

David's Early Life and Relationship with Henrietta

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Introduction

David "Day" Lacks is an important but deeply complicated figure in Rebecca Skloot's *The Immortal Life of Henrietta Lacks*. He was Henrietta Lacks's husband, first cousin, childhood companion, and the father of her five children. His life is closely connected to the book's central themes of family responsibility, poverty, grief, racial inequality, medical mistrust, and the ethics of biomedical research. Although the original title refers to him as "David Lack," his correct name is David Lacks, and he is generally called "Day" throughout Skloot's account.

David cannot be accurately described as either a completely devoted husband and father or a wholly uncaring man. Skloot presents him as hardworking but emotionally distant, loyal in some circumstances but unfaithful in others, suspicious of medical institutions, and unable to protect his children adequately after Henrietta's death. His weaknesses caused real harm, yet they developed within a life shaped by poverty, limited education, demanding industrial labor, racial segregation, and the sudden loss of his wife.

David's character also helps personalize the ethical controversy surrounding HeLa cells. Henrietta's cancer cells were collected and distributed without her knowledge, while David and the rest of the family remained unaware of their scientific importance for more than two decades. His confusion and anger after learning about the cells reveal the consequences of excluding patients and families from medical communication. Through David, Skloot demonstrates that scientific progress can produce lasting benefits while leaving the people most directly connected to that progress feeling ignored, frightened, and exploited.

David's Early Life and Relationship With Henrietta

David and Henrietta grew up together in Clover, Virginia. They were first cousins who were raised in the same extended family environment and worked on a tobacco farm. Their relationship developed when they were young, long before they formally married. Their first child, Lawrence, was born in 1935, and their daughter Elsie was born in 1939. David and Henrietta married in 1941 and subsequently had three more children: David Jr., usually called Sonny; Deborah; and Joseph, who later changed his name to Zakariyya Bari Abdul Rahman (Skloot, 2010).

Their early relationship reflects the limited economic opportunities available to many rural African

American families during the period. Farming provided difficult work but little financial security. Like many Black families participating in the Great Migration, David and Henrietta eventually moved from rural Virginia to Maryland in search of industrial employment and improved living conditions.

David obtained work at Bethlehem Steel's Sparrows Point plant near Baltimore. The position offered more reliable wages than tobacco farming, but steelwork was physically demanding and could involve long hours and hazardous conditions. The family settled in Turner Station, an African American community populated by many industrial workers and their families.

David's willingness to undertake difficult labor demonstrates that he accepted responsibility for supporting his household. However, financial provision was only one part of family responsibility. Skloot's portrayal shows that David often found it difficult to provide emotional security, attentive parenting, and protection for his children.

A Hardworking but Emotionally Reserved Man

One of David's clearest characteristics is his capacity for hard physical work. His employment at Bethlehem Steel enabled the family to maintain a home and support five children. This aspect of his character prevents readers from dismissing him simply as irresponsible. He worked within a social and economic system that offered Black men relatively few secure employment opportunities and frequently required them to perform dangerous manual labor.

At the same time, David appears emotionally reserved. He does not communicate openly about his fears, grief, or uncertainty. His silence becomes particularly important during Henrietta's illness and after her death. The children receive little explanation of what happened to their mother, and they grow up with incomplete and sometimes frightening ideas about her illness, treatment, and cells.

David's emotional distance may partly reflect the gender expectations of his era. Men were often expected to demonstrate strength through physical labor, endurance, and silence rather than through emotional expression. However, historical context does not remove the consequences of his behavior. His inability or unwillingness to discuss grief left his children without the reassurance and information they needed.

Skloot's characterization therefore creates a distinction between working for a family and being emotionally present within it. David fulfills part of the conventional provider role, but he struggles to meet the psychological and protective needs of his children.

David as Henrietta's Husband

David's relationship with Henrietta is marked by familiarity, shared history, affection, and serious flaws. They grew up together and formed a family at a young age. He accompanied her through

important periods of her life and continued working to support the household during her illness. Nevertheless, the marriage was not idealized. Skloot describes David's infidelity and the marital tension associated with it (Skloot, 2010).

