

A Century of Snatching Grave Robbing in Kingston, Ontario

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Article abstract

This paper examines nineteenth-century body snatching in Kingston, Ontario, focusing on the roles of the medical students, the local medical profession, and community reactions. Drawing primarily on newspapers and documents from the Queen's University Medical Faculty and the Kingston General Hospital, this chronological and thematic analysis explores the socio-medical evolution of the practice. The results invite reconsideration of earlier body snatching narratives in Canada.

A Century of Snatching

Grave Robbing in Kingston, Ontario*

By Scott Belyea

Abstract

This paper examines nineteenth-century body snatching in Kingston, Ontario, focusing on the roles of the medical students, the local medical profession, and community reactions. Drawing primarily on newspapers and documents from the Queen's University Medical Faculty and the Kingston General Hospital, this chronological and thematic analysis explores the socio-medical evolution of the practice. The results invite reconsideration of earlier body snatching narratives in Canada.

Résumé: Dans cet essai, nous examinons le trafic de cadavres au 19e siècle à Kingston, en Ontario, en nous concentrant particulièrement sur les rôles joués par les étudiants de médecine et les médecins locaux, ainsi que sur les réactions de la communauté. Puisant surtout dans des journaux et des documents provenant de la Faculté de Médecine à l'Université Queen's et de l'hôpital général de Kingston, cette analyse thématique et chronologique explore l'évolution socio-médicale de ce genre d'activité. Les conclusions qui en découlent invitent à remettre en question les études précédentes sur le trafic de cadavres au Canada.



With the 1828 exposure of William Burke and William Hare as entrepreneurial murderers in Edinburgh, uncomfortable questions were soon asked about the mysterious sources of bodies for dissection. The same concerns soon traversed the Atlantic, but in Canada with its moderate population and solo infant medical school in Montreal, body-snatching reports served mostly as entertainment. Heated discussion of the nation's cadaveric requirements for anatomical education would wait until it was triggered by local incidents.

Grave robbing has been investigated most thoroughly in the United Kingdom, often recapitulating the enticing Burke and Hare narrative as an introduction to exploring the practice's social and

* I would like to gratefully thank Dr. Jacalyn Duffin for her mentorship, direction, and support as well as the staff at the Queen's University Archives.

legal contexts.¹ The history of American body snatching has focused on the roles of anatomy and dissection in the development of the medical field.² In Canada, most scholarly work has focused on Ontario and Quebec. Montreal has garnered the most attention, with its rich socio-medical history and notorious Côtés des Neiges hilltop cemetery from which, according to Francis Shepherd, medical students and their exhumed “friends” often tobogganed down the winter slopes. Sylvio Leblond and D.G. Lawrence also cite many colourful Quebec examples of body snatching, collectively positioning Montreal as Canada’s grave robbing capital.³

Comparably little research addresses Ontario, with the exception of a 1988 article by Royce MacGillivray.⁴ Cited by almost all Canadian historians of the

topic, MacGillivray analyzed incidents from across the province and proposed dividing Ontario into “body snatching regions” based on duration of the practice: the southwest near Toronto ended earliest, followed by Kingston, then eastern Ontario with nearby Quebec’s influence lasting longest. He recommended that his geographic and chronologic hypothesis be tested by examining the Kingston area.⁴ To date, no one has undertaken this project. This paper aims to answer to the challenge by chronologically and thematically tracing the rise and fall of grave robbing in the Kingston region and setting it within the context of the practice’s Canadian history.⁵

The Queen’s University Archives supplied most sources for this work, including local newspaper reports, the

¹ Ruth Richardson examines the impact of body snatching on English society in *Death, Dissection and the Destitute*. 2nd Ed. Chicago: University of Chicago Press. 2000. An earlier account of the practice is found in James Moores Ball, *The Sack-‘Em-Up Men: An Account of the Rise and Fall of the Modern Resurrectionists*. Edinburgh: Oliver and Boyd. 1928. See also Julia Bess Frank, “Body Snatching: A Grave Medical Problem” *Yale Journal of Biology and Medicine*. 49 (1976): 399-410.

² For American grave robbing shaping medical culture see Michael Sappol, *A Traffic of Dead Bodies: Anatomy and Embodied Social Identity in Nineteenth-Century America*. Princeton: Princeton University Press. 2002. John Harley Warner and James M. Edmonson present a window into nineteenth-century medical culture through dissection photographs in *Dissection: Photographs of a rite of Passage in American Medicine, 1880-1930*. New York: Blast Books. 2009. As well, see Suzanne M. Shultz, *Body Snatching: Grave Robbing for the Education of Physicians in Nineteenth Century America* (Jefferson: MacFarland and Company, 1992). Racial factors of grave robbing are explored in David Humphrey, “Dissection and Discrimination: The Social Origins of Cadavers in America 1760-1915.” *Bull NY Acad. Med.*, 49:9 (Sept. 1973), 819–27.

³ For his experiences as a Canadian medical student see Francis J. Shepherd, *Reminiscences of Student Days and Dissecting Room* (Montreal: Privately Printed, 1919): 24-25. On Quebec, see Sylvio Leblond, “Anatomistes et résurrectionnistes au Canada, et plus particulièrement dans la province de Québec.” *Canadian Medical Association Journal*, 95 (1966), 1247-51; also D.G. Lawrence, ““Resurrection” and legislation on body-snatching in relation to the Anatomy Act in the province of Québec,” *Canadian Bulletin of Medical History*, 32 (1958), 421-22. For Ontario, see Royce MacGillivray, “Body Snatching in Ontario,” *Canadian Bulletin of Medical History*, 5 (1988), 51-60.

⁴ MacGillivray, “Body Snatching in Ontario,” 51-60.

⁵ For more Kingston cases see Scott Belyea “A Century of Body Snatching: A History of Cadaver-Acquisition in Kingston, Ontario from 1820-1920”, Master’s Thesis, Queen’s University, 2012.

records of the Queen's Faculty of Medicine, Kingston General Hospital, Kingston Penitentiary, and local cemeteries. Professional journals contemporary with the events were also consulted. These sources were used to trace the evolution of the region's medical education and social attitudes towards grave robbing for anatomical instruction.

