



“...to the Grave”—Autopsy, settler structures, and indigenous counter-conduct

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ARTICLE INFO

Keywords:

Indigenous peoples
Settler colonialism
Biopolitics
Governmentality
Counter-conduct
Autopsy

ABSTRACT

In February 2015, two Anishinaabe tribal members, Mushkoob Aubid and Autumn Martineau, passed away after car accidents in Northeastern Minnesota. Their bodies were slated to undergo autopsy, sparking opposition from their families on religious grounds. This sparked a struggle that pitted the families and tribal allies against state structures, in what led to the recovery of the bodies and changes in Minnesota state laws surrounding autopsy. The role of ‘quotidian’ settler violence in the events that transpired, through a theoretical framework of settler colonialism, biopolitics and the importance of autopsy, is placed in opposition to the role of ‘quotidian’ indigenous resistance, informed by a theoretical framework of counter-conduct and indigenous modes of knowledge and being. It is argued that although settler colonial society and its associated structures are able to reconfigure themselves at will in a variety of articulations in order to subjugate indigenous peoples, indigenous people are able to resist this subjugation with resourceful and multifaceted resistance of their own. This can be seen in the ability of the Aubid and Martineau families to recover the bodies of their loved ones. The paper concludes by considering the implications of the case study for future Anishinaabe/indigenous resistance against autopsy, and in more general applications.

1. Introduction

In February 2015, two Anishinaabe tribal members, Mushkoob Aubid and Autumn Martineau, perished in separate car accidents in rural northeastern Minnesota. Their bodies were taken to be autopsied by county officials, a practice that was vehemently opposed by their families as it went against their traditional methods of preparing bodies for burial. The opposition to autopsy that was mounted by the grieving families was multifaceted, eventually leading to changes in Minnesota state laws and ultimately resulting in the removal of the county medical examiner. In the process, the Anishinaabe faced equally organized and spirited attempts by the county medical examiner and other institutions of the settler state to proceed with the autopsies, and to defend autopsy practices statewide.

This little-known struggle around the fate of Anishinaabe bodies raises several questions for scholars of indigeneity and settler colonial studies. First, why was the state so keen to defend the autopsy process and what is achieved by autopsying bodies against the will of family members? Second, who and what is “the state” in this instance? While scholars commonly reference the structural violences of a “settler state,” just how does the medical examiner’s insistence on autopsy fit in, and with what other state actors does the coroner align? Finally, how successful was indigenous resistance to the particular

configuration of the settler state in this case?

In exploring these questions, I seek to draw attention to the stark totality of quotidian settler colonial violence towards indigenous bodies. In this particular case study, such violence played out via multiple scales of governance, ranging from the nation-state, down to smaller and more intimate structures, such as the county. This violence also worked through a variety of spatial structures which may not ordinarily be associated with such acts, ranging from the hospital to the university campus. It extended across the lifespan of an indigenous person and beyond, enduring past the moment of death. To make this argument, I draw on Wolfe (2008) to conceive of settler colonial violence as a “structure, not an event”—i.e., it is not limited to ‘spectacular’ moments of contention between the settler state and indigenous peoples, but rather constituted through ongoing and even banal practices. This structural violence has supported settler colonial hegemony throughout the history of the United States. It is resourceful and adept at changing its form to meet the needs of settler society. However, just as settler colonial structures are able to reconfigure themselves at will to subjugate indigenous persons, so too does indigenous resistance prove to be just as resourceful and capable of reconfiguring itself to meet the everyday tactics of settler colonialism. The net result—in theory—is the continuing failure of the settler colonial state to completely eliminate indigeneity.

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This paper is structured as follows. In the next section, I lay out a conceptual framework. Through this framework, I first seek to explore biopolitics, the act of autopsy, and how both concepts fit into the settler colonial state. I then explain the ways that the settler colonial state can configure itself at will and how this informs effective indigenous resistance and counter-conduct. The subsequent section then outlines the case of the attempted autopsies of Mushkoob and Autumn in greater detail in order to demonstrate the tactics used by all parties to assert or refute control over the deceased persons' bodies. I follow this with a discussion of three insights that the case offers for scholars of settler colonialism, science studies, and indigenous resistance. I conclude by contemplating the implications of the study for the parties involved, and for the potential future of Anishinaabe resistance against autopsy in Minnesota.

2. Indigenous bodies in the settler state

2.1. Settler colonialism & the biopolitics of autopsy

In the settler colonial state, state power and state hegemony have always been built on the premise that indigeneity and indigenous bodies are obstacles to be eliminated in the interests of progress, particularly as measured by settler colonial primacy over space (Adelman & Aron, 1999; Wolfe, 2006). In North America, this hegemonic control has taken various forms. For example, the U.S. government's forced dispossession of southeastern tribes such as the Cherokee along the infamous "Trail of Tears" was based upon the perceived political and economic threats indigenous presented to the emerging American state (Adelman & Aron, 1999; Wolfe, 2006). These genocidal acts have been numerous in the North American context, particularly during the Indian Wars of the 1800s in the United States. However, it is also asserted that settler colonialism does not always require outright force/violence, even as the settler colonial state always reserves the right to overt violence and has historically deployed the threat of force to keep indigenous peoples in check (Wolfe, 2006; Monaghan, 2013; Glenn, 2015). An example of philosophical-legal means of elimination is the de-humanization of American Indian tribes which occurred from various legal acts and court decisions in the United States during the early 1800s (Wolfe, 2007). This de-humanization, or *corpus nullius*, meant that American Indians were relegated to an 'lesser' political existence than European settlers. This meant they could be denied full participation in the settler state AND full sovereign control over their own lands, ultimately legitimizing their elimination (Wolfe, 2007 & McCarthy, 2016). American Indians were relegated to reservations and placed into an 'exception' where they were understood as separate from settler society, yet subordinated to settler rule (Rifkin, 2009).

From this, settler colonialism in the United States gradually transformed into a project of indigenous assimilation into the state itself. In part through military domination and pacification, the American state began to push for individualism among tribal members and a breakdown of existing tribal social networks (Biolsi, 1995). This was a biopolitical positioning of indigenous peoples from a collective population into individual bodies that could be brought into the settler state and rendered pacified as objects to be known and regulated (Morgenson, 2011; Glenn 2015). This would allow indigenous bodies to be more easily assimilated, steadily losing their social/cultural networks, beliefs, and their unique status as the original people of North America in furtherance of incorporation into a purported 'multicultural' state, where their cultural rights would be recognized yet constrained and diluted (Hale, 2005; Bryan, 2010). This results in indigenous people being enrolled in state-supported 'neoliberal multiculturalism' (Hale, 2005). Of course, such a 'multicultural' state would be in name only. Settler culture and sensibilities would always take the forefront in such a state, sweeping away any indigenous political and social structures deemed unnecessary to it (Dunbar-Ortiz, 2014; Veracini, 2015). If there is any recognition of indigenous peoples or their cultures and traditions,

it will only be the aspects that can be of use to settler society, and do not challenge settler hegemony (Povinelli, 2002). Otherwise, those indigenous people who did not assimilate would be placed on the fringes of settler society, both spatially and socially (Rotz, 2017). Despite their placement on the margins (or perhaps due to it), indigenous people would be still subject to everyday violence within settler colonial structures; their pacification is never reciprocated by the settler state (Bonds & Inwood, 2016).

