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WASHINGTON UNIVERSITY IN ST. LOUIS

University College Department of Liberal Arts

“White Skin by Color, French Canadian by Métissage: Heredity knows no color”

by

Paula Y. Wilson

A Thesis presented to
The Graduate School
of Washington University in
partial fulfillment of the
requirements for the degree
of Doctor of Liberal Arts

January 2021
St. Louis, Missouri

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Acknowledgments

First of all I would like to thank and acknowledge the Doctor of Liberal Arts (DLA) program director, Professor Stephanie Kirk, Ph.D. and faculty advisor Rebecca O’Laughlin, Ph.D. I also thank and acknowledge the thesis chairperson, Professor Stamos Metzidakis, Ph.D., who has been an integral part of guiding me through this thesis research project. Blessings to you and thank you. I am also grateful for the following co-chairs, Shanti Parikh, Ph.D, and Tabea Linhard, Ph.D. I am thankful to Professor Harriet Stone, Ph.D., former director of the DLA program for initially providing me guidance in developing this topic and interest. I also thank and acknowledge my mentor for editorial assistance, Shirley A. Spencer, Ph.D., MSN. Valerie Adams, Professional Writing Coach and Editor and the Washington University Writing Center (Akia Jackson, Ph.D.) was fundamental to the success of this thesis and are greatly appreciated for their support. I appreciate and acknowledge Shane Rencer for sharing his French Canadian family heritage, the Old Mines Area and Cindy Merx of the French Canadian Historical Societies and their valuable information. I acknowledge support from the Veterans Administration through the post 911 GI Bill and their endorsement of the accredited continuing education. I offer special thanks to the Washington University in St. Louis, University College program for allowing me to participate in their premier Doctor of Liberal Arts program that has enhanced the life of an author in a special way.

Paula Y. Wilson

Washington University in St. Louis

January 2021

Dedicated to my parents the late William Slaughter and Thelma Slaughter, my daughters Angela Wilson, Juanita Singleton and family.

Abstract of the Thesis

“White Skin by Color, French Canadian by Métissage: Heredity knows no color”

for University College Graduate Student

by

Paula Y. Wilson

Doctor of Liberal Arts

University College

Washington University in St. Louis, 2021

Beta thalassemia (β -thalassemia) is one of the hereditary disorders unique to French Canadians (Brackeleer). This thesis argues for any correlations that may exist between the social and identity structures. These social and identity structures correspond with the close relationship between the French Canadians and β -thalassemia. The study reveals the specific cultural and linguistic isolation of these people and the principal cause of the distinguishing traits of this disorder as obscure amongst this ethnic group. French Canadians slowly but surely migrated from the French-speaking Providence of Québec in Canada and Toulouse, France during the 18th, 19th and early 20th centuries. Their migration led to their dispersal in the Midwest, Northeast and Louisiana, as well as throughout the vast Louisiana Purchase territory inclusive of Alabama area within colonial Louisiana.

Through further research into the oral and written histories found in the relevant literature and art, a better understanding of the construction of their societies as well as identities is

revealed. Their migration led to the dispersal of the hereditary disorder β -thalassemia specifically in the territory known as Alabama. There is a lack of research in medical genetics in the United States on French Canadians (French Canadians outside of Quebec), inclusive of black Americans (Laberge, Michaud and Richter 289). Blacks were largely overlooked. The literature review also revealed this to be true where there are limitations in written historical literature whether through art, literature or medical artifacts. Scholars reveal from the literature review and theoretical framework that most research seems to agree that β -thalassemia occurs in Blacks as well as Caucasians. However, there continues to be a debate about the frequency of the occurrence in the United States due to the continuance of racialized medicine. The significance of the disease in this ethnicity is important for further research.

The lack of accurate population count for French Canadians inclusive of blacks has been less than satisfactory. Researchers agree the French Canadian ethnicity is significant to add to the list of population in addition to the Mediterranean people, those already identified as carriers of the β -thalassemia hereditary disorder of today. Defining people's boundary through cultural, economic, and political strategies expresses the importance of self-definition in "dealing with questions of who is and who is not a member of a particular people" (Ens and Sawchuk 16). Beyond the concept of race, the theoretical framework is viewed as a theoretical question, "... from brothers – who is presumed entitled or disposed, person or slave, autonomous or alien, citizen or enemy?" (Krimsky and Sloan 242) Krimsky and Sloan tried to argue against racialized medicine, that the theoretical framework for medicine should not be based on racism and Darwinism. The concept of racism and Darwinism combined biologizes the two theories in order to substantiate an illusionary ideology. Current studies appear to support the notion that "racialist superstitions" are still interwoven into genetic medicine of the future (242). Scholars reveal the

challenges associated with identifying French Canadians as an ethnicity inclusive of blacks and unknown to the migration of β -thalassemia in the United States. This ambiguity is recognized in addition to the current acknowledgment of this disease's changing pattern of ethnicity.

Introduction

Background

Beta Thalassemia (β -thalassemia), a hereditary disorder, is just as prevalent and important health wise as Sickle Cell Anemia and systemic lupus erythematosus (Lupus) were in the past, when both diseases remained relatively obscure and unrecognized by the American population of African Americans, Native Americans and mixed-race peoples or Métis. The Thalassemia are a group of inherited blood disorders that affect the way the body makes hemoglobin, a protein found in red blood cells that is responsible for carrying oxygen throughout the body due to damaged or missing genes. While there are multiple types of thalassemia, the two main groups are alpha thalassemia and beta thalassemia (referring to the globin subunits affected). In both cases red blood cells are destroyed at a rate faster than normal, causing anemia and resulting in skeletal pathologies associated with varying degrees of anemic response (Thomas). For the purpose of this research study, Beta Thalassemia (β -thalassemia) is the focus.

This hereditary disorder is one of the hereditary disorders unique to the French Canadian population (De Braekeleer and Dao). The research indicates the specific cultural and linguistic isolation of these people is the principal cause of these distinguishing traits of this disorder (De Braekeleer and Dao 205). Through further research into the oral and written histories found in the relevant literature and art, a better understanding of the construction of their societies as well as identities are revealed. The argument is that they are an obscure and mostly unknown ethnic group in most of the United States, as they slowly migrated from the French-speaking province of Québec in Canada and Toulouse, France during the 18th, 19th and early 20th centuries. Their migration led to their dispersal in the Midwest, Northeast and Louisiana, as well as throughout the vast Louisiana Purchase territory and neighboring land eventually known as Alabama. Carl

Ekberg, Robert Englebert and Guillaume Teadale, David Vermette and Jean Morrisset all agree that the French Canadians were forcefully removed from their place of origin in Quebec through political and economic means¹. This mass migration to these many different places with or without the knowledge of the disorder β -thalassemia is something which this evidence is not widely acknowledged or publicly discussed. Within much of the art and literature produced by these people one can find several traces of and allusions to this hereditary disorder. This hereditary disorder exists still in millions of mixed races and French-Canadian descendants living in the United States today. This is precisely because art and literature frequently express important aspects of any given culture, such as their most pressing health concerns regarding long-term mortality and birth issues. Oral histories are more prevalent than written forms among French Canadians. Because such oral history is most often passed down through families and not professional historians some of its arguments are difficult to prove.

The cultural foundations of the French Canadians beliefs, values, and customs are based on their abilities to retain their oral traditions and synchronically assimilate into the English Society. Their premises are a larger than often recognized one due to its assimilation into Anglophone society over the centuries, beginning with the documented migration of the French Canadians to the United States. In some ways, French Canadians are slightly different moreover from the Acadians and Cajuns of Lower Louisiana (Laberge, Michaud and Richter, 287). French Canadian customs that are passed down through many generations, despite the assimilation and syncretic differences experienced or brought along by such individuals, expose otherwise hidden truths about them.

¹ (C. J. Ekberg, French Roots in the Illinois Country: The Mississippi Frontier in Colonial Times) (Vermette) (Morrisset) (Havard, The French Conception of Sovereignty)

For example, French Canadians name variations were customary amongst names for families as well as property and forts. Between the two common languages English and French, “two dozen variations are found for the spelling by contemporaries” of Fort Toulouse, Alabama and located in the official records (D. H. Thomas 151). Data from French Canadian communities of today provides a glimpse of the customs of name variations from two French Canadian family communities of Saint Louis and Old Mines Area that shows old family names that can sometimes be perplexing when searching and recreating genealogies and customs of families and places (Hinton, Karen 1) (Beaulne, Escoffier and Weeks). The variation of the names sometimes came with how the names sounded and officially written down to the articulation of the sounds. The same issues could be found in the 1830, 1840 census of Old Mines as well as conflicts in census’ nationally in various other areas. The uses of different surnames from one that is expected is similar to different names for places. The argument correlates with the name variations of the Missouri families and customs of the French and English (Table 0.1) (Beaulne, Escoffier and Weeks).

Table 0.1 Population Name variations (French/French Canadian)

Les Noms des Vieille Famille de la Region de la Vieille Mine (Sample of Names)

Old Family Names of the Old Mines (Missouri) Area

1900's	1800's	1700's
Bourbon	Bourbon	Bourbonnais Brunet dit Bourbonnais
Lalumandier	Lalumundiere	Lalumundierre dit LaFleur
LaPlante	LaPlante	Laplante
LaPlant		Badaillac dit LaPlante
Tessier	Tessier	Tessier
	Texier	Texier dit Lavigne Texier dit LaVigne
Ranger	Rangé	Rangé
Rongey	Ranger	Ranger
	Rangier	
	Rangey	

Rongey
Ronge
Ronja

Also for example, the various names of Fort Toulouse which the Native Americans who intermixed with the French and converted through assimilation to the French language understood these variations and customs. Historically, Fort Toulouse was a strategic construction of the French regime in honor of “the legitimized son of Louis XIV and Madame de Montespan, Admiral Louis Alexandre de Bourbon, the Count of Toulouse” (D. H. Thomas 151). The Admiral was an intricate member of establishing an administration of the post from the elite providence of the city of Toulouse, in one of the providences, Languedoc of France (ibid).

It was customary, however, for the French to use the name of the location of a fort more often than the official name. They referred to the post usually as the “Post aux Alibamons,” or “Fort des Alibamons.” On a few occasions, it was called “Fort Toulouse des Alibamons,” and not infrequently the French referred to it simply as “aux Alibamons.” English usually called it the Alabama Fort or Post. (D. H. Thomas 149)

Yet it is precisely these types of customs which can provide much needed analysis of social construct and correlations and new knowledge about the most pressing health concerns through identification of ethnicity, self- identification and determination. Anthropological discoveries of thalassemia traits which appear throughout the U.S. and Canada also genetically identify a common heredity makeup of French Canadians. This disorder has nonetheless mutated and evolved as a result of their migration throughout the states, specifically, for our purposes here, in Alabama. For this reason, further research is needed to determine the percentage of French-Canadian descendants carrying this hereditary disorder, descendants largely isolated geographically from other populations as well as by fundamentally different cultural traditions and social arrangements. The research helps us to understand better how and why social and

political constructions also seriously affect the very identity and self-knowledge of communities of mixed race and French-Canadian descendants throughout the United States of America.

Purposes of the Research

The purpose of this research is to explain more fully why certain so-called exclusively “American” communities still consider themselves French Canadian, Métis, métissage, or mixed race (Native American, French and African), particularly in Alabama, in the small towns and villages around areas like the site of the old French Fort Toulouse, along with Auburn, Opelika, Tuskegee, Waverly and Lee county. A number of archives and anthropological studies completed in the area of Fort Toulouse indeed provide researchers with potentially valuable documents and historically rich records of health issues commonly found within these populations.

Methods

A data analysis was conducted to synthesize and gain new perspective on the correlation between the French Canadians and β -thalassemia. A Literature Review Synthesis Matrix was created to derive common themes supporting various topics of the Critical Race Theory (CRT). An integrative, systematic review of papers and records was utilized for the research of Beta Thalassemia in order to examine correlations between French Canadians and the hereditary disease. The use of historical texts and fictional novels were utilized to extract data for the use of comparing and contrasting storytelling to historical data and applying the concepts to the critical race theory as theoretical frameworks. It also helps to analyze what has been done and needs to be done to mitigate the negative affects the lack of knowledge β -thalassemia has on the French Canadians and Blacks in the public health environment.

Search Strategy

The search was conducted using databases through Washington Universities database search engines utilizing StatPearls, PubMed, Google Scholar, OVID, Jstor.org, Clinical Genetics, aap publications.org using a combination of the following subject headings and key words:

“ethnicity, race”, “ethnicity AND thalassemia”, “illness, disease AND thalassemia AND French Canadians”, “race AND French Canadians AND thalassemia”. The search was conducted to retrieve various subtopics concerning scientific myths and scientific truths with race, β -thalassemia, health gap/disparity in research with Minorities and French Canadians.

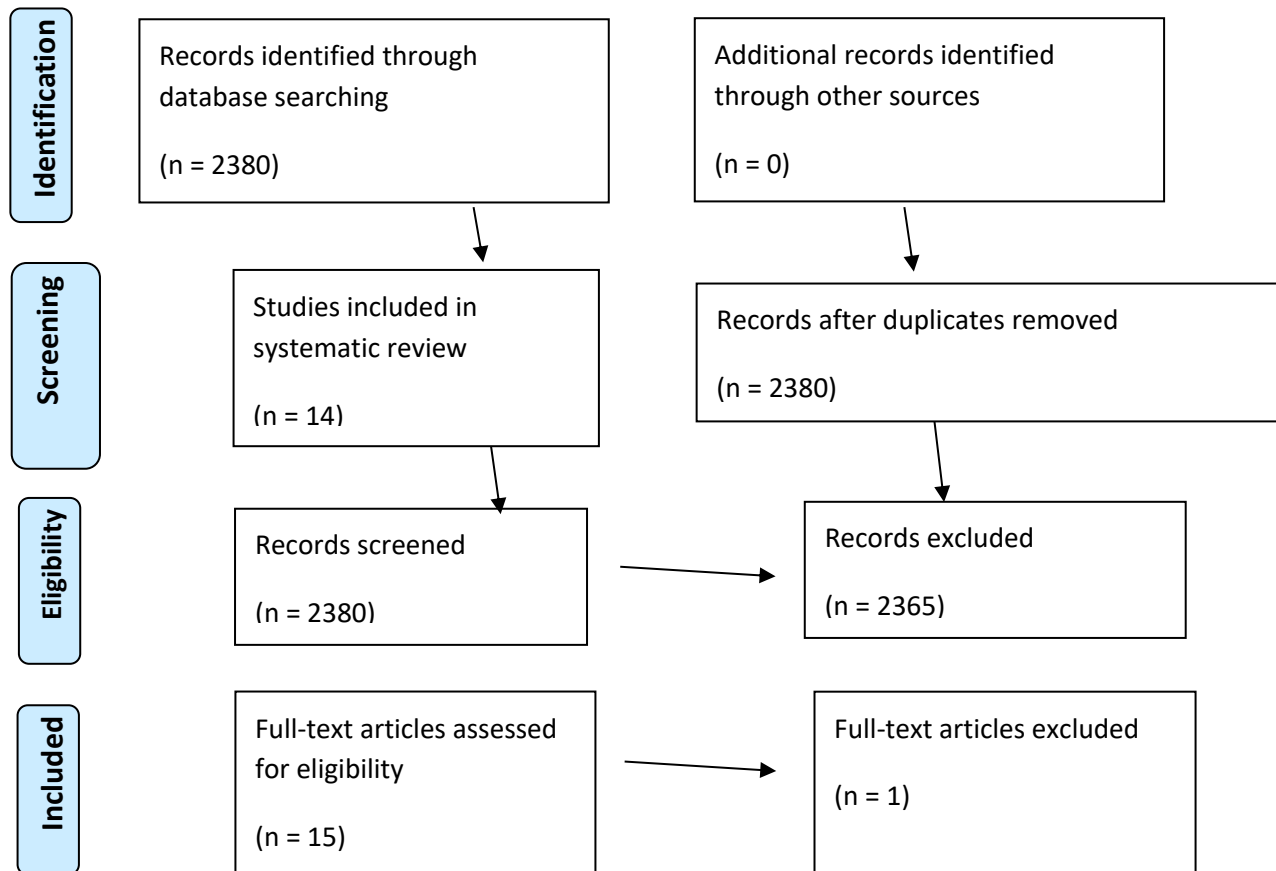


Figure 0.1 PRISM - Flow Diagram of Process for researching β -thalassemia (Key words: Race, French Canadians, Thalassemia)²

² (Moher, Liberati and Tetzlaff)

Study Selection

The author conducted the search, coded the studies for data analysis utilizing the Literature Review Synthesis Matrix for common themes. An integrative review of literature and summary of papers reviewed was used in order to apply race and ethnic relations approaches for the population health research.

Table 0.2 Integrative Review of Literature

Summary of papers reviewed	Authors	Focus	n	Measures	Results	Conclusions
	Atkin, Karl et al. (2001)	Coping strategies and resources young people (10-19) use to cope with thalassemia major	25	The aim of the research provided understanding of young peoples experience with this chronic condition. Qualitative measures and analysis conducted through semi-interviews. Comparisons conducted by theme (framework) and case.	Generalised their experience through an analysis of their oral responses of structured questions based on confilting situations, behaviors, beliefs and interactions.	Minority ethnic communities saw racism as a "fact of life" and came in many forms in the social environments of health and education
	Bajwa, Hamza and Basit, Hajira (2020)	Beta Thalassemia Education	0	Education/Epidemiology - The true numbers in the United States are unknown	beta-thalassemia is more prevalent in the Mediterranean population	Several laboratory tests have been developed to screen and diagnose thalassemia. Complete blood count (CBC), Peripheral blood smear, Iron studies, etc. Patients should receive education on the hereditary of the disease, social worker and geneticist, are essential
	Braverman, AS et al. (1973)	American Blacks: The problem of mild thalassemia	28	Clinical and hemologic studies were performed. Families originated in the southern United States, no history of Mediterranean ancestors. 4 families with homozygous Beta Thalassemia. Globin chain synthesis in patients were compared to data from 7 Italian an Greek children with typical severe Beta Thalassemia	All black patients with mild thalassemia had definitely elevated hemoglobin. The black thalassemia homozygotes reported were not transfused patients but were similar to non black patients who had severe Beta Thalassemia.	
	Eichner, Edward R. MD. (1976)	Black female with Homozygous Beta Thalassemia (follow up after twenty years.)	1	Case Report	Patient had unhealed ulcer on her leg and was being treated for 20 years by her local doctor. Previous records from a location (Kansas) she lived in before living in Louisiana diagnosed her with beta thalassemia (1962).	The molecular basis for the puzzling thalassemia in blacks as compared to whites remains a mystery.
	Friedman, Shlomo et al. (1973)	β -thalassemia in Black Americans	31	Hematologic and Subunit Synthesis Data of Black American patients (analysis) - grouped in family units	24 patients were found to have β -thalassemia trait utilizing hematologic and globin synthesis data and genetic studies. Results were similar to those found in Caucasians	Results are reproducible and are characteristic of globin synthesis in any patient.
	Graves, Marvin L. M.D. (1915)	Tropical Diseases and Public Health (Mortality rates and causes of death/Malaria) 19.1% Whites per 100, 000. 80.8%: Alabama	#	Statistical analysis of census and population count	Death rate among blacks according to the "Negro Year Book of 1913", issued by Tuskegee Institute - 24 to 1000, with average lifespan of 35 years old.	The vagrant negro, in the city and in the country, is a menace to white health and white security.
	De Brackeleer, Marc and Dao, To-Nga (1994)	Hereditary disorders in French Canadians - 28 Hereditary disorders in which β -thalassemia is one of the disorders (D19)	138	Reconstructed genealogies using various sources	Patients were born in various regions of Quebec and there were clusters of cases observed with ease.	2 of the 38 founders common to all β -thalassemia genealogies originated in Languedoc where the β -thalassemia mutation was still present at the time of this study
	Eleftheriou, Androulla (2020)	COVID-19 Pandemic and hemagloban disorders (β -thalassemia)	#	Risk analysis	Education of risk	β -thalassemia is a risk factor with three levels of risk and awareness of underlying conditions
	Kreimer-Birmbaum, M. et al. (1975)	Mild β -thalassemia in Black patients	15	Hematological Investigations, Hemoglobin biosynthesis	determinations: results indicates that there are no difference between blacks and Caucasians concerning β -thalassemia but they appear to differ genetically at different loci	possible roles of both environmental and genetic factors must be considered due to different clinical manifestation between blacks and whites.
	Labarge, A-M et al. (2005)	distribution of genetic diseases in Quebec	#	β -thalassemia - disease with distinctive features in French Canadians/genealogical reconstructions/review of journals	The carrier frequency is around 3% of the world population for the era. Occurs in 1.03% of population in Quebec (Portneuf county, southwest of Quebec City)	Carrier screenings have been conducted since 1980 on Italian and Greek communities
	Pierce, H.I. et al. (1977)	β -thalassemia in Black Americans (all males)	1310	hematologic methods and techniques of hemoglobin analysis (541 blacks and 769 whites tested)	73 blacks (13.4%) were studied with basis (MCH of less than 27.0 pg with 104 criterias) 15 whites (1.9%) had similar MCH values	The study confirmed that thalassemia is a frequent hematologically abnormalities in American Blacks.
	Thomas, Geoffrey P. (2016)	8000 year-old case of thalassemia	168	Archeological site and bones (The easiest way in which to determine the presence of either or thalassemia is through DNA testing and observation of the and globin genes.)	Based on the clinical and archaeological literature, thalassaemias not the only potential cause for each of these traits when viewed separately. There are multiple potential causes for anaemia including sickle cell disease, vitamin deficiencies, malnutrition, hypothyroidism, and other hereditary disorders	The only way to be 100% accurate in this diagnosis would be to extract and test this individual's DNA. Without a DNA test of this individual's and globin genes, the diagnosis of thalassemia pre-sented here must be viewed as tentative
	Vichinsky, Elliott P. et al. (2005)	Changes in Epidemiology of β -thalassemia in North America and the migratory patterns to North America	721	Cross sectional study conducted with thalassemia syndromes/relationships between ethnic origins, genotype, and phenotype. Compared with three previous surveys. 87 additional programs were reviewed and hemoglobiopathy programs from Ontario and California were used	Beta-thalassemia predominated in Eastern North America	The epidemiology of thalassemia in North America (new ethnicities, genotypes, and phenotypes. Medical communities need to provide education, prenatal diagnosis, counseling, and management of this new diverse group of patients
	Wailoo, Keith (1996)	Thalassemia as Case studies of genetic disease in America	#	Integrative literature reviews (examines how views of race, blood, and Mendelian genetics informed debates 1910-1950)	Evolving political identity of Blacks in social/political and health environments	A small group of medical writers shaped the American way of treating Blacks different when it came to the "hidden dangers and contamination associated with racial proximity, migration, and racial admixture."
	White, BP (1991)	Case of hereditary sperocytosis (HS) and β -thalassemia in an American Black	1	Case Report	clinical presentation, family history and specialized laboratory findings assisted in the diagnosis	Ancestry and genetic testing of Jewish, Black, Mediterranean or Southeast Asia is important due to the higher occurrence of thalassemia.