Early Years

Prior to the establishment of a medical college, Kingston, Ontario depended on foreign-trained physicians and those who had completed local apprenticeships. The apprenticeship system provided many advantages, including a more intimate, practical education, but it lacked institutional instruction, such as dissection, considered a pillar of nineteenth-century medicine, that required pupils and mentors to work creatively to find cadavers. The city's first extant record of grave robbing, assumed to be the work of medical men or their proxies, was from 1822. A man fell off a boat, drowned, and was buried on a farm; days later his exhumed body was found covered by tree boughs in an apparent attempt to hide it. The corpse was reburied and seems to have remained underground.⁶

More than a decade later, in 1834, the city's *British Whig* newspaper printed a story of how a Montreal man had been

feeding human remains to his dogs.⁷ The following year, in what might have been the first explicit case of legislative anatomization, convicted murderer Robert Watson was hanged and the judge ordered his remains to be turned over to "the medical gentlemen" for dissection. However, the physicians unanimously agreed that the body should not be dissected but returned to the man's grateful family.⁸ Their decision implies that the city's demand for cadavers was so meagre that available ones could be given back. This evidence of transferring unclaimed bodies from public institutions to the dissection room mirrored contemporary British practice and predated Canadian legislation to formalize the process. The informal arrangement between the judicial and medical communities may have been mutually beneficial; the former could use the threat of dissection's indignities to discourage crime, while health care educators had a supply of bodies.⁹

The legal means to obtain anatomical material was established in 1843 through the Legislative Assembly of the Province of Canada after solicitation by the Medical Board of Montreal to legitimize what was already occurring: the use of unclaimed remains for anatomy.¹⁰ The new law identified appropriate cadaveric acquisition practices and, by extension, inappropriate ones, in particular grave

⁶ *Kingston Chronicle*, 23 August 1822, p. 3, column 2.

⁷ *British Whig*, 29 April 1834, p. 2, column 5.

⁸ *Kingston Chronicle*, 10 November 1835, p. 3, column 5.

⁹ Shultz, *Body Snatching*, 8.

¹⁰ 1843 Provincial Statutes of Canada. *An Act to Regulate and Facilitate the Study of Anatomy*. 7 Vict., Cap 4-5. Kingston: Stewart Derbishire and George Desbarats.

robbing. Political involvement suggests a certain prevalence or prominence of body snatching in the public conscience.

With the founding of the Queen's Medical School in 1854, the number of grave robbing incidents reported in the newspapers began to increase modestly to a few events each year. The remains of Arthur Thompson were "clandestinely" transported from the Kingston General Hospital to the dissection table, where they were discovered by friends and reburied, only to be exhumed the same evening by unknown persons.¹¹ Months later, a mysterious container with mutilated human remains was taken from the river at Mirickville, later Merrickville; however, Dr. Thibodo, a local medical authority, refuted the idea that the disfigurement was work of the students, claiming that it was inconsistent with medical dissection.¹² From the earliest cases, the city's medical students were assumed to be guilty of any suspicious activities involving grave disturbances or misplaced cadavers.

As reports of the practice grew, the public became increasingly vigilant and corpses became more difficult to obtain. The increased demand from the School's growth meant cadavers had to come from further afield, beyond the city limits, and the realm of resurrections extended to Wolfe Island, only five kilometers offshore. The islanders shared

the town's fears and suspicions of medical students and erected solid vaults to house their dead during the winter. Thick stone walls, a "heavy door and impressive locks thwarted thieves" in the Anglican and United parishes; no successful island thefts are known.¹³ This geographic expansion of grave robbing contributed to a perception, exacerbated by local newspapers, of medical men scouring the countryside for the recently deceased. Any regional or distant news related to body snatching was reprinted. A convict in Welland sold his body to anatomists to collect the money before his death.¹⁴ New York boasted of upwards of 500 unclaimed bodies annually, prompting comparisons of regional availabilities.¹⁵ Numerous reprinted reports from elsewhere provoked a fear of grave robbing and resentment of the town's medical students.

By the 1860s, locally-reported incidents had increased, prompting more public expressions of concern and practical preventive measures; residents called for legislative and social reform and protected graves immediately following a burial. Those who could afford deterrents used them—winter burial vaults and the practice of employing someone to stay graveside until the body was sufficiently decomposed. Other prevention techniques also began to emerge like heavy stones manoeuvred atop the grave,

¹¹ *British Whig*, 7 February 1855, p. 2, column 5.

¹² *Mirickville Chronicle*, 14 June 1856, 2.

¹³ Trinity Church Cemetery Vault Plaque. Image © Scott E. Belyea.

¹⁴ *British Whig*, 6 June 1859, p. 2, column 4.

¹⁵ *New York Times*, 24 November 1858.

particularly in rural locations where supervision was impractical. But even that measure was ineffective. In 1903, local stonemasons re-buried a body that had been exhumed and taken to the medical school; they placed it under a large stone slab, but students dug around the impediment and retook the body.¹⁶

In 1870, Thomas McWaters discovered mutilated remains on his farm and the coroner concluded that the body had been dissected by medical students. The subject was identified as the recently-buried Timothy Horrigan and “that night the box was removed to a barn close by and watched by McWaters and a neighbor with loaded guns. But nobody came, though a pig and cow wandered in and was [sic] shot at, the pig paying the forfeit of his life for his indiscretion.”¹⁷ After two nights of guarding the body, McWaters and his watch party visited a local tavern and returned to find the body had disappeared. The article’s title captures public sentiments: “Who Lost a Corpse?”

Some body-snatching cases were more chilling than others. An 1871 article entitled “Whose Corpse Is Missing This Time?” described how the body of a Kingston prison inmate who had committed suicide was hauled into the medical school;¹⁸ another in 1872 detailed an investigation into a decapitated corpse

that mysteriously disappeared part way through the inquiry.¹⁹ When the body of a Tweed resident was exhumed, the intestines were left by the grave; this peculiarity, inconsistent with educational dissections, meant local villagers, rather than medical students, were suspected.²⁰ Students may have disembowelled the body to avoid suspicion, and little evidence suggests those without ties to the medical community significantly contributed body snatching in the region.