Through a governmentality that focused on the incorporation of indigenous people into the settler state, acts such as the introduction of blood quantum, and other means of population measurement meant indigenous peoples could slowly be assimilated (and ultimately 'eliminated') through another means: statistical attrition. Such attrition would eventually leave their lands open for seizure by European settlers, therefore being incorporated into the settler state (Morgenson, 2011). Indigenous bodies therefore became the site of elimination. In particular, the concept of blood quantum, or the amount of indigenous 'blood' an individual possesses, has held sway in settler articulations of American Indian tribal membership (Schmidt, 2011). Although the usage of 'blood' measurement for racial classification had seen wide usage on North American continent dating back to British colonization, its use for indigenous peoples by the United States began in earnest in the 1800s (Spruhan, 2006). This continued on, ranging from blood quantum being used to determine ownership rights on reservation land allotments, to modern usage by tribes themselves to set parameters for access to tribal membership and resources, such as gaming revenues (Schmidt, 2011). Although blood quantum is obviously not the only metric by which indigenous identity is formed, in the context of the United States, it has been established as the measure through which a body is deemed 'indigenous' or 'non-indigenous' in settler logic (Strong & Van Winkle, 1996). The act of placing indigenous peoples in one of these categories was mobilized for generating knowledge for anthropology and science, such as the medical measurements of 'full-blood' and 'half-breed' Anishinaabe peoples on the White Earth reservation in Minnesota during the early 1900s (Beaulieu, 1984; TallBear, 2013). This scientific categorization of indigenous people has continued into the present, as indigeneity has increasingly is increasingly determined at the microscopic level, through an increasing focus on 'indigenous' genetics and DNA (TallBear, 2013).

The embrace of statistics and scientific knowledge as tools of assimilation and dispossession of indigenous peoples has had a long history of use on the North American continent, in a variety of situations and geographical contexts (Harris, 2004). This leads to the question of autopsy, and how it can be understood in terms of state hegemony, governmentality and biopolitics. In modern European scientific and medical discourse, autopsy was embraced beginning in the 1700s as a method through which the body could be understood, quickly after death (Foucault, 1973). While the body might have been dead in the legal sense, clinically, the (declining) processes of life could be examined closely, turning the postmortem body into a site through which knowledge of life and disease could be known (Foucault, 1973). Medical examination of corpses is part and parcel of the scientific project of knowing populations through death—it is a profoundly biopolitical project in any context (Tyner, 2005). Autopsy is an essential means by which select authorities—in secure spaces closed to the public—generate knowledge about the body after death. Ultimately, though, the dead are enrolled in a project which is about understanding the conditions of life, with coroners' insights marshalled to an Agambenian science of 'making live' through 'letting die'. By gleaning information and insight from dead bodies about pathological concerns such as disease, medical science could be of use in potentially securing existing life from such causes of death (Timmermans, 2006).

Scholars of autopsy and science studies have described the practice as "necrophiliac rape" (Klaver, 2005: 10) that allows the state to take a Foucauldian "piercing gaze" into the deceased's body (Klaver, 2005: 24). This description appears an apt summation of the ways in

which—for indigenous peoples—autopsy can be perceived as a final injustice and indignity performed on a body which since birth has been subjected to settler colonial structures, especially in the area of medicine (Tlatilpa, 2015). It is an intimate act, touching the individual indigenous body itself. Indeed, Minnesota is home to one of the grossest examples of the ways in which a genocidal settler state inflicts violence on indigenous bodies long after the moment of death, and justifies such violence in the name of science. Following the Dakota War of 1862, 38 Dakota men were hung at Mankato, Minnesota in what is recognized as the largest mass execution in the history of the United States. In ghastly fashion, settler society's grip on the bodies endured beyond the gallows. Not long after the bodies' burial, many of the remains were exhumed by men including Charles Mayo (father of the Mayo brothers of Mayo Clinic fame) for use in medical experiments (Krohn, 2014). It would take nearly 150 years for the remains to be properly repatriated to the families (Avalanche Journal, 2000). In this, we can see the biopolitical turn of settler colonial structures—they seek to not only completely dominate indigenous lands, but also dominate indigenous bodies in life and death, through accompanying discourses of knowledge.

Opposition to autopsy is not unique to Anishinaabe people, or indigenous people more broadly. Many religions have expressed opposition to autopsy, and there is a wealth of literature on the specific nature of religious opposition to the practice, especially among the Jewish and Muslim communities, both in the United States (Parks, 1996) and abroad (Carpenter et al., 2014). In one court case, *Schwartz v. State*, a family of a deceased New York prison inmate successfully sued New York State on the grounds that the state conducted an autopsy on the deceased's body in spite of the stated objection of the family to autopsy on religious grounds (Parks, 1996). In 2015, the United Kingdom's High Court ruled that if a British family opposes an autopsy on religious grounds, non-invasive methods of death investigation must be undertaken instead (Gallagher, 2015).

In the context of the settler colonial state of Australia, objections by differing religious communities take on a stratified nature (Carpenter et al., 2014). In the case of Jewish opposition to autopsy, this has often been seen as a catalyst for change towards the practice of autopsy in the face of religious objection (Carpenter et al., 2014). When Muslim opposition is brought forth, unlike Jewish opposition, it is often viewed with hostility and suspicion by Australian law enforcement and coroners due to the perceived divide between Islamic religious tenets and Australian society (Carpenter et al., 2014). In the context of the current study, it is particularly salient that Aboriginal Australian bodies represent a large portion of those who are to be autopsied (Carpenter et al., 2014). To date, scholars have not explored Aboriginal resistance to this practice, but have recognized that as a site of potential (and therefore avoidable) conflict with the state, Aborigines are more likely to abstain from making their desires around autopsy known (Carpenter et al., 2014). With this in mind, it is also salient that in the context of the United States, there appears to be a particular gap in literature which directly interfaces with specific American Indian opposition to autopsy.

