



Organ Stealing: Fact, Fantasy, Conspiracy, or Urban Legend?

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"What's true? What's false? Who knows how to evaluate anymore?"

Seu João Gallo, Brazilian shantytown resident, 1990

Descend with me for a few moments into that murky realm of the surreal and the seemingly magical, into the maelstrom of grisly stories, fantastic allegations, and hideous rumors of kidnap, mutilation, dismemberment, blood and organ stealing -- and to taste the terror and panic that these stories occasion in the nervous-hungry residents of urban shantytowns, tent cities, squatter camps, and other "informal settlements" in the third world.

My primary illustrations will come from the shantytowns of Brazil, where I have conducted long-term, intermittent ethnographic research since the mid 1960s. (Scheper-Hughes 1992,1995). But I also draw on related instances from elsewhere in South and Central America, and I will also refer to the current situation in and around Cape Town, South Africa where I am currently engaged in a study "everyday" violence, some of it political, some of it criminal, and some of it medical.

The Rumor

A ghoulish rumor first surfaced in the shantytowns of Brazil in the mid-1980s, and it has been circulating there ever since. The whisperings tell of the abduction and mutilation of children and youths who, it is said, are eyed greedily as fodder for an international trade in organs for wealthy transplant patients in the first world. Residents of the shantytown Alto do Cruzeiro in NE Brazil, the primary site of my research, reported multiple sightings of large blue and yellow combi-vans [of the type used as Gypsy taxis by the poor the world over] , driven by Americans or Japanese agents, who were said to be scouring poor neighborhoods in search of stray youngsters. The children would be nabbed and shoved into the trunk of the van. Their discarded and eviscerated bodies -- minus heart, lungs, liver, kidneys, and eyes -- would turn up later by the side of roads, in between rows of sugarcane, or in hospital dumpsters.

'They are looking for 'donor organs'. You may think this is just nonsense", said my friend and research assistant, "Little Irene" in 1987. " *But we have seen things with our own eyes in the hospitals and the morgues, and we know better.*"

"Bah! These are stories of the poor and illiterate", countered another of my friends, Casorte, the

skeptical new manager of the municipal cemetery of the plantation town I call Bom Jesus da Mata. 'I have been working here for over a year and never have I seen anything. Where are these bodies? [Yet, even as we spoke on the following day, a municipal truck arrived at the gates of the cemetery with the body of a "desconicido", the remains of an unknown, unclaimed man found murdered in an abandoned field not far from town. The eyes and genitals had been removed. "Death squads", whispered Casorte, by way of explanation, and he made the gesture of a throat being slit].

The body snatching rumors were picked up by newspapers in Recife and were reported on the radio. Most of news reports mocked the credulity of simple people. But the media coverage, meant to dispel the rumors, actually exacerbated them. "Yes, it is true, wept Dona Aparecida, wringing her hands on the doorstep of her shack on the garbage strewn street called the Vultures' Path. "I heard it on the radio". Consequently, small children were kept securely locked in at home while their parents were out working. I found one terrified little girl tethered like a goat to a wobbly table leg.

Globalization of the Rumor

Soon after I began writing and delivering papers that interpreted the Brazilian organ stealing rumors in terms of the everyday violence practiced against the bodies of the poor and the marginal, I began to hear other variants of the organ theft stories from anthropologists working in Argentina, Colombia, Peru, Guatemala, Honduras, Mexico, India, and Korea. The rumor -- as we now know -- has trans-national, indeed global dimensions. Media reports of the seizure and sale of children (and of fetuses) for organ transport surfaced in domestic and international newspapers [see Maite Pinero, [Le Monde Diplomatique](#), 1992, for a listing of some of the most noteworthy news stories between 1987-1992]. The rumors were investigated by various international human rights organizations, and the practice was condemned in a resolution approved by the European Parliament in November 1988.

Though most of the stories came from Central and South America, there were reports of the organ theft rumor surfacing in Poland and Russia where it was reported that poor children's organs were being sold to rich Arabs for spare parts surgery. (Czubala 1991). Historian Luise White (1993) published stories of blood sucking/blood stealing human vampires in East and Central Africa, and South African anthropologist, Isak Niehaus (1993) has recorded blood and organ stealing rumors in the Transvaal collected during fieldwork in 1990-1993. The African variants often tell of blood sucking "firemen" or of "medical" agents driving red combie-vans looking to capture unsuspecting people to kill (or to drug) in order to drain their blood (or to remove organs) for magical ("muti") or medical purposes (to sell to local hospitals).