On occasion, skills acquired in anatomy translated into spheres beyond the dissection room. Dr. Michael Sullivan entered Queen’s inaugural medical class of 1854, later to become the Chair of Anatomy and a federal Senator. In 1879, he was asked to embalm the body of the late Bishop O’Brien, to make it presentable for the funeral, which was delayed to facilitate those coming from afar. In a letter to the editor of the *British Whig*, Sullivan explained how the request came too late and decomposition had already begun.²¹ This instance reveals how a respected member of the medical community was tasked with undertaking, bringing anatomical techniques from the medical to public realm. It also hints body preparation was the responsibility of the student or professor, as opposed to a lab technician, a position that did not yet exist.

¹⁶ An example of stones used as deterrents is found in the Diary of Thomas Dick. I-D-4 MU 840. 4 January 1867. Ontario Archives, Toronto. For the stone masons’ article see *British Whig*, 16 March 1903.

¹⁷ *British Whig*, 28 November 1870, p. 2, columns 1 and 2.

¹⁸ *Ibid.*, 25 January 1871, p. 2, columns 1 and 2.

¹⁹ *Ibid.*, 9 March 1872.

²⁰ *Ibid.*, 14 June 1877, p. 2, column 3.

²¹ *Ibid.*, 5 August 1879, p. 2, column 2.

The closest role to the technician of today would have been that of janitor. Kingston's Thomas Coffey held that position for twenty-five years, during which he never "lost a body," ensuring students had their subjects; yet no records describe him assisting with preparations or dissections.²² The explicit mention of this individual directly connected to the shady body supply, whose role was legitimized by association with the medical school, represents the awkward space between necessity and illegality occupied by obtaining cadavers.

The 1880s

In the 1880s, reports of body snatching were most frequent and communities took collective steps to thwart it, adding to the efforts of individuals. The *Tamworth Echo* reported on how residents resolved to eliminate it in their area, targeting the frequently-disturbed hamlet of Clark's Mills.²³ At a town hall meeting in Prescott, the people went further; they offered "a reward of fifty-dollars for the apprehension of any person or persons engaged in such heinous business."²⁴ At whom this measure was directed or if the reward was ever collected is unknown, but these initiatives prove the seriousness of the issue at the grassroots level.

During this time of reporting preva-

lence and social concern, families continued to keep the bodies of loved ones in winter burial vaults, choosing sites for efficacy over proximity. Certain vaults were deemed safer than others, resulting in an uneven distribution of bodies in the region. The body of an Inverary woman was intentionally transported to the Sydenham vault, rather than the closer but more susceptible Sand Hill vault.²⁵ Stockpiling of bodies in some vaults may have tempted body snatchers, but the buildings usually proved to be an effective preventative strategy, where the population density and wealth allowed for such a structure. Over time, some vaults were fortified and updated, while others required maintenance. For example, thieves broke the heavy lock of a previously-safe vault in Odessa's Wilton Cemetery and stole two bodies. A month later, the vault sported a new iron door with four locks and it seems to have fared better after these upgrades.²⁶

Despite the frozen ground, not all winter deaths resulted in vault-use. Grave robbing reports suggest that winter burials were more common in rural locations, where vault-accessibility was limited. In 1886 at Brewer's Mills, approximately 25 kilometres northeast of Kingston, two men took care to bury William Moore under a manse window. Then they piled

²² *Queen's University Journal*, 17 October 1904, 31.

²³ *Tamworth Echo*, 22 March 1880.

²⁴ Minutes of Prescott Town Council. David Dee Fonds, Box 4, File 22. Queen's University Archives, Kingston.

²⁵ *British Whig*, 28 January 1886, p. 4, column 5.

²⁶ *Ibid.*, 19 February 1884, p. 2, column 3. For the upgrades article see *British Whig*, 12 March 1884, p. 3, column 2.

snow, water, and ice atop the grave in an unsuccessful attempt to deter resurrectionists.²⁷

Men guarding the graves presented significant hurdles for the students and their agents, but a combination of cunning and deceit coerced unsuspecting sentries to give up a body. A man named Asselstine approached Mr. Perry, grave protector of John Chatterson, town criner of Violet hamlet, claiming to be the brother of the deceased's son-in-law. Citing his fear of body snatchers, Asselstine inquired about body's safety and received reassurances; however, his emotional convictions persuaded Mr. Perry that body snatchers would resort to desperate measures, including gunpowder and dynamite, to extract a body. Arrangements were made for the corpse to be removed from the vault later that evening and it was quietly ushered away. The next day the hoax was revealed.²⁸ Notwithstanding Asselstine's threats, no evidence suggests explosives were ever used and the detail may have been fabricated by the newspaper.

In the 1880s, the students seem to have become more brazen as their attempts to take bodies left the graves in tampered states; perhaps the destruction was deliberate retribution for the public's resentment or the perceived anonymity of snatchings provided cover. The thieves must have picked the wrong grave in October 1886 when the partially

decomposed body of Thomas Redmond was exhumed from Kingston's St. Mary's Catholic burial ground. Once the decay was identified, work was abandoned leaving the sprawling remains to be found by ladies the following morning: "The act is about the most disgraceful that has ever been perpetrated in this locality, and no pains should be spared in tracing up the guilty persons and having them punished to the full extent of the law."²⁹ Despite the call for action, little effort seems to have been made to catch and punish the snatchers.

One of the most publicized body snatching scandals in Kingston's history pertained to a vault break-in at the Pine Grove Cemetery before Hallowe'en 1888. The city's two main newspapers printed a combined total of nine articles on the story; gossipy details suggested that the bodies had been targeted, as only two of the six cadavers had been taken from the vault and police suspected inside knowledge of the lock's inner workings. Later, a mob of more than a hundred resisted the authorities in their efforts to find the culprits. They searched the medical school, discovered the partially-dissected bodies, and faculty were thought to be involved.³⁰

Late in the decade, an article described how immature students who robbed graves flaunted their disrespect with gruesome stories of the dissecting room. The report was followed by a dis-

²⁷ *Ibid.*, 13 December 1886, p. 8, column 1.

