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Determining African Birth from Skeletal Remains: A Note on Tooth Mutilation

ABSTRACT

Tooth mutilation existed in sub-Saharan Africa, and was found among slaves transported to the New World. A small number of mutilation cases have been identified in early New World "Negro" skeletons from the Caribbean and Florida. The skeletal evidence alone precludes determining if the individuals were African- or American-born, but limited ethnohistorical data suggested the former. This hypothesis is considerably strengthened by evidence from 18th-century runaway slave advertisements found in the newspapers of five mainland British colonies. Analysis of these ads shows that every runaway who is identified with tooth mutilation came from Africa. This ethnohistorical evidence supports other sets of bioarchaeological and ethnohistorical data that the African custom of tooth mutilation was not generally practiced by Caribbean or North American slaves. Where filed or chipped teeth appear on skeletons "racially" identified as African in New World sites, there is an excellent chance that the individuals were African-born.

Introduction

A major cemetery discovered in 1991 in New York City has generated a great deal of public interest and controversy in New York, and has also attracted considerable attention from the anthropological community (Howson 1992; Howson and Handler 1993; Cook 1993; Harrington 1993; General Services Administration 1993). Containing the earliest and largest number of Africans and their descendants yet discovered in an undisturbed New World site, the Colonial-period cemetery in Lower Manhattan has great potential for shedding light on the biocultural history of Africans in the New World.

The approximately 400 excavated skeletons represent a fraction of the total number of estimated interments. Intensive analysis of the skeletons, scheduled to begin at Howard University in late

1993 or early 1994, will continue for several years. One issue to be addressed with these remains—as it has with slave remains found in other New World sites—is whether individuals had been born in the Americas or in Africa (e.g., Blakey et al. 1993:64–70). The archaeologist or physical anthropologist might be interested in distinguishing between persons of Old World and New World origins or birth—particularly where research is directed to the retention, modification, or loss of African customs in the New World and issues of biocultural change and adaptation. Whatever bioanthropological methods researchers employ to ascertain region or continent of birth, a cultural feature which helps establish if a particular skeleton represents an African-born individual is tooth mutilation—the intentional deformation or alteration of the natural appearance of the teeth.

Tooth Mutilation

Tooth mutilation has been reported from various world regions, including the Pacific and Asia, and among pre-Columbian New World populations (cf. Handler et al. 1982:297). It was also well-known in large parts of sub-Saharan Africa, including the East, Central, South West, West, and Western Central portions, the latter two areas having played crucial roles in the transatlantic slave trade. Tooth mutilation in West and Western Central Africa was practiced on both sexes although it is impossible to quantify the sexual distribution of mutilation from the early ethnographic or travel literature. This literature often does not mention the sex of the persons with mutilation, but sources that do provide such information give the impression that the practice was common among both males and females in some groups, while among others the mutilation was performed chiefly on males. Early European visitors to West Africa, imbued with their own ethnocentric views and naive understandings of African customs, often erroneously associated some forms of mutilated teeth with cannibalism. For Africans, however, tooth mutilation had nothing to do with cannibalism—a prevalent myth Europeans held about African cultures—and was ap-

parently done almost entirely for aesthetic reasons. Sometimes, however, the mutilation also seems to have been linked to group, e.g., clan or "tribal," identification and performed around puberty; in fact, it usually was performed at the onset of puberty or earlier, although it was not necessarily related to rites of passage (e.g., Phillips 1746:213; Thomas 1916:111; Lignitz 1919–1922:884, 917, 920, 935; Talbot 1926:388–423 *passim*; Talbot 1932:171; Rattray 1932:331, 403; Herskovits 1938:289; Milheiros 1952:207; Bohannon 1956; Jones 1983:21n6, 71, 109; Van Reenen 1986).

Considered by Africans themselves as a painful operation, quite a few types or styles of mutilation have been reported. In West Africa these include, for example, "filing or grinding off the angles, so as to bring them to a narrow point" (Duncan 1847, 2:309); "filing the teeth very much down, leaving a wide space between" (Allen and Thomson 1848, 2:297); "filing single teeth to a point like a V" or "filing two teeth into the shape of an inverted V"; cutting teeth "vertically or square"; chipping the four incisors "nearly level with the gums, save for the extremities of the two outside teeth, which are left and are cut vertically"; cutting "to a point . . . the four incisors in the upper jaw"; and "hollowing out a space between the two centre incisors" (cf. Lignitz 1919–1922; Talbot 1926:394, 398, 410; Entwistle 1946; Marshall 1946; Singer 1953). Illustrations of various West, Western Central, and South West African mutilation types/styles are found in, for example, Lignitz (1919–1922:903ff.), Huard and Leriche (1938:660), and Van Reenen (1986:160, 162, 163). Although there were a variety of types or styles of mutilation, they were produced by only a handful of basic methods. The two most common methods of mutilation in West and Western Central Africa were filing or chipping of the occlusal edge of the front teeth, particularly the incisors; a third method, extraction, seems to have been less common although it may have been more frequent in other areas of Africa (Lignitz 1919–1922; Singer 1953:116; Van Reenen 1986).