2.2. Configurations of the settler state & indigenous resistance

Autopsy brings together particular bureaucratic and statistical institutions of the settler state in a specific configuration. As a biopolitical tactic, autopsy necessarily enrolls medical examiners, the universities in which they are trained, the police who secure the scene of death and recommend an autopsy, emergency management technicians who recover the body, and the various state bureaucrats in health and demographic offices that maintain and mobilize the resulting data. When the body being autopsied is American Indian, information from the body can potentially be forwarded by the state to Federal-level entities such as the National Center for Health Statistics and the National Institutes of Health, to be combined with data from living Native bodies collected by the Indian Health Service to gain a better understanding of

causes of death among American Indians (Espey et al., 2014). If we accept that settler colonialism is a structure, then we must understand it to be composed through these sometimes surprising coalitions and configurations. Far from a monolithic entity which acts upon indigenous bodies in particular and predictable ways, we instead can envision the settler colonial structure as a nimble assemblage which can respond to manifold situations that might threaten its hegemony. Those assemblages can constitute themselves at and through multiple scales, including federal (e.g., Bureau of Indian Affairs, Congress), state, and the micro-jurisdictions created by the overlap of counties and tribal lands.

It is through these multi-scaled and multi-sited configurations of power that the settler state exerts power not just in spectacular moments of conflict (e.g., the 2016 Dakota Access Pipeline protests) but in profoundly quotidian ways—such as through the border agents that deny Mohawk the treaty-guaranteed right of transit across the U.S.-Canada border (Simpson, 2014). The settler colonial state can make itself felt at any moment in time, anywhere within its boundaries. In the face of such simultaneously expansive and intimate repression, how can indigenous people fight back?

The answer (and question at the same time) to this question of resistance against settler structures is to understand indigenous resistance as equally multi-sited, multi-scaled, and adaptive. For example, Simpson (2014) proposes the concept of interruptance to think through Mohawk resistance in both quotidian and 'remarkable' contexts. This includes Mohawks' persistent assertion of treaty rights through repeated border crossings that "interrupt" state understandings of belonging and citizenship, and through outright political action, as through the Oka crisis of 1990 (Simpson, 2014). This concept is not just limited to scholarship on Mohawk people, but has been echoed in other works by indigenous scholars (McCarthy, 2016). Furthermore, it is possible to imagine quotidian resistance of the type Simpson describes as an example of the Foucauldian concept of counter-conduct (Foucault, 1978; see also Rosol, 2014). Counter-conduct implies that a group understands the behavioral 'conducts' that they are expected to operate within by dominant power structures, yet choose to not do so. Indigenous counter-conduct through interruptance does not always come through the form of performative acts of resistance, however. Many times, the simple act of indigenous people choosing to incorporate the social and political traditions of their tribe into the everyday acts of their lives is enough to serve as effective resistance towards settler structures (McCarthy, 2016). These very acts interrupt and subvert settler notions of what indigenous people should be, and what actions they may take in their lives, both deliberate and quotidian (Simpson, 2014 & McCarthy, 2016). For example, the Inuit people continue to hunt and fish in their traditional territories, despite the development of conservation laws in Canada that deem certain instances as poaching (Gombay, 2014). The control or denial of information on tribal members, their beliefs, and their traditions can be another form of counter-conduct, as can be seen from the difficulties anthropologist Leo Srole encountered from 'unruly' Ho-Chunk tribal members in Wisconsin, during his attempts to learn more about their sacred practices (Arndt, 2016). In modern times, some tribes have taken steps to establish some form of control over research activities on their sovereign territories and tribal citizens, setting clear protocols by which researchers must abide by (TallBear, 2013).

Such counter-conduct has particular relevance for the historical background of this study. In 1990, an Ojibwe elder passed away, and was slated to be autopsied by the local medical examiner. His son went to the hospital where the body was being held, loaded his father's body into his vehicle, and led police on a high speed chase along the roads of a rural northern Minnesota county. He eventually escaped, burying his father's body in accordance with Midewiwin¹ tenets. The father's name

¹ Although I make multiple references to the Midewiwin, or Mide faith in this paper, I

was George Aubid—the son’s name, Mushkoob (LaDuke 2015; Johnson, 2016). Despite what might appear to be a ‘spectacular’ instance in counter-conduct in the recovery of George’s body, Mushkoob’s intent was not to create a public spectacle, but to simply regain possession of his father’s body so George could be buried according to his religious beliefs. I propose this concept of quotidian indigenous counter conduct as a productive way to think through indigenous resistance to the quotidian repression of the settler state—one that is persistent and effective but in many cases does not give open legitimacy to the state’s right to exert violence upon them.

3. The sequence of (unremarkable) events

Insights and data that underpin my research were gained through several different methods. For a timeline of events, I used local newspaper articles and online news stories (primarily from the *Duluth News Tribune*) about the deaths of Mushkoob Aubid and Autumn Martineau, the attempted autopsies of their bodies, the actions taken by their families, and the subsequent events surrounding the new Minnesota statute on autopsy. I conducted semi-structured interviews in the early spring of 2015 with several fellow Anishinaabe who were involved in the events surrounding Mushkoob and Aubid. In the process, I was acutely aware of my own positionality as an Anishinaabe scholar who was interviewing community members on events and topics that were potentially sensitive to them. Therefore, the interviews were designed to allow the interviewees to guide the conversations, and special care was taken to respect the willingness of the interviewees to speak on sensitive topics such as the Midewiwin faith.

On February 6th, 2015, Mushkoob Aubid, an elder member of the Mille Lacs Band of Ojibwe, was involved in a single-car accident on Minnesota State Highway 210 some 45 miles west of Duluth, Minnesota, when his car collided with a utility pole on the side of the road. He was brought to a hospital 25 miles away in Cloquet, Minnesota, where he passed away the next day, February 7th (Olsen, 2015b). It was determined by the county and the medical examiner’s office (operated by a private firm that was contracted by the county) that there was a need to ascertain and establish an official cause of death in the eyes of the state, as instructed through established Minnesota state statute (Olsen, 2015b). Therefore, it was decided that an autopsy would have to be conducted on Mushkoob’s body, which was therefore transported to Duluth, 20 miles from Cloquet, where the medical examiner’s office had working space in the Medical School building on the campus of the University of Minnesota Duluth (Olsen, 2015b).