Statement of the Problem

Coronavirus 19 (COVID-19) pandemic has brought to the forefront the importance of identifying all populations affected with β -thalassemia. French Canadians, inclusive of blacks in the United states are understated in population count. β -thalassemia is identified as one of the risks groups concerning patients with thalassemia, a hemoglobin disorder (Dr. Eleftheriou, Androulla 3).

Thalassemia traits which appear throughout the U.S. and Canada also genetically identified as a common hereditary makeup of French Canadians, one that has nonetheless mutated and evolved as a result of their migration throughout the states, specifically, for our purposes here, in Alabama. Blacks are overlooked concerning this hereditary disorder. Further research is needed to determine a quantified accounting of the percentage of French-Canadian descendants carrying this hereditary disorder.

Research Questions

In the course of the research study, the thesis seeks to ask -- and answer to the extent feasible – the following questions:

1. What specific laws and institutions transformed the growing nation from one composed of primarily homogeneous Anglo-American ethnicity into a far more segregated, “racialized” one?
2. What effects did geopolitical and migratory laws have on the French Canadian people that forced them to assimilate into primarily Anglophone America?
3. What distinct population migrated to the United States and then further to Alabama, specifically east of the Fort Toulouse area settling into the new communities for growth in the French-Canadian traditions?

Research Hypothesis and Significance of the Study

The research extends the author's Doctor of Liberal Arts (DLA) coursework in ways that afford her the opportunity to offer original interpretations as well as a more coherent synthesis of a range of works of history, anthropology, medicine, art and literature concerning French Canadians and β -thalassemia. Due to the current COVID-19 pandemic, the hypotheses are based on materials available for research and the analysis based on cultural/geographical research of significant areas of concern. Consequently, on materials researched instead of physical observation or research through geography or anthropology.

Chapter 1: Erasure and Effacement

Chapter 1 of this research study is an integrative/systematic and narrative literature review. The theoretical framework is the Critical Race Theory. The purpose of the review is to examine the correlation that may exist between the social and identity structures of French Canadians and β -thalassemia. The in-depth research into Métis/Creole admixture provides an opportunity to compare and contrast historical and fictional data supporting the correlation between French Canadians and Beta Thalassemia (β -thalassemia). Two geographical features and analogies by authors Carl J. Ekberg and Jean Morisset provide an understanding of the French Canadian identity and customs. This study supports the theory that it is critical to acknowledge an understated amount of French Canadian American descendants who are essential as an ethnicity in the United States today, specifically in Alabama. Combining historical narratives with oral discourses to the current critical race theory assist in stating a more accurate account of French Canadians self-identifying in the United States through acknowledgement of the ethnicity rather than the black/white race. Recreating the French Canadian heritage through “maps, stories, and place names” (Morisset 20) (Ekberg 1) is important to understand the challenges associated with β -thalassemia and the correlation between the ethnicity and heredity disease. Common themes are identified through the scientific myths and scientific truths associated with French Canadians and Beta Thalassemia.

Numerous scholars have combined the important concept of race and ethnicity applied to certain cultural studies from academic historical texts, fictional novels, sociology and political sciences, as well as academic medical reviews and articles. Analyzing the correlations that may

exist between the social and identity structures of French Canadians and Beta (B) Thalassemia, a hereditary disease, defines the concepts identified in this review. The in-depth research into Métis/Creole admixture (French-Canadian, French Native American, and French African) provides an opportunity for comparative examination between historical data and fictional data supporting the correlation between these entities.

Topics to support the theme are race and the historical concept of Darwinism (Zooism 1859) in order to understand the important concepts of racism and Darwinism that shaped the French Canadian communities nationwide in America. The scholars identify major issues of β -thalassemia as the health disparity of the mixed raced French Canadians based on research founded in myth (perception of a racial concept) versus actual evidence of the science concerning this disease.

1.1 Effacement of French Canadians and heredity through racism

Race based in scientific myth compared to scientific truth associated with French Canadians and Beta thalassemia, further expounds on the research and possible correlation between the French Canadians and β -thalassemia. Previous research has supported the hypothesis that public discourse of “race”, which is not an identity but a social construction, is defined in this literature review as a “politically contested scientific myth and social reality”³. The literature on *Race and the Genetic Revolution* have pointed out that Darwinism was created to give race a scientific legitimacy (Krimsky and Sloan, 2) in order to create a heirachy of whites and others⁴. Current

³ (Krimsky and Sloan, 2), (Omi and Winant, 2) (Ba, 43) (Fanon, 1, 36)

⁴ December 1787 St. Louis and Ste. Genevieve, Lieutenant Governor employed a taxonomy to the census, including a color hierarchy consisting of a racial rubric. The rubric detail of color (white, tan, or black[“blancos, pardos, negros”]) consisted of mulattos, mestizo, metis, *griffe*, or *zambo* (Spanish for a person of mixed African and Native

theories in medicine hypothesize that the “concept of race” does not agree with the legitimate taxonomic concept of chimpanzees applied to humans (Krimsky and Sloan, note 14). This “...paradoxical elements, confusions, and public myths associated with how race continues to be used in science” and medicine is significant in “the role it plays in social policy and popular culture” (Krimsky and Sloan). Past studies have yielded some important insights into the French Canadian history (Waddell 4) which is different from the Acadians and Cajuns. Egbert C. Smyth argues that, “their connection with their mother country, the Providence of Quebec, differentiates them from the Acadians, Cajuns, French in Louisiana, Irish or German immigration (9)”. Most researchers working in the area of French Canadian history and genetic demography agree that they were not expelled from the St. Lawrence River and Acadia (New Brunswick and Nova Scotia), but migrated throughout North America⁵, potentially as far south as Mobile, Alabama and the eastern seaboard of the Louisiana Purchase historical territory (Ekberg, 92, 94). They had freedom of movement around the North American continent (Laberge, Michaud and Richter, 287) (Ekberg, 46).

Métis French Canadian Americans are widespread throughout the United States, especially throughout the original Louisiana Purchase geography areas (Morisset 25). The existing literature emphasizes the “mighty river that today separates Illinois from Missouri was in colonial times a geographical feature that united rather than divided (Ekberg 2)” the communities as a cohesive entity through “shared blood, language, religion and customs (Ekberg 1)”. These two geographical analogies of communities and people help build on the theory of

American blood) focusing exclusively on color of skin. Native American slaves were lumped in with mulattos and thus overall “pardos” (Ekberg, *Stealing Indian Women: Native Slavery in the Illinois Country*, 92) (C. J. Ekberg, *Francis Valle and His World: Upper Louisiana Before Lewis and Clark*, 196).

⁵ (Ekberg, 2, 8, 9, 37, 50) (Ens, 15) (Morisset, 25) (Laberge, Michaud and Richter, 287)

millions of French-Canadian American descendants living in the United States today, specifically in Alabama as the study claims, are obscure and can be recreated through “maps, stories, and place names” (Morisset 20) by geographical research review. French Canadians were not historically a copiously identified racial or ethnic group in the United States except for... obvious and researched locations of New England consisting of the early state of Maine, New Hampshire, Vermont, Massachusetts, Rhode Island and Connecticut (Smyth 318) late 19th century.

1.1.1 French Canadians, Race, Ethnicity and “Negro Blood”

The first subtopic, defines the following terms: French Canadians, race, ethnicity, and “negro blood”. It also describes how the existing literature emphasizes how “The people (*French Canadians*) possess a distinctive sociocultural heritage and sense of self-identification (Ens and Sawchuk 19)”. The review clarifies and defines, “mixed blood persons whose parents were of European (or French Creole) and Native American stock” (Ekberg 64). It also provides theoretical framework supporting the language of an admixture and clarification of Métis which parallels between the word Métis interchanged with the word mulatto. This familial identity helps frame the concept of how French Canadians consider themselves the ethnicity they identified with in their families. The paternal father/son relationship is defined to include a portion of the “negro blood theory”. Ethnic group formations in societies are complex and the relationship between the different meanings of ethnicity for a basis of the argument of mixed raced communities are identified (Vincent 288).

French Canadians are first generation “white” French colonists born in Canada and their descendants (Ekberg and Person, 218) (Waddell 4) who migrated throughout North America, also defined as Créoles. Researchers working in the area of French Canadians agree that the admixture of French and Native Americans supports the hypothesis that French Native Americans also consider themselves as French Canadian (Morisset, 25, 31) (Ekberg, 115) (Ens, 15). Morisset’s analogy and consensus in stating that “ ‘French America’ is less French than Native and as much *Métis* as *Canadien*, both identities tending to merge” (25) is an identifiable correlation to this study.

For the basis of describing a Métis, Ekberg presented as a character in his historical presentation of a French/Native American subject “Céladon”, “*Stealing Indian Women: Native Slavery in Illinois Country*”(115). This character provides an insight to his readers as to Ekberg’s defining thought of the person’s identity as a possible “non-white” French Canadian descendant who in theory considers himself as an “Other” (ibid). The description of the character of the man of mixed blood ancestry, spoke fluent French, and possibly the Native American language because he mingled with both “as an equal within the main body of Creole Society in St. Genevieve” and the indigenous communities providing an image of a bi-cultural individual. The language “outlaw” presented as the character of Céladon implies that he potentially had bad blood because of his mixed race (116). Another perception to a character named Céladon could be derived from the novel “*L’Astrée* which shows how historical context can add to the narrative of history a “paradox of nothing (Meding 1087)”. The author, Honoré d’Urfé, a Quattrocento humanist had a philosophical distrust of writing and a preference for an

oral medium to add to the written text. The protagonist of the 17th century mythical guidebook was created to articulate the laws of love. The duplicity of the character Céladon, the Shepard was his melancholic idleness and a gardener hermit struggling also with the gift given to him by a nymph to “receive ‘paper and ink’”. The character had a love for women, potentially representative of the authors own person identified in the novel in an “interdependent exchange (ibid)”. Both authors, Ekberg and d’Urfé, using the name Céladon articulated in their historical and fictional writings the complexity of describing the inner character of a human who can transition between two worlds.

“Canadian Constitution Act of 1982 recognized the Métis as one of Canada’s Aboriginal peoples” (Ens and Sawchuk 15). The exact term Métis is not distinct in literature today. It is loosely defined and identified as just a mixed ancestry that stressed the Native American part of a person’s heritage (Ens and Sawchuk 15). Scholars use the term “Métis” as, originally French word (Métis) meaning ‘mixed’, to designate individuals and communities who identify their antecedents with historical communities connected to the fur trade” (Ens and Sawchuk 19). “The people possess a distinctive sociocultural heritage and sense of self-identification” (Ens and Sawchuk 19). The term “Métis” is utilized in this capacity. The historical meaning of Métis evolves over time and means something different today rather than centuries ago and according to Ens and Sawchuk, the meaning still changing today (19). Métis is not the focus of this study and alternatively, the author utilizes the definition used by Jean Morisset in “*The head of the River is Unknown*”, Canadien to define the métissage relationship of the French and their relationship with the Native Americans. Morisset described the transfusion of the Natives

and French as an interconnectedness of cultural and environment where the identity was neither Native nor French but Canadien (31). Throughout the research for clarity and definition of the term *Métis*, the term defined by Ekberg, “mixed blood persons whose parents were of European (or French Creole) and Native American stock, Métis, descended from parents of different races – black and white, red and white, black and red” (Ekberg 64) is adopted (Table 1.1). This term could also be interchanged with the word mulatto. “People of mixed Native Americans, African and European ancestry could adopt very different identities. Some were raised as Native Americans and never knew another identity, others were raised as French Canadians or Acadians and did not consider themselves Métis” (Ens,15). They would from a familial identity consider themselves the ethnicity they identified with in their families, either French Canadian, Acadian, Creole, black or white (Table 1.1). Ens and Sawchuk also defines Métis as, a people who embodies the French Canadians and are a “distinct people of North America” (15).

Table 1.1 1797 Census color rubric - White, tan, or black [“Blanco’s, pardos, negros”]⁶

French Canadian	Creole	French born in Canada	Descendants from France, thus French Creole	White
French Canadian	creole	Mulatto – born in Canada or United States (colonial Louisiana)	Descendants from French, or French Creole father and Native American slave (free) woman. As of June 1787 Native American slaves were freemen (hidden through this rubric and kept as slaves/or marriages) (68)	“pardos”/ tan white – Native American marriages Note: According to Ekberg, Native Americans who were born of the villages of the Illinois country (colonial Louisiana) were

⁶ The rubric detail of color (white, tan, or black [“Blanco’s, pardos, negros”]) consisted of mulattos, mestizo, metis, griffe, or zambo (Spanish for a person of mixed African and Native American blood) focusing exclusively on color of skin. Native American slaves were lumped in with mulattos and thus overall “pardos” (Ekberg, *Stealing Indian Women: Native Slavery in the Illinois Country*, 92) (C. J. Ekberg, *Francis Valle and His World: Upper Louisiana Before Lewis and Clark*, 196)

				technically Creoles (63)
French Canadian	creole	Mestizo – born in Canada or United States (colonial Louisiana)	Descendants from French, or French Creole and Native American, free or slave woman	Native American and white blood European (or French Creole) and Native American stock
French Canadian	creole	Métis – born in Canada or United States (colonial Louisiana) – also known as mulattos	Descendants from French, or French Creole father and Native Americans, free or slave woman and parents of different races (racial mixture)	(p.64) (black and white, red and white, black and red). Note red=Native America blood
French Canadian	creole	<i>Griffe</i> – born in Canada or United States (colonial Louisiana)	Descendants of French Creole and Native American, free or slave woman	Mixed Native American and black – “negros”
French Canadian	creole	<i>Zambo</i> – born in Canada or United States (colonial Louisiana)	Descendants of French Creole and Native American, free or slave woman	mixed African and Native American blood – “negros”

The name *Canadien* was given to the Natives by the French who recognized them as “their own Native Americanized Creoles born in America and whose identity was molded by the inter-relationship with the indigenous peoples and physical geography of the so-called New France” (Morisset 31). The term *Canadien* is utilized as French Canadian for clarity and is inclusive of the identity of Native Americanized Creoles. According to Ekbert, natives and Blacks were called creole, defined as “anything produced by Creoles”(Ekberg 218) in literature. “Creole”, written as an adjective rather than a noun is to include the dynamics of the Creole inhabitants who intermingled with the natives and blacks and migrated throughout the United States of America and Canada (Ekberg and Person 218). French Canadians when it came to blacks and Native Americans in their care, slaves, or freedmen, treated them from a protective manner of father/Son relationship. This paternal relationship incorporated a portion of the “negro

blood theory” as such; the father was the one with the ‘good blood’ and son, thus when insolent to the father, was of ‘bad blood’ ” (Ekberg, 206). Carl J. Ekberg agrees that the French recognized the physiological differences between themselves and blacks, but they did not commit to recognizing blacks as inferior (206). From a historical account according to Krimsky and Sloan, at the end of the twentieth century, race was defined, "in an Unabridged Random House Dictionary (1993) as an arbitrary classification of modern humans, sometimes, exp. formerly, based on any or combination of various physical characteristics, as skin color, facial form, or eye shape" (3)(Figure 1.1)(Figure 1.2).



Figure 1.1 Certified Mulattos on Birth Certificates (and Census)

(George Woods (1868-1950), Ida Varner Woods (1869-1945))

Self-Identified as Creoles (orally passed down lineage)

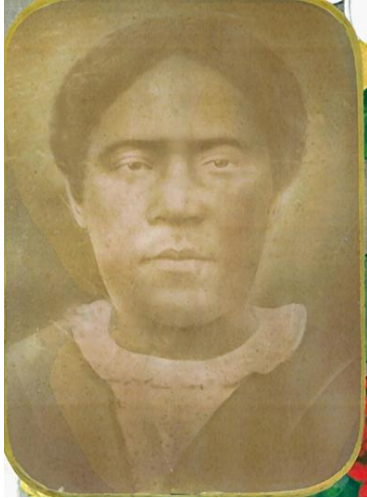


Figure 1.2 Certified Mulatto on Birth Certificate (and Census)

(Milia Waller Echols (1863-1937))

Self-Identified as French Canadian and Cherokee (orally passed down lineage)

Modern medical literature still utilizes nineteenth century anthropological categories in group studies (Krimsky and Sloan 144). Ethnicity – (United States) “...as opposed to race...is an individual identity arena in which subjects identify in terms of several generations of ancestors from X, Y, and Z (Waters 1990)” (Vincent 289). Ethnic group formation in societies are difficult and contrary to group formations with mixed ancestry. National identity is quite different in the United States compared to European identity. The United States focus on national identity is “through the state, flag, international success, democracy, and opportunity” (Vincent 288), whereas European national identity focus is “a question of nature, community, and national roots or history” (ibid). Mixed ethnicity is a hybrid of the two and more complex because of the two contradictory focuses on national identity.

It is in commercial city-states and in nation-states that one finds a strong tendency to both individualization and homogenization. In such states, there is tendency of the state itself to be transformed from a ruling class to a governmental body. It

becomes representative of the people and there are clear democratic proclivities as well. Questions of loyalty, legal equality, and solidarity become central. These are issues of social homogeneity...a practice of boundedness, the notion that “this is our society, our state.”...it does not belong to everyone, that is, to outsiders, who could include foreign traders and a large slave population (Vincent 290).

For the purposes of this study French Canadians are identified as a Francophone (non Carribean) ethnicity of Canadians of French heritage living in the United States, inclusive of mixed race population, specifically unrecognized as such in Alabama today.

1.1.2 Racial rhetoric formation and the Mendelian theory

This second subtopic scrutinize racialized medicine through racial rhetoric formation and the Mendelian (*Mendelian Genetic Disorders*) theory. Blacks are classified as a race and not culturally an ethnicity such as French Canadian (Pierce, Kurachi and Sofroniadou 981). This review explores the understanding of the “bad blood verses good blood” theory. Historically circa 1910-1950s, superstition and mysticism permeated throughout the medical communities in order to separate the differences between blacks and whites. Whites are considered to be the superior race at the top of the race hierarchy. This tension in creating a superior society verses human consciousness in health care created the debate in the field of genetics because blacks and mulattos were considered to be of the same race. Race and medicine through genetic disease are constructed ideas by the physicians of the past (Krimsky and Sloan 3). Additionally, this subsection provides evidence in the construction of obscuring an ethnicity for the political advantage of separating two “human species”, blacks and whites into two separate but equal entities (Ekberg, 206)(Wailoo, 309, 315).

The general picture emerging from the review of thalassemia in American blacks is that American blacks are defined as a race and not culturally an ethnicity such as French Canadian (Pierce, Kurachi and Sofroniadou, 981). This is significant to understand since β -thalassemia is considered by researchers to be more prevalent in the Mediterranean population rather than French Canadian. The vast majority of the work in the area of β -thalassemia has focused on the hereditary disorder as in the genes, per the professional intellectuals. They subjectively apply the disorder to a certain population and minimize the French Canadians and American black population from this disorder.

The prevailing symbolic framework produced by prominent intellectuals of “constructed knowledge” in the medical communities of physicians was distributed through “national and medical journals” (Wailoo 305). The articulation of the Mendelian dominant disorder (*genetic*) theory is specifically applied to American blacks concerning sickle cell anemia. According to Wailoo, disease thought and racial thought intersects with thalassemia disease and sickle cell disease in the 20th century (305). The two disorders are distinctively different from each other biologically and genetically. It is generally accepted wisdom that, "One of the most persistent of the myths involving blood - and one that has taken an incredible human toll - is the belief that the blood not only contains life but also the qualities of a being"(Wailoo, 306). "...hematologists rejects the earlier association of 'blood' with individuality, race, genetics, and national origin as a dangerous myth (*Darwinism disputed*)" (Wailoo, 306). Historically circa 1910-1950s, superstition and mysticism associated with the blood permeated throughout the medical association in order to keep up the discourse of “bad blood verses good blood” theory.