²⁸ *Ibid.*, 20 December 1884, p. 5, column 3.

²⁹ *Kingston Daily News*, 11 October 1886, p. 4, column 2.

³⁰ *British Whig*, 22 October 1888.

cussion of practical anatomy's morality: "The custom [of body snatching] appears almost in a character of necessary evil. It is hard to defend it absolutely; it is equally hard to condemn it outright, and no one will admit this more readily than the conscientious medical student".³¹ By positioning grave robbing as an educational requirement, this report ignored the failing efforts of the legal system to enhance the supply. A belief that the practice was necessary had arisen; despite the protests, it had become locally engrained and almost inevitable. A speculative account reasoned that a quarter of the town's 200 medical students needed dissection material, the number of required bodies was estimated to be 30 to 40 a year.³² Considering the official population of Kingston was a modest 14,100 in 1881 and only a handful of bodies trickled in from legitimate sources, the difference had to be supplemented locally and from neighbouring villages.³³

To address growing grave robbing concerns, provincial legislation was introduced in 1885, but it encountered fierce opposition. The time limit for a body to be claimed post-mortem increased from 24 to 48 hours, but the change was revoked in 1889.³⁴ Polarized opinions between the medical community and social interest groups resulted in weak legisla-

tion, which failed to bring about change. Medical educators pushed for a loosening of the terms required to acquire a body, while religious and benevolent groups cited moral arguments for protecting society's less-fortunate. The conflicting viewpoints remained unreconciled and the debate shifted to the law's wording, which allowed "bona fide friends" of the deceased to claim a body. Physicians felt the terminology was too vague and that benevolent groups were taking advantage of the Bill to collect bodies to which they had no right in order to provide decent burials.

Another factor that contributed to the increased number of cadaveric thefts reported during this decade was the presence of the Women's Medical College (WMC) at Kingston, formed in 1883. With significant cross-appointment from the male school's faculty, the college graduated 34 women before it closed in 1893, in view of a women's school in Toronto and the opening of another at Bishop's College, in Quebec. More students undoubtedly added to the city's pressure for cadavers.³⁵

The WMC first occupied a portion of City Hall, and pupils dissected under its central dome, bringing anatomy literally and figuratively into the public sphere. When the faculty explored op-

³¹ *Daily News*, 29 October 1888, p. 2, column 1.

³² Annual Calendars. David Dee Fonds, Box 3, File 15. Queen's University Archives, Kingston.

³³ 1881 Census of Canada, 1880-81. Volume 1. Ottawa: Government of Canada. 1882.

³⁴ 1885 Statutes of Ontario. *An Act Respecting the Study of Anatomy*. 48 Vict., Chap.31. Toronto: John Notman.

³⁵ For a history of the Women's Medical College at Kingston see A.A. Travill's *Women's Medical College (Kingston): history* (Queen's University, 1980).

tions to bring the school closer to Queen's University and away from downtown by renting a public building bordering residential areas, at least one neighbour voiced a strong opinion.

The very thought of a Medical School... with all the other generally disgusting matters connected with Medical Schools is as absurd as it is offensive... We could conceive of a Law School or Theological School, or any kind of a Common School asking for accommodations in such a place, but a Medical School, whew! that is altogether too preposterous.³⁶

Despite the flamboyant protest, WMC completed its move.

Like WMC, the Queen's Medical School also occupied a variety of buildings about town before finding a permanent location. Originally located on the second story above a downtown shop, then in the East Wing of the Summerhill Manor, by 1860 it occupied the first purpose-built building on the Queen's campus. In 1866, the Medical School dissociated from the University, to become the Royal College of Physicians and Surgeons at Kingston, known as 'the Royal'. A reincarnation of the former Queen's Medical School, the new institution moved to another downtown location, only to later be invited back to the Queen's campus and reintegrated in 1892. The medical school's at times vagabond-nature fur-

thered the public's perception of being surrounded by anatomy, dissection, and bodies.³⁷

Montreal's smallpox epidemic of 1885 also contributed to the expansion of body snatching in eastern Ontario. Somewhat distant geographically, Montreal's corpses were used for local anatomical education, but were also trafficked to American medical schools. A *New York Times* article explained how Quebec's smallpox outbreak resulted in hesitation to use its cadavers.³⁸ With its proximity to the American border, Kingston would have become another logical source from which to obtain dissecting material. Further research to determine the extent of these transnational cadaveric shipments would be beneficial.

Post-1880s

In 1891, following a life in Ontario politics, the body of former Glengarry County MP Patrick Purcell was unearthed for vengeance rather than anatomy; instead of being dissected, it was sunk in the river.³⁹ The buzz generated by the high profile case provoked a debate on body snatching in the Senate. Dr. Michael Sullivan, the aforementioned physician-senator, argued against legislation which would punish body snatching, while Dr. Donald McMillan, also a physician, claimed the opposite.⁴⁰ Acknowled-

³⁶ *British Whig*, 23 July 1883, p. 1, column 3.

³⁷ Anthony A. Travill, *Medicine at Queen's: A Peculiarly Happy Relationship* (The Faculty of Medicine at Queen's University: The Hannah Institute of Medicine, 1988), 76-96.

³⁸ *New York Times*, 10 January 1886.

³⁹ MacGillivray, *Body Snatching*, 56.

⁴⁰ MacGillivray, Royce and Ewan Ross. *A History of Glengarry* (Belleville: Mika Publishing Company 1979), 56.