Mushkoob’s family immediately informed the medical examiner’s staff that they were opposed to the autopsy of Mushkoob’s body. This opposition was based upon their adherence to the Midewiwin, a traditional Anishinaabe society and faith, and upon their assertion that the cause of Mushkoob’s death was due to a heart attack, and not the accident (Olsen, 2015b). They followed Mushkoob’s body as it was transported to the UMD Medical School (Olsen, 2015b). Once it reached the Medical School, the body was taken inside of the building where the autopsy was to be performed later that day. The family was immediately denied access into the building. At this point, several phone calls were made to tribal officials from Mushkoob’s band, the Mille Lacs Band of Ojibwe (T. Johnson, 2016). The officials then contacted tribal attorney Tadd Johnson to see if he would be able to find any way to stop the autopsy. Johnson made a series of phone calls, including one to fellow tribal attorney Rebecca St. George, and to Rick Smith (director of the American Indian Learning Resource Center at

UMD and local community leader), in order to enlist their help in both attempting to stop the autopsy, and to reach out to the Mushkoob’s family, who by this point were occupying space in a parking lot directly across the street from the Medical School (Olsen, 2015b; T. Johnson, 2016; St. George, 2016; Smith, 2016). Smith then mobilized support from the University to accommodate the family; this included the provision of an indoor space for them, food for a funeral feast, and support for other prescribed actions, such as building an outdoor fire (Smith, 2016).

St. George, in turn, was able to draw upon local connections she had with the Duluth legal community in order to persuade the medical examiner’s office to postpone the planned autopsy for several days (St. George, 2016). She also had a series of conversations with the medical examiner himself, Dr. Thomas Uncini. In these conversations they discussed allowing the family to perform various rites required by their faith. Dr. Uncini expressed doubt about the legitimacy of Mide, and was concerned that the family would “tamper with the body” (St. George, 2016). Subsequently, St. George and Johnson also began to work on an *ex parte* court order to release Mushkoob’s body, which was completed and signed by a local judge (Kraker, 2015; T. Johnson, 2016; St. George, 2016). Court order in hand, Johnson returned with Rick Smith to the UMD campus, where they attempted to read the court order to a member of the medical examiner’s staff via telephone. A brief verbal altercation followed where the staff member essentially refused access to the body, refusing to even recognize the court order (T. Johnson, 2016; Smith, 2016).

Soon afterwards, Director Smith was able to get Dr. Uncini himself on the phone. Dr. Uncini asserted that Johnson and Smith were not only lying about having a court order, but that they were also making up the Midewiwin faith. He demanded that UMD campus police “get those people [Mushkoob’s family] off of campus” (Smith, 2016). At this point, Johnson and Smith had to return to the Aubids and tell them the body would not be released that night (T. Johnson, 2016). Therefore, the family stayed outside the medical school, in below freezing temperatures, due to the fact that some of their actions such as tending a fire could not be done in an indoor space and also owing to their desire to be as close to Mushkoob’s body as possible (Olsen, 2015; T. Johnson, 2016; Smith, 2016). The following morning, however, Johnson and St. George had an appointment with the St. Louis County attorney, Mark Rubin, in Duluth. During their meeting, Rubin talked to Carlton County attorney Thom Pertler, and they agreed to honor the court agreement and release the body (T. Johnson, 2016; St. George, 2016). Mushkoob’s body was released to his family later that day, 2 days after his death. They were able to mourn and bury him according to their Midewiwin faith (T. Johnson, 2016; St. George, 2016; Smith, 2016).

Several days later, Autumn Martineau, a member of the Fond du Lac Band of Lake Superior Chippewa, died after the car she was riding in was hit by another vehicle on an Interstate highway on/off ramp in Cloquet (W. Johnson, 2015; St. George, 2016). It was immediately clear to observers including Johnson that Autumn had died from the car accident itself. However, the medical examiner’s office again insisted that Autumn’s body needed to undergo autopsy, against the wishes of the Martineau family, who also practiced Mide. Johnson and attorney St. George were again involved in attempts to release Autumn’s body (W. Johnson 2015; T. Johnson, 2016; St. George 2016). This time however, Dr. Uncini and his staff were far more hostile. When St. George made contact with Dr. Uncini, he yelled at her, calling her “a liar and dishonest,” stating that he didn’t wish to have any further dealings with St. George or other Fond du Lac officials (St. George, 2016). When the Chairwoman of the Fond du Lac Band, Karen Diver, attempted to talk to Dr. Uncini, he yelled at her as well, insinuating that the Fond du Lac Band had some sort of privileged relationship with county judges (St. George, 2016). The situation surrounding Autumn’s body became more urgent when one of Dr. Uncini’s staff members informed the Martineau family that her body was to be moved to a medical facility in Hibbing, a city 70 miles north of Cloquet (Benjamin

(footnote continued)

decline to go into specific tenets of the religion beyond what is necessary for the narrative. As many indigenous religions have only been legal to practice openly in the United States since the passage of the American Indian Religious Freedom Act of 1978, I wish to respect my fellow Anishinaabe people and their right to privacy related to their religion.

& Diver, 2015; W. Johnson, 2015; St. George, 2015). The Martineaus were told that they had only one hour to secure a court order to prevent the transfer and subsequent autopsy. St. George was nevertheless able to get the court order signed, and with the assistance of the county attorneys, was able to save Autumn's body from being autopsied (W. Johnson, 2015; Kraker, 2015; Olsen, 2015c).

The events surrounding the attempted autopsies of Autumn and Mushkoob, combined with the tragedies of their deaths, had a significant impact on Anishinaabe people of the region. Many family members and community members were astonished at the perceived lack of respect for their loved ones and religious traditions by the medical examiner's staff, which was made clear by local newspaper reports. "Can you imagine having lost a close relative, and you couldn't get access to them? You had some authority figure holding them from you?" asked Mille Lacs Band spiritual advisor Obizaan (*English name-Lee Staples*) (Manisero, 2015). "We just want to prepare [Mushkoob's] body for his journey to the next world...this is the way it's been done for thousands of years," said Mushkoob's widow, Winnie LaPrairie (Olsen, 2015b). "We respect other people's ways...why can't they respect ours?" added Winnie (Olsen, 2015b). When the Aubids occupied space outside of the UMD Medical School, Mushkoob's son noted, "We're trying to do this [observation of the Midewiwin funeral rites] peacefully and according to the law, but our beliefs supersede those laws. Our father gave us explicit instructions for what to do when he passed, and that's what we're trying to do here" (Olsen, 2015b). Reactions to the attempted autopsy of Autumn reflected the continued disbelief of community members that Uncini and his staff seemingly had not learned anything from their interactions with the Aubids. "We're just really at a loss here...I'm thinking they would've learned some cultural competency in having to deal with the Aubid family," said Fond du Lac Band Chairwoman Karen Diver (W. Johnson, 2015). Autumn's family members also spoke to the need to respect and follow Midewiwin tenets. "I'm Midewiwin and that's my niece...she should be home. Someone should be with her already. According to our practice, the body should not be left alone and she's been left alone, said Autumn's aunt, adding "If you come into serve our community, you should be culturally competent. You should understand what our practices are" (W. Johnson, 2015).