This line of study is a source of debate in the field of genetics. Race and medicine through genetic disease (disorder) is constructed ideas of the physicians of the past (Krimsky and Sloan, 3). Joining the two theories, darwinism and racism, to make one cultural artifact of the 'negro blood' concept gives credibility to politically separate the two "human species", blacks and whites into two separate but equal entities. Mulattos because of the so-called 'Negro blood', are perceived as biologically inferior to whites (Ekberg, 206)(Wailoo, 309, 315). There are fallacies in racial thinking concerning disease technology and hereditary thought amongst the scientific communities. The current genetic testings of genealogy has the potential to be manipulated to present a story tracing ones genealogy to a narrative conducive to the established historical knowledge and language based on mythological "magical plane of reasoning" (Wailoo, 319). There is no allele (gene) for race (as distinct from skin color). It remains fiercely disputed as "mere" contestable "theory". "Sickle-cell anemia, often mischaracterized as a "black" disease, is an inherited defensive response to having ancestors who lived among malarial mosquitoes"(Krimsky and Sloan 245). The same can be a true state of β -thalassemia, the autosomal disease recessive, obscured and recognized only as a white (Caucasian) and Mediterranean disease. Current literature from a plethora of scholars have contended that nearly all β -thalassemia variants are inherited in a Mendelian recessive manner (De Sanctis, Kattamis and Canatan), but there is a small subgroup of β -thalassemia alleles that behave in a dominant fashion. Most researchers during the 1970s (ca. 1972-1979) working in the area of thalassemia research agree that the methods compared to non-Black patients resulted as a common disorder in the American black populations with

0.8% in the United States (1973) (Friedman, Hamilton and Schwartz) (Kreimer-Birnbaum, Edwards and Rusnak 985). Friedman, et.al. clinical findings resulted in evidence that the disorder is similar to those of Caucasians (1453). Kreimer-Birnbaum, et al. went on to define Beta Thalassemia as not atypical in American Blacks (257, 285) and thus, the study acknowledges previous research has largely overlooked the significance of the hereditary blood disorder in French Canadians and blacks. The Heterozygotes are the same in blacks as Caucasians Cooley's Anemia. The severity of symptoms is different in black patients verses Caucasians and it is noted that the clinical symptoms are milder in blacks compared to Caucasians (Kreimer-Birnbaum, Edwards and Rusnak 257). The differences in the severity of symptoms does not validate the treatment of blacks as insignificant than other ethnicities for this condition. A recent line of research over a decade ago has established that the research methods were to "define the relationship between ethnic origins, genotype, and phenotype" (Vichinsky, MacKlin and Wayne e818). The results obtained are as follows, "ethnic backgrounds of patients by diagnosis – 43% white, 51% Asian, and 6% black or multiethnic" (Vichinsky, MacKlin and Wayne e820).

1.1.3 Public Health issues in Fiction as related to Academic text

This subsection compare and contrast the fiction and academic text. The fictional plots and character narratives of French colonial African communities put into words storytelling as cultural experiences related to many ethnic minorities. These minorities includes the French Canadians aforementioned and defined in this thesis. The psychological effects of the father/son relationship developed through French colonialism is a theory that caused tension between identity of self and community. A number of

studies indicate policies created between the French and British colonies were for peace compared to commercial gain, respectively and caused community friction between loving their country or loving their God.

Making transition from one environment to another and the historical data reviewed provides insight into how the language of change was articulated academically and through fictional plots and characters of the French colonial communities globally. The review examines the fictional role of the protagonist as a correlation to social issues such as their most pressing health concerns regarding long-term mortality issues.

“*The Old Man and The Medal*”, by Ferdinand Oyono is a fiction using satire in presenting the father/son relationship and health issues. The novel opens up with the protagonist having anxiety because he was summoned by the Commandant of the community without knowing what he wanted. Fear and tension are created in the initial language of the novel in anticipation of the protagonist going to see his father (Commandant). The central character is awakened with anxiety and feels he has no support of his wife as he thinks he is about to be crucified by his superior. He initially yells at her, “Wake up! How can you sleep when I have troubles? Woman, you are as weak as the disciples were on the Mount of Olives. You know I have to see the Commandant early this morning. We must say our prayers...” (Oyono 3). Language is utilized to provide a visual of the heart and mind of Meka, the protagonist. A feudal ruler (French Colonist/Catholic Missionary) demands fear and dependency on him as an ally and protector. Conversion was the requirement to Christianity throughout the French colonization period. The “patriarchal order of France, Louis XIV, was imagined that

he...styled himself as a 'father' to..." (Weyhing and Havard 89) his vasselage in which France ruled. Socially the 'father' was the protector of his children rather than "demands of subordination to his will" (Weyhing and Havard 89). Vicky Lebeau supports the notion that Freud indicated, "Anxiety... is without an object" (137), and defines the widely accepted hypothesis that if colonized people are not insolent then they are ignorant and savages. Oyono argues that, through the fictional characters and plot, the problem of ill health was a universal social problem that the French had a duty to take care of the health care of the villagers. The protagonist of political politics indicates the work of Oyono's narrative and demonstrates that the French did not act in accordance with the duty. He introduced the problem of health of the old man and his medicine as a momentary slip of his newfound religion and partaking in drinking the Africa-gin for relief of his rheumatism. The alcohol was a mental, emotional and physical pain reliever. All the old characters in the novel was ridden with health ailments (Oyono 17-19). Although these ailments were presented in a fictional manner produced by the author, it was a realistic issue in the medical communities in the United States and needed to be addressed accordingly in a serious manner. This text parallels with the "white" perception of black people presented to the medical professionals (ca.1916) literature by Marvin L. Graves, M.D., a Caucasion, through medical journals to the medical communities of the South (412). Dr. Graves research is not without controversy. He used this same argument to support his proposition in getting rid of the menace and health problems of the 'white' race, which was the blacks and their unsanitary living conditions, hygiene, alcoholic diseases and unbridled libido (412-413).

From a literary autobiographical viewpoint, Mariam Ba provides a discourse on the tension of a black Protestant African woman trying to fit into a black Muslim African society. Her discussion of the character Jacqueline, an Ivorian, who was from a different country in Africa trying to fit into her new elite society as a wife of a doctor, ended up having a nervous breakdown. The nervous breakdown was due to Fanons description, “the madness of the black image”(151) (Verges 137). These findings indicate the desire for citizenship and elite identity comes with the price of conversion to Christianity (Catholism) under which the law would provide the citizen the French designation as a natural citizen of the land (Havard 113). The tension is always going to be between the identity of self as indicated by the character representation of the African woman as African. Despite cultural differences, once a citizen of France, whether through birth or naturalization, identifying as French Canadian is a concept that argues as effective.

Francisation was a policy to reify French identity. But in theory the assimilation policy went both ways due to the missionaries intervention and idea of living amongst the Native Americans as well as learning their culture while teaching them the French “good citizen” way through conversion (Havard 114, 115). According to Havards theory, the tension in creating a society of French Canadians was the racialization of social relations and fear of mixing amongst the elites (ibid).

The findings of this research shows that Wailoo drew parallels between miscegenation and racism. The 20th century physicians did not differentate the two traits sickle cell anemia and thalassemia, which both white and black patients displayed⁷.

⁷ (Kreimer-Birnbaum, Edwards and Rusnak, 257) (Wailoo, 317) (Bojanowski, 2811) (White, 257) (Friedman, Hamilton and Schwartz, 1453)

Racism caused some physicians to see the hereditary disease from a black observation discussed throughout the medical communities rather than from the Greek and Italian patients' clinical diagnosis. The disease they identified as having the heredity disorder of thalassemia or Cooleys anemia (Wailoo, 314) was a white or Mediterranean disease. The use of the word miscegenation (métissage), rooted in the politics of separation of races, was propagated through the medical professionals and characterized as the key vehicle of transmission of the disease. This is a term that is vital to be rooted out of the public health system today if valid medical truth of the hereditary disorder of β -thalassemia is to be exposed as a disease that is inherited in blacks as well as whites and impacts the physical well being of the population if not screened properly. Throughout the 20th century, the appearance of sickled cells even in the so called 'white people' was treated as a genetic marker of 'Negro blood'. This biological racism was created in medical societies to segregate and oppress Blacks. The research findings of Wailoo provided evidence supporting the created blood disorder isolated in the laboratory and labeled as such (311) by Victor Emmel, a Chicago anatomist. His diagnostic technology constructed a disease to distinguish between the pure colonist and unclean savage. (Wailoo, 312).

In the case of sickle cell anemia, the expert use of diagnostic technology, Medelian theory, and methods of physical anthropology in the construction of these lines sheds light on the fundamental, modern, ritual processes at work. For some physicians, at least, problems of social order and racial segregation in American society informed their scientific conception of this disease (ibid)

The literature on the construction of this theory has its roots in racism. While some researchers agreed with this process in order to support the notion that this was a black only disease, other medical researchers “wrote about sickle cell anemia from a different

clinical standpoint without engaging in discussions about the negro blood. (Wailoo 309, note 14)”.

Medically and politically this condition of having thalassaemia disorder was a biological defense to defend segregation and "consequences of racial intermarriage and social integration" (Wailoo 315). “ β -thalassaemia predominated in Eastern North America”⁸. This literature review reveals that previous studies have demonstrated since 1925, severe thalassaemia was being researched empirically on populations from Italian children with distinctive anemia and deformities. The term thalassaemia was later defined as “thalassa anemia” (“anemia by the sea”) (ibid) because of recognized links to the Mediterranean region” (Vichinsky, MacKlin and Waye, e818). The medical researchers group Vichinsky, et. al., agree that “thalassaemia is documented in all ethnic groups originating from geographic regions in which malaria was or remains endemic (ibid.). Also, thalassaemia is an increasing public health problem worldwide” (e818). It is important to realize that malaria was endemic in the 18th and 19th century in the south and there was no research and cases available until after the turn of the twentieth century. An inadequate amount of research has been conducted today concerning citizens of the French Canadian ethnic ancestry due to their obscurity which includes blacks and whites of this ethnic group and their lack of knowledge of this hereditary disorder. This potentially is less evident in blacks in the south, particularly Alabama due to the unjustified actions of not providing the medical research and resources to their needs.

⁸ (Vichinsky, MacKlin and Waye, e818) (Wailoo)(De Sanctis, Kattamis and Canatan) (Krimsky and Sloan)

Graves (1916) discourse emphasized that malaria in Alabama was listed in his research data as an issue of “deaths...calculated per 100,000 of the population from this disease, at the rate of 19.1% of whites verses 80.8% of black peoples” (409), respectfully. His theoretical framework takes account of public health crisis amongst the blacks as due to “ignorance, superstition, and insanitation” in which he attributes the responsibility to the spread of the disease and death happening among the whites (ibid) was due to miscegenation. Hereditary disorders were not identified during this timeframe and current literature on β -thalassemia reveals no boundaries between whites and blacks and its correlation to malaria ⁹. Graves premise, “project an image of better order” for whites to abide by in the medical field of public health, is presented through a mythological or fictional review of his data which was new and inaccurately collected through the new system of census collection of populations (407). In order to project an image of better order Graves research argues that the rate of increase in blacks, inclusive of mixed race populations in America compared to the immigration and rate of increase of whites in America between 1880 and 1912 was significant in the South. Graves provides one of the earlier discussions of the correlation between public health issues of world commonwealths and race hierarchies of the United States. The scholars most pressing concern was mortality and the inaccurate, but high number, of accountability of total blacks in the south according to the census (1880-1915) for southern states. From his count of total blacks in the United States his results indicated, due to continued infidelity and miscegenation, the increased trend of mulattoes would eventually overtake the

⁹ (Kreimer-Birnbaum, Edwards and Rusnak, 257) (Eichner, 1237) (Pierce, Kurachi and Sofroniadou, 983) (Braverman, 857) (Friedman, Hamilton and Schwartz, 1453)

number of blacks and thus cause more problems in the white communities (Graves 408). The majority of blacks who lived outside the South portrayed no issues because the population percentage of whites were higher than the 50% rate of the south (ibid). According to Graves, Alabama had the third largest black population with a 42% data of this population researched. A considerable amount of the research focused on mortality statistics and population growth from the census count. Graves claims that “the distribution of the races makes it plain that there is no practical problem of health in the negro race outside of the South” (410). The foundation of forming the racial concept in order to subjugate a race and the formation of political policies created a base for presenting this problem. The problem would be addressed in public health in order to “designate cures for the whites political, social, and sanitary ills (Graves 412)”.

The foundational theory of Graves caused some physicians to believe the cases of whites having sickle cell anemia is that they have tainted blood through miscegenation (métissage) – racial intermarriages. John Lawrence, a New York Physician of the late 1920s refuted the notion that 'deeply rooted racial characteristics' were responsible for the condition (Wailoo). The condition was not the result of public health and environmental issues, it is heredity. "Black physicians did not necessarily agree on the meaning and significance of the Emmel test" (Wailoo, 317). The author is congruent with these ideologies and agree that racial intermarriages was not the major cause of mortality, but a heredity disease that needed to be accredited by the medical communities. Wailoo’s past research upheld some important insights into the Mendelian theory where, in "1925, numerous case reports of 'sickle cell anemia in whites' appeared in the medical presses"

(307) in which these cases were called thalassemia. Thalassemia was a known disease researched in the early 19th century in which the medical communities labeled sickle cell anemia a black disease and thalassemia a white disease.

1.2 Erasure of ethnic identities in favor of racial ones (1880 – 1930s)

The second topic of this review mines data in order to discern between facts and the fictions/myths surrounding colonized or otherwise exploited peoples during the primary periods of the mid nineteenth century, circa 1880 – 1930s. The data mined correlates race consciousness with identity as a French Canadian and health issues identified related to β -thalassemia. Cultural bonding in literature with established French Canadian communities are common in their environments and could be attributed to other communities across the United States within the colonial Louisiana territory, including Alabama and the Fort Toulouse area.

The critical race theory narrative also reveals that race consciousness began with the Europeans colonizing the new world in the 18th and 19th centuries (Omi and Winant). Data indications show that contentious arguments against miscegenation (Ekberg, 24) appears to be based on the accepted hypothesis that the early Europeans “race theory and race prejudice” (Omi and Winant, 162) was commonly known amongst the English colonists of North America.

While Omi’s findings on the Europeans colonizing with racist and prejudicial theories, it has not yet been demonstrated by the historian Ekberg in his writings of the French Canadians of Illinois Country. On the contrary, he argues that the communities shared in cultural bonding through “their language and their ethnicity. They were all francophone, and they were virtually

all of French, French Canadian, French Native American, or French Creole extraction” (Ekberg, 239).

Just as the cultures shared a bonding in the Illinois Country, this study argues that a similar cultural bonding in Alabama, a part of the Louisiana territory pre-twentieth century ensued.

In the eighteenth and early nineteenth centuries, French-Canadian explorers penetrated the heart of North America, followed by *coureurs de bois* and *voyageurs* engaged in the fur trade, many of whom were French Canadians. Some mingled with native (*indigenous American*) populations (Laberge, Michaud and Richter, 289).

These findings are congruent with the work of Ekberg and Braekeleer.

1.2.1 Citizenship and naturalization

This subsection to the topic explores the interconnected relationship between the French Canadians at Fort Toulouse and the indigenous natives and their migratory patterns effect on the citizenship and naturalization process of the French Creoles and their admixtures of communities. Unambiguously the trading paths, villages, and towns from Fort Toulouse, west to east, its river and creek systems and its indigenous and autochthonous townsites and villages are presented as significant (D. H. Thomas 150) figures (Figures 1.3, 1.4, 2.3) for the research study. A careful examination of Figure 1.3 reveals an interconnected relationship between the French Canadians at Fort Toulouse and the indigenous natives, located outside the county seat of Wetumpka. It also reveals a migratory pattern east of the Coosa and Tallapoosa river and creek systems.

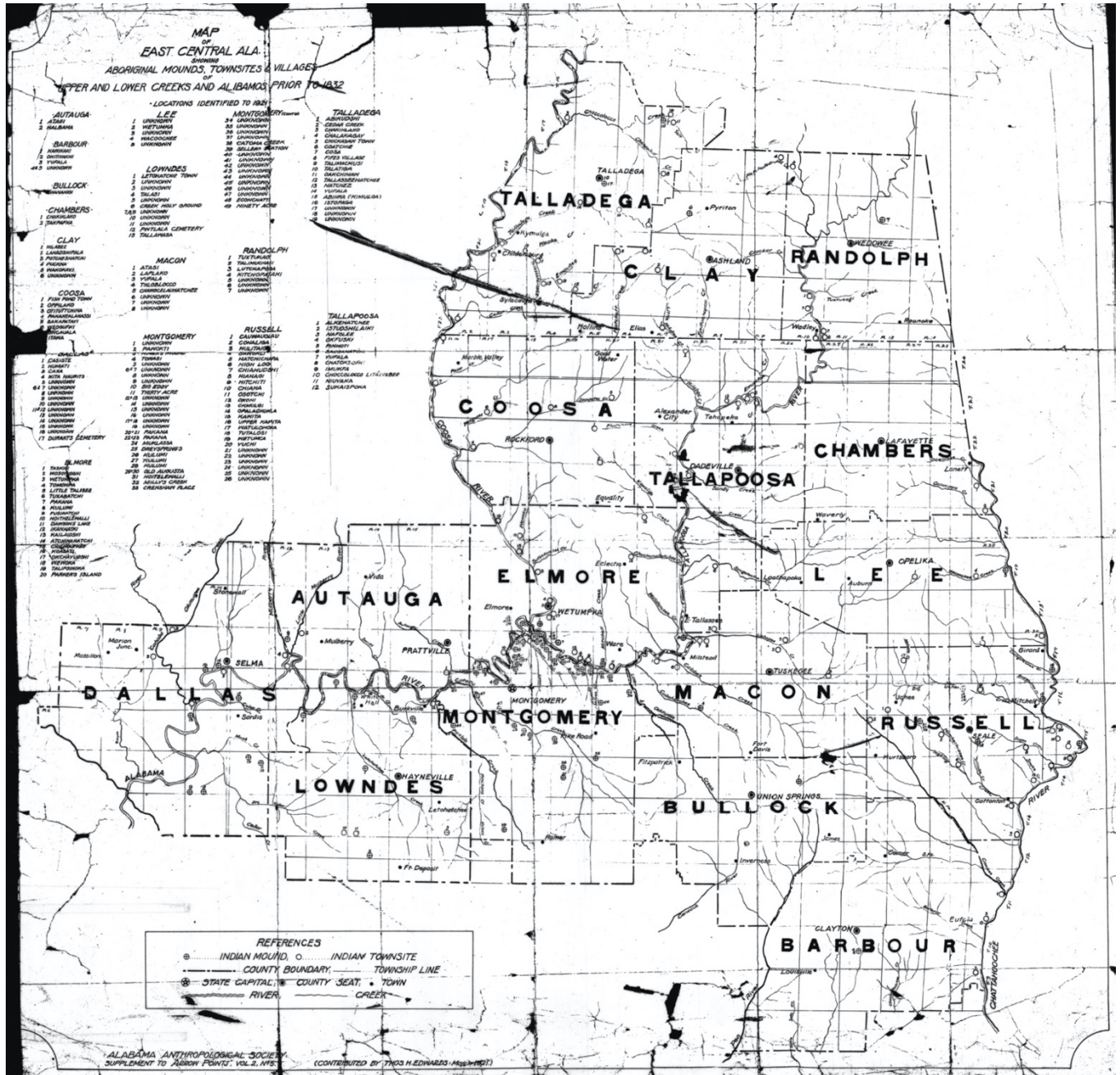


Figure 1.3 Townsites & Villages of Upper and Lower Creeks and Alibamos Prior to 1832. (Edwards)

Fort Toulouse is located within the vicinity of Wetumpka, at the head of the Alabama river where it splits into the Coosa, which is not only a French Canadian county seat, but also an autochthonous township of Native Americans (D. H. Thomas 150)

(Figure 1.3). An autochthonous native townsite identified as Wetumpka can also be located southeast of Opelika county seat in Lee County (Figure 1.3, item 2 Lee county). Currently today, the city of Wetumpka is also the location of the historical Fort Toulouse, and the autochthonous Native American village of Wetumpka southeast of Opelika is no longer identified as a site or city named Wetumpka.

Milia Waller Echols (Figure 1.2) argued orally that the last names of the families – Echols are kinship in order to trace their lineage safely, though obscure, to the common societies' normal way of living in order to trace and mitigate consanguineous marriages. They were initially Christianized, Roman Catholic and allies with the French Canadians in their communities. Their religious affiliation evolved from Roman Catholic to Methodist with traits of Roman Catholic ideologies retained in family customs. A reverence to Saint Christopher, patron saint of all travelers, and medal was passed down through the lineage from mother to daughter.