Assembling a Skeleton: Queen's University students prepare a skeleton off-campus. Notice the man on the far right has the Queen's 'Q' on his shirt. Date unknown. (Queen's University Picture Collection. "Faculty of Medicine". Locator V28 Cl-Med. Queen's University Archives, Kingston, Ontario.)

edging the immorality of grave robbing, Sullivan maintained that students had the right to provide their own dissection material when their institutions failed to do so. Despite his efforts, in 1892 those convicted of body snatching could be imprisoned for three to ten years and fined between \$2,000 and \$5,000.⁴¹

Punishments for body snatching may have been severe, but only one person, a student, is known to have been jailed for the offence. James Hutton was incarcerated for two weeks because he was

caught in the act while two colleagues escaped.⁴² No fine was mentioned. The light sentence suggests an unwillingness to severely punish students who robbed graves, based on the realization that if future doctors could not dissect because of a body shortage generated by legal failure, it was ultimately society's fault and a detriment to its future.

The number of body snatching reports declined during early 1890s following the calamity of the previous decade. One factor influencing the change was

⁴¹ 1891 Debates from the Senate of Canada. *An Act for the punishment of the offence generally termed "Body Snatching."* Honourable Mr. McMillan. 1st Session. 7th Parliament. 54 Vict. 1891. Ottawa.

⁴² *British Whig*, 26 March 1903.

an 1892 announcement by the Queen's medical faculty that each student would dissect only half a body, in accordance with the new Ontario Medical Council requirements. The conditions were decreased from a full body and were justified because little was to be gained from repeating the exercise on the cadaver's opposite side.⁴³ Kingston's medical leaders, claiming repetitive dissection was useful, strongly opposed the decision, but to little effect. The new policy appears to have addressed grave robbing rather than education, but had the intended effect of decreasing the need for bodies.

As the novelty of the rules subsided, the number of reported resurrections again grew, although not to previous levels. Following a theft in 1895, St. Mary's Cemetery boasted that it had the first instance of grave robbing in its history. But the cemetery's claim was not true; it had been unsuccessfully targeted years earlier and the confident statement concerning its security does not match the reports concerning other Kingston graveyards. The use of an otherwise negative incident to positive effect speaks to the commonality of the practice.⁴⁴

By the mid-1890s, the city's body shortage had become chronic, despite the recent provincial and medical legislation, and generated an atmosphere of professional desperation. As the medical school officially supplied the dissec-

tion material, the faculty were ultimately responsible for it and felt the deficiency most acutely. The Queen's faculty minute book entry on 19 October 1895 revealed its concerns and attempts to provide bodies for the students.

The Secretary was instructed to find out the law regarding the matter [of cadaver acquisition] and he and the Principal were requested to ascertain the names of the Inspectors of Anatomy in Ontario east of Cobourg.

Dr. Campbell was requested to go to Belleville and interview Drs. Gibson and McColl, the Inspector of Anatomy and the Coroner and make the best arrangement possible for obtaining material from that section.

Dr. Anglin was requested to write to Dr. J.V. Anglin [his brother] regarding the [obtaining of] material from Montreal.

Dr. W.G. Connell was requested to write to Dr. Hart of Prescott on the same subject.

Drs. Ryan & Campbell were appointed to endeavor to secure material at once.

The Secretary was requested to see that the local Press notify the Public that the Faculty provides dissecting material in the manner provided by law and have taken steps to prevent the occurrence of scenes such as took place in connection with the body of the late Mr. Nelson.⁴⁵

As demonstrated by the first line of the notes, the faculty members did not know the legal framework within which they should have been functioning, prov-

⁴³ *Ibid.*, 4 October 1882, p. 1, column 8.

⁴⁴ A previously unsuccessful attempt is found in *British Whig*, 5 November 1888, p. 4, column 2. For the successful attempt see *British Whig*, 2 May 1895, p. 5, column 6.

⁴⁵ Queen's Faculty of Medicine Minute Book, 19 October 1895, p. 57. Queen's University Archives, Kingston.

ing their actions were independent of the legislation. Resorting to personal and professional contacts to find dissection material illustrates the extent to which the body shortage affected the school. The urgency is clear, and Drs. Ryan and Campbell were probably successful in their quest to obtain bodies *at once* for within two weeks, two bodies were resurrected.⁴⁶ Even the minute book's final claim that the public should be informed of the legality of the faculty's business seems questionable given the doctors' admitted uncertainty of the law.

As cases of grave robbing reported in the newspapers rose and fell, the Queen's arts and theology faculties emphasized the distinction between their actions and those of medical students. Attempts to distance themselves from the perceived indecent and insensitive methods of the medicos resulted in reputation-saving editorials highlighting their differences.⁴⁷ Muddying the divisions between faculties, during its time as the Royal, the medical school rented a building from the university. While the arts and theology faculties may not have appreciated the medical men's antics, Queen's continued willingness to rent out its premises implies the inconvenient associations must not have outweighed the income.

Just as the other faculties dissociated themselves from the medical men, so too did the Medical Faculty from its students. After grave robbing incidents

which garnered public attention, the Medical Faculty repeatedly condemned its students, suggesting they were body snatching for sport rather than of necessity and that it was "beneath the dignity of the college to depend on its students for maintenance."⁴⁸ While criticizing yet abetting the students, these public chastisements attempted to mitigate an already tarnished public image, but had little effect on the pupils. After one such reprimand, three bodies were taken in the following four days, from three separate cemeteries. All were assumed to have made their way to a dissection table. Apparently the students took little heed of the faculty's warnings; in fact, they may have been enticed by them.

An Alternative View

The reports of all local body snatching incidents in Kingston's newspapers were isolated into single cases and graphed by month as seen in Figure 1.

The majority of the attempts in fall and winter suggest a seasonal nature to the activity. The trend closely mirrors the students' academic year and has practical implications as well. Given the cooler months slowed the cadavers' decay, by acquiring and studying during this time, students maximized their learning before their subjects became unusable. Prior to preservation and embalming improvements in the 1890s and 1900s, students would have been aware of the dissection's

⁴⁶ *British Whig*, 7 November 1895, p. 1, columns 3 and 4.

⁴⁷ An example of an article which distanced the other faculties from the medical one is from the *Gazette Reporter*, 10 November 1888, p. 3 column 2.

⁴⁸ *British Whig*, 3 February 1885, p. 2, column 2.