In Italy (of all places!) Paolo Toselli (1991) wrote a series of news features concerning rumors of poor children kidnapped for transplant surgery that surfaced in August 1990 and quickly achieved wide circulation. As many as 231 children were reported kidnapped in Italy during 1990. In the Italian instance, the stories focused on a "black ambulance" as the kidnap vehicle. Other Italian rumors warned of a mobile operating surgery touring the countryside north of Rome. And, there were rumors of a blackmarket trade in poor Brazilian children said to be illegally imported to Italy as a source of "spare parts" for organ transplants. Here we have, full circle, the rumor that began in Brazil , the "donor" nation, finding its counterpart some two years later turning up in the "receiving" nation. [Like the children's game "Telephone"]

But, I was stymied just a few days ago, when my husband and I went out to dinner with our son, Nate, and his Argentinean buddy, Mattias, both university students. I apologized for being preoccupied and explained I was a bit worried about a presentation I had to make in in Italy on

organ stealing rumors. Mattias immediately perked up and asked what I was going to say. "Do you have any information?", I asked slyly. "Well", Mattias began, " this Mexican lady who works in the kitchen of 'Noah's Bagels' told me about a friend of hers who had gotten drugged and abducted from Spengler's [a seafood restaurant]. The guy was just sitting at the bar and minding his own business when a business man , dressed up to kill in a Giorgio Armani suit, sat down next to him and bought him a few drinks. Well, the guy finally passed out cold and the next day the police discovered him still unconscious in a dumpster. He was O.K. but he had a very fine little incision on his stomach, like it was done by professionals, you know."

One could even link the Latin American "baby parts" story with rumors in the U.S. of UFO alien abduction for sexual abuse and organ/reproductive stealing ["aliens have no genitals!"], as reported by Luise White (1994) and by perceived abduction victims in therapy in my own community, Berkeley, California (Richard Offshey, personal communication). I encountered a version of this story in Spanish-speaking northern New Mexico a few years ago. Local farmers and ranchers there had spread a rumor of ritualized animal mutilations that was attributed to extraterrestrials. A livestock inspector I interviewed in Taos County verified instances of ritualized slaughter of livestock with mutilations and did not discount the possibility of Alien terrorists.

Impact of the Rumors:

The rumors have had their effects. An article I published (originally in the LA Times (1990) but picked up by international news agencies, and republished in New Internationalist in which I linked the "organ theft" rumor and panic in Brazil to the shadowy practices of international adoption there helped to shut down the American evangelical Christian "orphanage" I had investigated in a suburb of Recife and to reduce significantly the number of international adoptions from that city and from rural Pernambuco. Elsewhere, accounts of the rumor --even in media stories attempting to disprove or discount it -- have backfired and generated an anti-international adoption climate in Central America, but especially in Guatemala, where foreign tourists, suspected of child theft for organ trafficking have been attacked. The Leventhall report for USIA notes the adverse effects of the organ stealing rumor on voluntary organ donation, citing a precipitous decline in donated cornea in Columbia following national broadcasts of child organ trafficking there.

Verifying the Rumor

Verifying *actual* cases of children exported for organ transplants has lead to a predictable dead end. Allegations of "baby farms" and "fattening houses" in Guatemala, Honduras, Mexico, and Brazil, where newborns were said to be housed awaiting transport to the United States for use as organ donors , were investigated and found to be based on false accusations. The International Children's Right Monitor, published a report raising the obvious questions: Where would the operations take place? How could the murder of the child donors be concealed? Wouldn't the cost and difficulty of an illegal and criminal trade far surpass the difficulty of normal procedures? Patients awaiting a transplant in US and every organ made available to them is strictly monitored by computer through the United Network for Organ Sharing. And organs must be matched to recipients to avoid rejection. Why, then, is it that the 'baby parts story just won't die? (San Francisco Examiner, 1990), despite the appointment of a full-time disinformation specialist , Todd Leventhall, for the U.S. Information Agency in Washington

who has led a long campaign to kill it?

What does it mean when a lot of people around the world begin to tell variants of the same bizarre and unlikely story? In other words, how does one interpret the social imaginary of poor and third world peoples? According to one interpretive strain the rumors indicate a kind of global mass hysteria reflecting characteristic *fin de siècle* anxieties and post modern malaise, a misplaced new age spirituality focusing on the body and the sanctity of organs in the face of everyday threats to personal security in the forms of urban violence, anarchy, theft and loss, fragmentation. (The world's cities, after all have never been so dangerous, so violent.)