His unfaithfulness complicates any claim that he was a consistently devoted husband. Henrietta lived with the emotional and physical consequences of a relationship in which trust was repeatedly tested. The book also places their marriage within a culture in which unequal expectations often applied to men and women. David possessed freedoms that Henrietta did not experience to the same degree.

During Henrietta's illness, he appears concerned but lacks the medical knowledge needed to understand the severity of her condition. The family had limited access to clear, comprehensible information about cervical cancer, radiation treatment, fertility, tissue research, and the meaning of HeLa cells. This communication gap was intensified by differences in education, social status, and power between the family and medical professionals.

After Henrietta died, David blamed Johns Hopkins for aspects of her suffering and death. His response was not based on a technically accurate understanding of her cancer, but it reflects the family's broader distrust. Medical professionals had treated Henrietta, taken tissue from her tumor, and continued using those cells, yet the family had not been included in meaningful discussions about what was happening.

David's reaction illustrates how inadequate communication can transform uncertainty into lasting suspicion. His mistrust was not merely irrational fear. It developed within a history in which African American patients often experienced segregation, unequal treatment, and exploitation by medical and research institutions.

David's Failures as a Father

The original article describes David as a poor father after Henrietta's death. This conclusion is partly supported by the experiences of his children, but it requires a more balanced explanation. David was suddenly left with five children while working in a demanding industrial position. One of the children, Elsie, had already been institutionalized because of her disabilities, while the younger children required constant care and supervision.

David needed assistance, but the arrangements he made exposed some of the children to serious mistreatment. Ethel and Galen, relatives who became involved in caring for the family, subjected the children to abuse. Ethel was especially cruel toward the children, while Galen sexually abused Deborah. David did not recognize, prevent, or respond adequately to the danger in which his children were placed (Skloot, 2010).

This failure is one of the most troubling aspects of his character. A parent has a duty to protect children from foreseeable harm, and David's absence and lack of attention allowed damaging conduct

to continue. His work obligations and grief may help explain why he depended on relatives, but they do not erase the suffering experienced by his children.

Lawrence, the eldest child, was forced to assume adult responsibilities at a young age. He left school and worked to help support the family. The younger children grew up without the emotional stability that Henrietta had previously provided. Deborah spent much of her adult life trying to reconstruct her mother's identity and understand what had happened to her family.

Calling David simply a "bad father," however, risks reducing a complex situation to an individual moral defect. He was a widowed laborer with limited resources, little formal education, and insufficient institutional support. He had no childcare system, grief counseling, family assistance program, or clear medical guidance available to him. His failures were personal, but they were intensified by poverty and structural inequality.

Skloot's portrait encourages readers to hold both truths at once. David failed to protect his children adequately, and the conditions surrounding him made effective parenting exceptionally difficult. Explanation should not become excuse, but judgment should not ignore context.

Grief, Silence, and Family Trauma

Henrietta's death affected every member of the family, yet the Lacks children were given few opportunities to process their grief. David's approach was largely characterized by silence and endurance. Rather than helping the children speak about their mother, he concentrated on survival and work.

This silence contributed to a pattern of intergenerational trauma. Deborah grew up knowing very little about Henrietta and became intensely preoccupied with discovering who her mother had been. Zakariyya developed profound anger about the hardships the family endured and the use of Henrietta's cells. Lawrence attempted to protect the family but also carried resentment about the responsibilities placed on him.

David's inability to discuss Henrietta's illness also allowed misinformation and fear to grow. When the family eventually learned that Henrietta's cells were still alive in laboratories, they struggled to distinguish between a cell line and the continued physical existence of a human being. Some relatives wondered whether scientists had cloned Henrietta or whether parts of her body remained alive.

These misunderstandings did not demonstrate an inherent inability to comprehend science. They reflected a failure by researchers and medical professionals to explain scientific information in language appropriate to the family's educational background. Effective informed consent and ethical communication require more than presenting technical facts. Information must be understandable, and the person receiving it must have an opportunity to ask questions.

David's silence within the household and the scientific community's silence toward the family reinforce one another. In both cases, a lack of communication increases fear, confusion, and emotional harm.

