racial prejudice regarding whose pain doctors took seriously and acted upon.

Predisposed stereotypes and normalized degradation placed Black women in the positions to become subjects for medical experimentation. At the time, Black people "were considered more available and more accessible" but "legally invisible because of their slave status" (Savitt, 1982, p. 332), condemning them to being treated as material goods for use. A century later, these perceptions continued. In Harris' biography, he describes the women like interchangeable cadavers: "Lucy was still too ill to undergo another operation for a while, so [Sims] went to work next on Betsy" (Harris, 1950, p. 90). Furthermore, Sims almost certainly embraced the misconception that Black individuals had higher pain tolerance, as he neglected to use anesthesia for any of his experimental surgeries (Cronin, 2020, p. 10-11). Harris details: "Sims' experiments brought them physical pain, it is true, but they bore it with amazing patience and fortitude – a grim stoicism which may have been part of their racial endowment or which possibly had been bred into them through several generations of enforced submission" (Harris, 1950, p. 99). Years later, Sims would encounter many white patients who found the pain of VVF surgery unbearable, but he remained steadfast in racializing pain tolerance. In fact, Sims "was unable to

SCHOLARLY REVIEW

SCHOLARLY REVIEW JOURNAL

E-ISSN: 2996-8380
Published by Leadership & Innovation Lab

WINTER 2025/2026

find a white patient with a vesicovaginal fistula willing to endure the pain of the procedures until he used anesthesia" (Spettel and White, 2011, p. 2426). Though many researchers argue that anesthesia was reasonably unfamiliar at the time, Sims experimented from 1845–1849, overlapping with the years following the demonstration of ether as anesthesia at Massachusetts General Hospital in 1846 (Cronin, 2020, p. 9). "If he wanted to use [anesthesia]," it was available for him (Cronin, 2020, p. 10). While Sims' experimentation directly impacted the physical well-being of his female patients, the greater consequence of his success was the perpetuation of dehumanizing ideas regarding Black women and the institution of slavery.

NORMALIZED DEHUMANIZATION AND OBJECTIFICATION OF BLACK WOMEN

I. Two Interpretations of Animalization

According to *The Story of My Life*, Sims required the enslaved women to be positioned on their hands and knees during examination or operation, underscoring how inherently degrading and dehumanizing these experimentations were. The first time he utilized the genu-pectoral (knees-chest) posture was when performing the digital examination on Merril, the white woman who had fallen off a horse. Even then, he reportedly "could not make up [his] mind to introduce [his] finger into the rectum" because the examination was "so disagreeable" (Sims, 1884, p. 232).

From a professional standpoint, Sims appears to acknowledge the implications of such invasive procedures as a male physician operating on a female patient. Furthermore, after his initial examination of Merril, he reported her sweating profusely due to pain and the "unnatural position" (Sims, 1884, p. 232). Still, these observations do not preclude Sims from prompting his enslaved patients to assume this same position. Recalling his examination with Betsey, he wrote: "I... mounted her on the table, on her knees, with her head resting on the palms of her hands" (Sims, 1884, p. 234). (Note how the word "mounting" suggests both an animalization and sexualization of Betsey's body.) The only other time Sims refers to the knees-chest position happens during his recollection of Lucy's first procedure: "The poor girl, on her knees, bore the operation with great heroism and bravery" (Sims, 1884, p. 237). This sentence almost entirely contrasts Merril's description; there are no mentions of Lucy's pain or discomfort, only the fact of her position. As Deidre Cooper Owens writes in *Black Women's Experiences in Slavery and Medicine*, "the black female body was further hypersexualized, masculinized, and endowed with brute strength because medical science validated these ideologies" (Owens, 2017, p. 44).