Less dramatically, the world rumors have been interpreted by some oral historians and folklorists (see Dundes 1991; Champion-Vincent 1990, White 1993,1994) as constituting a genre, an oral literary form, the "urban legend". The stories are circulated and repeated because they are "good to think" and "good to tell", they entertain by fright , write Luise White, just like good old fashioned ghost stories 1 .

Todd Leventhall, disinformation officer for the US Information Agency, has adopted this language in his report "The Child Organ Trafficking Rumor: a Modern Urban Legend" (December 1994). Citing the writings of eminent folklorists (like Champion-Vincent 1990) who interpret the organ theft stories as the literary inventions of semi-literate people who do not possess the skills to sort out the credible and realistic from the incredible and the fantastic, Leventhall unequivocally states that the rumors are "groundless", "pernicious" , and "harmful". His position is that the rumors must be exposed, refuted, and killed.

Here I will frame my remarks as a response to Mr. Leventhall's conclusions that "no government, international body, NGO, or investigative journalist has ever produced any credible evidence to substantiate the rumor ...[which constitutes] a false story that is commonly believed because it encapsulates... widespread anxieties about modern life" (1994:i). Among these are "fear of and resentment at wealthy foreigners...fear of wrongful mutilation and death, subconsciously stimulated by the dramatic advances during the past ten to fifteen years in the field of organ transplantaton" (1994:2).

The USIA Leventhal report equates third world organ theft stories with US rumors about pets exploding in dangerous microwave ovens, and with the popularity of the American novel and film, *Coma*, that portrayed unsuspecting people rendered comatose state so that their organs could be removed for transplant in others. Organ theft rumors in South America and the Hollywood film are equated under the rubric of unsophisticated peoples' anxieties about modern technologies that have proceeded too far and too fast.

Leventhall's report relies on peoples' stories and narratives (just like the rumors he is trying to dispel), although among *his* sources are police, public officials and military officers, rather than the common people who often feel threatened by these. Lacking is any familiarity with the everyday, lived experiences of the very poor who circulate and believe the baby parts and organ stealing stories. Here, the ethnographer, working in small locations over time and skilled in the tasks of gathering and interpreting "local knowledge" by means of multi-layered "thick descriptions" of everyday life can perhaps throw new light on the fantastic rumors.

In Northeast Brazil where my research focused on the causes of infant and childhood death -- later of the deaths of the "disappeared" adolescents and young men of the shantytown of Alto do Cruzeiro. I began with the "official " statistics, but finding them wholly inadequate, [Child deaths, for example, are routinely under-reported by more than 50% in rural NE Brazil (see Scheper-Hughes 1992,1995, in press; Nations and Amaral 1991)], I soon left the civil registry

office to walk the length and breath of the poor barrios, hillside slums, and outlying hamlets in order to observe and document the experiences of the sick and dying, and to hand count, as it were, the the dead, and the disappeared. My "rule of method" was simple -- *follow the bodies!* Into the public clinics, into hospitals, even into surgery amphitheaters. It meant attending infant and child wakes, following "angel" processions and burials, trailing "street children" on their rounds of the city and tracking them down in the local jails that illegal detained them. It meant tracking bodies in the local hospital morgue, and accompanying relatives of the "disappeared" to the the Medical-Legal Institute in Recife. It meant visits to the municipal graveyard to examine old, new and reused gravesites, and the remains of the "unknown" or the "unclaimed" that were removed prematurely from competitive gravesites and tossed into the *deposito de osos* (the collective paupers' deep well) in the cemetery.

Collecting peoples' narratives is important, but one needs to listen to popular voices as well as the "official story". In Brazil this meant collecting the stories of the "folk demographers" of the rural community: the priests and nuns who attend deaths, the pharmacists, hospital orderlies, the local carpenters who fashion pauper coffins of plywood, cardboard, and crepe paper, the local seamstresses who sew the shrouds, the "praying women" who prepare the bodies of the poor and despised for burial, and the venders in the local market who sell all the ritual paraphernalia used at wakes. What these people did not know the combi- taxi drivers who carry the sick and dying to and from clinics and hospitals might know. What they didn't know the local grave-digger was sure to know. The all too often " rejected knowledge" of these "specialists" can provide the missing social context within which strange events occur and even stranger rumors circulate to account for them.

Based on this kind of anthropological "thick description" -- both in Brazil and in South Africa -- I have drawn rather difficult conclusions about the organ stealing rumors, suggesting that the stories are repeated and circulated because there is some truth to them (see Scheper-Hughes 1992, chapter 6).