African slaves transported to the New World, as Stewart and Groome (1968:31–32) suggested some 25 years ago, "not only had a knowledge of . . . tooth mutilation . . . but in some instances

bore in their own teeth examples of the custom." When Stewart and Groome wrote, only five cases of tooth mutilation had been reported in New World individuals identified as "Negro." These individuals were found in several areas of the Caribbean and Florida, but they usually lacked archaeological contexts and were poorly documented. Four of the individuals were assumed to be African-born, but the investigators offered no direct historical or archaeological evidence for their assumption (Stewart 1939; Stewart and Groome 1968). The fifth case involved only a skull, but Ortner (1966), who analyzed it, left open the question of its origin.

Analyses of about 100 slave remains excavated from the Newton plantation cemetery in Barbados during the early 1970s added five more cases of tooth mutilation. (Until superseded by the New York cemetery, with which it is roughly contemporaneous, Newton was the largest and earliest known undisturbed slave cemetery in the New World.) Unlike the five earlier finds, however, the Newton remains were from well-documented and undisturbed archaeological contexts (Handler and Lange 1978; Handler et al. 1982; cf. Corruccini et al. 1982). Although the Newton data offer the largest and earliest single group of skeletons showing signs of tooth mutilation—see Handler et al. (1982) for photos and drawings of the mutilated teeth, neither the physical characteristics of the skeletons nor their associated cultural features could demonstrate with certainty that these individuals had been born in Africa. Despite the discovery of more early African and African-American skeletons in New World sites since publication of the Newton finds, additional cases of tooth mutilation do not seem to have been reported in the literature. However, preliminary field assessments of the New York City skeletons suggest approximately 15 individuals with *modified* teeth (Michael Parrington 1993, *pers. comm.*). When detailed analysis of these individuals is completed, some of the modified teeth may prove to be intentionally mutilated rather than broken by accident or ground by pipe wear resulting from smoking habits (e.g., Handler and Lange 1978:133–135, 165, 232; Handler and Corruccini 1983:84–87).

The considerable likelihood that the Newton tooth mutilation cases were African-born and that tooth mutilation was not practiced in Barbados derives from ethnohistorical data. Some of these data include the absence of any mention of tooth mutilation, including any prohibitions against the practice—such evidence is lacking for other slave societies, as well—in an abundance of conventional printed and manuscript primary sources treating the island's early history and slavery (cf. Handler 1971, 1991; Handler et al. 1982:306). These data also include newspaper advertisements for runaway slaves. A sampling of such advertisements for several years during the second half of the 18th and early 19th century yielded an occasional individual with some form of tooth mutilation. In each case where this characteristic occurs, the individual is identified as being of African birth. For example, the *Barbados Gazette* (1753) reported on the runaway Cuffe, "a Coramantine Negro" with "his fore teeth filed." The *Barbados Mercury* (1787, 1805) yielded a few ads mentioning a "new Negro" whose "teeth are filed" and "speaks little English"; an "African man" with "upper fore teeth filed shorter than the lower"; and another with "filed teeth."

No Barbados newspaper ads have been discovered wherein tooth mutilation—or body scarification, another marker of African birth—is identified with an individual of New World origin; the only references to tooth mutilation occur in contexts indicating that the individuals were born in Africa. Moreover, no other written evidence even suggests or alludes to the practice of tooth mutilation in Barbados. Morphological evidence independently suggests, but cannot confirm, the ethnohistorical reasoning that the mutilation on the Barbados burials was performed in Africa (Handler et al. 1982); in addition, skeletal lead content relative to age also may be a significant sign of African birth (Corruccini et al. 1987).