During these events and in the time period immediately following, Johnson conducted research on the extent of the powers held by medical examiners over a deceased's body. He discovered that in practice, most medical examiners made contact with the families of the deceased. This was not done by Dr. Uncini or his staff in either the Aubid or Martineau case. As a result, Johnson launched an effort to change state law. Together with tribal officials and lobbyists from the Fond du Lac and Mille Lacs bands, and with allies in the state legislators, a bill was introduced in the Minnesota Legislature on March 16th, 2015 (just over a month after the deaths of Mushkoob and Autumn) that allowed for families to voice opposition to autopsy on religious grounds: "If the representative of the decedent objects to the autopsy on religious grounds, an autopsy must not be performed unless the coroner or medical examiner determines that there is a compelling state interest to perform the autopsy." (State of Minnesota, 2015; Davis & Olsen, 2015; Stellar, 2015). The bill met initial resistance from the Minnesota medical examiner/coroner community (T. Johnson, 2016).

When eventually passed, the bill addressed concerns by the medical examiner community by maintaining the state's right to autopsy under certain circumstances/on a number of grounds, including homicides, police shootings, workplace deaths, electrocution and drowning (State of Minnesota, 2015). The bill also failed to specify its origins with American Indian concerns—the "religious grounds" for resistance to autopsy are not exclusive to indigenous peoples but extend to all Minnesotans. Nevertheless, the passage of the new statute represented a victory for the Fond du Lac and Mille Lac bands, because it in theory would prevent other families from experiencing what the Aubid and Martineau families went through (KAAL, 2015).

The new statute mandated that a medical examiner talk to the families of a deceased person before conducting an autopsy: "The coroner or medical examiner shall, as soon as possible, but no more than 24 h after the discovery of the decedent's body, exercise good faith efforts to give verbal or written notice to the representative of the decedent of the intended autopsy" (State of Minnesota, 2015). It also addressed treatment of the body after death: "Autopsies performed after a religious objection under this subdivision must be the least intrusive procedure consistent with the state's compelling interest in performing the autopsy" (State of Minnesota, 2015). These victories were sweetened by the fact that, in response to tribal and community pressure, Dr. Uncini resigned from his post as medical examiner in St. Louis County in March 2015 after serving in that position for 17 years (Myers, 2015; Peterson, 2015). In April 2016, he also was removed as Carlton County medical examiner by the county board after serving for just over one year in the position, in an apparent response to the previous year's events (Lund, 2016). It must be noted however, that as of the writing of this piece, Dr. Uncini continues to serve on as medical examiner in two remote northeastern Minnesota counties (Minnesota Department of Health, 2017).

With the details of the cases now laid out, I return to the questions I first posed in the introduction.

4. Why autopsy?

The first question concerns the state's insistence on autopsy. The case of Mushkoob and Autumn show, after all, the lengths that the medical examiners's office went to physically and discursively secure the bodies for examination. There are valid arguments to be made in support of autopsy. Medical professionals and academics who work in medical fields have support the act of autopsy, on the grounds that autopsy allows the pathologist to confirm or challenge the initial diagnosis contributing to the body's death in a manner that provides the smallest margin for error or misdiagnosis (Costache et al., 2014; Marinescu & Rogozea, 2014). Accordingly, the act of autopsy, through its complete and total examination of the body, can uncover underlying causes of death or illness that may not have been found when the person was living (Ayoub & Chow, 2008; Marinescu & Rogozea, 2014; Jauhar, 2016). The educational benefits of autopsy include its importance to the science of pathology (Ayoub & Chow, 2008). Autopsy also yields information of broader interest to the state and settler society. For example, questions of population epidemiology can be answered through data gleaned by autopsy, such as a study on cancer rates in Southeastern Minnesota that ran for decades (Chute et al., 1991). Data from autopsy makes its way to entities such as the Centers for Disease Control and Prevention (CDC), which then incorporates it into systems such as the National Vital Statistics System, allowing the state to track death rates and other vital statistics, made available for information purposes and in the interest of public health (Centers for Disease Control and Prevention, 2018).

Presumably for these reasons, most federal and state laws protect the right of coroners to access the dead. The version of Minnesota Statute 390.11 that was in effect during the events in question, gives the coroner "sole discretion" to conduct autopsy "in the case of any death... when, in the judgement of the coroners...the public interest would be served by an autopsy" (State of Minnesota, 2010). The statute makes no mention of any allowances a coroner is obliged to make for family objection upon religious or moral grounds. Further, the statute asserts the need for speed: "The autopsy shall be performed without unnecessary delay"—which could perhaps justify the rushed schedule in the Martineau case. The statute also gives wide latitude to the actions that could be undertaken on the body, including cutting it open, removing organs and other parts, and conducting tests on those parts, as long as such actions support "determining or confirming the cause of death" (State of Minnesota, 2010). If Dr. Uncini would have proceeded with autopsy and wished to remove, retain, test or otherwise use body

parts, fluids or tissues in a manner “done only for research or the advancement of medical knowledge and progress” (State of Minnesota, 2010), only then would he be required to obtain “written consent or documented oral consent...from the legal next of kin...prior to [such] removal...or use” (State of Minnesota, 2010).

It is also important to outline the specific role that the medical examiner plays in this process. There has been a gradual shift in the United States from a model where a coroner handles the process of investigating and defining a cause of death, to a model where investigations into death are primarily handled under the auspices of a medical examiner. This shift could be attributed to the mostly elected nature of the coroner position, which might lead to a coroner who has little medical training or one who might be susceptible to corruption or other political influence. It also can be attributed to the perceived scientific legitimacy of the medical examiner, who is expected to have their educational background in medicine and pathology, and is more removed from the political processes and ramifications surrounding the investigation of a death (Timmermans, 2006). Many counties in Minnesota have moved to the medical examiner model, and as the St. Louis County medical examiner’s office website states, the medical examiner in that county is an independent contracted official, answerable to the County Board only by Statute 390.11 (St. Louis County, 2017).

Medical examiners often derive their authority from their culturally inscribed duty of providing a ‘voice for the dead’ (Timmermans, 2006: 12). Indeed, Dr. Uncini defended his work on the grounds that he was providing a public good through his autopsies. In an interview with the Duluth News Tribune, he stated that he was doing what was expected of him by the state of Minnesota and the counties he served—as he had done for nearly 30 years in the region. “I wanted to do this [job] because I was providing the people of this county with a service that was vital to them. And I think I did a good job” (Olsen, 2015a). He also stated, “I didn’t do anything wrong...I felt like autopsies needed to be done. I was listening to what they [tribal advocates] were saying, I just disagreed” (Olsen, 2015a).

As reasonable as this stance appears, it understates what others reported about the extent of Dr. Uncini’s ‘disagreement’ with tribal authorities, which included personal attacks and thinly veiled racism. Indeed, for a medical examiner who has spent 30 years in the Duluth region in close proximity to multiple sovereign tribal nations, it seems surprising that he should dismiss the Midewiwin faith as fictitious and illegitimate. Combined, his actions raise the question of the degree of his interaction with the American Indian community in his role as coroner. For example, were American Indians more at risk to undergo autopsy by Dr. Uncini (or another medical examiner) than white, Euro-American citizens of the region?