Most anthropologists (as opposed to folklorists) who have encountered these rumors in one form or another will suggest that the stories are, like the Scriptures, at the very least metaphorically true, operating by means of symbolic substitutions. Blood sucking rumors in Africa and organ theft and fat stealing rumors in South America are cogent metaphors expressing the often grotesque nature of colonialist and neo-colonialist economic, social relations and labor practices. (See Comarff 1985; Taussig 191987,1990; Nash 1977; Niehaus 1993). The root metaphor concerns the radical commodification of the body and of body parts in work and in new medical practices.

In its strongest and plainest version, the body parts rumors may be taken as factually true. The business of organ transplants is conducted in a transnational space. Elements of both legal and illegal trade in blood and solid organs exist in some parts of the world. Between 1983-1988, 131 patients from three renal units in the United Arab Emirates and Oman traveled to Bombay, India where they purchased, through local brokers, kidneys from living donors. The donors were from urban shantytowns outside Bombay who were compensated between \$2,000 and \$3,000 for a kidney. This ghoulish trade was widely publicized in an Indian news weekly, but treated as well in a *Lancet* article analyzing the high mortality among the Arab recipients of purchased Indian kidneys (Salahudeen et al. 1990). Where there is a legal market in the sale of blood or organs, one can be almost certain of an illegal blackmarket replete with human rights abuses.

In my research on AIDS in Brazil (Scheper-Hughes 1994), for example, I found that 1 of every 5 cases of reported AIDS in Rio de Janeiro was linked to contaminated blood. Although it is unconstitutional to traffic in blood in Brazil, the new laws have not been enforced by public

health authorities. In Rio, Mafia style "numbers" game bookmakers (*bicheiros*) traffic openly in blood and blood products just as they do in illegal drugs.

Meanwhile, in Cape Town, South Africa today cornea, heart valve, liver, and skin graft "donations" are harvested and distributed to the appropriate surgical and medical units for use in transplantation without soliciting family members' consent. The 'donor' bodies, most of them township Blacks and 'Coloureds' who were the unfortunate victims of violence and other traumas, are handled by state pathologists attached to public mortuaries still controlled by the police. (see NIM 1996: 37-38). There is strong disagreement among pathologists today about the current mortuary-to-surgery practices which are not in strict conformity with South African laws. There is no "presumed" consent for cadaveric organ procurement. Instead, doctors and hospitals are "presumed" to operate with explicit consent of organ donors or their families, a presumption that is not completely warranted.

Fear of potential medical exploitation of the dead is strong enough in South Africa at present that the second section of the now hopefully final draft Bill of Rights, dealing with the security of the person, includes wording meant to protect the human rights of potential organ donors. The ANC favored wording of the section on the right to bodily integrity to specify "the right to make decisions about reproduction *and their bodies* free from coercion, discrimination and violence. Speaking for the ANC, Willie Hofmeyer explained the inclusion of the words 'and their bodies' with reference to the case of organ transplantation in South Africa.

It should come as no surprise, then, that in the impoverished Black townships outside of Cape Town, a stone's throw from the city's famous Groote Schuur teaching hospital (where Christian Barnard pioneered heart transplants), people express hostile and negative attitudes toward organ donation. 2 Politically astute township youths referred to the directionality of the exchanges: organs were being "harvested" from poor and black bodies -- representing the majority of the population of South Africa and accounting for a grossly disproportionate number of violent and accidental deaths -- for transplantation into wealthy, white bodies. Sophisticated, high tech medicine is the prerogative, still, of South African whites. Negative attitudes toward organ removal also derive from older and "traditional" practices of "muti" murder in which organs are removed for magical practices. A case, verified by doctors at Groote Schuur Hospital, occurred in Nyanga, a black suburb of Cape Town this past year (Cameron 1995).

Here I will argue that the organ stealing stories are told, remembered, and circulated because they are true at that indeterminate level between metaphor and fact. The poor people of urban shantytowns world wide are "on to something"; the stories express an intuitive sense that something is gravely amiss.

Timing of the Rumors: Political Disappearances / State of Emergency

It is important to note the geo-political mapping and the timing of the organ stealing rumors. While rumors of blood libel and body snatching appear and disappear periodically, the current spate of organ and child stealing rumors arose and spread in the late 1980s. In Brazil, Argentina, Guatemala El Salvador, and South Africa the organ stealing rumors have arisen within a specific political context and following a recent history of military regimes, police states, civil wars, and "dirty wars" in which abductions, "disappearances", mutilations, and deaths were commonplace.