In *Anarcha Speaks*, Christina humanizes Anarcha by reimagining how she may have interpreted and understood the animal-like positions Sims placed her in. Anarcha felt like she would "grow a new mouth / when [Sims] come / wit them metal sticks / proddin [her] no better than / you do some tired mare" (Christina, 2018, p. 57). The juxtaposition of the vaguely described "metal sticks" and precision of feeling like "some tired mare"

SCHOLARLY REVIEW JOURNAL

E-ISSN: 2996-8380
Published by Leadership & Innovation Lab

WINTER 2025/2026

demonstrates Anarcha's attunement to her own pain. She may have known little-to-nothing about VVFs, but she was deeply aware of the pain it continued to put her body through. After Sims becomes Anarcha's new enslaver and brings Anarcha, Lucy, and Betsey to his house, she explains: Sims "put his fingers in you like nothin / push on yo stomach/ make you squat / then write it down. / we in the barn learning how morning / happens" (Christina, 2018, p. 61). With Anarcha's voice, Christina parallels the enslaved women with barn animals. The comparison not only isolates Sims' racist objectification, but also the induced internalized racism and dehumanization among the Black women. Sims frequently operates on Anarcha: "i comin out my dress like always. / figurin my knees out and / how to survive em when they used like feet" (Christina, 2018, p. 62). Anarcha expresses the familiarity she finds in the knees-chest position with the metaphorical figuring of how her knees may replace her feet. By inferring Anarcha's likely awareness of the degrading position, Christina offers a perspective on the ways enslaved women grappled with and, oftentimes, internalized animalization.

II. Sacrifice for the Greater Good: The "White Savior" and Blood Symbolism

The Story of My Life and "On the Treatment of Vesico-Vaginal Fistula" speak of working toward a "greater good," reflecting the widespread exploitation of slavery in the medical field, and sustaining the white savior complex plaguing America at the time. In a letter written in 1828 to *Statesman and Patriot*, a newspaper located in Milledgeville, Georgia, a correspondent wrote: "The *bodies of colored* persons, whose execution is necessary to public security, may, we think, be with equity appropriated for the benefit of a science on which so many lives depend" [italics in the original] (Savitt, 1982, p. 339). The letter violently defends using Black *bodies* – as the correspondent makes the objectifying distinction – for the betterment of (white) lives, a sentiment echoed by Sims and his colleagues. At the start of the chapter in his autobiography on VVF, Sims explained that women with VVFs "would prefer death" (Sims, 1852, p. 236). Moreover, though he proposed to purchase Anarcha, Lucy, and Betsey, Sims reemphasized that he had "kept all these negroes at [his] own expense all the time...an enormous tax for a young doctor in country practice" (Sims, 1884, p. 241). Eventually, after finding a treatment for VVFs, Sims mentions the importance of it to "relief of suffering humanity" (Sims, 1884, p. 246). His work certainly helped improve the conditions of many suffering women with VVF; however, this phrase alludes to his upbringing in a culture that idolizes white heroes. In Sims' experiment, the "greater good" came at the cost of Black lives and reinforced the white savior complex.

While Sims ultimately neglected to mention any blood as a result of the procedures recounted in his autobiography, blood holds significant cultural and ancestral symbolism for West African people and serves as one of Christina's signature motifs portraying sacrifice. Owens describes the deeply intertwined meaning of motherhood to enslaved women and Africa during the nineteenth century through the concept of "blood mothers" (Owens, 2017, p. 45). "Blood" in this context represented the survival of their heritage even amidst an institution built to strip the identities of these West African people. Expanding on "blood mothers," Owens tailors "blood" to a woman's experience in other cultural interpretations of blood, including blood as a means

SCHOLARLY REVIEW

SCHOLARLY REVIEW JOURNAL

E-ISSN: 2996-8380
Published by Leadership & Innovation Lab

WINTER 2025/2026

for Black women to forge "secret and sacred" ties among each other and "Life and death" symbolized by menstrual blood and miscarriages (Owens, 2017, p. 45). Acting as a throughline in several existential themes, "blood" to Owens resembles proof of humanity. Similarly, Christina reveals her own inspiration for the repetition of "blood" in *Anarcha Speaks* ("At Last, Anarcha", 2018), citing how her family had been a part of the desegregation "social experiment" in Little Rock, Arkansas: "[Christina's family] also are people who have done seismic things and bled for it, but they choose not to bleed out loud. My creative side always seems to require exposing the blood and the bruising" ("At Last, Anarcha", 2018). For Christina, the imagery of "blood" carries ancestral and sacrificial connotations. Additionally, not only did her family sacrifice themselves for an "experiment," but they did so in silence. Whether or not Christina used the interpretations of blood referenced by Owens, she, too, understands "blood" in a profoundly intimate and personal way, and uses her work to amplify the voices that have been silenced.