Vital statistics from the state of Minnesota, and from Carlton and St. Louis Counties, suggest that the answer is yes. This is because of the relatively high percentage of American Indians in the two counties relative to the state as a whole (Table 1), the relatively high death rate of that population despite comparable age structures (Tables 2 and 3), and the greater likelihood that the nature of American Indian deaths would indicate autopsy (i.e., cases in which the cause of death was not

Table 1
Populations of Minnesota, Carlton County, and St. Louis County, with American Indian/Alaskan Native populations, expressed in actual population and in percentages of total population (Minnesota State Demographic Center, 2017).

Administrative unit	Population (est. 2015)	American Indian/Alaskan Native population (est. 2015)	Percentage of population
State of Minnesota	5,489,594	73,101	1.3%
Carlton County, MN	35,569	2128	5%
St. Louis County, MN	200,431	4733	2.4%

Table 2
Estimated size and percentages of each governmental unit’s population within three age ranges—this data includes the Fond du Lac reservation, which has territory in both Carlton and St. Louis counties and is the closest reservation geographically to Duluth and Cloquet (United States Census Bureau, 2015).

Age Ranges (Percentages of total population within age range) (2015 estimates)	State of Minnesota	Carlton County, MN	St. Louis County, MN	Fond du Lac Reservation, MN
Birth to 24	1,786,179 (33%)	10,991 (30.9%)	64,399 (32%)	1468 (36%)
25–59	2,561,289 (47.4)	16,451 (46.4%)	87,643 (43.8%)	1834 (44.8%)
60 and older	1,071,703 (19.6%)	8001 (22.6%)	48,464 (24.1%)	788 (19.3%)

Table 3
Overall death rates of Carlton and St. Louis County compared with death rate of state of Minnesota as a whole (Minnesota Department of Health, 2015).

Administrative unit	Population (est. 2015)	Total Deaths, 2015	Death Rate (expressed per 100,000) in 2015
State of Minnesota	5,485,238	42,652	777.0
Carlton County, MN	35,635	391	1099.3
St. Louis County, MN	200,381	2094	1044.7

Table 4
Death rates (per 100,000 peoples) for White and American Indian/Alaskan Native racial categories for three published causes of death which would potentially trigger an autopsy under Minnesota Statute 390.11, compiled from 2010 to 2014, and published in 2015; this is the most recently published information that is available (Center for Health Equity & Center for Health Statistics, 2015).

	Homicide	Suicide	Unintentional injury
Caucasian	1.2	12.2	38.8
American Indian/Alaskan Native	8.5	18.2	98.8

immediately apparent) (Table 4). These data suggest that, as long-term coroner in this region, Dr. Uncini was more likely than many his colleagues elsewhere in Minnesota to encounter American Indian bodies. His hostility to tribal leadership, and his insistence on proceeding with autopsy despite tribal concerns, therefore seems inconsistent. It was after all up to his discretion to proceed with autopsy.

Part of his hostility may be derived from the relative insularity of the medical examiner community against changing cultural and political trends. Medical examiners like Dr. Uncini occupy a rare space where their expertise is rarely questioned or criticized, and in many jurisdictions, they are granted total control of a deceased body with few mechanisms to check such power, with Minnesota proving to be no such exception (Timmermans, 2006: 14 & State of Minnesota, 2010). Despite the freedoms afforded to indigenous religious beliefs since the passage of the American Indian Religious Freedom Act in 1978, the way which the existing autopsy statute read provided Dr. Uncini with neither incentive nor persuasion to go against the law, especially to accommodate a religion that he very well might not have been aware of.

The medical examiner’s office also had financial incentive to pursue autopsies. According to the medical examiner contract that was in force in 2014, St. Louis County paid \$324068.04, for Dr. Uncini and his office staffs’ salaries, along with other costs, such as training of staff and laboratory fees (St. Louis County, 2012). Additionally, the contract outlined rates for autopsies, broken down on a per-capita basis, which came to \$1513.19 in 2014 (St. Louis County, 2012). This fee was broken down into several parts, including \$787.00 for the ‘physician cost’, \$595 for ‘laboratory cost’ and \$131 for the ‘pathology assistant’.

In the agreement with Carlton County that was in force during the controversy, Dr. Uncini's firm was paid \$12,000 annually for a 'medical examiner fee', along with \$21,500 in other related costs (Carlton County, 2015). For autopsies, the contract provided for up to \$1865.73 per body autopsied (this figure includes a \$655 charge to perform the autopsy at the Hibbing hospital where Dr. Uncini's firm was located) (Carlton County, 2015).

Given the fact that both counties had higher-than-average death rates for American Indians, and a higher share of deaths for which autopsy could be justified, it is not surprising that Tadd Johnson stated during our interview, "I'm living in a place where there's essentially a bounty on bodies of American Indians and a medical examiner can make \$1500 per body if he cuts them open" (T. Johnson, 2016). Johnson speculated that to the medical examiner community, American Indians might be viewed as a population who would be less likely to challenge state authority and hegemony by protesting their loved ones being taken off to be autopsied after death, making dead Anishinaabe bodies a prime target population for autopsy. This of course also is assisted by the presumed assimilation of Anishinaabe people into the settler colonial state; as 'citizens' of Minnesota, they must be included in all statistical data about death, not only among the American Indian population, but in more broadly based state-wide statistics, further entrenching the state's interest in seeing autopsies carried out.

It can be easy to simply dismiss Dr. Uncini's motivations as purely driven by ignorance, racial bias towards Anishinaabe people or financial motive. However, as this section has elucidated, every action which was taken by his office was backed by state law and a discourse that prioritized the scientific knowledge possessed by Dr. Uncini and his office. Ultimately, they were performing the actions that they were called upon by the state to perform, despite their troubling way of doing so.

5. Malleability of settler structures

Whatever Dr. Uncini's motives, he as medical examiner embodies only one way in which the settler state can configure itself to act against indigeneity. In fact, what we would consider to be the "settler state" manifested itself in various ways in the Mushkoob and Autumn cases. Dr. Uncini and his office were probably the most prominent part of the state apparatus in the events, and also arguably the most unique. Dr. Uncini's firm, Lakeland Pathology, is a private medical practice (e-physician.info, 2017), contracted by county governments. While the firm might not appear to have been a direct instrument of state power and hegemony, through its contract work and financial compensation, it was directly enrolled in the machinations of the settler colonial state—i.e., to carry out autopsies of indigenous bodies in order to generate knowledge of life and death.