Citizenship and naturalization are two distinct policies of New France for the integration of the indigenous communities into the societies based on absolutist and cultural colonial ideals. This concept evolved into a sub-category of the father/son concept of protection and recognition of the Native Americans as allies rather than subjects called “suzerainty-protection” (Havard 127). The population that fell into these categories are the Christianized Native Americans from the Illinois Country and the Native American missions established in St. Louis, Cahokia, Ft. de Chartres, Ste. Genevieve and Kaskaskia who was “a community of fur traders, farmers, priests, and

Native Americans”¹⁰.



Figure 1.4 Southeastern Indian Towns and trading routes map.¹¹

They were through conversion to Christianity considered French Canadians (ibid). Also, foreigners living on French soil colonized and converts were naturally considered French Canadian through naturalization (Havard 127). These policies also were potentially applied in the location of Fort Toulouse and their allies in Alabama, specifically east of the Fort located around the trading paths (Figure 1.4) to the Georgia state line of today (D. H. Thomas 151). This horizontal line of trading from Wetumpka (Fort Toulouse) to Opelika encompassed on both side of the trading routes Auburn,

¹⁰ (C. J. Ekberg, Colonial Ste. Genevieve: An Adventure on the Mississippi Frontier 7)

¹¹ (Alabama Archives and History Foundation)

Tuskegee, Waverly and Lee County. The rivers, creeks and trading routes were a common bonding of communications and communities in which the French Canadians intermixed to where even today there is a population who self-identify as French Canadian and continued to provide oral stories of their lineage from the fur trades of the Louisiana territory by the French. The French colonized from the Gulf coast as far as Spanish Pensacola Florida (ibid).

Due to the overlapping of trading in the Mississippi valley both “France and England never did agree upon the boundaries between their empires” (D. H. Thomas 154). This study argues that the communities were more French than British despite both utilizing the trading areas and routes as their own. This was a “private correspondence (ibid)” understanding between the two different governments, French and British, from the official records as Ft. Toulouse being the French colonized line at the east most part of the French territories. The French military was dominated by their life at the Alabama post. Ex-Soldiers stayed on after their enlistment terms expired and remained in the areas as farmers. Other colonists decided to settle around the fort, thus a considerable civilian community evolved and grew. From the trading paths identified in Figure 1.4, the Fort Toulouse communities were similar to the communities in the town of Kaskaskia. The French Canadian creole community in Alabama resided incognito under the leadership of the French military and political presence.

Carl J. Ekberg’s trend in the discussions of Blacks and Native Americans, to be inclusive in the academic texts discussing French Canadians and their reconstructed geographical culture, openly acknowledges the influences of daily life in the Creole

communities, whether they were populated by slave or freedmen (Ekberg and Person, 217). According to Ekberg, the differences in humanitarian practices between the French Canadians and Anglo Americans was due to the Roman Catholic's religious worldview of colonization (Ekberg, 147, 201). The Capuchin and Jesuit missions to the Alabama post held the church records which was lost except one detailed post census that still exists in the Historical Society of Alabama records (D. H. Thomas). The census consisted of 91 private soldiers, 44 officers, 58 other men, 39 women and 36 infants, and who are known to have lived for some time at the post and have been identified (ibid). The 19th century surnames of the families in Alabama follow a patrilineal pattern.

Historically looking at an example of the lineage of the Echols family correlation, French Canadian – the husband (Echols), the wife being the Native American, teaches family and passes down tradition orally through memory, in which Anglo American heritage follows the patrilineal pattern tracing heritage. While early studies suggest that consanguineous unions were common in Europe and Nouvelle France (New France) lack of mobility might have been a factor of the practices. Researchers in the literature review revealed that, to keep land and wealth in the family, and to get around policies of the church and state, cousins marrying through sibship communities, alleging marrying of third cousins being non-consanguineous is a myth. Catholic faith was a "defining element of French-Canadian identity" (Laberge, Michaud and Richter 296). Genealogical reconstructions provide a genetic trace which argues that the mutation of β -thalassemia in Portneuf County, Quebec originated from Languedoc region of Southern France (ibid). There is a correlation between Quebec, Ft. Toulouse, French, French Canadians and

indigenous communities in Fort Toulouse and its surrounding areas because, due to the difficulties of genealogical reconstruction (identity through gene therapy) in the research of Dao and De Braekeleer, the persons from Languedoc are unknown in records. The literature, *Hereditary Disorders in the French Canadian Population of Quebec I. In Search of Founders (1994)* (De Braekeleer and Dao), results concluded that perhaps the mutation of β -thalassemia came from Languedoc rather than by founders from Perche. Italian and Greek communities in Montreal since 1980 received carrier screenings (Laberge, Michaud and Richter). Later research seems to indicate that:

Consanguineous marriage is especially common throughout the Eastern Mediterranean, Anatolia, North Africa and the Indian subcontinent, where 25–70% of unions involve related family members. Religious, cultural and economic factors are commonly perceived reasons for such marriage. As a consequence, at least 8.4% of the world's children have related parents. The practice is also accepted in South America and parts of sub-Saharan Africa. The highest overall prevalence of consanguineous unions is in poor rural communities, which are typified by low levels of maternal education, early age at marriage and first birth, short birth intervals, and longer reproductive spans (Vichinsky, MacKlin and Waye)

There is a major difference in the economic purposes and reasons for consanguineous marriages outside the United States. The common thread between these two reasons [inside the United States and outside the United States] is that a hereditary disorder (Thalassemia) is developed and passed on throughout the generations in both environments. Consanguineous marriages between the wealthier families were a strategy to keep properties in the family (De Braekeleer and Dao 238) producing a dense kin network. Several families intermarried in three generations (patterns of marriage up to the 1950s) (De Braekeleer and Dao 244). Surnames follow a patrilineal pattern whereas the wealthy married the commoners and vice versa. "Intermarriage (including sibship

exchange) between families was consistent." (De Braekeleer and Dao 242). When looking at this analogy of consanguineous marriages and French Canadians, a conclusion could be made from a husband/wife concept of relationship with the French Canadians and Native Americans. If this analogy is based on oral traditions and patterns, then appropriately with Milia Waller's historical story of where her family came from in Alabama as valid. Her ethnicity is based on the allied relationship the French had with the Native Americans in Alabama in a father/son relationship. She is thus French Canadian and Cherokee, simultaneously through self-identification and naturalization.

1.2.2 Heredity knows no color – Effacement of Blacks

This review provides the historical existence of the problem with miscegenation and malaria. Laberge A-M et al., supports the theory that "some French-Canadian disease alleles (genes) are found across Canada and northern United States"(249). The theory presented in this paper goes further to say that the disease alleles, specifically β -thalassemia are found throughout the United States from Northeast to the midwest and the colonial Louisiana Purchase territory, specifically in Alabama. The art and literature presented thus far provides several traces of and allusions to β -thalassemia that still exist in numerous French Canadians and/or black and white races, particularly French Canadian creoles though cryptic.

Today, race consciousness still dominates the American mindset in the United States because the ancestry of the early people who colonized the nation through Anglophone policies passed their bias on through their generations. Families have evolved and the one thing constant from the literature that has evolved is

humanitarianism is still divided on how to treat people based on their race. French Canadians became obscure and turned inwards to the familial customs and culture in order to survive the politics and laws instituted during colonial times that had never gone away. Language evolved to the language of the nation, American English.

According to Wailoo, the "Medelian dominant disorder and this genetic character had important social and public health implications"(309). Previous studies have demonstrated, "Disease proved to be a powerful idiom for expressions of fear and concern, provoking a variety of medical responses to the so-called 'Negro problem' " (310). Wailoo agrees that sickle cell anemia, to the physicians of the 20th century, saw this disorder as a latent problem to be rooted out of the 'Negro' community (ibid). Most physicians saw this hereditary disease as a race relations and public health issue in America (Wailoo 315). Furthermost, the research on miscegenation and malaria suggest the trends in literature concerning whites and blacks are based on the current knowledge acquired through data obtained in records available. The problem with miscegenation and malaria did not exist before European contact (Ekberg, 110, 251) with North America.

Little research has focused on the different reactions of how the whites endured prevalent malaria and varied in the articulation of how the blacks endured malaria (Ekberg, 203). Past studies yielded some important insights into the medical history of the early inhabitants during this period as Carl Ekberg suggested (248). It is important to note the language in a quote listed by Ekberg supporting the review on the issue of malaria being a problem in the eighteenth century.

Since Colonel Wilkins Arrived He, every officer & almost every private Man, have been most Violently attacked with a Feaver. ...They continued helthy until about the 20th of Sept, When they Were Attack'd by twentys in a day & so severely that in the Course of about a Week there was but Nineteen Men capable of Duty at Fort Chartris. ...At present there are about fifty Men capable of Duty & the Violence of the Disorder is great abated (251).

This quote is understood to be used to substantiate the presence of malaria in Ste. Genevieve, Missouri, however the question is why did Wilkins, quoted by Ekberg, call the illness a disorder verses a disease? Using the word disorder in the report could imply something potentially genetic rather than symptomatic from a reoccurring disease. According to Ekbert, "malaria is characterized by intermittent fever, headaches, and general malaise." (250) One can only hypothesize to the language of communication in this discourse, however, by 1916 the medical communities were discussing malaria as an epidemic caused by blacks.

The Southern Medical Association Ninth Annual Meeting of 1915 in Texas is where physicians congregated in order to present new technologies and discoveries in medical and scientific research. The literature on, *The Negro A Menace to the Health of the White Race*, (Graves) produced in the Southern Medical Journal and written by Marvin L. Graves, M.D. has its roots in Charles Darwin and racial theories (411). This "avant gardist (Burger, 59)" literature by Graves introduced darwinism and racism as its argument to support the article (407). The review of the literature shows that Dr. Graves concern for "The South" was to substantiate the observation and data collection of census data, and to gain facts on the mortality rate and the prevailing of disease and causes of death (407). This appears to be more of an economic concern rather than a humanitarian concern. Those who maintain the "negro blood" theory include Graves, who provides in

this literature racist rhetoric throughout the medical communities of the south. This discourse was accepted from a prominent intellectual doctor, viewed as professionally qualified in his analysis, is an example of a cultural artifact affecting the medical capabilities and research for black people concerning similar ailments compared to whites. This cultural artifact also is based on the praxis of life in a social hierarchy of population and testing through data gained from a new established census in the time period (ca. 1880-1912) utilized by the United States (Graves, 407). Graves argues that the disparity of the death rate among blacks compared to whites in the south, is blacks was “seriously ill all the time” (411). The argument does not address what the illness was, but the death rate and illness problem was identified as an economic loss due to sickness and death (Graves, 411). This argument is contrary to Ekbergs assessment concerning malaria where, “blacks withstood malaria better than whites” (110, 203) in the Illinois Country. The language in the literature by Graves substantiated inherently implicit racism on a social hierarchy level where blacks are at the bottom of society. Despite the condescending rhetoric, Graves agreed the deaths of the blacks are preventable and financial distribution of \$100,000,000 to the South to “expend annually in improving the health conditions of the race” (411) would be a solution to the problem. Most scholars do not agree with Wailoo’s assessment of hereditary disease being synonymous with 'Negro blood' (306) but, do agree that the racial thought developed by medical professionals was a foundation to separate race by hierarchical means. This theory substantiated the health concerns of whites as being more prevalent at the top rather than the bottom of the heirarchy where blacks are located. A small group of medical professionals affected the

mentalities of the scientific researchers and “some but not all ...interpreted these biological features explicitly in their defense of racial segregation" (Wailoo, 306).

1.2.2.1 Case Study

A case study is presented as an example in this section. A presumed sickle cell anemia patient was misdiagnosed due to the medical theories, lack of research in blacks and homozygous β -thalassemia of the time (Eichner 1236). This patient appeared to the medical communities to be the oldest American black with homozygous β -thalassemia in Louisiana (Eichner 1236). The correct diagnosis was made in theory and confirmed once original, diagnosed in 1953 and 1961 respectfully, case reports was received and verification of patient diagnosed with thalassemia. As noted earlier, this disease is similar to Cooley’s Anemia (Beta thalassemia, Major) (Friedman, Hamilton and Schwartz). The female patient did not get proper treatment for over twenty years for a chronic leg ulcer due to lack of diagnosis by her immediate doctor in Louisiana. Her clinical course of action did not expand over the 20 year space in having the blood disorder. The patient knew she was diagnosed with thalassemia initially in the 1950’s and was able to articulate this to the medical researchers. In contrast to white patients, Eichner claimed that most black patients with the same disorder have mild form of the disease and live long lives. This was not a reason to overlook the severity of the symptoms and not treat the patient until they were in crisis? Research during ca. 1950s – 1980s states that the “defect in β -thalassemia trait is milder in blacks than whites” (Friedman, Hamilton and Schwartz 1453) but provided limited

investigating research to support their theory. The author potentially utilized the theory of Friedman, Hamilton, and Schwartz to come to his conclusion of this report (Friedman, Hamilton and Schwartz 1453) that thalassemia is milder in form in blacks rather than in whites. The scholar did agree that it was a mystery to make such a statement when they have case evidence of a degree of severity in the patient's chronic leg ulcer, splenomegaly and anemia that was not treated for over 20 years. The patient was obviously in pain and had ailments that she endured without the proper medical treatment over time.

1.3 Erasure of ethnic identities and hereditary disorders (circa 1990s - present)

The study examines the cultural practices and traditions of the descendants of Quebec and continued throughout their migratory locations over time. As stated earlier in this study, Sickle Cell Anemia and Thalassemia are two distinct hereditary disorders. Pauling and Neel argue that sickle cell anemia was not a Medenlian dominant disease but was an autosomal recessive disorder (Wailoo, 318). A number of scholars disagree with their analogy because the disorder is both a genetic disorder and an autosomal recessive disorder. Data that revealed cases throughout the mid-twentieth century exposing thalassemia as a hereditary disorder passed to future generations. This knowledge of Thalassemia added to the list of autosomal recessive disorders is prevalent in blacks as well as whites. Researchers from the 1950's to present found that there were misdiagnosed and diagnosed cases of blacks with β -thalassemia verses sickle cell anemia, respectfully, as well as whites (Eichner 1236). The work of Kreimer-Birnbaum et al. demonstrates that the laboratory-based studies have clearly shown the genetic and

pathophysiologic bases in blacks compared to Caucasians are not clear concerning the differences in how the healthcare is identified in blacks (257). Since 1994, little has been written about β -thalassemia concerning Blacks in this healthcare crisis, including French Canadians. Whites when diagnosed initially with having sickle cell anemia, were rediagnosed as having thalassemia instead, or a product of miscegenation (*métissage*)¹².

Braekeleer and Dao, in their study (1994) of French Canadians, found population clusters of hereditary diseases to include β -thalassemia from genealogies reconstructed to identify the probable origin of the hereditary disease (205). This population moved from Europe (mainly France) in the seventeenth and eighteenth centuries. The late 20th century researchers began to define the hereditary disorder from a medical founders perspective. Thus, the hereditary disorder is found in the French Canadian population of Quebec as founders (Braekeleer, 205) (Laberge, Michaud and Richter, 287). Scholars conducted research argue that the United States French Canadians fall into a category as an ethnic group rather than two different races because of the geographical migratory patterns of the *voyagers*. Morisset defines the French Canadians as, pan-American, essential, and a product of an intermingling with other elements (*locations in America*) that has flowed through the “geographical blood” as a heritage (21). Drawing on the work of Clarence W. Alvord, Carl Ekbergs findings highlight the historical French colonies “outsite the St. Lawrence Valley to the north” (Ekberg, 1) of “Illinois Country, and the New Orleans area of the south” (Ekberg, 1). French Canadians are also an integral part of the New England territory. The New England territory consisted of the following states in 1891: State of New York, Maine, New Hampshire, Vermont, Massachusetts, Rhode Island, and Connecticut.

¹² (Wailoo, 318)(Friedman, Hamilton and Schwartz, 1453)(Pierce, Kurachi and Sofroniadou, 981)(Eichner, 1236)(Kreimer-Birnbaum, Edwards and Rusnak, 257)(Braverman, 857)(Bajwa and Basit)(Bojanowski)(White, 257)(Vichinsky, MacKlin and Waye, e818)

The population count for French Canadians/Franco Americans per the census was 1,250,000 (1891) in all but two of the 51 states and territories (E. C. Smyth 317). The population was counted in both the regular states and Native American territories. The historical data the researcher derived his data from had bias in that the discourse in the accountability of the French Canadian families that had a large amount of Native American blood were dead (E. C. Smyth 316). Mixed race French Canadians are counted in the population census. Even though the acknowledgement of the admixture was preferred to eliminate from historical records the mixed races, the consensus was to consider them ‘white’ or French Canadian or Native American if mixed with a large percentage of Native American blood. According to Smyth, “The Canadians must be loyal to its government, but their hearts and minds must remain true to their first love, their nationality, a new France...language, customs, traditions, aspirations, faith...” (E. C. Smyth 321). French Canadians were considered a race, but not the racial term of today concerning ‘race’. The terms were interchanged with ethnicity and race. They had a tenacious spirit and aims to abide by the Roman Catholic church in having early marriages and large families. Their tenacity was a different civilization from the Anglo-Americans. The French Canadians that were an admixture with a large percentage of Native American blood was known by their features (ibid).

As noted earlier in this review, data shows “ β -thalassemia is not rare in American Blacks” (Kreimer-Birnbaum, Edwards and Rusnak, 257). It is considered mild in blacks as noted in research data and is comparable to Cooley’s anemia in Caucasians (Friedman, Hamilton and Schwartz, 1456) (Kreimer-Birnbaum, Edwards and Rusnak, 257). This statement supports the theory of Carl J. Ekberg stating, during the eighteenth century that blacks withstood malaria

better than whites. It, however, contradicts the research and data Graves presented in Alabama with the higher rate of malaria and mortality rates amongst blacks in the geographical location of Alabama. According to the research by Friedman et al., "The clinical features of β -thalassemia trait in the blacks do not seem to differ from those seen in other ethnic groups"(1453). The research does not necessarily (clearly) define mixed raced peoples as a social or cultural norm. (Friedman, Hamilton and Schwartz, 1456). Intermarriages in Quebec between descendants were frequent. This study agrees that the cultural practices of the descendants of Quebec continued these traditions throughout their migratory locations.

Most researchers working in the area of biological science, genetic literature, including Michael Omi, reaffirmed the consensus that "a common understanding of that race is not a 'scientific' concept rooted in discernible biological differences" (Krimsky and Sloan). Hereditary disease knows no color as Frantz Fanon contended in his poem that "...black is not a man" (Fanon, 1). Fanon's prevailing symbolic framework of poetry produced to explain the mind of a black man, particularly himself is compelling in order to provide a glimpse of the mentality of a person due to cultural change in an environment. It gives a prevue into the heart and mind of a French African man from the Antilles, but just a shadow of what he is thinking without experiencing his journey in life and experiences. Patricia Williams would argue that race, ethnicity and identity have nothing to do with recognition of the three characteristics and genes. But data from this study argue that ethnicity defines heredity and the DNA in genes helps us trace an illness as well as lineage back to its source (Krimsky and Sloan, 247).

Chapter 2: Resilience Produces Good Health

The social praxis of life as “parts that make a whole product (Keating)” are collective amnesia (memory), collective imaginaries and population health, collective communities/identity. Ens and Sawchuk defines ethnicity as “culturally constructed over historical time” (15). In order to bring the French Canadian communities in Alabama to the forefront in the American society of today the individuals dynamically constructed is fundamental, as the Métis and non-status Native Americans did in Canada (15). It is vital to identify them as a separate and distinct ethnic people in the American society of the United States rather than a racial concept. The French Canadian communities are a validated society in the Midwest, Louisiana and New England French quarters. In order for an individual to self-define themselves as French Canadian, scholars agree with the concept of ethnicity being recreated and constructed for the “appearance, metamorphosis, disappearance, and reappearance of ethnicities” (Ens and Sawchuk 16) to form a foundation for stability and recognition of all families. This warrants further research in Alabama as an addition to the communities, as a population and reconstruct, to expand the ethnicity and include the French Canadian Native Americans/Africans historical locations. This study adopts the term defined by Ens and Sawchuk of “ethnicity” which is a function of the beliefs of historical actors, the external political factors and economic pressures. Definition of racism emerging from ca. 1960s to the 1980s according to Omi and Winant is “social practices which (explicitly or implicitly) attribute merits or allocate values to members or racially categorized groups solely because of their ‘race’(145)”. This social construct of race was created for the Anglo-Americans in the United States by the intellectual communities and is complex because defining race from a particular person of color that is of a

certain ethnic, national, class-based, and proponents of race is a problem (ibid). The healthcare of these constructed racial groups have been utilized by the political and economic theorist to allocate resources to the whites first and less resources to the blacks for research and medical advancements. Fanon contends that in order for racial theory to be justified, an institutional psychotherapy construct is introduced to society for a psychological impact on the blacks to deny their own healthcare antidotes (Fanon, *Black Skin, White Masks* 4). Fanon in *Black Skin, White Masks*, emphasizes an “immediate recognition of social and economic realities (ibid)”, which is important to be identified by blacks in order to be effective in disalienation (ibid). These correlations in theories can also be applied to the French Canadian population who identifies as Creole/creoles.¹³ The inferiority complex and internalization of being an “other” in society and economics appear as if a population is being lazy when it comes to their welfare, but they are institutional, and psychologically broken in pursuing resolution to their healthcare other than mythological ways.¹⁴ In discussing economic, social and cultural integration into the new society of the 19th century, Walter A. Schroeder argues that the French Canadians of Old Mines Area had “a sense of inferiority, and social and psychological isolation due to poverty” (47). Like a commissioned artist paints landscape and every-day life of workers in their artworks, Schroeder’s literature, to describe his argument of an impoverished French society, is ill representative of a community and their values and mentalities. The theory argued by Schroeder, that French Canadian and Creole cultural ancestry is no longer valid in the town in 2005 due to linguistic changes from French to American English, is not relevant and biased because the

¹³ (Padron General de los Pueblos de Sn. Luis y Sta. Geneveva de Thinueses) (C. J. Ekberg, *Stealing Indian Women: Native Slavery in the Illinois Country* 92) (C. J. Ekberg, *Francis Valle and His World: Upper Louisiana Before Lewis and Clark* 196), Table 1.1

¹⁴ (C. J. Ekberg, *French Roots in the Illinois Country: The Mississippi Frontier in Colonial Times* 21)

cultural patterning of the populations traditions still stands today (49). Schroeder's theory emphasizes the concept of the literature with articulating the lack of a French speaking black population (ibid). This prevailing framework and production of a theory is a commodification of an idea to instill in the researcher readers that culture is lost when the language is no longer used as a cultural relic of the community and the presence of black French Canadians are missing.