David's Response to the Discovery of HeLa Cells

The Lacks family did not learn the full significance of HeLa cells immediately after Henrietta's death. More than two decades later, researchers contacted members of the family because they wanted blood samples that could help them distinguish HeLa cells from other cells. The family did not receive an adequate explanation of the researchers' purpose and initially believed that they were being tested for cancer (Skloot, 2010).

David found the situation difficult to understand. He learned that Henrietta's cells were alive, being studied worldwide, and connected to important scientific discoveries. Yet neither he nor the children had known about the cell line. They also lived with limited access to healthcare while biological material originating from Henrietta had become scientifically valuable.

His response combines anger, fear, suspicion, and confusion. He came to believe that doctors might take parts of his body as they had taken tissue from Henrietta. This fear reflects both limited scientific understanding and a profound loss of trust. From David's perspective, the institution that treated his wife had withheld information and permitted others to use a part of her body indefinitely.

The scientific benefits of HeLa cells were extraordinary. The cells contributed to research involving cancer, infectious diseases, genetics, radiation, and numerous other areas of biomedical science. The National Institutes of Health has identified more than 110,000 scientific publications citing HeLa cells between 1953 and 2018 (National Institutes of Health, 2022).

However, scientific value does not eliminate the ethical importance of communication and respect. David's reaction shows what can happen when research institutions treat biological materials as scientifically important while treating the person and family connected to those materials as irrelevant.

Medical Ethics and Informed Consent

The original article argues that the use of Henrietta's cells violated her right to informed consent. This statement expresses an important contemporary ethical concern but requires historical and legal qualification.

Henrietta's tumor tissue was collected during her treatment in 1951 and given to researchers without her knowledge. At the time, federal regulations did not require researchers to obtain the type of informed consent now associated with human-subject research and biospecimen use. Therefore, it

would be inaccurate to suggest that the doctors violated the modern Belmont Report or contemporary federal research regulations, since those standards did not yet exist.

The National Research Act was passed in 1974, and the Belmont Report was issued in 1979. The report established respect for persons, beneficence, and justice as central principles of ethical research. Respect for persons includes recognizing individual autonomy and providing people with sufficient information to choose voluntarily whether to participate in research (National Commission for the Protection of Human Subjects of Biomedical and Behavioral Research, 1979).

Judged according to these contemporary ethical principles, Henrietta was denied meaningful control over the research use of her tissue. She was not informed that part of her tumor would be used to establish a cell line, and she had no opportunity to accept or reject that use.

David's legal position was different from Henrietta's. Because Henrietta was an adult capable of making her own decisions, consent should have been sought from her rather than from her husband. It is therefore imprecise to say that the initial removal of the cells violated David's personal right to provide consent on Henrietta's behalf.

Nevertheless, later events affected the entire family. HeLa cells contained genetic information related to Henrietta's descendants. Publication of genomic information could reveal information about living relatives, creating privacy implications that did not end with Henrietta's death. Modern scholarship on biospecimens emphasizes that biological samples may have familial as well as individual significance (Beskow, 2016).

In 2013, the National Institutes of Health reached an agreement with members of the Lacks family concerning controlled access to HeLa genomic data. The agreement did not provide the family with ownership of the cell line, but it gave family representatives a role in reviewing applications for access to certain genomic information (Greely & Cho, 2013). This later arrangement illustrates a form of engagement that had been missing from the family's earlier interactions with researchers.

David as a Product of Racial and Economic Inequality

David's character cannot be separated from the social position of the Lacks family. He and Henrietta were African Americans born in the rural South during an era of legalized segregation. Their educational and economic opportunities were restricted, and they entered institutions in which white professionals generally possessed far greater authority.

When Henrietta sought treatment, Johns Hopkins was one of the few major hospitals in the area that treated Black patients. Treatment was provided within a segregated medical system. The fact that care was available does not mean that patients and professionals interacted as social equals.

David's limited education placed him at a disadvantage when dealing with researchers, doctors, lawyers, and journalists. Scientific explanations were frequently delivered in language that he and other family members could not easily understand. The family's questions were sometimes treated as evidence of ignorance rather than as reasonable requests for transparency.