During the Argentine "Dirty War" of the late 1970s and early 1980s, children were stolen, students were captured, interrogated, tortured and killed. Their bodies were abused and mutilated, and physicians often collaborated as interrogator-torturers (as they did in El

Salvador , Argentina, and in South Africa) with the military state. Anthropologist Marcelo Suarez Orozco (1987) described in lurid detail the abuse of children during the "Dirty War". Babies and small children were kidnapped and given to military families; older children were abducted by security officers, brutalized in detention, and then returned "transformed" to relatives. Some of these were used as "bait" to entrap other "subversives". Other children were tortured in front of their parents and some died in captivity. An official truth commissions, established in the mid 1980s (CONADEP 1984), initiated the task of documenting after the fact the kinds of atrocities that had terrorized large segments of the population there. Nonetheless, Dr. Felix Cantarovitch, reporting from the Ministry of Health in Buenos Aires in 1990, contributed an article to *Transplantation Proceedings* (1990) in which he states:

"In Argentina between 1984 and 1987 a persistent rumor circulated about child kidnapping. The rumor was extremely troublesome because of its persistence sustained by the exaggerated press that has always been a powerful tool to attract attention of people about the matter. In November 1987 the Secretary of Health gathered the most important authorities of justice, police, medical associations and also members of Parliament with the purpose of determining the truth. As a result it was stated that all the rumors and comments made by the press were spurious."

Similarly, Mayan Indian villages in Guatemala sustained military attacks that were nothing less than genocidal over the past decade. The counterinsurgency war, which reached its height between 1978 and 1984, left over 100,000 people dead, another one million internally displaced, and caused thousands to flee across the Mexican border. Over 440 rural Indian villages in the highlands were destroyed. (see Falla 1982, 1992; Green 1995). Women were widowed and children were displaced, lost, and orphaned in the tens of thousands. These displaced children became the focus of international (especially North American) adoption, contributing to villagers mounting sense of panic, terror, and disaster. The consequent hysterical attacks of American tourists, especially those seeking to adopt Indian babies, has to be understood within this recent history. That Leventhal cites interviews with Guatemala's military officials in refuting the over-determined child and organ stealing rumors there, is a bit like asking the proverbial fox to guard the hen house.

Similarly, in Brazil many vestiges of the military state remain. In the shantytowns this presence is still felt in the late-at-night knock on the door, the appearance of masked men in police uniform, and in the scuffle abduction of one's husband or teenage son. Several young men of the Alto do Cruzeiro , each black, young and in trouble with the law for petty crimes, were seized from their homes just after Christmas in 1987 by masked men in uniform. Two of the bodies, slashed, mutilated, and duped between rows of sugarcane, turned up a few weeks later. The police arrived with graphic photos: "How do you expect me to recognize meu homen (my man) in these pictures? Dona Elena screamed. Finally, the men came one night for the teenage son of Black Irene, the boy that everyone on the Alto knew affectionately as "Nego De". The existence of local paramilitary death squads is suspected, but on this topic shantytown people are silent, speaking, when at all, in a complicated form of sign language. No one else wants to be marked. Meanwhile, violent attacks and the murder of unwanted street children in Brazilian cities continues unabated to this day (see Dimenstein 1992; Scheper-Hughes and Hoffman 1994).

One could "read" the organ stealing and baby parts rumor and panic as a response to the nervous, unstable democracies just now emerging in parts of South and Central America. In Argentina, Brazil, Guatemala, the rumors surfaced or *soon after the democratization* process was initiated and in the wake of the reports by " truth commission" such as Nunca Mas in Argentina and Brazil Nunca Mas. The rumors appeared, then, during a time when people finally became aware of the magnitude of the atrocities practiced by the state and its henchmen. Insofar

as the poor of urban shantytowns are rarely called upon to speak before official Truth Commissions, body theft rumors may be seen as a surrogate form of political witnessing. The rumors participate in the spirit of the various official Truth Commissions by testifying to human suffering on the margins of the official story.

The rumors also signify a sense of alarm, warning others in the community that their bodies, their lives, and those of their children are or have been in danger. The rumor expresses, obliquely and covertly, the abnormality of the "normal" and the chronic "state of emergency" in which poor people live (Taussig 19992, citing Benjamin). The rumors express the subjectivity of subalterns living in a "negative zone" of existence where lives and bodies are experienced as a constant crisis of presence (hunger, sickness, injury) on the one hand, and as a crisis of absence and disappearance on the other.