The University of Minnesota Duluth's medical school itself was enrolled into this discourse of medical knowledge to a significant degree through its relationship with St. Louis County and the county medical examiner's office. In a 2014 agreement between UMD and St. Louis County, the county provided \$2,666.33 per month to the University in order to maintain a purpose built space and equipment in the UMD Medical School building (St. Louis County, 2014). The agreement stated that such a relationship between UMD, St. Louis County, and the medical examiner's office had existed since 1998 (with the medical examiner's space being constructed around the same time), and served several purposes, such as providing a working space for the medical examiner, as well as "[providing] teaching services to the UMMSD"²

² UMMSD is an abbreviation for the University of Minnesota Medical School, Duluth, the official name of the UMD Medical School. Despite its location on the UMD campus, UMMSD is a branch of the larger University of Minnesota Medical School, and administrative control formally lies with the Medical School administration on the University's flagship Twin Cities campus. However, the agreement includes the signature of the Chancellor (chief academic officer) of the University of Minnesota Duluth, AND the

(St. Louis County, 2014). The agreement also made clear that the medical examiner's office had primary control over the spaces provided to it, even to the extent of restricting access of medical school students if deemed necessary by the medical examiner's office (St. Louis County, 2014). The resulting product of the agreement is a partnership between the medical examiner's office and the University, where the medical examiner gains access to workspace, and the University gains access to bodies for training in Western, settler medical knowledge.

There were also more punitive forms of state power apparatus which were—including law enforcement. While this application of state power proved to be unevenly applied—a Minnesota State Patrol trooper who responded to the scene of Mushkoob's crash mentioned to Tadd Johnson that he didn't feel an autopsy was necessary (while stating that the decision to autopsy was ultimately not his to make), and some UMD campus police officials acted as go-betweens to Mushkoob's family, Smith, Johnson and the medical examiner's office—there were also instances where law enforcement served to secure and surveil, such as the UMD campus police's presence near Mushkoob's family as they occupied space outside the UMD Medical School.

Despite the spirited challenge presented to it by Mushkoob's family, Autumn's family, and their allies, the settler state and its apparatuses were quickly able to reconfigure themselves to negate any lasting ill effects to its hegemony. Through signing court orders, persuading Dr. Uncini to release the bodies, and helping to push through the new statute on autopsy, it might appear these apparatuses behaved in a way which we might not ordinarily expect from settler colonial structures—they worked in favor of indigenous people (resulting in a positive outcome for the bereaved families). This might appear at face value to be a critical blow to settler colonial structures by indigenous actors using 'the master's tools to dismantle the master's house', in a subversion of Lorde (1983). However, I argue that in reality, Indigenous rights and spiritual concerns became enrolled within a system of neoliberal multiculturalism, which diluted these rights and concerns into a general, non-specific accommodation for religious beliefs that did not present a threat to state authority and hegemony (see Hale, 2005).

This can be seen through the revision history of the Minnesota statute on autopsy. On one hand, the state legislators who authored the bill changing the statute did include new clauses such as the aforementioned requirement for medical examiners to communicate with families of deceased people (Green et al., 2015). They also wrote in the language providing for mechanisms through which families could express religious opposition or objections to autopsies (Green et al., 2015). However, their revisions also included the vast list of situations where a medical examiner, acting on behalf of the state, would have a compelling interest in performing an autopsy. Even with the clause referring to the 'least invasive method' for death investigations carried out after a religious objection, it notes the investigation must only use the least invasive method that corresponds with a certain cause of death. The bill also makes generic references to religion in general, without mentioning American Indian beliefs, or any specific religious beliefs at all. It can be reasonably expected that the state has no mandate to make reference to specific religious beliefs. However, the bill appears to be worded to appear to entertain any potential religious opposition, while providing the medical examiner an opportunity to find a compelling reason through which the state can still perform an autopsy.

6. Indigenous counter-conduct

Of course, just as settler structures can be flexible and manifest themselves at multiple levels, indigenous people are just as capable of presenting resistance towards these structures at multiple levels, even

(footnote continued)

medical school dean representing the Duluth campus.

when it's not intended as overt resistance at all. One such example was in the use of social capital and settler legal structures by indigenous people. In communicating with the county attorneys of St. Louis County and Carlton County, Johnson and St. George called upon existing social networks that they belonged to as lawyers in the Duluth community. Obtaining those court orders to release Mushkoob and Autumn's bodies can be interpreted as a form of counter-conduct that operated through legal structures of the settler state, as it was a Carlton County judge who signed the court orders releasing both Mushkoob and Autumn's bodies to their families. Tribal officials and lobbyists enlisted the help of Minnesota legislators in order to draft a statute on autopsy which would be more sensitive to tribal needs. This particular form of counter-conduct did not go unnoticed by settler structures, especially Dr. Uncini, as he exclaimed, "What is it with you people, are you best friends with all the judges or something?" while speaking with the chairwoman of the Fond du Lac Band (St. George, 2015). Parallels can immediately be drawn between Uncini's reaction and Arndt's piece on the Ho-Chunk mentioned earlier—once again, indigenous people were acting in a manner that on a surface level interfered with the gathering of information by settler structures.

The second form of counter-conduct came in the occupation of space. Mushkoob's family made clear to the settler colonial state in a very visible way that the project of autopsy, and the delegitimization of the Midewiwin religion would not proceed uninterrupted. By staying where they were on the UMD campus, in spite of the presence of law enforcement, the Aubid family created a space which was in that moment of time indigenous. Barred from being close to the body of their loved one, the Aubids were able to follow the rites prescribed to them by Mide in a parking lot, across the street from the Medical School. Additionally, this occupation of space triggered additional assistance; Rick Smith was able to receive institutional help from UMD to help accommodate the Aubid family's needs as they stood outside.

The third form came in the assertion of the right to mourn. In their occupation of space outside of the UMD Medical School, the Aubid family undertook actions that were misconstrued as resistance, even by myself. During my interview with Rick Smith, I asked him about his roles in the 'protests surrounding Aubid.' Smith quickly corrected me, "I guess I don't recognize it as a protest. It was an effort to communicate and do things appropriately [because] of traditional beliefs and human rights" (Smith, 2015). Building a fire, singing songs, and occupying space are things that we can generally accept through Western discourse as portraying a protest. However, as previously stated, these things were funeral rites that the Aubid family were carrying out because they couldn't be close to Mushkoob's body. These things were not actions that the Aubid family was performing for attention or notoriety, but something that per tradition and religious belief, they had always done. This provides a great example of what Audra Simpson would describe as 'interruptance' of notions of resistance and protest, and can even be described as quotidian as the Aubid family was doing nothing different than what they would have done if Mushkoob's body was there with them.