Occasional references in the secondary literature to runaway advertisements in other New World areas also indicate that tooth mutilation—and body scarification—were only associated with African-born slaves, thus corroborating the Barbados data (e.g., Debien 1966; Brathwaite 1971:202–203;

Mullin 1972:40, 44, 45). Moreover, there is no evidence that Suriname maroons, the most "Africanized" of New World peoples, practiced tooth mutilation (Richard Price 1979, pers. comm.; Price and Price 1980:90). In general, then, a body of ethnohistorical data, although not abundant, leads to the conclusion that where tooth mutilation appears on the skeletal remains of persons "racially" identified as African, these individuals were born in Africa. Furthermore, by inference, tooth mutilation was not practiced by slave populations in the New World and did not appear on creoles, that is, those born in the Americas.

This hypothesis is considerably strengthened by an analysis of a large collection of 18th-century runaway advertisements from weekly newspapers in Georgia, Maryland, Virginia, and North and South Carolina. These five colonies contained the vast majority of the slaves, as a group averaging roughly 82–90 percent of the total black population, in the 13 colonies during the 18th century, as calculated from tables in McCusker and Menard (1985:103, 136, 172, 203). Compiled by Lathan A. Windley (1983), this posthumously published collection comprises the largest number of systematically collected and organized runaway advertisements for any group of New World colonies. The four volumes of *Runaway Slave Advertisements: A Documentary History from the 1730s to 1790* contain full transcriptions of several thousand chronologically-arranged ads. The ads provide an array of valuable data on the physical, cultural, and personal characteristics of thousands of slaves who challenged the slave system by absenting themselves from their masters.

Methods

Each volume was systematically read, and both the number and the sex of the runaways were tabulated. If an advertisement appeared in more than one newspaper only the first listing of the slave was tabulated, and multiple escapes from the same or different masters were not taken into account. Data were recorded on intentional body sacrificia-

TABLE 1
SLAVE RUNAWAYS AND TOOTH MUTILATION

Colony	Years	Runaway Population					Tooth Mutilation Cases				
		Males		Females		Total N	Males		Females		Total N
		N	%	N	%		N	%	N	%	
North Carolina	1751-1790	79	88.	11	12.	90	2	67.	1	33.	3
Virginia	1736-1790	1,364	87.	210	13.	1,574	4	100.	0	0	4
Maryland	1745-1790	1,095	87.	159	13.	1,254	5	100.	0	0	5
South Carolina	1731-1785	2,604	80.	665	20.	3,269	28	85.	5	15.	33
Georgia	1763-1790	1,028	80.	251	20.	1,279	12	80.	3	20.	15
Total		6,170	83.	1,296	17.	7,466	51	85.	9	15.	60

Source: compiled from Windley (1983).

tion, almost always called "country marks" in the ads, and tooth mutilation. Tooth mutilation is identified by such expressions as "teeth filed"—by far the most common descriptive phrase, "sharp teeth," "cut teeth," "teeth filed sharp." In most cases the mutilated teeth are not identified, but in about 22 percent of the cases, the "foreteeth" or "upper foreteeth" are specifically mentioned as "filed," "sharpened," or "pointed."

As noted above, tooth extraction was a third method of mutilation in West Africa although it was less common than filing or chipping. The ads sometimes indicate that the runaways had missing "foreteeth" or "upper teeth." However, it is impossible to tell from the ads themselves whether these missing teeth resulted from intentional mutilation practices or from accidents, natural tooth loss or edentulism, or dentistry to remove diseased or painful teeth. In some cases where missing foreteeth are mentioned, the individuals are identified as African-born. It might be possible for biological anthropologists to detect "human intervention in the pattern of tooth loss" in an archaeologically recovered African skeletal population (Corruccini et al. 1982:447; cf. Handler and Corruccini 1983: 77), but the newspaper ads provide no data on this question. Although some of the tooth loss cases reported in the ads may, in fact, reflect intentional mutilation performed in Africa, tooth loss cases have been excluded from this discussion.

In the identifiable tooth mutilation cases, data

pertaining to place of origin were recorded. With respect to Africa, in 66 percent of the cases specific ethnic or geographical terms were not given, but African origin was inferred from such statements as "a new negro just arrived," "has been in this country for just . . . months," "speaks no English," or "of the same cargo." In about 33 percent of the cases African origin is indicated by a regional or ethnic name, e.g., Guinea/Guiney—the most common term, Angola, Ebo, Calabar, Congo, Gold Coast. In this article, actual place of birth or ethnic group is *not* assumed from such terms, but an African origin is clearly indicated when designations such as the preceding are used by masters to characterize their runaway slaves.