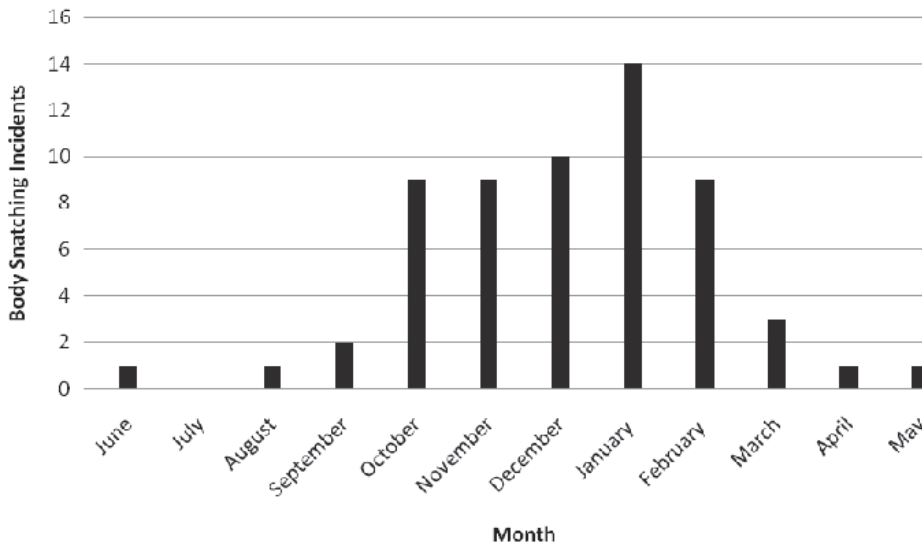


Figure 1. All Reported Kingston Body Snatching Attempts by Month. The number of local attempts, both successful and unsuccessful, ever reported in Kingston newspapers. Reports of bodies being transported, suspicious activities, *Queen's College Journal* references, professional journals, and KGH documents have been excluded. Multiple articles on the same thefts have been counted once.

pace and cadaver's decomposition as limitations on their education.⁴⁹

Kingston General Hospital

Since Kingston General Hospital (KGH) was the interface between medical and public worlds and most unclaimed bodies were processed there, it was the natural setting for the body snatching debate and its practical repercussions. As the issue grew in prominence through the 1880s, compounded by fluctuating legislation, social groups continued to claim bodies and the editor of the *Canada Lancet* echoed local feelings:

Heretofore, the permission given to 'bona fide friends' to claim them has been sadly

abused—50 or 60% of these bodies being sometimes claimed by friends of a bogus kind, e.g. by fellow member of societies to which the deceased might have belonged, and often only by fellow countrymen; or by anyone indeed; even a hospital nurse....⁵⁰

Kingston's medical men could do little to intervene, despite their frustrations.

In one newspaper article, a local physician was asked why students did not purchase bodies. Ignoring the fact that even purchased bodies required an origin, he blamed the charitable organizations: "...of late, the Salvation Army claimed the body of nearly every pauper that died. If the Army would refrain from doing this, very few cases of grave-robbing would be heard of".⁵¹ The unknown phy-

⁴⁹ Shultz, *Body Snatching*, 90.

⁵⁰ *Canada Lancet*, 21:8 (April 1889), 249.

⁵¹ *Daily News*, 25 January 1890.

sician seems to have been familiar with the records from the KGH *Death Book*, which logged cause of death and other details, including the corpse's claimants. In 1886 alone, the following societies took custody of bodies: Foundrymen, Orphan's Home, Masons, Knights of Labour, Ladies of St. George's Society, and the Salvation Army.⁵² Herein lay the physicians' displeasure of the benevolent groups' paradoxical and hypocritical actions—claiming bodies, which could otherwise be turned over to anatomy, while criticizing the students for a problem, the legal solution to which they were eliminating.

KGH's deceased sometimes disappeared without a trace, leaving members of the staff perplexed. In these cases, few questions were asked about the cadaver's presumed destination, the dissection table. Family members or affiliated groups usually requested and collected the cadaver, but sometimes bodies were absconded with illegitimately, before they could be repossessed from the hospital. One *Death Book* entry was euphemistically candid about William Proctor's cadaveric destiny: "delivered for anatomy (been stolen)."⁵³ In the 1870s alone, the *Death Book* reveals four documented instances of bodies being removed without permission, suggesting the students took advantage of the institutional ties and ge-

ographic proximity between the hospital and medical school.

The valedictory address was an opportunity to bring issues of importance to the attention of the medical faculty; to thank the professors for their patience, Kingstonians for their hospitality and their daughters, and to recommend improvement. During the 1880s, KGH often became the recipient of criticism. The number of medical students in Kingston had swollen since the inception of both institutions, placing new demands on learning, observation, and patient interaction; the hospital's wards were crowded with students. At times, the school's expanding needs created friction between it and KGH, and the pupils were forthright in identifying perceived shortcomings of either organization. In the 1887 valedictory speech, the hospital was criticized for its overall condition and lack of quality surgical instruments.⁵⁴ The hospital's board of governors' rebuttal was printed in the *British Whig* and reprinted in the *Queen's College Journal*:

...the question has been repeatedly debated at the Board, when students have been unruly, stolen dead bodies, and otherwise misbehaved themselves, and the only reason why the counsel of the older heads, to cut off the students, has not been followed, has been the desire to help the [school].⁵⁵

Calmness usually prevailed, but occa-

⁵² Kingston General Hospital Collection. *Death Book*. "1865-1903 Patient Records and Registration—List of Patients who have died in the hospital with disposal of their bodies". 1886. Queen's University Archives, Kingston.

⁵³ KGH *Death Book*. October 1869.

⁵⁴ *Queen's College Journal*, 11 May 1887.

⁵⁵ *British Whig*, 11 May 1887.

sional public jabs damaged the images of both organizations.