This study argues that most populations in the identified areas of French Canadian history consider themselves, up until the mid-twentieth century, French Canadian and/or Franco Americans including the black population through oral traditions. There is value in adding the oral traditions of a community with written documentation to support the times and locations in the Old Mines Area, Fort Toulouse, colonial Illinois Country, New England or in which they live. Schroeder portrays the role of the Old Mines Area community to the elders (parents and grandparents) as role models but argues that the role models were inferior because the French Canadians, Native Americans, and Africans were represented as common folk. This representation in the communities verses the wealthy, socially conscious community leaders who could, according to his theory, set cultural standards is demeaning to the society at hand. This study argues against his theory as data shows cultural standards are set by communities bonding and creating their own traditional relics despite the loss of language through assimilation.

The literature review revealed data showing the disparity in understanding the different reactions on how the whites endured prevalent malaria varied in the articulation of how the blacks endured malaria (Ekberg, 203). This research brings knowledge to the forefront of blacks having this disease as well as Caucasians and Mediterranean peoples. Although numerous researchers agree that blacks show milder forms of the same disease in Causasians, scholars

acknowledges the issues of their symptoms are the same and critical to be addressed. Further research is important to be accomplished to fill the fissure of knowledge concerning blacks in this public healthcare crisis, including French Canadians who are an ethnicity containing blacks, whites and mixed race populations. Due to current migrations over the last twenty years and scholars scantily focused on the United States, thalassemia is an anemic disease that is inclusive of other ethnic identities other than a Mediterranean disease. (Vichinsky, MacKlin and Waye e824). Social patterning in certain cultures bring to light the limited research investigating the correlation between French Canadians and Beta Thalassemia that recognized in addition to the current migration of this disease's changing pattern of ethnicity. French Canadians (French Canadians outside of Quebec), inclusive of black Americans (Laberge, Michaud and Richter 289), and the impact on the lack of research in the medical genetics in the Unites States is significant. Keating's argument builds on this study in that "race and ethnicity clearly have a strong relationship with health outcomes (54)" and there is a disadvantage of health in minorities due to political ideology.

Hereditary disorders to include β -thalassemia was not a factor in infant mortality even through it is a biological issue to be adhered to since the 1990s (Graves 407). In Graves (1916) study, he provided a discussion of the disease malaria and adding a human element to his theory based on species other than humans as carriers then applied the theory to humans (411). His claim that the problem was "economic and social causes of various kinds" (ibid) is a fallacy since the facts during research in the later parts of the twentieth century proved that the illnesses, undefined by Graves, were a more underlining condition of a blood disorder. For example, the theory of blacks having β -thalassemia (Friedman, Hamilton and Schwartz, 1456) (Kreimer-

Birnbaum, Edwards and Rusnak, 257) was tested and proven that it was similar to the Caucasians having β -thalassemia but never pursued as a major health issue. De Braekeleer and Dao in their 1994 study of *Hereditary Disorders in the French Canadian Population of Quebec*, found that distinguishing traits of the times comes from specific cultural and linguistic isolation (205). The literature traced the identity of the French Canadians in Nouvelle-France who called themselves French Canadians (Creoles) in order to descend the migration of these peoples from the France province of Perche, Normandie and Ile de France. The constraint derived from the records pertained a variation and changes in surnames which was a common practice (De Braekeleer and Dao 216). The work of De Braekeleer and Dao demonstrates that “hereditary disorders cluster in eastern Quebec due to the migrants from Perche, France, mobility and settlement on the north shore of the St. Lawrence River” (De Braekeler and Dao 225). They brought with them a specified and identifiable social system “which had major consequences on migration, marriage, kin network, and family behavior” (De Braekeler and Dao 226). They contended that French Canadians (Creoles) are the result of founder effect and genetic drift. The study carried out by De Braekeler and Dao reveals that “...marriage is a key institution in social reproduction (Bourdieu 1976), a relationship between class and kinship rapidly developed among the settlers of Nouvelle-France (Molloy 1990)” (De Braekeler and Dao 235). De Braekeleer and Dao also concludes in their literature, *Hereditary Disorders in French Canadians I and II*, that the mutation of “ β -thalassemia genealogies came from Languedoc, France” (219). Researchers agree with the work of De Braekeleer and Dao and demonstrates that through migration and settlements of kinships in clusters the hereditary disorder migrates through the development and genetic drift of the French Canadian population. Thus, the hereditary disorder β -thalassemia is a

genetic drift through migration and cluster of populations. The study widely acknowledges through research and publicly discuss the correlation between β -thalassemia genetic drift and the specific cultural and linguistic isolation of these people in areas of Alabama as similar to New England, Louisiana and Midwest identified French Canadian localities. This goes beyond the conclusion of the French Canadian founder effect in Quebec and its surrounding localities. The research data shows kinship culture and could potentially be a pattern of similar culture in Alabama (specifically Fort Toulouse area and east of the Fort in a triangular cluster of villages and towns)(Figure 2.1) in order to show and acknowledge there are more people with the heredity disorder than widely acknowledged in the United States.¹⁵ It brings new updated knowledge to today's medical and sociological communities that lack acknowledgement of this disorder in all French Canadians (Franco Americans), inclusive of blacks in America. This research provides to a larger population than acknowledged in the medical communities the principal cause of the distinguishing traits and genetic drift of this disorder β -thalassemia. Relatively little is understood about how blacks are an ethnic population of French Canadians ignored and lack intervention in the medical fields for primary care. Through a better understanding of the construction of their societies as well as identities, this argument is focused on the research that black Americans are inclusive of the original French Canadians in Alabama obscured through historical Anglo American policies and institutional laws. Currently, no study has looked specifically at the hereditary disorder, per the professional intellectual's, but subjectively applied to a certain population and minimized the American black population from this disorder. As noted earlier in the discourse in theories, "Maps, stories and place names" are

¹⁵ "The US Census of 2000 estimates that over 2.3 million Americans report having French Canadian ancestry. Typical French Canadian mutations have been reported in Americans of French Canadian ancestry." (Lagerge, Michaud and Richter)

more significant to trace the identities of the Franco-American peoples beyond formal records (Morisset, 20). This research expands on collective memory in order to discuss the prevailing issues of the population in question. The author's grandmother from her mother's lineage claimed to be French Canadian and Native American, interchangeably.

2.1 Collective amnesia (memory)

The novels, "*The Suns of Independence*" by Kourouma and "*Ambiguous Adventure*" by Cheika Kane, language used in their literature provides insight into the collective memory from a colonized French African perspective. For example, "The hunting stories made the days pass easily", "Then the hunting stories began again" statements were made between the descriptive paragraph of the community and their cultural rituals, "...all sat around the communal calabashes for the midday meal. Everyone prayed at the appointed times except the fetish priest (non-believer) and earned divine blessings with their prayers" (Kourouma 87). The memories were post colonization and the communities were living in impoverished conditions amongst fleas and flies swarming around (perception of a non industrialized community) without running water, kitchens, baths, nor toilets. The imagination of the readers takes the audience to a perception of open sewage due to lack of amenities known to an industrialized civilization. The descriptive language by Kourouma speaks to the readers for the understanding of these people prior to colonization as the Royal dwelling of the tribal Horodugu and was the oldest and largest dwelling place with the "oldest, largest, reddest rats, fleas, and cockroaches(ibid)". Impoverished but living, and a public health issue that needed to be addressed but was not (Kourouma 88) identified by the plot in a

fictional manner. The articulation of the subconsciousness of the protagonist, Fama, “...poverty could neither be healed nor hidden”(ibid), affected his decision making on a conscious level. The description of the characters memory of being the richest in his village of Togobala, the last of the Dumbuya was philosophical. “But when Fama lay alone throughout the long sleepless nights, he found it shamefully soothing. He had no more money worries”(ibid). This example of individual and collective memories of a community are in parallel between the fictional characters Kourouma and Cheika Kane’s. Despite differences in plots and characters, there are areas of agreement concerning memories of various communities regardless of location.

The French translator, Katherine Woods of Kane’s novel provides a recount of a memory identifying the personality of who Senegalese people are in presenting the translation of a man who is French but also a “Mohammedan Senegalese”. Her representation through literature presented in the initial preface – a conversation with a Swiss lady on a small French Ship and their rapport considered the implications of the story where the young African offered a personal instance of success of the French colonial idea.

“What is your nationality?”
He answered with simplicity and pride:
“I am French.”
A little surprised, she continued:
“And what part of France do you come from?”
The answer was equally proud:
“Senegal” (Kane v)

Her interpretation of the fictitious novel was that *Ambiguous Adventure* tells a story of its failure to articulate the positive view of the short discourse presented in the

beginning of the novel (ibid). The review of the literature shows that the translators can set the hearts and minds of the readers initially to judge between the translation and plot of the novel whether there is hidden bias involved or not (Kane v). The notion brought up by the fictitious account of literature could also be a reality, in order to maintain self identity as French Canadians and to transition with the times. It is not always necessary to meet the expectations of the political positions in the communities (Kourouma 122-124) set by the leadership contrary to the father/son relationship. It is significant to maintain the hearts and minds of the peoples oral traditions and continue to build up to what the communities expectations could manage in being part of a population in the US larger than is often recognized. The existing literature by Kourouma emphasizes through the plot to change from traditional ways to industrialization by the leadership was to comply with the politics of the father/child relationship (122-124). The research agrees with the author in his articulation of how politics were destructive for assimilation of the communities hearts and minds of the people. Historical fiction plots attempt at showing a social reality in society that needs to be addressed. Politics and laws through colonization are an attempt at recreating a society through assimilation and conformation of its expectations for future communities (ibid). Blacks were ignored when it came to public and physical health concerns due to these changes.

2.2 Collective imaginaries and population health

G rard Bouchard presents his theory as an “integrative” or “synthesis” paradigm (pattern) (Bouchard 169). This collective imaginary theory by Bouchard established a link between society and health in establishing an understanding of the cultural trends of

the Quebec society between ca. 1850 and 1960 from a broadly construed grouping of values, beliefs, and ideals wrapped up in myths and comparing it with the health pattern (mortality rates) (169). The literature stresses the importance of belonging and shared perceptions. Bouchard stressed the importance of autonomy, self-esteem, and self-reliance as significant elements in order for a community to gain social trust, solidarity, and connectedness in the healthcare system associated with healthy psychological and biological development. The research study agrees with Bouchard's theory because a concern for population health might also involve some consideration for racial myth that has been introduced to society as a scientific truth in the "art of war" on society that historically was intended to be subjugated to the policies of racism. In order for the migrated French Canadians and communities through their collective imaginations to gain social autonomy, they would have to reject the notion of the "praxis of the existing society" (Burger 59) central to ethnicity, race, language, and religion known to be related to risks of disease. A widely accepted hypothesis is that the literature on race became institutionalized during the early 20th century through the medical communities utilizing the literary cultural artifacts. These works of art are still produced through the distribution of the race ideology by the bourgeoisie society through the medical journals and congregations at conventions.

Racialized medicine was then institutionalized and practiced on a hierarchical level with whites at the top and blacks at the bottom for health and welfare, research and resources. The research literature on β -thalassemia that has been presented as a scientific myth through the medical institutions is accepted in the medical communities as an

obscured hereditary disease that is not only Mediterranean, but also an American white and black hereditary disease explicitly specific to their ancestry according to the “Negro blood” theory. Bouchard’s position concerning collective imaginaries is as follows:

I posit that all attempts to frame a political thought or simply to account for collective reality – past and present – are faced with dichotomies leading to contradictions between competing principles or conflicting requirements such as freedom/equality, localism/universalism, idealism/pragmatism, and elites/popular classes. The function of myth is precisely to act as a mediating mechanism and to allow reason to, one way or another, overcome these contradictions. Myth does that by inserting a third component that makes the original dichotomy look like and function not as an inescapable opposition but as a functional leverage, which also becomes a source of dynamism or energy. Therefore, myth appears to be a central feature of any structure of thought, whatever its origin or form (folk tale, philosophical system, scientific theory, literature, political discourse, or day to day identification strategies). (172)

Collective imaginaries are discourse and essential not to be confused with identity. Bouchard argues that collective imaginaries are a “sphere of discourse made available by intellectuals, whereas identity is representations once internalized and re-processed by individuals or social groups” (Bouchard 175). This offer of explanations for definitions of myth emerging from a “collective mechanism” is significant in understanding that in “ordinary circumstances, it fulfills vital societal functions” (Bouchard 174). In this literature on myth, there seems to be general agreement that “it alleviates lines of conflict” (ibid). The idea that “myth acts as an indispensable and universal device of any social life” (Bouchard 170) is central to the notion that the theories presented by Bouchard are non-binary in their function as literature. The definition presented to support the “sociocultural/health framework” research study to connect the health and well-being of a population helps define on a individual level, the connection to a populations hereditary diseases. Thus, oral histories can be significant as

a research in understanding that β -thalassemia is not only a hereditary disease for Causasians and French Canadians (Creoles) in America, but for Black people of French Canadian/Native American/African ancestry also. Bouchards theoretic approach recognizes the “universal essence of myth as a representation or a set of representations that carry and promote in a durable way meanings, values, beliefs, and ideals, which are embodied in historical events, individuals, places, or objects” (172). This study agrees with the researcher that it is in “the nature of the myth to always combine, in various degrees, an realistic and a fictional component” (Bouchard 173). Oral traditions are sometimes perceived to be mythological rather than a traditional truth passed down through generations of families for the mental stability of heredity.

Collective imaginaries becomes the population truths through their values, beliefs and cultural practices.

... for all the resilience that fostered the dream and successive programs of reconquest, what prevades the sample of writings is a depressed mood, a deep sense of powerlessness, a negative, inhibiting self-image, a widespread conviction that the French Canadians have failed to make their own destiny and have been left on the margins of history. This conclusion is entirely consistent with a large body of literature on colonialism, particularly to sociocultural effects of a prolonged political and economic dependency. (Bouchard 38)

The Fanon (1961) concept, defined by the author, as leftist intellectuals were quite influential among themselves. Internalizing is detrimental to any population due to the political and sociocultural conditions of consciousness and transcended the haunting of the French Canadians expectations. Bouchard’s theory of the Modernist in literature towards the attitude of the French Canadians and their “depressive cultural picture (195)” correlated the mental attitude of their longing to be loved as a collective identity. This

bleak result in their outlook towards their psychological and biological health affects the everyday lives of the communities mentally and physically. Fanon's ideology on the process of the consciousness is contingent on the individualization of the private self (2). French Canadians collective identity towards nationality based on language compared to race and ethnicity is no difference. The existing literature by Egbert Coffin Smyth, indicates that the feelings of belonging to a people is a tenacious characteristic in which the collective imaginary of the populations thoughts and feelings are their connections to their mother country, the Providence of Quebec (9). Their spirit and aim to hold on to their heritage as French Canadians provides a strong memory and connect to the past in order to sustain their communities throughout the geopolitical tensions of change. Researchers note a consensus of Smyth on thought and feeling – belonging to their new emigrated locations and connection to Quebec brothers/sisters/family gives them a way to preserve the Catholic faith of their countrymen based on bonding throughout the cultural geographical landscapes and various communities (ibid). These communities engendered through the migration of the French Canadians valuable geopolitical locations in which the people found solace from the politics and economies throughout Quebec, Northeast America, colonial Illinois Country and the Louisiana Purchase territory inclusive of Alabama. The inner man and spirit of the peoples are revived due to these memories of belonging. The belongings are due to recognition of collective memories (history through family tree) of family (community) bonding and traditions that brought them all together in a special place (E. C. Smyth). The theory of collective consciousness is ingrained in the memories of the land and place where the communities natural habitat was untouched

until the colonization of the autochthonous communities. Legal constraints cause tension between the cultural collective consciousness and the father/son relationship developed for protection and allies. The tensions caused by mentalities and politics of the communities as a nation are adjusting and changing the “North American imagination” of the peoples (Morisset 30). The “good blood/bad blood” concept is entrenched through fear and tension between gaining freedom and assimilating into the new society created by colonizing (Fanon, *The Wretched of the Earth* 36). In his discussion of “...your humanism claims we are at one with the rest of humanity but your racist methods sets us apart”, Jean Paul Sartre confirms the centrality of Fanon’s idea of “humanism claimed to be universal” (ibid). Fanon’s concept of reality is this...from the mythological concept of the colonized settlers, whereas the inhabitants are dehumanized as animals, “the native discovers that his life, his breath, his beating heart are the same as those of the settler” (Fanon, *The Wretched of the Earth*). Fanon’s theory of collective identity reside on the thought of the settlers skin is not any more valuable than a native’s skin. Race is not a factor where values and moral living is necessary but a unifying of nationalism (36). The intermixing of the French Canadians and indigenous communities did not eliminate the unifying of nationalism (Fanon, *The Wretched of the Earth* 131), but created a hybridity of a collective national unconsciousness. The strategy in the art of conflict against the French Canadians hearts and minds in this study reveals the Europeans common racial feelings – “latent racism...Black Africa...brutal, uncivilized...savage”, verses White Africa. This concept was applied throughout North America continent towards the French Canadians psychologically. Brutal racism was applied towards the autochthonous

communities verses integrating into their cultural societies and conversion of the Roman Catholics and Native Americans of the era. Thus, according to the Europeans the civilized became the uncivilized though intermarriages rather than acceptance of this cultural production of proselytizing the communities. This study argues that the theory of the Europeans only pushed the French Canadians into passive resiliency rather than assimilation through violent methods. Fanon argues that it is a misconception to view assimilation as a racial philosophy which is harmful for the “unifying of nationalism” (131). The study carried out by Fanon revealed a psychological justification of submission to the situation of the times (environmental issues, health issues, community issues (i.e. politics), etc.):

The supernatural, magical powers are essentially personal; the settler’s powers (*politics, community positions*) are infinitely shrunken, stamped with their alien origin. We no longer really need to fight against them since what counts is the frightening enemy created by myths (*racial*). We perceive that all is settled by a permanent confrontation on the phantasmic plane (Fanon, *Black Skin, White Masks*).

The French Canadians oral history and memories passed down through their lineages filled the place of mythology and is contrary to the European philosophical theory of racism.

2.3 Collective communities/identity

Social and identity structures encompasses the sociological and identity of bi-racial identity. Rockquemore et al. researchers in literature concerning bi-racial complexities in society acknowledges that social roles and norms exist between ethnic and racial identity (55). Current research indicates that significant differences exist between cultural and racial identity (ibid). Bi-racial identity is a current definition of the old terms

Mulatto or Métis. It does not define the ethnicity of the person or the density of the admixture. Definitions of “ethnic identity” and “racial identity” emerging from the research on “sociological factors influencing Biracial identity” (Rockquemore, Brunson and Feagin 55) include “ethnic identity” which is contemporarily viewed as “optional” and/or “symbolic” and focuses on the individual level of characteristics (ibid).

Rockquemore et al. noted that an “African descended individual is assumed to have a black identity” (ibid). The research agrees with this correlation and go on to say not just African descended individuals, but also individuals of creole, Native American, Métis and mixed race are included in the structure and group in America.

The language of the discussion in “Beyond Black: biracial identity in America” literature is, the emotional intelligence for blacks in self-identification. They are expected to have “feelings of closeness to similar others in idea, feelings and thoughts” (55). Thus, to consider oneself black an emotional awareness is necessary. The comparison of blacks to other blacks in this literature does not articulate the true bonding of blacks to their cultural and societal environments that make up their values and beliefs. Black people and their national pride of being Americans by their ethnic identity rather than the racial identity is confined to an identity labeled by society. Rockquemore et al. noted that skin color does not predict identity choice and argued that “awareness of one’s ethnic group membership decreases as the group becomes less distinct within a particular social environment” (58). This research study agrees with their correlations and propose the opposite is true: When black or white group membership decreases and the cultural group

French Canadian gets more visibility in society rather than the racial groups, then other issues like health concerns are more visible.