The Aubids' steadfast opposition to the autopsy of Mushkoob's body, along with the Martineaus' opposition related to Autumn centered around the belief that the act of cutting open their bodies would fundamentally go against their Midewiwin beliefs. Perhaps because of this, we can understand the anger felt by Dr. Uncini and his staff throughout the process—in the settler colonial state, indigenous people are not meant to truly benefit from settler structures, both historically and to the present day. These structures are meant to hasten the assimilation of indigenous people, not be used by those same indigenous people in order to persist, thrive and *win*. Dr. Uncini was beaten on his own discursive and political home turf by the 'underdogs'. Because of the Aubids' initial opposition, when it came to Autumn Martineau's body, the family and their allies knew exactly what to do in order to win the release of their loved one. This portends well for the question of how indigenous modes of knowledge can survive against the pervasive

nature of settler colonialism.

What is still unclear is whether we can ultimately chalk up the controversy to be a win, or a loss for the Aubids, the Martineaus, and the resistance they presented. It can certainly be considered a win on an intimate scale, as the families were ultimately able to recover the bodies of Mushkoob and Autumn. On a legal and jurisdictional level, it can also be considered a success as the families were able to spearhead the push for a new statute on autopsy in Minnesota. However, the generic nature and residual loopholes built into the statute means Anishinaabe religious concerns can still be ignored if the state can prove that the cause of death triggers one of the numerous instances of 'compelling interest' which gives the state the right to conduct an autopsy. For the Anishinaabe and in the context of resistance, this amounts to a highly partial, temporary success. The settler colonial state and its structures can now draw upon its experiences with confronting Anishinaabe opposition and resistance to autopsy, in constructing new ways to marginalize and subdue such opposition and resistance. This also points towards a potential future loss, one that could result in further violence and pressure against Anishinaabe people and ontologies.

In sum, it may very well be that Anishinaabe people, especially those who follow the Mide faith, both won *and* lost in these events. This speaks towards the totality of the domination of the settler colonial state and its structures over Anishinaabe people. While forced to change its configurations to accommodate the challenges brought to it by the Anishinaabe, rather than break or rupture, settler structures merely reconfigured themselves. This means they must be contended with in discussion of any future acts of opposition, quotidian or not.

7. Conclusion

This is not the first instance in which opposition has been presented by indigenous people in Minnesota to the practice of autopsy. Mushkoob himself recovered the body of his own father from the grips of the settler colonial state, after all. Therefore, it is grimly ironic that Mushkoob himself became the center of another struggle over the treatment of indigenous bodies after death. Motivated by a need to biopolitically position indigenous bodies as sources of information about death, not only for statistical knowledge but for monetary gain, the apparatus of the settler colonial state mobilized itself to attempt to forestall the efforts of the Aubid and Martineau families to keep their loved ones from being autopsied. However, these families mobilized support with their allies in tribal government to take action. With the help of officials in county government and state legislators, they succeeded in securing the return of the bodies of Mushkoob and Autumn. They also succeeded in changing the state law surrounding autopsy from one which gave medical examiners wide ranging power to conduct the practice, to one where families who objected on religious grounds had some semblance of ability to make their objections not only known, but heeded. Even as Dr. Uncini continues to serve as medical examiner in northeastern Minnesota, literature produced by his own medical firm take note of the right of the family to be consulted, and to express religious opposition in any potential autopsy of their loved ones (Uncini, n.d.).

The case study offers one way of thinking through the potential for indigenous ways of knowing to adapt and resist the quotidian, pervasive nature of settler structures. Specifically: the case study illuminates the ways in which Anishinaabe people met these everyday challenges to their identity and spirituality, through pursuing everyday means of resistance. Most of these means of resistance were not meant as specific performances of resistance, but rather abiding by their traditional and spiritual-ontological beliefs, such as the occupation of space outside of the UMD Medical School by the Aubid family. Their actions forced the medical examiner's office to abandon the attempted autopsies of Mushkoob and Autumn. Their strategy of relying on Anishinaabe traditional beliefs were effective in this case as it denied the settler state a legitimate rationale to suppress indigenous resistance with force.

It remains to be seen what the long term political and social effects of these events might be on the relationship between the Anishinaabe people and the settler state structures of Northeastern Minnesota. Certainly it is unlikely to be the last conflict around the right to deny autopsy: the vague wording in the new statute may well set the stage for further conflicts between indigenous people and the state of Minnesota. As Dr. Uncini noted in his interview with the Duluth News Tribune, “It [the medical examiner position] was going to go on whether I’m doing it or not” (Olsen, 2015a). Rather than broken by indigenous resistance, the structures of the settler state proved to be flexible, accommodating protest but ultimately preserving its ability to do violence to indigenous bodies across a variety of scales and settings. Therefore, the Anishinaabe people will need to continue to be flexible as well in order to meet the future challenges these settler structures will present to them. But as long as indigenous people will continue to “get in the way” of elimination, they will ensure that their cultures and identities will live on for future generations. Quotidian acts of resistance and counter-conduct based in Anishinaabe ontologies can provide a way forward in such future struggles. Even through death, indigeneity lives on.

Acknowledgements

I wish to first and foremost give thanks and recognition to the Anishinaabe people of Minnesota. As an Anishinaabe tribal member, I wish for my work to be of utility to my people, and more broadly, the indigenous peoples of this continent, as they continue their struggle against the settler colonial project. Without your struggles and triumphs, I would likely not be here today, writing this piece.

The people who I interviewed as part of my master’s thesis, and therefore in service of this paper helped immensely to shape this project as it moved forward from master’s thesis to journal publication, and potentially beyond. Chi-miigwech to Tadd Johnson, Rebecca St. George, and Rick Smith for the time you graciously provided to interview you—I will be forever grateful for your assistance.

As an academic project, I must thank the people in academia who have helped me to further shape this work. Thank you to Dr. Nathan Clough, Ph.D., Dr. Joseph Bauerkemper, Ph.D.—my co-advisors during my master’s degree at the University of Minnesota-Duluth, and Dr. Kendra McSweeney Ph.D., my Ph.D. advisor at The Ohio State University. I also owe my gratitude to my fellow graduate students at Ohio State such as Brookes Hammock, Ariel Rawson, Nora Sylvander, and students at other institutions, such as the students at Indiana University and the University of Kentucky who read my paper and provided feedback as part of the 2017 KOI political ecology workshop.

To the scholars who reviewed this article: Miigwech for your kind words, constructive criticism, and thoughtful suggestions for improving the piece, especially in theorization of scholars, and highlighting the community-based aspects of the paper.. As Anishinaabe, I was particularly thankful and honored to have my piece reviewed by a fellow Anishinaabe scholar.

And finally, thank you to the staff members of Carlton and St. Louis Counties, especially Shanny Hurst and Shannon Miller, for their assistance with retrieving medical examiner contracts for their respective counties.

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