Local Medical Community: Dissection as an Emblem

Not only was Kingston's public concerned about how the students were acquiring corpses, so too was the local medical community. While popular opinion was a mixture of growing disapproval with undercurrents of curiosity and tempered excitement, most professionals wanted to see a quiet resolution to the issue, favourable to the Anatomy Department's predicament. The students' grave-disturbing adventures projected negative attitudes that affected physicians too; when public opinion turned against the pupils, established practitioners realized that they too would suffer, reasoning public disapproval could hamper public health policy and funding. Consequently, the more farsighted members of the medical community hoped for an easing of tensions and a resolution of the issue. The inclusion of a Kingston body snatching case in the 1876 inaugural issue of the *Canadian Journal of Medical Science* emphasized their concern for their reputations.⁵⁶

Some physicians, however, held the views similar to those in an anonymous article, titled "The Study of Surgery," which placed the necessity of learning above public courtesies. "The usual custom in the Medical College is to divide a subject into eight parts, each being stud-

ied by a small [knot?] of students simultaneously. Diabolical as the idea may seem it is absolutely necessary for each man to take a limb or a part home with him."⁵⁷ Practitioners recognized the benefits of keeping dissection inconspicuous, but when pushed, some boldly prioritized professional obligation.

Occupying the same sphere as the medical students, local physicians were sometimes blamed for not doing enough to prevent body snatching and were held partially responsible, if only morally. But not all medical professionals were involved with the school, and their attempts to defend themselves could be misrepresented as supporting the misbehaviour. Professional solidarity often, but not always, caused doctors to side with the pupils, who did not always deserve their sympathies. Physicians were stuck being guilty by association and being responsible for ending the thefts.

Many of Kingston's physicians had trained in an environment where body snatching was a reality, either in the United Kingdom or elsewhere; they may have had nostalgic reasons for supporting the students. Dissection was an integral part of the professional rite of passage of medical school, an aspect of which was providing one's own material if necessary. Physicians with traditional views may have seen body snatching as part of anatomy's ethos and the medical education experience.⁵⁸

⁵⁶ *Canadian Journal of Medical Science*, 1 (1876), 31-32.

⁵⁷ *British Whig*, 23 October 1882, p. 1, column 7.

⁵⁸ Warner and Edmonson, *Dissection- Photographs*, 7.

Dissection enhanced anatomical education, but it was also used to help determine an organic cause of death. If family members refused an autopsy, doctors could satisfy their curiosity by employing others to retrieve the remains. The case of Charles Brennan's wife may be an example: she died at KGH in 1880 of a "peculiar disease" and days later the corpse was unearthed from her grave in Gananoque.⁵⁹ Such reports speculated on links between local physicians and body snatchers and drew closer associations than the former may have cared.

Kingston Penitentiary

Established before formal medical instruction was offered in Kingston, the Penitentiary was cited as a local provider of cadavers in the Medical School calendars from at least 1860 through 1867, which gave the city "very great advantages for the study of anatomy."⁶⁰ In the late 1850s and early 1860s, the Penitentiary donated its greatest number of bodies for anatomy, reflecting more inmate deaths and their effective transfer to the school. But even here the quantity fluctuated greatly: in 1857, of the 17 deaths, only a single corpse was sent to the students, while the following year, 18 of 21 bodies were turned over for dissection.⁶¹ It is difficult to account for this variability with little staff turnover at either institu-

tion and a relatively consistent number of Penitentiary deaths.⁶² However, the prison's relatively abundant donations in this period may have kept the number of reported grave robbing incidents low, offsetting the school's growing demand.

By the late 1860s, fewer than five prisoner cadavers were sent to the Queen's Medical School annually, reflecting the prison's declining death rate, a trend which persisted to the frustration of anatomists. As demonstrated by its inclusion in the WMC's open letter in 1883, the efforts of the two medical faculties to market the Penitentiary as a selling point for a Kingston education were clever, if untrue.⁶³ The preceding decade had seen fewer than ten deaths per year at the Penitentiary, while the number of corpses sent for anatomy is unknown. When divided between the two schools, this source likely had minimal impact and did little to alleviate the continual cadaver scarcity. The unreliable and variable source of prison corpses meant that faculty and students depended primarily on other sources.

Trade in Bodies

Kingston newspaper articles that explicitly mention local body trafficking and prices suggested trade in the public's imagination, if not in reality. In addition to theorizing repeatedly about

⁵⁹ *British Whig*, 22 October 1880, p. 3, column 2.

⁶⁰ Annual Calendars. David Dee Fonds, Box 3, File 15. Queen's University Archives, Kingston.

⁶¹ Warden's Letter Books. Kingston Penitentiary Collection, Queen's University Archives, Kingston.

⁶² Personal correspondence with Kingston Penitentiary Museum Curator David St. Onge who accessed the number of inmate deaths per year.

⁶³ Travill, *Medicine at Queen's*, 143.

a black market for bodies and speculating how grave robbing was perpetrated, the city's *British Whig* publicized the prices which cadavers fetched in the city in 1892: \$30 for a body, \$5 for a limb.⁶⁴ Whether these prices were for legally or underground acquisitions is not specified and represents the legal and moral ambiguity of cadaver acquisition and transport. Some people sold their own bodies prior to death; although infrequent, these deals were a legitimate source, while other sales were criminal. Corpses were transported as barrels of 'pickles', 'apples', or packed in simple crates; they travelled by boat, train, and, no doubt, by carriage both in and out of Kingston. A newspaper article based on an interview with an unidentified "medical school representative," claimed that local bodies were sent to Montreal and Toronto for \$30, the same price paid locally for bodies.⁶⁵

Typically, Kingston's medical pupils were blamed for missing bodies, but one newspaper article inferred otherwise:

These [body snatching] offences cannot be attributed to students of the local medical colleges, for as much as \$46 each have been paid for subjects for colleges in various parts of the Dominion. A regular trade in bodies seems to have been established. Only a few days ago, at a wake in the city, a student was offered the body for \$5.⁶⁶

While the higher cost was likely attributed to regional availabilities, possibly far

from Kingston, the existence of agents involved in illicit networks seems probable. Even if the students did not obtain cadavers directly, their educational needs drove the trade and its commercialization by opportunists.