A number of studies on the “Negro Blood Theory” concerning fictional and historical text shows the difficulty to recognize and trace ones origins without utilizing the theory of collective memories of people and their oral traditions, as well as data collected, of shared heritage through generations and experiences (Kourouma, 87) (Kane, v) (Ens,15). The findings on the existing literature written by Jean Morisset emphasizes, “maps, stories and place names are more significant to trace the identities of the French Canadian peoples beyond formal records (colonial documentation) ... memory fills the gap of what historians refuse to acknowledge (examine)” (Morisset, 20). This is a valid argument because the author’s grandmother claimed to be French Canadian and Cherokee (Figure 1.2), interchangeably all their lives and was evidenced by her hair, skin color, facial features, and cultural customs carried out with family traditions and actions. The author’s father last living sister continues to state that her great grandmother was of Native American and African descent (representing the same features of hair, facial features and social customs), thus the patriarch great grandmother was a “Zambo”. It is believed that both family orientations are from the same tribal villages of the Cherokees (Gilbert, 6) (Abram) and tribes of Echota (Hill). The name Echols of the author’s father and mother heredity have the Echols surname and could potentially be a name variation of Echota to give recognition of the tribal affiliation lost in the transformation to the Anglo American society. A name variation from Echota to Echols could potentially be accredited, changing the last two letters of the name, during the 19th century for survival.

These name variations are similar to the name variations of the population of Old Mines, St. Louis (Illinois Country or Upper Louisiana) and the Fort Toulouse customs and phonetically clerical errors. The surname could also be a masquerade of the Echota tribes kinship in order to recognize each other that stayed in Alabama verses leaving with the “Trail of Tears” (Hill), and/or coming back from the traumatic expulsion of the “Trail of Tears” to live amongst each other in their communities (Hill). During the transition to an Anglo American society through their policies, the kinships knew who they were orally in order to mitigate consanguineous marriages amongst the other French Canadians and whites in their area who might be part of their kinship groups. The surname Echols is utilized in Opelika, Auburn, Tuskegee, Waverly, and Lee county in Alabama by two separate family kinships, located within the Echota Nation historical location (Hill)(Figure 2.1). An overlay of the map (Figure 1.4) of the trading routes over the map of Cherokee cession of Alabama (Figure 2.1) territories contained Cherokee and their land they owned. Lines 10 to 13 of the map Cherokee cessions (Figure 2.1) are the areas of concern that correlates with areas studied where the French and Native American intermixed and married in a peaceful manner. This area overlaid with the trading routes (Figure 1.4) specifies the communities of Fort Toulouse at the head of the Alabama River where the Coosa river divides, Wetumpka, Auburn, Tuskegee, Opelika, Waverly and Lee counties. Combined with the stories of the families that domiciled in the area, and the places is significant to trace identities of the French Canadian peoples for this research study.

Further research is necessary in order to provide social success in identifying the people in Alabama as discussed. The author's grandfathers claim to be creole could be substantiated through the understanding and knowledge of race construction and how Creole (white and Pardos), and mulattoes were considered in the census category according to the French Canadian historical "rubic detail of color" (Table 1.1) noted earlier in the literature review, and 1787 St. Louis and Ste. Genevieve census data, "Padron General de los Pueblos de Sn. Luis y Sta. Geneveva de ...", located at the Missouri History Library (Ekberg, 92)(Figure 2.2).¹⁶

¹⁶ Missouri Historical Society Library and Research Center, Census Data of St. Louis and Ste. Genevieve, 1797 (Padron General de los Pueblos de Sn. Luis y Sta. Geneveva de Thinueses)

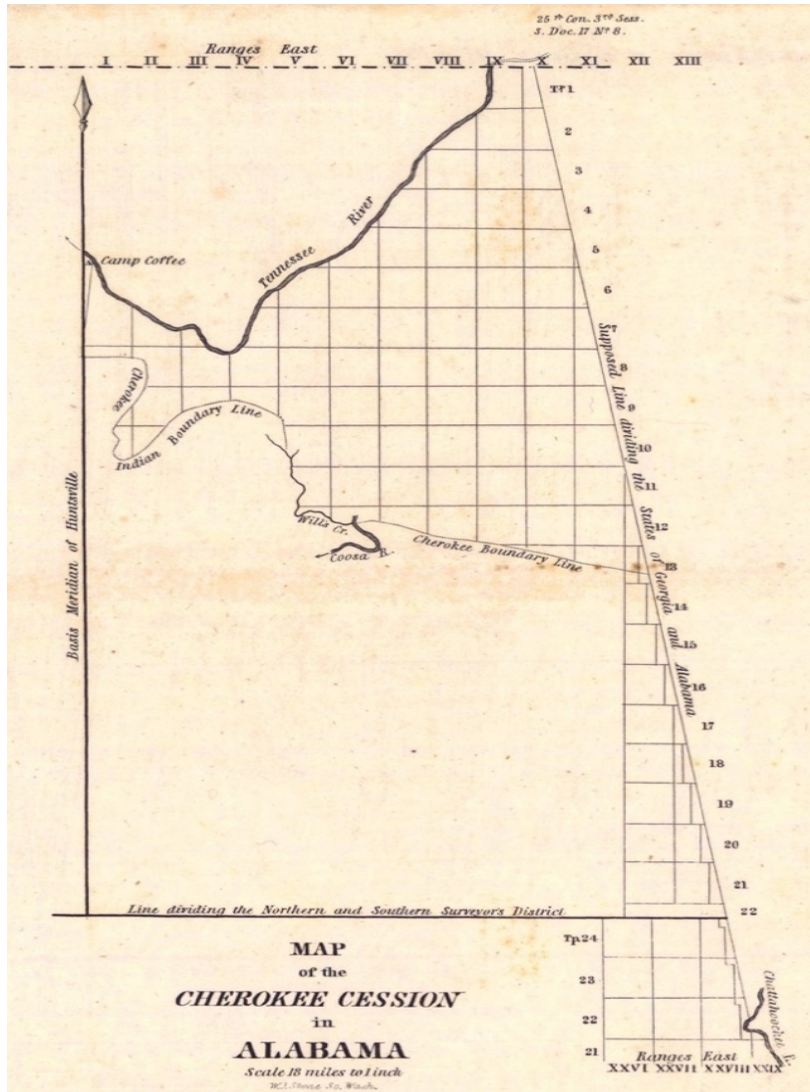


Figure 2.1 Map of the Cherokee Cession in Alabama (Stone)

A review of the literature shows that the standard way of completing the census reports by the French, during the 18th century, was utilized throughout the local governments of colonial Louisiana Purchase territory to include Alabama’s governmental policy. There is a consensus with Ekbergs correlation of the identity of Native Americans “born within one of the villages”(63), and how they would be obscured in the census because they were “technically Creole”(ibid). Contrary to the “Negro blood theory”, it is

agreed amongst the researchers that “early parish records abound with marriages between Frenchmen (or French Canadians)” and Native Americans¹⁷, in which the “one-drop rule” does not apply (ibid). The contention is the “one drop rule” did not apply because they were not categorized because of race but rather was recognized as an ethnicity. This is contradictory because the marriages between whites and Native Americans stated in the “census color rubric”(Table 1.1), from a racial perception of the mixed raced peoples, they are categorized as, “Creole, creole, pardos and negros”, blacks (Figure 2.2).

Numero de Casas	Nombres de los Blancos y Libres de ambos Sexos		Numeros de los Libres				Numeros de los Esclavos					
	Numero de los Blancos		Pardos		Negros		Pardos		Negros			
	Barones	Embras	Barones	Embras	Barones	Embras	Barones	Embras	Barones	Embras		
	Edades	Edades	Edades	Edades	Edades	Edades	Edades	Edades	Edades	Edades	Edades	
	1 ^a	2 ^a	3 ^a	1 ^a	2 ^a	3 ^a	1 ^a	2 ^a	3 ^a	1 ^a	2 ^a	3 ^a

Figure 2.2 Racial Categories of the Census Data of St. Louis and Ste. Genevieve, 1797

This research study asserts that eliminating the “one drop rule” policy and reversion to an ethnicity is significant in order to bring the French Canadians to the forefront as an ethnic group of people, inclusive of blacks. The French Canadian group of people identifies in common their “geographical features that united rather than divided (Ekberg, 2)”, and integrates into their communities as a cohesive entity through “shared blood, language, religion and customs”¹⁸. The American South applied the racial policy to their institutions to discredit mixed marriages and their relations (C. J. Ekberg, *Francis Valle and His World: Upper Louisiana Before Lewis and Clark* 14). The idea that “negro blood” is central to the theories of the “one drop rule” was not applied in “colonial

¹⁷ (C. J. Ekberg, *Francis Valle and His World: Upper Louisiana Before Lewis and Clark* 14) (Morisset) (Ens and Sawchuk)

¹⁸ (Ens and Sawchuk) (Morisset) (Ekberg) (Fanon, *Black Skin, White Masks* 3) (Keating 8)

Illinois Country, where many whites had many “drops” of Native American blood (ibid). Documentation and photos also supports this research in genealogy and tracing the census records of Native Americans and Federal records to support the knowledge obtained orally. Oral folklore and family traditional stories define who a people are, where they historically originated and how they evolved over time. This is true for the French Canadian Americans in the United States especially in the Illinois Country, Northeast and southern Louisiana territory inclusive of Alabama. Belonging to certain groups solidifies the identity the families established through their cultural, economic, and political successes or tragedies. The data from the literature review provides convincing evidence against the hypothesis whereas “the blood not only contains life but also the qualities of a being” (Wailoo, 306). This is an area of disagreement amongst most physicians of today that is supported by the contentions of this research. This theory is a sociopolitical idea that social and cultural norms is crucial to be changed because of the race acceptance and divisiveness of black and white “race medicine” (Krimsky and Sloan, note 9 in part 4 (8)).

King Louis the XIV theology articulated by Father La Vente, the Mobile parish priest, the view of many when he wrote “we do not see that the blood of the Native Americans can do any harm to the blood of the French...” (D. H. Thomas 76). French men found indigenous wives and mistresses in the Alabama villages located nearby and migrated at least 80 miles east (Figure 2.3) towards the British trading territory (Figure 1.2). I endeavor to say that nearby means from Fort Toulouse to Opelika. King Louis XV contrary to the predecessors theology disagreed and forbade marriage with native women

and was not very effective in the local communities. This review draws parallels between the theology of King Louis XIV and King Louis XV where the experience and age of the one over the other is noted, respectfully. Louis XIV was an old and biased king who was not as trusting in advisors of heretic nature like John Law. John Law was a Scottish economist and projector who propagated his agenda on how France should replenish their national debt depleted by numerous wars under King Louis XIV (Ainsworth 162). His ideas were rejected by Louis XIV and received by Louis XV who was inclined to be more trusting because of his ambition, inexperience and youth. King Louis XIV's dying wish to his successor was to "maintain peace and practice economy (Ainsworth 196)". John Law propagated his agenda on the young king and changed the priority of King Louis XIV's theology of peace to a theology of economics (ibid) supported by King Louis V.

Thomas in his studies found that "Captian Marchand may have, as legend has it, married the Creek woman, Sehoi, at the fort in 1721 even though it appeared that his successors did not follow suit" (78). Jean Charles Trouilett, the storehouse keeper at the fort had his three-month-old daughter baptized in 1750 where he acknowledged a liaison with his female Native American slave (ibid). His contemporaries were not so open in acknowledging their relationships with the indigenous women. Their wives would have been citizens of the French Canadian settlements and children, French Creoles. It is a creditable cause to research further and identify the communities that consider themselves French Canadians in Alabama, but call themselves black due to the political and social identification and categorizing of people. Proponents of racial identity research

have pointed out that, “black identity emerged from the historical, demographic, and structural origin of Fort Toulouse and Frenchmen interwoven in the communities of the Native American villages specifically of the American cultural context” (Rockquemore, Brunnsma and Feagin). Given the location Alabama (Figure 2.3), and the conversion of Native Americans, this would make sense if the Native Americans transfused into the society and cultural groupings, as an identity would call themselves French Canadians (D. H. Thomas 143) (Morisset 31).

Indian Villages and Forts of the Coosa-Tallapoosa River Region

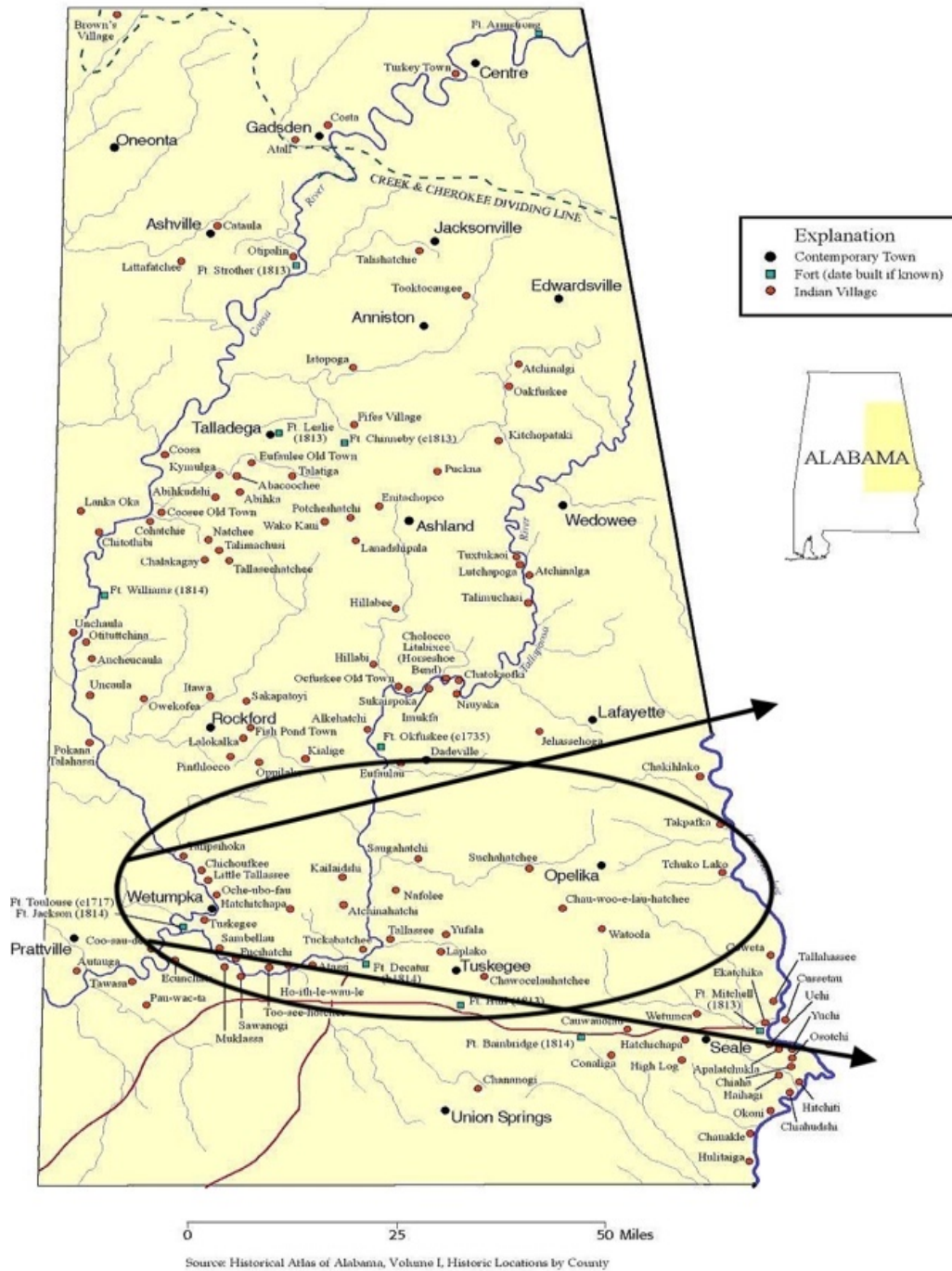


Figure 2.3 Alabama Map (Alabama Department of Archives and History)

Chapter 3: French Canadians, Blacks and Beta Thalassemia

History often repeats itself in cycles. The cycles can be broken by intellectual societies devoted to correcting the roles of politics and laws that effect the flawed foundation of erasure and effacement of a hierarchy of humans. This thesis has generated a wealth of data on the correlation between French Canadians and β -thalassemia. French Canadians and cultural health issues are linked interchangeably to the lack of knowledge that they are connected by blood to the hereditary disorder. Populations of French Canadians are considered in the United States as a racial designation of either white or black. Over the years, an enormous amount of research has been done on the obscurity of the French Canadians ethnicity in an attempt to acknowledge them in the United States. Recent studies have explored the impact of racialized medicine on the population. Racism and racialized medicine has mitigated the duty of the medical communities to recognize French Canadians as a part of the hereditary disorder β -thalassemia. As evidenced earlier in this thesis, Blacks are largely overlooked as part of identifying a more accurate population account of the French Canadian communities. The current pandemic of COVID-19 effaces psychosocially and physiologically the population where screening of the β -thalassemia disorder are necessary for the safety of the people identified at risk. The United States does not currently recognize French Canadians nor the hereditary disorder β -thalassemia as a public health issue to be addressed. National and state laws are the foundation of the critical race theory and are obstacles to overcome in research and practices of the disorder and the population affected. The right to quality healthcare must be available to every citizen of the U.S.

Considerable research attention has been directed towards the connection between French Canadians and β -thalassemia.

3.1 Outcome of good population health produced

The good population health necessity is for everyone with the same process to produce access to healthcare and health behaviors for everyone affected by the hereditary disease, and not based on race rather than ethnicity. Daniel P. Keating outlined several key features of society for successful health outcomes. These key characteristics are based on his health/wealth model and patterning the effects of health on the social outcomes (54). The considerable focus for this research study is two of the features noted, race and ethnicity. Racism is learned and “persist in people’s minds and public policies” (Krimsky and Sloan). Racial reasoning is illustrated by “genetic structure, self-identified race/ethnicity, and confounding in case-control association studies (Krimsky and Sloan 145)”. Keating argues that “it is also important to note that these various features of social patterning of health often interact with each other” (Keating 54, note 2) in a complex way that might be difficult to differentiate from each other.

To date, scant attention has been paid to the correlation between French Canadians and the hereditary disorder β -thalassemia. Successful Societies theories, presented in “*Successful Societies: How Institutions and Culture Affect Health*”, helps provide an understanding into the importance of comprehending the challenges associated with the lack of correlation between society and health. This correlation is a significant awareness beyond the historical and fictional literature concerning past

diseases circa 1880s – 1930s, and 1990 – present in the creation of a new society “post” Europe amongst French Canadians in the United States of America (Keating 54).

Self-definition means defining peoples boundaries through cultural, economic, and political strategies as an expression of the importance where self-identity and self-definition intercepts (Ens and Sawchuk 16). Beyond the concept of race, Patricia Williams theoretical framework takes account of race as a theoretical question, “what distinguishes beasts from brothers – who is presumed entitled or disposed, person or slave, autonomous or alien, citizen or enemy” (Krimsky and Sloan 242). Current studies appear to support the notion that “racialist superstitions” are still interwoven into genetic medicine of the future (242). The correlation of this racial concept and current health trends keeps the knowledge of β -thalassemia obscured in America and mythical to believe that mixed raced people in America of French Canadian descent would have the hereditary trait and connect them back to the Quebecois societies. This study argues that Creole societies are not societies which invent new politics of emancipation. They are not slaves of their past (Verges 136). Their real battles involve cultural health and heredity disorders and how it affects the outcomes of social patterning due to the racial theory and ethnic divide.

The principal premise of this research is that all of these communities identified in the research are quite similar, mainly due to their geographical locations and in comparative analysis they inevitably relate closely to the French Canadian community’s cultural societies and collective health issues. Equal treatment of research and development of public health in education and management concerning the hereditary

disorder β -thalassemia is a precondition according to all ethnicities and races without division of racial species of black and white origin. National health systems are created to benefit those at the top of the racial hierarchy. The values of the national population health does not always encompass those that have been historically marginalized. Evidence exists regarding the marginalization of French Canadians, Blacks and the hereditary disorder β -thalassemia and their effacement physically and psychologically. It is significant for further research to identify a more accurate population of French Canadians and its percentage of total population available in the United States. If the population identity is not taken seriously, then there is a risk of high mortality amongst this population given the current public health crisis. Primary Care providers, Internal Medicine, and present-day French Canadians, once identified in the United States population (Creole, French Native American, French African, Black, White), are key stakeholders and users of this updated knowledge. Evidence has supported the claim that historically the French Canadians are resilient and have the “capacity to adapt, to change, and to overhaul its collective imaginary” (Bouchard 184). Their resilient attitudes helped them evolve and change with the “challenges of the times”(ibid).