Misplaced Bodies: Clinics and Hospitals

There are even more mundane sources of the organ theft rumors as well. In Brazil the rumors allude to the way that poor peoples' bodies are usually dis-regarded in medical encounters. In public clinics and hospitals of the rural Northeast indifferent doctors in the employ of the state or the *município* are willing to over-medicate the poor, to tranquilize hungry bodies, and to order unnecessary amputations and surgical removals for treatable conditions. I think of the municipal dental clinic in Bom Jesus where poor peoples' teeth were extracted for minor toothaches. Dr. "Tiradentes" agreed, saying with a shrug of his shoulders:

" Yes, this clinic is scandal, truly, and people worse off coming here than treating themselves. This is no way to run a clinic. ... What do you see here -- just a chair!

All I do is pull teeth. People come in with a healthy set of teeth, but with a pain they can't bear. All they need is a filling. But they can't afford a private dentist in town. So, against my conscience I pull the tooth. If I sent them all home, I'd soon be out of a job.

My job is not only to extract teeth from the poor, but to extract their votes for the mayor as well."

And at the municipal clinic Dr. Joao took a cursory look at Seu Antonio, a cane cutter who had suffered a series of strokes that had left his eye damaged and his vision impaired, and said: " That eye of yours isn't worth anything; let's have it removed." The frequent accident victims among the sugarcane cutters and sugar mill workers on the plantations return home from hospital with grotesque scars and badly set bones that leave them permanently disfigured or disabled. Meanwhile, the the middle classes and the wealthy of rural Brazil indulge themselves in the very latest and most sophisticated forms of body sculpting and plastic surgery. "So many of the rich are having plastic surgery and organ transplants, " offered an older woman of the shantytown of O Cruzeiro, that we really don't know whose body we are talking to anymore".

In all, the organ stealing rumor has its basis in poor peoples' perceptions, grounded in a social and bio- medical reality , that their bodies and those of their children might be worth more dead than alive to the rich and the powerful. They can all too easily imagine that *their* bodies , and the bodies of their young children, may be eyed longingly by those with money. As they envision it , organ exchange proceeds from the bodies of the young, the poor and the beautiful to the bodies of the old, the rich, and the ugly , and from the poor in the South to the rich in the North: Americans , Germans, Italians, Japanese and Israelis in particular.

Obviously, there are many existential and ethical dilemmas concerning modern biomedical

technology that are being imaginatively addressed by shantytown residents in the pre-literate form of "wild" rumors. For these reasons shantytown residents fear hospitalization and avoid dying in public hospitals where they imagine that autopsies are done to harvest usable organs from charity patients as a way of canceling their medical debts. "Little people like ourselves", I was often told, "can have anything done to them". Stories like the following, told by an elderly washerwoman from Recife confirms some of these suspicions:

"When I was working in Recife," she began, "I became the lover of a man who had a huge, ugly ulcer on his leg. I felt sorry for him and so I would go to his house and wash his clothes for him, and he would visit my house from time to time. We were going along like this as lovers for several years when all of a sudden and without warning, he died. The city sent for his body. I decided to follow him to make sure that his body wouldn't be lost. He didn't have a single document, so I was going to serve as his witness and as his identification papers. But by the time I got to the public morgue they had already sent his body to the medical school for the students to practice on. So I followed him there and what I saw happening at the school I could not allow. They had his body hung up and they were already cutting off little pieces of him. I demanded the body back, and after a lot of arguing they let me take it home with me. It's true, he was only a beggar, a 'tirador de esmolos,' who sometimes did magic tricks on the bridge in Recife to amuse people. But I was the one who washed his clothes and took care of his wound, and so you could say that I was the owner of his body."

When Biu's little girl Mercea, who had been sick for a very long time, finally died in late February of 1988 just as they arrived at the emergency room of the local hospital, Biu whisked the child's body away despite the protest of the clinic staff. She and her sister buried Mercea hurriedly that same day. I accompanied Biu to the *registry office* where she recorded the child as having died at home that morning. "We were afraid of the state", Biu said, "I didn't want an autopsy or Mercea's body tampered with. She is *my* child and I will be the guardian *of* her little body."

But Mercea, like most of the more than 300 children who die in Bom Jesus each year, was buried in an unmarked grave although in her own little coffin, purchased on credit. Within less than six months her grave was cleared to make room for another "little angel" and her remains were tossed in the deep well that is called the bone depository, the "*depósito de ossos*". And so, Mercea's older sister, Xoxa, (who was away working on a plantation at the time of her baby sister's death) could not, on her return home, locate the little grave. This made it difficult for Xoxa to offer her sister the pretty white stockings that Mercea told Xoxa in a dream that she wanted. "Your vision was a true one", Biu told her eldest daughter. "In our rush to bury Mercea we had to put her into the ground barefoot."