The financial records of the medical faculty for the 1910s reveal that bodies were purchased from local sources, some identified, such as a funeral home director and the Inspector of Anatomy, while others were simply names with their accompanying municipalities. In 1917, the faculty bought cadavers from multiple vendors, including paying \$193 to Montreal's McGill University, although the number of cadavers received is unknown.⁶⁷ Because the entries could be left intentionally vague, it is challenging to infer the legality of the trafficking. Given the scarcity of usable bodies, few questions were asked of suppliers.

Kingston's position along the Toronto-Montreal corridor, as well as its proximity to the American border, maintained its importance as a trade centre through which bodies were bought and sold; however, the presence of professional body snatchers seems unlikely. The city would have been unable to support body snatching as a permanent vocation given the small volume of dissection material required annually. Entrepreneurial students and the few corpses from legal sources left little room for professional

⁶⁴ *British Whig*, 1 December 1892, page unknown.

⁶⁵ *Ibid.*, 14 January 1885, p. 3, column 3.

⁶⁶ *Ibid.*, 15 January 1887, p. 8, column 1.

⁶⁷ Queen's Medical Faculty Financial Records 1914-1931. Arch 1184a, Series 3, Box 3. Queen's University Archives, Kingston.

resurrectionists in the city. More likely, locals who sold bodies to the medical school were involved in the post-mortem arrangements, such as undertakers or gravediggers. Through bribery or by completing the task themselves, these individuals probably sought to supplement their income on a few occasions each year; some may have resurrected annually, accumulating experience. Medical students who fancied the adventure likely assisted peers or completed the tasks themselves, but only during their time as students. They may have boasted of their prowess, but were occasional thieves at best.⁶⁸ Like John Rolph's enterprise which brought bodies to Toronto from across Lake Ontario in whiskey barrels, the seasonal nature of the demand also worked against Kingston's body trade developing beyond amateur, if coordinated, efforts.⁶⁹

Conclusions

Ontario legislation aimed at providing legitimate avenues of cadaveric procurement failed to be implemented effectively, resulting in schemes by medical educators to find the required bodies. The few cases involving grave robbing that went to court resulted in weak punishments that did little to deter students or their agents; they suggest that the societal inconveniences of body snatching were insufficient to warrant sentencing

to the full extent of the law.

While comparable to Montreal's body snatching in the number and nature of cases, Kingston's practice differed in significant ways. Because the city's population was insufficient to meet the medical students' cadaveric demands, trafficking spread beyond the city to surrounding communities. As urban and rural bodies were obtained based on accessibility, the fears of the neighbouring villages were legitimized and this peripheral scavenging is an element absent in the literature on Montreal. A more-detailed study of the origins of Montreal's cadavers would help nuance the differences between the cities' practices.

Another difference between Kingston and Montreal was the latter's larger reputation as a notorious body-snatching centre; it was forged through a combination of an older and more-established medical tradition, a known availability of bodies, and a population to support their export. Given early reports of grave robbing, Montreal's repute likely became self-fulfilling in attracting more ghoulish attention, a process that also occurred in Kingston, but on a smaller scale.

Grave robbing in Toronto remains relatively unexamined, with the exception of MacGillivray's examples⁷⁰ and references relating to John Rolph's exploits.⁷¹ Taken collectively, these cases help note the practice's existence but

⁶⁸ Hilda Neatby, *Queen's University: 1841-1917. Volume I* (Montreal: McGill-Queen's University Press 1978), 212.

⁶⁹ Sappol, *Traffic of Dead Bodies*, 60.

⁷⁰ MacGillivray, *Body Snatching*, 53.

⁷¹ See Sappol, *Traffic of Dead Bodies*, 60 and G.M. Craig, "John Rolph" *Dictionary of Canadian Biography* (Toronto: University of Toronto Press 1976), Vol. 9, 683-90.

scant evidence precludes serious conclusions. Toronto's absence of grave robbing lore, contrasted with Kingston's strong body snatching tradition, may reflect its nominal presence, or perhaps such activities have simply been overshadowed by the city's evolution.

MacGillivray suggested Ontario's body snatching practices ended earliest in the southwest and lasted longest to the east, but the evidence presented here suggests a different narrative. While the custom appears to have persisted longer than in Quebec, especially Montreal, Kingston's affinity for grave robbing peaked in the 1880s and lasted through the 1910s. LeBlond proposed that Quebec's legislation in 1883 effectively ended body snatching locally, but did it continue beyond that date? Research to re-examine the duration of body snatching and the influence of legislation in Quebec would prove enlightening; similarly, an investigation of grave robbing around Toronto and in the maritime provinces would enhance the picture.

Kingston's relatively small population and geographic isolation contributed to a medical ethos of self-sufficiency and autonomy which manifested itself through body snatching. Bolstered by the faculty's independence as the Royal from 1866 to 1892 and a lack of support from the law, grave robbing emerged of neces-

sity. Most incidents were linked to medical education and the acts were committed primarily by students or their agents. At times dismissive of public opinion, the students' attitudes shifted from discrete to flagrant, perhaps in defiance of an increasingly disapproving public, who felt betrayed and violated. Kingston's frustrated citizens appear to have understood the school's predicament, preferring students acquire and dissect bodies privately; perpetrators were pursued infrequently and half-heartedly.

A concluding example represents the region's body snatching concerns. In 1850, the Cataraqui Cemetery was established, then located a few miles outside of town. Ideally situated, it was far enough out of town to protect from diseases, yet close enough for visitation. Ironically, this site predisposed it for grave robbing as its proximity facilitated convenient acquisition yet was distant enough to avoid discovery. With the burial of Sir John A. Macdonald at the cemetery in 1891, elaborate plans were made to ensure his body would remain buried: the coffin was surrounded by limestone slabs, an area two to three feet around the stonework was filled with cement, stones, and wire, and after it hardened a layer of concrete was poured on top.⁷² The heavy barriers underscored the community's well-founded reasons for trepidation.

⁷² *Daily News*, 10 July 1891, p. 4, column 3.