Through the vivid imagery of "blood" as sacrifice in *Anarcha Speaks*, particularly in a biblical context, Christina argues that Sims must fundamentally believe that women, especially Black women, are inferior to him. In her poem titled "Dr. Sims Makes Something New," with a footnote about his invention of the modern-day speculum's predecessor, she seems to address Sims' laundry list of namesake inventions (Christina, 2018, p. 67). She recalls how God created women in the Bible, "a composition of afterthought / a borrowed rib" (Christina, 2018, p. 67), interpreting that Sims would likely believe in this verse – not simply as a Christian (Sims, 1884, p. 26), but as a misogynist too. Christina understands this mindset to be the explanation for why Sims is able to justify "disassembl[ing]" enslaved women (Christina, 2018, p. 58), and further elaborates, "Everything we delight in came / First by the blood of a woman / And then / *And then* / Iron and what men do / After" (Christina, 2018, p. 67). The collective "we" invites the audience into Sims' mind, and the immediate mention of "delight" seems to outweigh – or even warrant – the required sacrifice: "the blood of a woman." Although Sims' operations on Anarcha and the other women have yet to succeed by this point in Christina's narrative, his character reiterates to himself, "Every time you see a black girl bleeding / Think: *Progress*" (Christina, 2018, p. 69). (Note how Sims' character refers to his subjects as "girls," which they are as seventeen- to nineteen-year-olds; he nearly recognizes the exploitative nature of his experiments, though the following line only confirms his unshakeable determination to make "progress" despite its inherent casualties.) Toward the end of Christina's book, Sims' character states, "Things die to make room / For miracle" (Christina, 2018, p. 71). And while Sims – the historical figure – never directly admits this in his autobiography, Christina uses imagery and other poetic devices to spotlight the undertones in Sims' precise words, in the repetition of phrases like bringing the "relief of suffering humanity" (Sims, 1884, p. 246). Sacrifice and death materialize in the form of blood, and ultimately, it is Black women's blood that spills for the sake of scientific advancement.

SCHOLARLY REVIEW

SCHOLARLY REVIEW JOURNAL

E-ISSN: 2996-8380
Published by Leadership & Innovation Lab

WINTER 2025/2026

THE MANIPULATION OF LANGUAGE

I. The Role of Authority in Illegitimate Consent

The absence of consent in *The Story of My Life* exposes the easily manipulated power dynamic between not only enslavers and enslaved people, but also doctors and patients. Sims becomes these two figures simultaneously, exponentially increasing his influence over his patients. The only direct mention of consent appears in a passage recalling Betsey's first *examination* – not surgery – after Sims supposedly cured Merril's retroverted uterus (Sims, 1884, p. 234). The fact that he clearly writes "Betsey willingly consented" makes the absence of consent elsewhere in his narrative glaringly evident (Sims, 1884, p. 234).

A common argument, as stated in the 2012 article "The Core Competencies of James Marion Sims, MD," authors J. Michael Straughn Jr. et al., defending Sims in this case, claim that his patients gave *signs* of consent: "implicit desire for care, willing participation, and enormous bravery" (Straughn et al. 2012, p. 200). However, the point of consent is that patients give it *explicitly:* for enslaved people, these women likely had to receive treatment or participate in the experimentation whether they desired to or not. As Monica Cronin writes, holding "position[s] as slaves within a slaveholding society rendered them incapable of refusing to assist" (Cronin, 2020, p. 9). Sims being the enslaver of his patients only further undermine his credibility to obtain voluntary consent and as a physician in general. On the subject of Anarcha and Betsey's acquisition, he wrote: "I made this proposition to the owners of the negroes: If you will give me Anarcha and Betsey for experiment, I agree to perform no experiment or operation on either of them to endanger their lives.... I will keep them at my own expense" (Sims, 1884, p.236). Sims' initial address spoke solely to the women's previous enslavers, revealing that he neither considered his patients capable of giving consent nor having valuable opinions. When Sims took on this dual role, he succumbed entirely to the racist systems governing society and knowingly exploited them.