3.2 Beta Thalassemia, migration and changes in dynamics

The work of Vichinsky et al. demonstrates that “changes in the epidemiology of Thalassemia in North America” is evolving into a minority disease (Vichinsky, MacKlin and Wayne 1988). There is a consensus amongst researchers where they agree with this analogy of Vichinsky in which Laberge et al. literature review narrows the scope of

research population history to Quebec and its impact on medical genetics (Laberge, Michaud and Richter 287). One of the world's most common genetic disease predominately found among minority groups (ethnic/others), according to Vichinsky, is a strong correlation between ethnicity and patient genotype (Vichinsky, MacKlin and Waye e818) (Laberge, Michaud and Richter 287). "The changing pattern of ethnicity extends beyond E- β -thalassemia and alpha thalassemia...a disorder historically affecting white people in North America, are from other ethnic backgrounds..." (Vichinsky, MacKlin and Waye e820). Due to current migrations over the last twenty years and few attempts made to investigate the role of French Canadians in the United States, "thalassemia can no longer be termed a 'Mediterranean anemia'" (Vichinsky, MacKlin and Waye e824). A small number of scholars have investigated the impact of the current recognition of this disease's changing pattern of ethnicity. French Canadians (French Canadians outside of Quebec), inclusive of black Americans (Laberge, Michaud and Richter 289), and the impact on the lack of research in the medical genetics in the United States is momentous. Laberges et al. argument builds on Vichinsky et al. in that, β -thalassemia minor is a 'disease with distinctive features in French Canadians founded from migrants from Portneuf, Quebec (Nouvelle France). Demographics in the research included Canada (Toronto region to include Ontario) (Vichinsky, MacKlin and Waye e820). An autosomal recessive disease is identified in about 3% of world population (2005) – 196,257,211 (Laberge, Michaud and Richter 296).

Trends in thalassemia birth (immigration vs local births) was a basis for the research and it is reasonable to conclude that the changes in epidemiology were

substantial for further research and education. A sample size of a small proportion of ethnicities including African, black, mixed race and unknown are included in this research (Vichinsky, MacKlin and Waye e821). Assuming that this category of peoples does not have thalassemia and neglected to test/research further for the conditions instead of accidentally happening upon the data, the research results might have a bias in interpreting the data. Vichinsky et al. also included in the categories of data an “Other White” category that included European, North African, and Hispanic for data gathering and research (821). On the contrary, past studies have yielded some important insights into β -thalassemia concerning case study of families that originated in the southern United States in which “white ancestors could not be excluded in any case” (Braverman 859). Mediterranean ancestry showed no history or were not identified in the cases of blacks (ibid). Researchers agree that although the clinical symptoms might be milder in blacks than Mediterranean’s, the scientific revelation of the condition is still identified as a hereditary disease in blacks¹⁹.

This framework is used in order to examine disparities in the French Canadian ethnicity and public health research of β -thalassemia, a hereditary disease of this population. Identifying French Canadians as a separate and distinct ethnic people in the American society of the United States rather than a racial concept brings community identities of risk, who are unaware of their hereditary disorder and lack of identity to common knowledge. This shows a correlation between the French Canadians and β -

¹⁹ (Braverman 259) (Kreimer-Birnbaum, Edwards and Rusnak 257) (Friedman, Hamilton and Schwartz 1458) (Pierce, Kurachi and Sofroniadou 983) (Vichinsky, MacKlin and Waye e820) (Bajwa and Basit) (Eichner 1237) (White 259)

thalassemia. The hereditary disorder β -thalassemia awareness needs to be brought to the forefront, which is addressed as an underlying condition to the current public health issue.

Given today's current public health condition of COVID-19, β -thalassemia is an underlying condition that French Canadians and black Americans are not aware of and critical to understand and ensure their safety in the environments in which they live (Dr. Eleftheriou, Androulla). Dr. Eleftheriou states that "all patients with hemoglobin disorders should be considered amongst the 'vulnerable' groups of society" (ibid). As aforementioned, it is important to understand the United States has not recognized this as an American public health issue amongst the identified population. The researcher notes this global recommendation and argues that it is essential for the United States to add the disorder and identity of the French Canadian population affected with this hereditary disease. The problem with today's medicine is lack of consistency in β -thalassemia screenings for French Canadians of also mixed raced heritage. Davidsons article, "Thalassemia", through the Gale encyclopedia of medicine, agrees that for "basic information" the basis of population is race, ethnic background, family history and age. This research study agrees that the initial criteria considerations for diagnosis of β -thalassemia in the United States black population (Bojanowski) is ethnic background and race. After ethnic background and race is identified, family history and age should be considered for further screenings. The researchers Hamza and Hajira argues that "Thalassemia" is more prevalent in the Mediterranean population (Bajwa and Basit). Their findings do not speak to the population of the United States, French Canadian

ancestry, black, or white communities (ibid). There is no effective screening available in the United States for patient population of French Canadian descendants (Black and white) so, "The true numbers of thalassemia affected patients in the United States are unknown presently (Bajwa and Basit)" (Laberge, Michaud and Richter).

The Mendelian dominant disorder theory is full of bias and the purpose of this ideology is to provide political dominance over a race. Contrary to Louis XIV theory of father/son relationship and mixing of blood, these constructed fears are based on construction of a social race and "concerns about miscegenation and the 'negro blood' theory (Wailoo) (Krimsky and Sloan) rather than a humanistic view. Historical, demographic and sociological factors affect the political ramification of whether resources are provided to the patient population because there are no benchmarks to identify the numbers of thalassemia patients in the United States (De Braekeler and Dao) (Bajwa and Basit). The results of this study also shows the necessity of the population affected for medical education on what the hereditary disease is and how it affects their bodies, whether β -thalassemia minor, intermediate, or major (Cooley's Anemia).

This disease has negative repercussions to the individuals affected and could have a high morbidity rate if not understood that two carriers increases the risk of major issues (Bajwa and Basit). If the lack of knowledge of this hereditary disease goes on unacknowledged, historical, demographic and sociological factors affect the political ramification of whether resources are provided to the patient population (De Braekeler and Dao) (Bajwa and Basit). The certainty of the evidence of test accuracy is significant because it is imperative that the hematologists continue to dispel the myth of 'good

blood, bad blood' and the essence of life flowing through the veins of a human are based on the characteristics of the blood. ("Negro Blood" myth) (Wailoo). Rejection of the earlier association of blood related with individuality, race, genetics, and national origin changes myths to truths based on valid evidence from quality research (Wailoo) (Krimsky and Sloan).

Ample evidence exists to suggest a connection between French Canadians and β -thalassemia. The research agrees with De Braekeleer and Dao in their research of the founder effect in which β -thalassemia is one of the hereditary disorders which originated with the French Canadians of Quebec and goes on further to provide updated migratory information and research to include blacks as a part of the heredity disorder. The hereditary disorder migrated (mutated) with the migrations of the French Canadian ancestry throughout North America (De Braekeleer and Dao).

Foundational laws of anti-miscegenation and institutionalized racism in medical research and practices transformed the United States homogeneous Anglo-American ethnicity into a far more segregated, "racialized" one. French Canadians were forced to become a passive community of people and recognized as an inferior tributary ethnic group. French Canadians are also recognized as either white or black in the Anglo societies in order to be an assimilated culture. They, however, did not entirely conform as data reveals and maintain their culture through recognized customs and oral traditions passed down through their domestic heritage. This cultural status in society caused them to develop a "pattern of the social gradient, for example, race and ethnicity, where unsurprisingly, minority populations are at a health disadvantage (Keating 54)".

Bouchard argues that the Quebec cultural past is based on “Muthos – different from what ‘myth’ is called today as an ancient Greek meaning – a true story, a story that unveils the true origin of the world and human beings”(174). The review and definition of “Muthos” argued by Bouchard in order to apply the meaning to the French Canadian cultural societies of today in the United States are noteworthy for this research. This finding is similar with the work of Krimsky and Sloan (2011) who identifies the barriers of biology to the “cultural imagination” as a “hurdle to overcome” of a group of people (Krimsky and Sloan 242).

...at one extreme, there are those zealots who actively deploy races in the innate mark of beings so different that they constitute another species altogether – aliens, sun, or moon types, untouchables, nonpersons, beasts. And at the other end of the spectrum are those ordinary creatures for whom discussions of race remain heavily inflected by quiet assumptions of biological difference, within a largely inchoate, unexamined, and unconsciously malleable mush of assumptions about genes, social history, law and culture. (Krimsky and Sloan)

The hurdles to overcome are the “Negro blood theory” infused into the Mendelian theory. The other hurdles are to make mental and physical changes to the medical societies and cultural populations complicit assumptions of races being so different that it is not important to research the total characters and genetic markers of β -thalassemia. Omi articulates that, the thought process of the Europeans of the 18th and 19th centuries was that race was a “biological” concept (*Darwinism*)(161). However, while early studies suggested that race is biological, later research seems to indicate that “the concept of race has defied the biological definition” (Krimsky and Sloan) (Omi and Winant 163).

Nationality “is generally understood to be a sovereign system of government within a particular territory” (Vincent 356). Previous studies provides epistemological

knowledge of the institutional system state policies which are used to confine and validate the definition of the construction of race (Vincent *ibid.*) (Omi and Winant 38). Much of the debate over the term and construct of race has revolved around whether race is an essence (life) or a mythological construct for race formation (*ibid.*). Race is not an essence due to the medical definition of the “Negro Blood” theory in a certain race. It is a mythological ‘racial formation’ developed to subjugate a class, race, and economical development of people who are in need of equality in healthcare. The study carried out by Omi indicates historically, the definition and language of the socialization and constructed races included the significance of its being. These beings are “a determinant of one’s political rights, one’s location in the labor market, and indeed one’s sense of ‘identity’ (Omi and Winant 145).” They failed to include in their discourse the importance of one’s right to quality healthcare for “all” rather than for a particular privileged race. This equality in healthcare is an essential start to the knowledge of heredity and how disease disorders affects certain ethnic groups.

The study research identified the health issue of β -thalassemia as widespread among the mixed race Creoles/creoles as in strictly French-Canadian communities, though it seems to have been unbeknownst to both groups. In order to understand how thalassemia (Beta) affects present-day French Canadian communities, this research traced the evolution and fragmentation of the French-Canadian community with the purpose of understanding the subsequent development of racial policies that impacted healthcare. The specified Creole, French Native American, French African, Black, White communities are as follows: Illinois Country (colonial Louisiana Purchase Territory),

New England²⁰ and colonial Louisiana Purchase territory including Alabama²¹. Current studies appear to support the notion that historical changes have lasting effects in present-day communities that trace their heredity not to a skin color but to an ancestry. “Racist superstitions” are still interwoven into genetic medicine of the future (Krimsky and Sloan 242). The correlation of this racial concept and current health trends keeps the knowledge of β -thalassemia obscured in America and mythical to believe that mixed raced people in America of French Canadian descent would have the hereditary trait and connect them back to the Quebecois societies.

Primary care and Internal medicine physicians have a duty to recognize French Canadians as separate from Mediterranean populations affected and continue to provide quality care to those identified and affected by this hereditary disease. Key coexisting conditions are "Thalassemia is an inherited disorder that affects the production of hemoglobin and causes anemia" (Bojanowski 2811). β -thalassemia (Major) is the most severe anemia and potentially life threatening. β -thalassemia (Minor) has mild to nonexistent symptoms. Major symptoms of anemia cause weakness, pallor, and lack of energy. This condition can show up from testing as early as weeks after the birth of a child and later in life as an adult. The spleen can become enlarged and affect the immune system of the patient that thus causes vulnerability to infection. This research identified a total patient population of 1323 in the research data which was consistent of whites and blacks. Blacks were intermittent in the research and evidence suggests that they were

²⁰ New England consist of these states that the year 2000 census lists as Franco Americans or (French Canadians): Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island and Vermont.

²¹ Fort Toulouse and 80 mile radius. (Figure 1.1 Townsites & Villages of Upper and Lower Creeks and Alibmos Prior to 1832)(Figure 1.2 Southeastern Indian Towns and trading routes map)(Figure 2.3 Alabama Map (Alabama Department of Archives and History)

scarcely included in literature as a result of current screenings and research. The theory was tested over twenty years ago but never pursued as a major issue for health prevention and intervention for today.

The disease cannot be prevented however management of the disease can be offered once identified through "chorionic villus sampling" (Bojanowski 2813) or hemolytic testing. Knowing who is at risk prior to a public health crisis and preparation for emergency management would prevent mass casualties in any given communities that cluster with the disease. The minority of a patient population, i.e. French Canadians, leaves the United States vulnerable to numerous people for example in Alabama, with this underlying condition. The condition recognizes a population at risk for a higher mortality rate in the respective areas if not treated or recognized by a community of people.

Racial barriers to implementation could be due to medical "radicalized medicine", and or racist rhetoric. Once the racial biases are identified and removed, federal or state resources could be utilized to irradiate the issue. Cultural mentalities is a prerequisite to be changed in order to embrace and accept self-identification of all color people as one humanity verses race acceptance and divisiveness of black and white for quality healthcare (Kerimsky 4). This is imperative because currently race and ethnicity of the racialized medical system is a major component to be utilized to diagnose β -thalassemia as a hereditary disorder in the United States black population. An initial diagnosis of β -thalassemia in the United States black population provides a foundation for documenting correctly the number of French Canadian and black population that is affected currently

in their respective geographical locations. Once diagnosed correctly the population is made aware of the underlying risk to the prevalent mortality rates in public health issues like the current pandemic COVID-19. A dynamic change in the initial diagnosis of β -thalassemia affecting the French Canadians and blacks is imperative based on research evidence obtained from this study and the current mortality rate of blacks due to the pandemic. The racialized medicine theories identified in recognizing a group of common cultural heritage and characters by splitting out the duplicity of race and viewing French Canadians of all categories as an ethnic group are ignored in the census household/race origin whereas white and black are the dominant race of the census populations.

Recent research support the view that French Canadians are understated in population count in the United States. “Over 2.3 million Americans report having French-Canadian ancestry through the US Census of 2000” (Laberge, Michaud and Richter). Scholars noted that those identified as French-Canadians outside Quebec are amongst the First Nations of Quebec (Iroquois Nations) which is a fact but goes on to identify the significance of French Canadians and their admixtures in the United States. The research provided evidence supporting medical researchers claim that clinical findings of β -thalassemia in French Canadians are usually similar to those of affected individuals from other ethnic groups to include blacks. Since the 1980s, the results of the study reveals that there is no difference in the relationship between the French Canadian and Mediterranean populations who could potentially both be affected with the hereditary disorder (Laberge, Michaud and Richter).

Much of the debate over race or 'negro blood' has revolved around the "Mendelian dominant disorder" applied to the research concerning sickle cell anemia and thalassemia which was perceived to be a valid theory by many American physicians (Wailoo). Additional considerations to the problem revealed the results of β -thalassemia minor ($B+IVS-1$, nt110) being located in the geographic distribution of Portneuf (De Braekeleer and Dao) where most of these founders in Quebec originated from France. Migration patterns were considered in their research for results that produced a kinship population cluster of French Canadians with β -thalassemia. An expansion of migration action throughout North America provides a possibility of additional research of the Southern communities of Alabama in which they migrated and intermixed with the local indigenous communities through miscegenation (*métissage*). It is no surprise if the β -thalassemia hereditary disease appears in more populations of white than black people, if tested, or further research conducted for public health undermining conditions are recognized.

3.3 The Art of Confrontation and Change

The art of confrontation is to acknowledge the center of gravity of a population and attempt to destroy that center of gravity in order to delegitimize the culture and population to obtain assimilation into a new society. Maps, stories and location legitimizes the French Canadian existence and elevates the hearts and minds of the people nationally through the identity of self. The data from the current U.S. Census (2019) (Race Ancestry) (Table 3.1) provide evidence that there are populations in the United States that identify as French Canadian. Contrary to our expectations, the current

U.S. Census (2010) (Alabama – Race) (Table 3.2) there are less blacks in Alabama at the rate of 26% compared of 70% population identifying as white. Also, an estimated small percentage (3%) of potential people identify as French Canadian in the state (unknown are if they are black or white). This supports the thesis that the population of French Canadians nationally and statewide are underrepresented. The current continuation of institutionalized medicine based on historical rhetoric conflicts with the hearts and minds of the population effaced to seek out the truth in medicine concerning their heritage. The effacement in society of this disorder can impact community without notice. Insignificant research has been conducted over the last thirty (30) years. Miscegenation/métissage is a cultural practice that is a global phenomenon that had not stopped due to the U.S. laws of the past. Assimilation strategies of the French and Roman Catholics were more humane compared to the Anglo-Saxon Protestants assimilation strategies. The duality of the two strategies upon the French Canadians historically in the United States divided the ethnicity/race. The father/son relationship is reiterated in this section to show how the elimination of the relationship caused the center of gravity of the ethnicity to shift. Reconstruction of French Canadian societies in Alabama deserves more attention to understand the challenges concerning β -thalassemia and its correlation with their health and welfare mentally and physically. Hinderance to the continuity of care concerning the hereditary disorder is current bias through racialized and institutionalized medicine. There are current scientific knowledge and effective methods of research available incorporating community engagement to evaluate the admixture of French Canadians in Alabama.

It is important to reiterate, because of the historical erasure and effacement of French Canadians, how the research of the integrative, systematic and narrative review and theoretical analysis established that at the head of the Alabama river stood Fort Toulouse (Figure 1.3). The study of the location of potential French Canadians recreated through maps and stories has become a key aspect of linking the ethnicity and heredity disorder to a specific cluster population. The maps, trading routes and river villages identifies migratory patterns of the French Canadians and their admixture of communities. Fort Toulouse was a strategic post of the French Royalty and the colonization of North America previous to the Louisiana Purchase. The military and colonization strategy were a girth concept. The French circled the advancement of the Spanish and British empires from the west and east. Their most prominent locations that researchers established as French Canadians/Franco Americans are New England, Illinois country, inclusive of the Great Lakes area, and Louisiana to South Carolina border of the British trading routes and conquests.

The conjoining of the many Native Americans in the area (Figure 1.3, Figure 1.4) of Fort Toulouse (D. H. Thomas 152), their cluster of villages around the fort, river and creek systems and stories are similar to the cluster of participants in the study completed by De Braekeleer and Dao (223). Colonial policy developed by making a virtue of necessity. The French took their policy as a tactical objective of the colonization and missions of the church. This form of proselyting established great importance on maintaining peaceful relations with their Native American neighbors. Daniel Thomas' existing literature emphasizes the significant value the French placed on maintaining

peaceful relations with their Native American neighbors. The French Jesuits instituted a policy of sending French boys to live in the villages to learn the native languages and customs (139). This was a policy of the Jesuit Bishops of the Roman Catholic churches in Quebec and North America. The policy was successful in that the purpose was peace and conversion where each party learned of the other customs. These customs intermixed between the military as the population of soldiers at the fort also intermixed with the Native American languages and customs. The individuals later served as interpreters, (ibid) and their knowledge of the indigenous societies frequently aided post commandants. Through intermarriages to the soldiers and migration of the ones who completed their military commitments, the inhabitants of the villages surrounding Fort Toulouse would form a kinship identity and consider themselves the ethnicity they identified with in their families, either French Canadian, Creole, black or white (Table 1.1).

The data researched in this study legitimizes the Echols family oral acknowledgements of being French Canadian, Cherokee and Creole through familial traditional oral stories that could be added to the academic literature. The research data reveals the possibility of the name Echols to be a variation of Echota (name given to the Cherokee tribes in the southeastern locations of the Louisiana Purchase territories, to include Alabama – Figure 2.1). Mulatto is a European name, as noted in the research, and used in the United States as a common description and attributed to the people of color and mixed race. It is generally accepted wisdom that the name variations between the French and English, for example Fort Toulouse various naming standards between the

French, English and Native Americans was a common custom during the times and taken up by the Native Americans in their translations and understanding of the customs in name variations of the times. The current convention of naming mixed raced population is multi-raced or bi-racial.

The census data of 2019 (Table 3.1) reveals that approximately 0.6% of the United States of America population self-identify as French Canadian. These numbers categorized on the census data table are who identify with their ancestry as French Canadians. The population count is undervalued due to the historical policies and practices of the United States of categorizing people as white or black rather than their ethnicity of French Creole/mixed race and/or French Canadian.

Table 3.1 US Census 2019 (Race Ancestry)²²

French Canadian - US Census 2019 (0.6% Population identify as French Canadian ancestry)

Label	Estimate
Total Population:	328,239,523
French Canadian (0.6%)	1,994,739

It would be difficult to obtain further definitive French Canadian populations in Alabama, unless further research is completed locally or through surveys and interviews of local population within the geographical area identified in the literature review (Figure 2.1). The difficulty in obtaining this information is of no surprise given the changes in political policies and laws of assimilation historically as to how communities perceived themselves as a race or an ethnicity. Currently there are two distinct races identified in

²² <https://data.census.gov/cedsci/table?q=french%20canadians&tid=ACSDT1Y2019.C04006&hidePreview=false>

America in the state of Alabama in the census data: white or black (Table 3.2). This research study did not reveal the individual breakdown by states of the total population race ancestry because the census did not have the data available (Table 3.2) at the time of data extraction. These two race identities, white and black were the majority identified races in the state. There appears to be about three percent (3%) of the state of Alabama's population listed as more than one race, or two or more races. This indicates mixed race ethnicity that might be affected, if they correlate with the French Canadian ethnicity or as French speaking communities. Evidence exist to suggest that the white population in Alabama potentially have an estimate (+/-) of 98,818 (3% x 3,293,917) total population that identify as French Canadian heritage and 36,969 (3% x 1,232,325) blacks, respectfully.