[slide of Xoxa with Stockings]

Unequal Exchange

It was just this perceived injustice of unfair and unequal exchange of organs and body parts that kept Dona Carminha in search of medical assistance for her only living son, Tomas, who was blinded at the age of seven following the medical maltreatment of a serious eye infection. Secondary scar tissue had grown over the cornea of both eyes and the boy, now 13, was living in a world of impenetrable darkness. Carminha was certain her son's condition could be reversed by a cornea transplant. The only obstacle, as she saw it, was that the "eye banks" were reserved -- like everything else in the world -- for those with money. She had taken the boy to Recife, and then by bus to Rio where she pursued one impossible lead after another., going from hospital to hospital. Through all she persisted in her belief that somewhere she would find " a

sainted doctor" , a doctor of conscience who would be willing to help. "Don't they give new eyes to the rich"? And, wasn't her own son "equal before the eyes of God?"she asked.

Finally, the child and organ stealing rumor reflects unscrupulous practices of international adoption. In the shantytowns of Brazil I encountered several cases of coerced adoption and (in 1990 alone) two cases of child stealing by wealthy "patrons" ³ . Each year nearly 1,500 children leave Brazil, legally, to live with adoptive parents in Europe, the United States, and Israel. But if one adds the clandestine traffic in babies that relies on false documents and bureaucratic corruption in Brazil and abroad, exploiting the ignorance and the powerlessness of poor women , the number of children leaving Brazil has been estimated at 3,000 a year, or roughly 50 babies a week ⁴ .

The lively market in "spare babies" for international adoption is often confused with the lively market in "spare parts" for international transplant surgery. As poor people in shantytowns see it, the ring of organ exchange proceeds from the bodies of the young, the poor, and the beautiful to the bodies of the old, the rich, and the ugly, and from poor nations in the South to rich nations in the North. In the midst of the black market for organs and babies, poor people can hardly be blamed for thinking that their babies are wanted as much dead and for their organs as or their lives.

My investigations in 1989 (previously reported) led me to a small beach-front hotel in Recife, Pernambuco where I encountered several couples from Europe and the United States awaiting the final steps in adopting a Brazilian child. Most were working through adoption agencies in their native countries that had put them in touch with "Casa Alegre", a children's home in a secluded hillside suburb run by an elderly Protestant missionary from the American Midwest. The couples had scheduled their arrivals to coincide with the appointment of a sympathetic children's judge who supported international adoptions.

Adoption cost the couples about \$3,000 excluding air fares and living expenses in Brazil, considerably less than the \$10,000 it cost in the U.S. \$1,000 went directly to the Children's Home, and another thousand to the local "adoption lawyer", and the remainder paid for various legal "processing fees" and for a court translator. The couples, working through intermediaries, knew little about the birth parents, but they all believed that the the birth mothers had voluntarily surrendered their children.

At Casa Alegre in Recife I found a dozen babies lying in cribs. Above each head was a name and , in some cases, the name of an adoptive parent and their phone number. Some of the babies were awaiting the adoption proceedings, others had just arrived. Several babies looked ill and malnourished. The director explained that she did the best she could to match the babies according to the adoptive parents' specifications. Most wanted pretty, healthy babies, light-skinned and with white features. Girls were preferred.

When I asked, directly , about the Brazilian "traffic in babies", the director admitted that aspects of the adoption process were murky. Sometimes, she had to fight with mothers to release their children. Some birth mothers resisted signing the adoption papers even when they know it would be best for their child. As I left Casa Alegre I thought of the tortured ambivalence of Dona Maria of the Alto do Cruzeiro and of the loss and humiliation suffered by her husband. "When I am very angry", she once said, "I think to myself, 'Why doesn't that rich American woman who stole my little

blood (*galega*) come back and rescue the rest of us as well."

Conclusions:

Organ transplantation takes place within a specific historical, social, and political context. It depends, as Cantarovitch (1990) suggests, on a social contract and a social trust. The procedures cannot exit without the protest and defiance which the organ stealing rumors register, unless the grounds for social trust are explicit. This requires national and international laws protecting the rights of both organ donors and organ recipients.

At a very rudimentary level, the practice of organ transplantation requires a reasonably fair and equitable health care system. The Ministry of Health in Gauteng, South Africa was correct , I think, in proposing a temporary moratorium earlier this year on organ transplants, until the majority of South African blacks in the province could be assured access to adequate primary health care. Despite protests from the organ donor foundations, some organs (corneas in particular, according to my sources) are taken without consent. It seems like stating the obvious to suggest that organ donation requires a transparent process of informed consent .