Results

Almost 7,500 runaways were counted in the four volumes. Within this very large sample only 60 individuals were definitely identified with tooth mutilation (Table 1). These 60 individuals, however, constitute a far larger number of runaway cases with tooth mutilation than have been reported in any other colonial historical source or group of sources.

The overwhelming majority (83%) of the total runaway population was male; about 85 percent of the tooth mutilation population also was male. Although females comprised only 15 percent of the

mutilation cases, like the males their proportion was virtually the same (17%) as that of females in the total runaway sample (Table 1). The ethnohistorical data *do not* permit concluding that similar sexual ratios in mutilation cases should be expected in New World cemetery populations. The distribution found in the ads, however, suggests that tooth mutilation can be expected on both sexes—proportions undeterminable—in archaeologically recovered skeletons. At Newton plantation, for example, three probable males and two females comprised the five individuals displaying tooth mutilation. Both the physical and historical data, then, indicate that mutilation was not a sex-linked practice, and this reflects, as noted above, a general pattern in West African cultures. What is more relevant in terms of the present study is that the newspaper ads present clear evidence that all of the 60 individuals with mutilated teeth were slaves who came from Africa. There is no evidence that any individual in the tooth-mutilation sample originated in any area of the New World. Finally, it can be noted that the ads identify 228 individuals with “country marks.” When place of origin is indicated, these individuals are invariably identified as being from Africa, consistent with data from other New World areas (Handler et al. 1982). Approximately 11 percent of the 228 had both “country marks” and mutilated teeth; the latter cases are included in the overall sample of mutilated teeth (Table 1).

Conclusion

Evidence from a large number of 18th-century newspaper advertisements in the British mainland colonies shows that every runaway identified with tooth mutilation came from Africa, and that tooth mutilation was not a sex-linked practice. The ethnohistorical evidence supports and corroborates other data that the African custom of tooth mutilation was not generally practiced in the slave societies of the Caribbean or North American mainland.

However, some qualifications to the above conclusion are required. An earlier article on tooth mutilation (Handler et al. 1982:308) took note of the work of Fernando Ortiz, the Cuban anthropol-

ogist. In the early 20th century he reported what appeared to be a rather exceptional situation, affording the one clear example of tooth mutilation in a Caribbean society (Ortiz 1929). Ortiz reported that mutilation, characteristically involving point filing, was then practiced in Cuba primarily by some of the descendants of slaves originating in the Calabar region of southeastern Nigeria. In Cuba, the mutilation was associated with initiation rites of a secret society. Ortiz did not provide data on whether the practice had existed during the slave period; however, Handler et al. (1982:308) speculated that tooth mutilation in Cuba could have been a relatively recent introduction because the slave trade to the island continued, albeit in attenuated form, as late as the 1880s.

After the present paper had been accepted for publication, David Watters (1993, pers. comm.) drew my attention to two publications of which I had been unaware. In one of these, Rivero de la Calle (1973) discusses an archaeologically recovered “negroid skull” in Cuba which shows signs of tooth mutilation. However, the parts of his paper most relevant to the present discussion relate to the actual practice of tooth mutilation in Cuba. Rivero de la Calle refers to historical materials which show that mutilation was practiced in Cuba at least from the late 18th and early 19th century, primarily, but not solely, among peoples whose ancestors, according to contemporary writers, came from the Calabar region. In addition, Rivero de la Calle supplies evidence, including independent reports corroborating Ortiz’s findings, for chipped and filed teeth among Afro-Cubans during the late 19th and early 20th centuries. In fact, Rivero de la Calle relates a personal communication from a Cuban dental surgeon who, as late as 1950, had examined a patient upon whom dental mutilation had been practiced with small chisels (Rivero de la Calle 1973:4, 9, 16–17, 18, 19–20).

Aside from the Cuban evidence, some indication also exists that tooth filing has been practiced in modern times by some people of African descent in the province of San Cristóbal in the Dominican Republic. Only a photograph and its caption in an article by Peguero Guzmán (1989:177) provides this information. No details are given.

Thus, the practice of tooth mutilation apparently disappeared among most populations of African birth or descent in the Caribbean and North American mainland. Investigators who discover the remains of persons of identifiable African ancestry showing signs of tooth mutilation can conclude with a certain degree of confidence that such persons were born in Africa and not in the New World. Investigators should be aware, however, of possible exceptions, as exemplified by the evidence from Cuba and, perhaps, the Dominican Republic.

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