In *Anarcha Speaks*, Christina represents the power imbalance between Sims and the enslaved women through the way in which the fictional Sims perceives himself first as Adam, and then, as God. In the beginning, his character explains: "To be a doctor, a good one, / Is to be Adam. The *first* to find his hands and call them hands" (Christina, 2018, p. 73). Christina intentionally italicizes the word "first," using Adam's hands as a sarcastic metaphor for how many people mistakenly attribute Sims as the first to cure VVF. Furthermore, the phrasing of the sentence implies that Sims believed himself qualified enough to define a "good" doctor. Later in the same poem, his character bluntly expresses:

> We are the *same*, He and I. / Two engineers of flesh / Who will stare down the blood, / Dumb our eyes to piteous howl and pleas / In the advancement of our own autobiography... / What is a doctor but a God? / We both seek our names on everything / You will know, by who has lived. / And you will know by *who has died*, that we were. (Christina, 2018, p. 74)

SCHOLARLY REVIEW JOURNAL

E-ISSN: 2996-8380
Published by Leadership & Innovation Lab

WINTER 2025/2026

Here, he equates himself to God, implying they are the same in how they "dumb" themselves down to help people in need. Portraying Sims as a godlike figure effectively conveys how doctor-patient relationships should be scrutinized in the same way enslaver-enslaved dynamics are.

As Christina's narrative progresses, fictional Sims figures out a repeatable method to repair VVFs, which is captured in the following lines: "Watch these hands / Fix what God / Could not / The twisted knots of a woman's mad body" (Christina, 2018, p. 85). Christina repeats the hand motif and progresses the biblical comparison – Sims now claiming to be able to undo and fix the unnatural yet God-given condition of these suffering women. Christina's gradual deification of physicians is meant to parallel the trajectory Sims (the historical figure) himself underwent, the closer he seemed to repairing VVFs, foregrounding the relationship between Sims and his enslaved patients in structural inequities and institutional authority.

Another way Christina portrays the confluence of doctors and enslavers occurs through the gradual evolution in how Anarcha's character refers to Sims' character. In their interactions leading up to Sims purchasing Anarcha and the other women that would become his "patients," she calls him plainly: "the doctor" (Christina, 2018, p. 53). Yet, once Sims purchases them for experimentation, Anarcha grapples with Sims' new role as "doctor/massa" (Christina, 2018, p. 66). But this title, too, changes gradually; after Sims encounters a passing enslaver and tells him that Anarcha is "a mule wit a few / more miles left," she uses the term "Massa-Doctor" to describe him (Christina, 2018, p. 83). Though still using both "Massa" and "Doctor," the order, punctuation, and capitalization change: through these choices, Christina insinuates a shifting dynamic between Anarcha and Sims, who now presents as *both* an enslaver and doctor – though now seemingly more so an enslaver. Outside of proper nouns, Christina almost exclusively uses lower case to distinguish Anarcha's point of view from Sims', materializing her voice in a visible way; here, Sims' name becomes "Massa-Doctor."

In the final poem of *Anarcha Speaks*, "First is Last: How Anarcha Sees It," Anarcha seeks death to escape the haunting pain: "this thick, thick blood / this dream of iron and rope and / massa's hands behind me / fizzled down to nuthin / i need to remember" (Christina, 2018, p. 91). Instead of her feeling cured, Anarcha speaks of the blood and "massa's hands behind [her]," now referring to Sims as only "massa." Interestingly, Christina creates tension with how Anarcha calls the memory both a "dream" and "nuthin'" she needs to remember. The tension, in some ways, is mirrored in Christina's deliberate, changing titles for Sims: the endless internalization of oppression manifested as doubt within themselves and external relationships.