The social ethics of transplantation requires a reasonably democratic state in which basic human rights are protected and guaranteed. Organ transplantation occurring, even in elite medical centers by the most conscientious of physicians, within the milieu of a police or military state where political "disappearances (Brazil, South Africa), "dirty wars" (Argentina) , ethnic cleansing (Bosnia) or genocide (Ruanda, Guatemala) are practiced or where routine police torture and injury and deaths in detention are common (the 'old' South Africa) , can only represent an abomination, another form of violence. Under such compromised circumstance the most vulnerable people will fight back with the only resources they have -- gossip and rumors which convey, albeit obliquely, the reality of the "situation of emergency" that exists for them.

Following from the above, other requirements are a legal system concerned with the protection of women's reproductive rights, so that poor women are free from coerced sterilization and coerced adoption, both of which exist in parts of the world. Similarly, where vestiges of forced labor exist especially in "debt peonage" systems which unfairly bind workers to their "bosses", unfair exchanges -- including trade in children -- for survival fuels the panic underlying rumors of organ and child stealing.

Finally, the US government needs to accept far more responsibility for reinforcing political and economic circumstances that engender the bodily, ontological insecurity registered in the organ stealing rumors. The USIA document is tone deaf to the very real suffering expressed in the rumors, a suffering based on economic imbalances and political collusions in which the US has played no insignificant part.

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Notes

1. This is how White (1993, 1995) explains Central and East African blood sucking and organ stealing stories, especially favored by poor women who are sex workers. The women tell stories of urban brothels where unsuspecting men are lured and then drugged as they sit on chairs covering a trap door which drops the unconscious client to a basement where he is "operated on", that is, his blood is drained, skin is removed, and organs are taken. Poor women, so often abused by their male clients, took great delight in telling stories of male "johns" rendered unconscious, passive, mute, and physically gutted.

2. I cite my own field research in Chris Hani squatter camp as well as professors of medicine at the University of Cape Town (Lerer, Benataur, personal communication).

Nonetheless, a survey of "public attitudes to organ donation in South Africa", published in SAMJ in Feb. 1993 remarkably reported generally positive and supportive attitudes across ethnic lines, with the exception of communities closest to Groote Schurr Hospital where most transplantations in the country have taken place (see Pike, Odell, and Kahn 1993).

3. When Maria Lourdes, the mother of five sickly and malnourished children living in a miserable hovel on the Alto do Cruzeiro was asked by her wealthy *boss*) if she could "borrow" Maria's four-year-old, Maria readily agreed. The woman, for whom Maria washed clothes, said she wanted the little "blond" (*galega*) just for her amusement. Maria sent her daughter off just as she was: untidy, barefoot, and without a change of clothing. The patroa promised to return the child the following morning. Two nights passed and when still her daughter was not returned, Maria became worried but she did not want to anger her boss by appearing mistrustful. When Maria's husband returned home from his work on a distant plantation and he discovered his favorite daughter was missing, he shoved Maria up against the wall of their hut. "Stupid woman!", he yelled when Maria told him what had happened. The husband went off in frantic search. At the house of the patroa he learned that the child had already been given to a missionary who directed a "children's home" that specialized in overseas adoption. "Your daughter is in good hands," insisted the home's local sponsor and benefactor. "Leave her where she is and soon she will be on her way to America to become the daughter of a rich family. Don't be selfish; give her a chance." Had Maria and Manoel lodged a complaint with the police? I asked. "Do you think the police would take a complaint from us?" Maria said. She was angry at having been tricked but she came to accept what had happened. Surely her daughter was better off now.

4. Israel: About 150 Brazilian children live with their legal adoptive parents in Israel. Between 1985-1990 about 2,000 children have entered Israel from Brazil in a questionable manner. Italy: Most adoptive babies who go to Italy are from the state of Bahia which has a heavy concentration of Afro-Brazilians. Some of these adoptions have been investigated by the Italian courts. Germany: The clandestine adoptions of Brazilian babies to Germany can be traced to the Northeast Brazilian city of Fortaleza.

United States: About 200 babies leave Brazil each year legally through the help of private adoption agencies, many of them affiliated with fundamentalist and evangelical Christian Churches.

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Definition & Examples. Definition & Examples. When & How to Write an Urban Legend. Quiz. I. What is an Urban Legend? An urban legend is a fictional story rooted in modern popular culture. You can think of urban legends as today's folklore—just like traditional folktales, they are based on real parts of culture and often real people; however, in most cases the details have been exaggerated, ultimately making the stories false. They can take the form of an elaborate joke or hoax, a rumor gone too far, unsolved mysteries and crimes, popular misconceptions or beliefs, and so on. Some u...