Table 3.2 US Census 2010 (Alabama – Race Ancestry) (United States Census Bureau)

RACE (Alabama 2010) (3.1% Other)		Percentage of Population
Total population	4,712,651	
One race	4,651,281	98.7
Two or more races	61,370	1.3
One race	4,651,281	98.7
White	3,293,917	69.9
Black or African American	1,232,325	26.1
American Indian and Alaska Native	25,814	0.5
Cherokee tribal grouping	9,702	0.2
Chippewa tribal grouping	417	-
Navajo tribal grouping	120	-
Sioux tribal grouping	195	-
Some other race	51,260	1.1
Two or more races	55,739	1.2
Two races including Some other race	1,362	-
Two races excluding Some other race, and Three or more races	54,377	1.2

Historically, social and cultural practices of traditions appeared to be through consanguineous unions which was "common in Europe as in Nouvelle-France" (Laberge, Michaud and Richter). The study results did not indicate that these practices are still

relevant for today's societies within the past 50 years. As noted formerly, further research interviewing, or specific surveys would be necessary to bring to light the obscurity of the community traditions and cultures.

Davidson's article, "Thalassemia", through the Gale encyclopedia of medicine, about providing "basic information" to use race as a factor in one of the criteria's for consideration of the diagnosis of β -thalassemia in the United States population is a contention of this research study. Race defined in the medical community still appears today as a "racialized medicine" that politicize the rationalization for research and distribution of resources for research in this critical review. Race is not a variable and scholars agree against equating humans with the concept of animals like "apes, monkeys or chimpanzees" (Krimsky and Sloan) in order to define a hierarchy of species in humans. Like Darwinism, this is a created concept of racism. The color rubric applied to the variables in race and humanity obscures a true hybridity of ethnicities in the United States. The obscurity is based on the anti-miscegenistic origin throughout the colonization period to current generations. Social and cultural norms is crucial to be broken in the United States in order to conduct further research on effective screenings available in the United States for patient's population of French Canadian ancestry descendants (Black and white). Despite differences in race ideology, there are areas of agreement. Criteria's are benchmarks that are considered for diagnosis of β -thalassemia in the United States black population through recognizing their French Canadian ancestry in their local common heritage and individuals (Vermette 319). The impact of the COVID-19 pandemic on the United States supports the argument that there are racial issues in

medicine. These issues support the hypothesis that “historical and current experiences of discrimination and stigma, distrust in institutions...puts disadvantaged communities at greater risk” (Cooper). Dr. Cooper argues that, “As more data about the impact of the Covid-19 pandemic becomes available, it is increasingly clear that the disease is hitting the most vulnerable and disadvantaged populations in the U.S. in disproportionate measures (ibid)”. The urgency in the families, patients and medical societies to get Beta Thalassemia screenings provided by the medical communities deserves more research attention. Current data on the John Hopkins website reveals, “an extensive amount of data shows disparities in health by race, ethnicity, and social class, across the lifespan” (Cooper). Recent research tend to show the correlation between the French Canadians and Italian and Greek communities to be similar and developed through the reconstruction of the genealogy of the French Canadians (Laberge, Michaud and Richter). Additional review of the literature shows that, thalassemia is at the same "frequencies as cystic fibrosis in Caucasian or sickle cell anemia in African Americans" (Laberge, Michaud and Richter). The importance of β -thalassemia in all Americans living in the southern states and throughout the colonial Louisiana Purchase Territory, as a level of research, is on the same level as the genetic disease cystic fibrosis, Lupus and Sickle Cell anemia. The accuracy of the testing could only be perceived by the researchers as accurate with the idea that Mendelian dominant theory is central to theories of blood and genetics (Wailoo).

3.4 Efficacy of Culture

Current bias in research is eliminated in the screening and identification process in order to get quality reporting and gathering data as evidence to support the hypothesis. Keeping in mind Dr. Graves (1916) literature, it is important to understand that historically, he argues in "Tropical Diseases and Public Health" that the American South and mortality rates demonstrates the severity of recognizing data for understanding the health issues confronting "whites". He blames the disparity in death rates on the 'negro race' (Graves). Policies and laws were written and enforced in the south in order to mitigate interracial mixing of families out of fear using the theory Graves (1916) presented as social articles from the medical communities. These findings are congruent with the work of Graves (1916) in which he used newly developed census data of 1880 to support his claims. The ideology and correlation between mortality rates and adultery as well as miscegenation increase "post - antebellum", helped define a social construction based on the black population of the cities from most populated cities with blacks to the least with infant mortality. Data portrayed in the population table (1916) of diseases shows Alabama at 42.5% and was the third most populated Southern state according to Graves (1916) census data collected. Graves (1916) research developed census data to support political favoritism rather than health improvement of the nation's citizens (Wailoo). The infections among the blacks according to the data presented by Graves, were higher than the white population per census data gathered. Malaria was one of seven data points reviewed. Graves argued showing the illustrations of diseases and deaths per 100,000 of the population. From a socially constructed ideology, the argument was

supported by articulating the racial theory "that health problems were greatly intensified" by the black communities. This scientific myth of the negro is to support the theory of Darwinism (Zooism) through stating that the blacks are carriers of disease (Graves) (Wailoo) (Krimsky and Sloan).

Current research reveals that there is a higher white population in Alabama than blacks as compared to the historical data of approximately 50% (Graves 1916) of each race respectfully (Table 3.2). However, it is unknown the percentage of population with the hereditary disorder due to lack of research and potential misdiagnoses of the diseases associated with the genetic disorder in the state.

Insufficient research has been done post 1994 Quebec founder affect by Braekeleer and Dao. This study recommends further research in Alabama around the colonial Ft. Toulouse area and the triangular locations of villages and town east of the fort to the Georgia line (80 mile radius). Through further research, locations of families that still consider themselves French Canadians and articulates the family lineage orally would be located and educated to the public health issue. According to Braekeleer, there are limitations to the research done in 1994. The limitation are as follows

...genealogical reconstruction in which the study relies only. Cases with family dynamics of adoption and non-paternity should be a consideration of research limitations. Recording of marriages and births can have errors as several stages of the research process that needs further review. Difficulties reading the original record, error in transcription, errors in computerization, errors in the reconstruction of the familial links (false links), etc. (De Braekeleer, 1994)

In cultural environments there were common practices of change in surnames in Nouvelle-France. "Beta Thalassemia mutation is the most prevalent thalassemia mutation

found today (1994) in residents of the Languedoc region of France (Cao et al. 1989)" (Braekeleer, 1994).

The findings in the literature review reveals the art of confrontation concerning social policy developed by the racial construct to subjugate the French Canadian communities. This construct was also identified in the correlation between the fictional and historical literature showing that the construct of race, which creates traumatic events, affects the hearts and minds of the peoples and produced similar articulation of anxieties through the fictional characters and plots. The literature review combined with the theoretical framework laid out in scholarly research the correlation between the politics and social construct of the son reporting to the father in a father/son relationship. This relationship created a tension of fear instilled in the hearts and minds of the people to comply with change and being respectful of their new identities. Being happy and the sense of belonging to the French Canadian communities meant being good citizens. The literature review also provided an understanding of how the construct of race was not to produce equality because equality was linked to resources that the father was not willing to share as an Anglo American society.

The French and Roman Catholic societies did not share that ideology and was more humane in their approach to conversion and assimilation into a society that shared common bonding of geographical locations and customs when learned of each other. According to the researcher Vermette, "The *effective* racial caste system finds Anglo-Saxon Protestants at the top and Franco American Catholics (French Canadians) at the bottom (Vermette 320)". This shows the duality the French Canadians endured

psychologically and physically as they evolved into a divided race with the tension between being a Franco American Catholic and white or black ethnicity/race. The father/son relationship was more of a protective relationship and adaptation to a new land and country to create new societies. Ill health is associated as a social problem created by the racial theories in medicine. When the father/son relationship dissolves then fear of the unknown and dependency on having an ally/protector is no longer the case in America. Anxiety is produced through feelings of no support when the center of gravity, which is the values, beliefs, and cultural practices, is shifted to become someone else's values, beliefs, and ideals. The politics placed through the racial construct hierarchy of reporting applied to the "spirit of man" in order to create an unknown racial identity and what is known at the level of the person in control of the lives of the communities when assimilated into a colonized society.

The findings also revealed that the racial construction has been incorporated into medicine in order to manage resources in which the black and/or French Canadian mixed raced and poor communities at the bottom would be the least to be acknowledged in their issues. The literature review exposed this to be true where there are challenges associated with written historical literature whether through art, literature or medical artifacts. The results also disclosed from scholars of the literature review and theoretical framework that existing research has focused on thalassemia being a "Mediterranean anemia" but failed to explore β -thalassemia in the United States concerning other ethnicities like French Canadians (Vichinsky, MacKlin and Waye e824) inclusive of blacks of French Canadian ancestry. This research advocates the French Canadian ethnicity be added to

the list of population in addition to the Mediterranean people and list of those already identified as carriers of the β -thalassemia hereditary disorder of today.

Most scholars seems to agree that oral stories added to the historical accounts of society established in the United States (Morisset, 20) through customs, maps and geographical locations put into historical context the stories of familial heredity. This is a valid argument because Milia Echols Waller claimed to be French Canadian and Cherokee, interchangeably. Recreating the French Canadian heritage of the Echols family through incorporating family stories of familial lineage is important to understand the challenges concerning β -thalassemia and the correlation between the ethnicity and heredity. It also provides a direct locality in Alabama for further research which could be made in order to add validation to the number of actual people who are affected by this hereditary disorder. Also, through self-determination and identification they are considered French Canadian and of an identity validated through values, familial bonding of Alabama, stories, and customs of oral and historical locations and documentation. Researchers supports the findings of the literature review and theories presented in order to engage in the challenges associated with the correlation between French Canadian and Beta Thalassemia recognized today.

The hereditary disorder is in the genes, per the professional intellectual's, but they subjectively apply the disorder to a certain population and minimize the American black population from this disorder. Results of this study reveals that changes in the literature providing scientific truth to the understanding of different reactions on how the whites endured prevalent malaria is important today to counteract the racialized perception and

construct created to keep the hereditary disorder obscured from the French Canadian and American Black communities.

Current literature varied in the articulation of how the Blacks endured malaria (Ekberg, 203) in colonial times and changes are necessary to provide current consistency in providing unbiased views on the disparity and risk of having this disease. Malaria is not endemic in the United States but the hereditary disease is still prevalent and a stipulation to be addressed accordingly. Knowledge disseminated concerning Blacks in this healthcare crisis is not substantial, including French Canadians who are an ethnicity containing blacks, whites and mixed race populations. It has also been revealed through the literature review and theories of Dr. Graves and Freud that ill health was a social problem as a result of a 'slip of newfound religion' (conversion/assimilation), and being ignorant and savages.

These theories were presented as a foundation for racial theory in Dr. Graves (1916) (Graves 407) literature approximately at the same time Freud (1915) (Verges 40) was presenting his theory so that the foundation was filled with physical and psychological conflict to further divide the species of white and black people and create a hierarchy of superior beings. A better understanding of how a population of people create a bonding to their kinship is through social patterning in certain cultures. This social patterning theory identified in the theoretical framework brought to light the importance of the research study recognized in addition to the current recognition of β -thalassemia hereditary disorder and the changing pattern of ethnicity in which it affects. French Canadians (French Canadians outside of Quebec), inclusive of black Americans

(Laberge, Michaud and Richter 289), and the impact on the lack of research in the medical genetics in the United States is significant for further research in order to understand the correlation between these two, French Canadians and β -thalassemia. Keating's argument builds on this study in that "race and ethnicity clearly have a strong relationship with health outcomes (54)" and there is a disadvantage of health in minorities due to the political ideology of the United States. These two entities, French Canadian and β -thalassemia stay obscured and miscalculated in the value of knowing this updated information provided in this research study unless changes to the medical research communities are made to updated research of β -thalassemia in the United States and the results becomes a priority in healthcare.

Blacks are an ethnic population of French Canadians and ignored with lack of intervention in the medical fields for primary care and deserve(s) more research attention. In order to provide continuity of care to all communities affected with β -thalassemia today it ultimately is recognized as a hereditary disorder in French Canadians. Some researchers subjectively apply the disorder to a certain population and minimize the American black population from this disorder. The lack of knowledge of a patient population, i.e. French Canadians, leaves the United States vulnerable to numerous people, specifically in Alabama, with this underlying condition at risk for a higher mortality rate in their states if not treated or recognized in a community of people who are at risk. The most important current public health issue is COVID-19, a world pandemic in which thalassemia has been added to the at risk categories by the Thalassemia International Federation (TIF) 2020, along with sickle cell disease and cystic

fibrosis (Dr. Eleftheriou, Androulla). The vast majority of the work in a strong correlation between the French Canadians and β -thalassemia have focused mainly on the racial and political policies of the United States. These similarities historically created changes in the dynamics of the ethnicity of the French Canadians and whether they were to survive as communities identifying as French Canadians or Creoles/creoles. Today, French Canadians are located in New England consisting of these states that the year 2000 census lists as Franco Americans or (French Canadians): Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island and Vermont. They are also located as families in Saint Louis, Missouri and the Old Mines Area of Potosi and Washington counties in Missouri. Further research is needed to identify how many communities are in Alabama, Fort Toulouse vicinity within 80 miles or more and throughout the United States except for... obvious and researched locations of New England consisting of the early state of Maine, New Hampshire, Vermont, Massachusetts, Rhode Island and Connecticut (Smyth 318) and late 19th century Illinois Country.

Anthropological discoveries of thalassemia traits which appear throughout the U.S. and Canada also genetically identify a common heredity makeup of French Canadians, one that has nonetheless mutated and evolved as a result of their migration throughout the states, specifically, for our purposes here, in Alabama. Racialized medicine has hindered continuity of healthcare for French Canadians and blacks and obscured the need for understanding they need to be included in this public health crisis. French Canadians were considered lazy and passive with an inferior complex and constructed racial theories put them at the bottom of the hierarchy due to poverty,

ethnicity and relationship with blacks and being of a mixed race ethnicity that ranges from white to black. Malaise is one of many symptoms of β -thalassemia and could be misdiagnosed as laziness due to racialized medicine. The characteristic of malaise is a general feeling of discomfort, illness and uneasiness whose exact cause is difficult to identify. Similar characteristics include unhappiness, restlessness, uneasiness, unease, and melancholy, depression, anxiety etc. to include weariness. The literature review and theoretical framework findings conveyed to this research that if communities are not respected as humans and looked at as mere property or inferior to the race, then these symptoms would not necessarily be looked at as a genetic public health concern to be researched.

The characteristics were applied to the French Canadians and blacks (free or slaves) as lazy and insolent in academic historical literature, medical journals and communities with nothing said more to the contrary. Dr. Graves called it “seriously ill all the time” (Graves 408) and applied it to a public health condition attributed to blacks that needed to be wielded from the “white” communities through eliminating miscegenation. The tension between the political and social policies of the French and English pushed the French Canadians into a passive but resilient community and geographical locations along the fur trade routes and rivers. The psychological effects of the father/son relationship developed through French colonialism is a theory that caused tension between identity of self and community. “The sociocultural effects of a prolonged political and economic dependency (Bouchard 38)” was an integral effect on the French Canadians for decades. According to Fanon, in “*Black Skin, White Masks*” internalizing

is detrimental to any population (3). As a result of political and sociocultural conditions of consciousness, melancholy surpassed the troubling of the French Canadians opportunities. Current studies appear to support the notion that historical changes have lasting effects in present-day communities that trace their heredity not to a skin color but to an ancestry. “Racist superstitions” are still interwoven into genetic medicine of the future (Krimsky and Sloan 242). The correlation of this racial concept and current health trends keeps the knowledge of β -thalassemia obscured in America and mythical to believe that mixed raced people in America of French Canadian descent would have the hereditary trait and connect them back to the Quebecois societies. Through a better understanding of the construction of their societies as well as identities, a number of studies have shown that Black Americans are inclusive of the original French Canadians, potentially of Alabama populations, and erasure through historical Anglo American policies and institutional laws.

Current academic research indicates that French Canadians originated in the Lower Louisiana country to include Alabama and migrated to the vicinity of Fort Toulouse from Languedoc France and further from the fort east to the Georgia line in a triangular convention (D. H. Thomas 150). Since little has been written about the correlation between French Canadians and β -thalassemia in the Lower Louisiana country and Alabama, further research and reconstruction of these societies methodologies deserves more attention similar to the Gullah culture off the coastline of South Carolina. A number of scholars has conducted research on the Gullah, an English Creole culture, and provided empirical evidence supporting this community of blacks that has survived

to contemporary times and continue to speak their language of Gullah in South Carolina and Georgia (Schuetz) (Parra, Kittles and Argyropoulos) (Spruill, Leite and Fernandes 152). A recent line of research has focused on the geographic location as a basis for conducting their study to determine the admixture proportions and autosomal markers (Parra, Kittles and Argyropoulos 2001). This research study agrees with the accomplishment of the line of research focus on the Gullah communities. It also argues that to the best of the knowledge obtained, no study has focused on the admixture of French Canadians, a Creole/creole culture, in the Alabama geographic location aforementioned in this study. Little has been written about β -thalassemia and blacks in current research review, and few attempts have been made to investigate the role of blacks and this autosomal recessive disorder. This study agrees that a statistical analysis of the research genetic marker β -thalassemia is significant to identify the proportions inferred from this autosomal marker (Parra, Kittles and Argyropoulos 26) and genetic structure of French Canadians in Alabama, specifically the Ft. Toulouse area of interest in this research.

Current scientific knowledge is available to identify the clinical problem of the Gullahs between diabetes and Lupus (Spruill, Leite and Fernandes 154). Despite the differences of the autosomal recessive disorder between Lupus and Beta Thalassemia, there are areas of agreement. Spruill et.al agrees that the community based research approach between the academic researchers and the community is enriching (151). Scholars have also recognized the method for genealogical reconstruction through research on the “variation in the anterior dentition” of the Gullah (Stojanowski, Paul and

Seidel 127). The anterior dentition are methods that historically during the 1960s and 70s “helped redefine biodistance within a populational perspective” contrary to the racial characters emphasized in racialized medicine of that era (Stojanowski, Paul and Seidel 125). These approaches are effective methods to use for further research of the French Canadian communities of Alabama in order to enlist the communities in the academic research and empower them to engage in social justice for their health issues. This research study argues that the two methods mitigates racial bias in medicine and enlist communities trust in academic research and their health issues being identified for good population health.

The population who potentially migrated east of the Fort Toulouse was French Canadians who are first generation “white” French colonists born in Canada and their descendants (Ekberg and Person, 218) (Waddell 4). The colonists also migrated throughout North America defined as French Créoles. Creole inhabitants who intermingled with the natives and blacks and migrated throughout the United States of America and Canada (Ekberg and Person 218) also might have been part of the fur trade companies that settled and traded with Fort Toulouse in the vicinities. The research revealed that, French men (soldiers and inhabitants of the fort) found Native American wives and mistresses in the Alabama villages located nearby Fort Toulouse and migrated at least 80 miles east (Figure 2.1) towards the British trading territory (Figure 1.3). It is difficult to identify the particular population that migrated east of Fort Toulouse due to lost records from the fort and missing historical census records of Alabama. From reviewed findings and revelations of the literature review and theoretical framework,

research studies reveals that potentially the Echols families are part of the French Canadian ethnicity and communities.

Evidence has supported the claim that French-Canadian American descendants are obscure in some areas in the United States and coming to light in other areas like Illinois, Missouri and New England. The obscure locations in Alabama around the Fort Toulouse area can be recreated through “maps, stories, and place names” (Morrisette 20) by geographical research analysis and oral traditions passed down through the lineages as information of heritage. The author’s grandmother claim to be French Canadian and Cherokee is a valid claim through historical and oral self-identification, determination and preservation of a family heritage. As a result of the data obtained in this research, the principal hypothesis of this research is that all of these communities are quite analogous, mainly due to their geographical locations and in comparative review they inevitably relate closely to the French Canadian community cultural societies and collective health issues. There are several people in the Echols family that has been diagnosed medically with β -thalassemia.

The intermixing of the French Canadians and Native American autochthonous communities did not eliminate the unifying of nationalism (Fanon, *The Wretched of the Earth* 131), but created a hybridity of a collective national unconsciousness. A latent and passive identity was passed down through family stories of heritage and lineage bonding with the communities through kinship and religious values. The emotional intelligence of identity is to self identify with a community in which the Echols communities have portrayed through oral language. According to Rockauemore, Brunisma, and Feagin,

current research seems to indicate that “significant differences exist between ethnic and racial identity” (54). Bi-racial identity is a current definition of the old terms Mulatto or Métis. It does not define the ethnicity of the person or the density of the admixture. As Fanon wrote, “Black is not a man” (Fanon, *Black Skin, White Masks* 1). Definitions of “ethnic identity” and “racial identity” emerging from the research on “sociological factors influencing Biracial identity” (Rockquemore, Brunsma and Feagin 55) include “ethnic identity” and focuses on the individual level of characteristics (ibid).

Rockquemore et al. noted that an “African descended individual is assumed to have a black identity” (ibid). This thesis agrees with the correlation and go on to say not just African descended individuals, but also individuals of creole, Native Americans, Métis and mixed race are included in the structure and group in America. The research helps to understand better how and why social and political constructions also seriously affect the very identity and self-knowledge of communities of mixed race and French-Canadian descendants throughout the Unites States of America. Cultural identity is the strength of the French Canadians consciousness rather than the labeling of a community as a race or ethnicity (Vermette 319). The general picture emerging from the review of thalassemia in American blacks is that American blacks are defined as a race and not culturally an ethnicity such as French Canadian (Pierce, Kurachi and Sofroniadou, 981).

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