His distrust therefore represents more than an individual personality trait. It reflects the experience of a man who repeatedly encountered institutions that possessed information and power he did not have. He knew that his wife's cells had been used without her knowledge, that scientists had benefited from them, and that the family had remained poor and medically underserved.

The book does not establish that David was entitled to profits from every scientific or commercial use of HeLa cells. The legal ownership of removed tissue is a complicated matter. However, the contrast between the family's poverty and the extensive scientific and commercial activity surrounding HeLa deepened their sense of injustice.

A Flawed but Sympathetic Character

David is neither the hero nor the principal villain of Skloot's narrative. He is a flawed individual whose choices sometimes hurt those closest to him. His infidelity injured his marriage, his emotional distance limited his connection with his children, and his failure to supervise their care exposed them to serious abuse.

At the same time, he is a sympathetic character because his limitations are presented within a difficult life. He grew up in poverty, performed demanding labor, lost his wife at a relatively young age, and was left to care for five children with little support. He was expected to understand complex medical and scientific developments without receiving clear explanations from the professionals involved.

David also experienced powerlessness. He could not save Henrietta from aggressive cervical cancer, could not fully understand what had happened to her cells, and could not control the institutions that continued to use them. His fear of doctors in later life suggests that Henrietta's experience did not produce confidence in medicine. Instead, it left him anxious that researchers might also take biological material from him without permission.

His character is therefore built from contradictions. He is hardworking but neglectful, concerned but inarticulate, suspicious but not entirely unreasonable, responsible in providing income but irresponsible in protecting his children. These contradictions make him believable and prevent the family's story from becoming a simple conflict between innocent relatives and unethical scientists.

David's Symbolic Importance

Within the larger structure of *The Immortal Life of Henrietta Lacks*, David represents the human consequences of scientific exclusion. The HeLa story is often described through medical breakthroughs, laboratory discoveries, and technological progress. David's experience redirects attention to the people left outside those developments.

He symbolizes a family member who learns that science has preserved a biological part of his wife while medicine could not preserve her life. He also represents the gap between professional scientific knowledge and public understanding. Researchers understood HeLa as a cell line, but David initially encountered it as the disturbing claim that part of his deceased wife remained alive.

His character also highlights the importance of trust. Medical mistrust is sometimes described as a problem located entirely within minority communities. David's experience demonstrates that distrust can be a response to secrecy, disrespect, unequal treatment, and historical exploitation. Trust cannot be demanded from patients and families; institutions must earn it through honesty, understandable communication, accountability, and respect.

Finally, David represents the imperfect survivors who remain after a person becomes a symbol. Henrietta became internationally recognized for the scientific importance of her cells, but her family continued living with ordinary and painful problems. They experienced poverty, illness, abuse, grief, incarceration, and family conflict. David's flaws prevent readers from romanticizing the family while still recognizing the injustice they experienced.

Conclusion

David "Day" Lacks is a complex character whose life reveals the intersection of individual responsibility and structural inequality. He was a hardworking steelworker who attempted to provide financially for his family, but he was emotionally distant and failed to protect his children adequately after Henrietta's death. His infidelity and parenting failures caused harm, yet his behavior occurred within circumstances shaped by poverty, grief, racial segregation, dangerous employment, and limited support.

His reaction to HeLa cells is equally complex. He did not understand the scientific meaning of an immortal cell line, but his mistrust was not baseless. Henrietta's tissue had been used without her knowledge, the family had remained uninformed for decades, and later researchers communicated poorly when seeking blood samples from family members.

The ethical problem should not be described simply as the violation of David's right to consent. Henrietta was the individual whose autonomy should have been recognized. Nevertheless, David and the children had legitimate interests in receiving honest information, being treated respectfully, and

protecting genetic privacy that could affect living family members.

Skloot's portrayal does not ask readers to excuse David's failures. Instead, it encourages them to understand how personal weakness, grief, economic hardship, racism, medical inequality, and institutional secrecy can interact. David is significant because he embodies both accountability and victimization. He made decisions that harmed his family, but he was also part of a family excluded from decisions concerning one of the most influential biological materials in modern medical research.

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