II. The Fluidity of Narratives Based On Intended Audience

By recounting Anarcha's surgery in almost entirely technical terminology throughout *The Story of My Life*, Sims conceals her pain and keeps his narrative at the forefront of historical records. About three years into

SCHOLARLY REVIEW

SCHOLARLY REVIEW JOURNAL

E-ISSN: 2996-8380
Published by Leadership & Innovation Lab

WINTER 2025/2026

the experimentation, Sims had already performed around twenty operations on each of the enslaved women, but failed frequently. He went on a brief hiatus from experimenting to develop a technique to tie sutures in between the bladder and vagina in crevices he could not usually reach (Sims 1884, p. 243). Eventually, he came up with a "beautiful" suture method which required fine silver wires instead of the typical silk sutures to hold (Sims, 1884, p. 244-245). After Anarcha's thirtieth procedure, he wrote:

> She was put to bed, a catheter was introduced, and the next day the urine came from the bladder as clear and as limpid as spring water, and so it continued during all the time she wore the catheter. In all the preceding operations, where the silk was used for a suture at the base of the bladder, cystitis always resulted. The urethra was swollen continually, and the urine loaded with a thick, ropy mucus. With the use of the silver suture there was a complete change in these conditions. (Sims, 1884, p. 245)

While this passage sensibly highlights why the new suture material is necessary, it also meticulously details these results in passive scientific language. It focuses on Sims' own innovations while saying nothing of how his metal implements were placed on sensitive, traumatized vaginal and bladder tissue with no anesthetics, which must have been extremely uncomfortable for his patients to endure. This omission illustrates how Sims' definition of success falls only on the ultimate product: the "perfect union of the little fistula" (Sims, 1884, p. 246).

Sims' use of clinical language toward his patients reinforced his objectification of them, an observation shared by many of his more outspoken critics. Monica Cronin explains the reality of his dominant narrative: "History has recorded a lot more information about James Marion Sims, the doctor who went on to develop a repeatable surgical repair for obstetric fistula, than it has about Anarcha who suffered through it" (Cronin, 2020, p. 7). *The Story of My Life* preserves Anarcha in Sims' words, reducing her to a vessel for gynecological advancement.

On the contrary, Sims' official published paper, "On the Treatment of Vesico-Vaginal Fistula," patently mentioned the inevitable pain and bleeding the enslaved women endured, suggesting that Sims may have intentionally included certain details depending on his work's target audiences. In this same medical paper, he also explained that, in the largest regions of the fistula, knowing where to best cut or roughen the tissue for future suturing can be difficult – therefore, he advised inserting a "soft sponge" into the bladder to help the scarification process, which was "always attended with very great pain" via the sutures (Sims, 1852, p. 241).

Following sponge insertion, Sims explained how scarification "always [causes] hemorrhage," which at times is "so profuse as to compel [him and his assistants] to desist for a short time, the patient being allowed to change her position and rest" (Sims, 1852, p. 241). He also revealed two aspects left out in his autobiography: first, he relied on surgical assistance, and second, the procedure can cause such severe bleeding for the patient

SCHOLARLY REVIEW

SCHOLARLY REVIEW JOURNAL

E-ISSN: 2996-8380
Published by Leadership & Innovation Lab

WINTER 2025/2026

that the operation must cease completely. These assistants, positions sometimes fulfilled by the other enslaved women, were often required for "cleaning instruments for re-use during the procedure, and holding both the patient and the speculum in the correct position" (Cronin, 2020, p. 10). By specifying the roles of assistants, Sims implied that the paper was written for other physicians looking to learn more about how to execute the operation themselves. The differences in language between Sims' personal and professional texts demonstrate the potential spaces for inaccuracy and manipulation in his narratives. Even in the contemporary period, the use of this clinical language continues to mask medical consequences to patients and protect doctors and the institution itself.

Anarcha Speaks offers a fictionalized rendition of Anarcha's internal emotions during the operation, provoking the audience to realize how much of the women's horrific experiences *The Story of My Life* disregarded. In her poem titled, "Anarcha, In Position," Christina imagines what Anarcha may have thought in the moments leading up to the surgery: "i concentrate on / my teeth/ the roof of my mouth/ / i'm tryna rub it smooth/ concentrate on not blinkin / see how long I can go til my eyes need to shut" (Christina, 2018, p. 70). The vivid description in verse portrays the ways Anarcha attempts to distract herself from the imminent pain. A different operation results in a similar internal struggle: "i tell you [Dr. Sims] open that black bag and i / give God my right eye. / i mean, i *leave*... out my own self, / my own body i just leave til he done / cuz pain is a house you caint never get the / door closed on when he start up wit doctorin" (Christina, 2018, p. 75). Here, distractions no longer suffice to mitigate the pain she feels. Instead, Anarcha longs to "leave," separating her experiment-ridden body and soul. Christina uses poetry to subtly allude to how, though their bodies were owned by enslavers, "enslaved women [resisted] the efforts of slave masters to lay claim to their 'souls'" (Owens, 2017, p. 50), rewriting dehumanization as defiance in the process. Her interpretation of Anarcha's pain challenges the "stoicism" of the Black women, the apparent reason "for [Sims] to continue his surgical experiments" (Costa, 2003, p. 661). *Anarcha Speaks* enhances the feelings in Anarcha's mind, asserting that not all pain needs to be seen to exist.

CONCLUSION

Written one hundred and thirty-four years apart, *The Story of My Life* and *Anarcha Speaks* recount the same events from the opposing frameworks of entirely different political and social contexts – yet both reveal the perpetuation of misogynistic motivations, racist medical stereotypes, and the silent exploitation of Black women. While gynecology continues to rely on the Sims' inventions and positions, many of which still bear his name, there is no way of knowing how many women's names have been lost to time and omission. Although several contemporary research and medical articles have been written in later years to debate the ethicality of Sims' actions, the arguments for each should bring a more serious degree of skepticism into analyzing Sims' accounts (especially as the book was edited by his son prior to publication). In the face of a glaring lack of balanced, objective, and well-rounded narratives documenting the history and progress of the field, it is

SCHOLARLY REVIEW JOURNAL

E-ISSN: 2996-8380
Published by Leadership & Innovation Lab

WINTER 2025/2026

imperative that researchers and medical experts alike should regard the social, cultural, and artistic accounts written by the very individuals this history would seek to invisibilize with equal earnestness. Works like Christina's are crucial to the ongoing dialogue around gynecology and the medical field at large, not only because they center figures from the margins who are largely omitted from history, but also because the narratives themselves are composed by the kinds of marginalized women who are most intimately familiar with legacies of exploitative trauma. Though Sims is inextricable from the field of gynecology, there exist solutions in interdisciplinary artistic mediums that offer the women whose lives birthed gynecology a proper reckoning.

REFERENCES

Andrei, A. (2013, April 12). *James Marion Sims's Treatment of Vesico-Vaginal Fistula*. Embryo Project Encyclopedia. Arizona State University. http://embryo.asu.edu/pages/james-marion-simss-treatment-vesico-vaginal-fistula

Beacon Broadside. (2018, October 30). *At Last, Anarcha, Victim of Dr. Marion Sims, Gets Her Reckoning in Dominique Christina's Poetry* (C. Coleman, Ed.). Beacon Press. https://www.beaconbroadside.com/broadside/2018/10/at-last-anarcha-victim-of-dr-marion-sims-gets-her-reckoning-in-dominique-christinas-poetry.html

Covington Women's Health Specialists. (2022, March 17). *A Brief History of Gynecology and Its Impacts in Today's World*. https://www.covingtonwomenshealth.com/2022/03/a-brief-history-of-gynecology-and-its-impacts-in-todays-world/

Costa, C. M. (2003). James Marion Sims: Some Speculations and a New Position. *Medical Journal of Australia*, *178*(12), 660–663. https://doi.org/10.5694/j.1326-5377.2003.tb05401.x

Cronin, M. (2020). Anarcha, Betsey, Lucy, and the Women Whose Names Were Not Recorded: The Legacy of J Marion Sims. *Anaesthesia and Intensive Care*, *48*(3), 6–13. https://doi.org/10.1177/0310057X20966606

Christina, D. (2018). *Anarcha Speaks* (T. Jess, Foreword). Beacon Press.

Domonoske, C. (2018, April 17). *'Father of Gynecology,' Who Experimented on Slaves, No Longer On Pedestal in NYC*. NPR. https://www.npr.org/sections/thetwo-way/2018/04/17/603163394/-father-of-gynecology-who-experimented-on-slaves-no-longer-on-pedestal-in-nyc

Fisher, W. (1968). Physicians and Slavery in the Antebellum Southern Medical Journal. *Journal of the History of Medicine and Allied Sciences*, *23*(1), 36–49. https://www.jstor.org/stable/24621722

Harris, S. (1950). *Woman's Surgeon: James Marion Sims* (E-book ed.). Macmillan Company.

JAMA. (1962). James Marion Sims (1813–1883). *JAMA: The Journal of the American Medical Association, 181*(9), 786. https://doi.org/10.1001/jama.1962.03050350048015

SCHOLARLY REVIEW JOURNAL

E-ISSN: 2996-8380
Published by Leadership & Innovation Lab

WINTER 2025/2026

Medlen, H., & Barbier, H. (2023, February 6). Vesicovaginal Fistula. In *StatPearls*. StatPearls Publishing. https://pubmed.ncbi.nlm.nih.gov/33232059/

Ojanuga, D. (1993). The medical ethics of the "Father of Gynaecology," Dr J Marion Sims. *Journal of Medical Ethics*, *19*(1), 28–31. https://doi.org/10.1136/jme.19.1.28

Owens, D. C. (2017). Black women's experiences in slavery and medicine. *In Medical Bondage: Race, Gender, and the Origins of American Gynecology* (pp. 42–72). University of Georgia Press. https://doi.org/10.2307/j.ctt1pwt69x.7

Savitt, T. L. (1982). The Use of Blacks for Medical Experimentation and Demonstration in the Old South. *The Journal of Southern History, 48*(3), 331-348. https://doi.org/10.2307/2207450

Shende, P., Jagtap, A., Goswami, B. (2024, September 15). The Legacy of James Marion Sims: History Revisited. *Cureus*. https://doi.org/10.7759/cureus.69484

Sims, J. M. (1852). On the Treatment of Vesico-Vaginal Fistula. *International Urogynecology Journal and Pelvic Floor Dysfunction, 9*(4), 236–248. https://doi.org/10.1007/BF01901610

Sims, J. M. (1884). *The Story of My Life* (H. Marion-Sims, Ed.). D. Appleton and Company.

Spettel, S., & White, M. D. (2011). The Portrayal of J. Marion Sims' Controversial Surgical Legacy. *Journal of Urology, 185*(6), 2424–2427. https://doi.org/10.1016/j.juro.2011.01.077

JAMA. (1894). The Statue of Dr. J. Marion Sims in Bryant Park. *JAMA: The Journal of the American Medical Association, XXIII*(18), 689–690. https://doi.org/10.1001/jama.1894.02421230029003

Straughn, J. M., Jr., Gandy, R. E., & Rodning, C. B. (2012). The Core Competencies of James Marion Sims, MD. *Annals of Surgery, 256*(1), 193–202. https://doi.org/10.1097/SLA.0b013e318249ce3b

Vaswani H K, Kshirsagar S, Kathpalia S, et al. (2024, November 29). A Pioneer in Women's Health, Dr. James Marion Sims (1813–1883). *Cureus*. https://doi.org/10.7759/cureus.74733

Wailoo, K. (2018). Historical Aspects of Race and Medicine. *JAMA: The Journal of the American Medical Association, 320*(15), 1529–1530. https://doi.org/10.1001/jama.2018.11944