McGill Institute of Islamic Studies & Department of History and Classical Studies

# Angelical Conjunctions

## CROSSROADS OF MEDICINE & RELIGION, 1200-1800

In Conjunction with

CREOR Medicine, Myth & Magic Graduate Student Conference

April 12-14, 2019

Conference Program

McGill

CREOR
McGILL CENTRE FOR RESEARCH ON RELIGION
CENTRE DE RECHERCHE SUR LA RELIGION

## DESCRIPTION OF THE CONFERENCE

*Angelical Conjunctions: The Intersection of Religion and Medicine 1200-1800* brings together twenty-five scholars who focus on the late medieval and early modern periods. The conference invites us to see the connection between religion and medicine not as an inconvenient deviance of past societies, let alone as a necessarily adversarial relationship, but as a key phenomenon that enlightens a given society's conceptions of the mind and the body, and how the society negotiates these competing conceptions. The connection between medical and spiritual practices took many forms over the centuries, from the pious provision of health care (in person or through endowed charity), to the archetypal figure of the healing prophet. Yet despite decades of specialized research, a coherent and analytical history of the "angelical conjunction" itself remains elusive.

Taking an inter-cultural and long-term perspective, Angelical Conjunctions investigates how Islamic, Christian, and Jewish traditions interpreted, produced, and shaped medical knowledge. We aim to develop methodological and theoretical perspectives on the "angelical conjunction(s)" of these two spheres.

*CREOR Graduate Student Conference: Medicine, Myth, and Magic* will investigate the complexities and diversity that arises at the crossroads of medicine and religion. We know that since Antiquity medical traditions in Greece, Babylon, Egypt, China and India were intrinsically intertwined with its religious practices. The observation and study of anatomical and mental ailments was not necessarily a distinct science, the lines between medicine, religion, and "magic" remained at times blurry. Myth and ritual were also used to connect the body to sacred spaces. Early modern, and especially post-Enlightenment, thinking sought to bring a clearer divide between medicine and religion. As science and technology progressed it provided the field of medicine with a diagnostic and prognosis system which was purely "rational" and devoid of spiritual beliefs. But the acceptance of this proposition has not been unanimous. Despite the extraordinary advances of post-Enlightenment medicine, both Western and Eastern, does the quest for scientific knowledge leave any room for religious beliefs, traditions and ethics to influence medical practice?

## ABOUT CREOR

The principal goal of the Centre for Research on Religion (CREOR) is to study the world's religions in their constantly changing historical manifestations. The Centre's aim is to create a broad academic platform to coordinate and support research on the identities of the main religions of the world, their differences and their common grounds, and how they contribute to a better understanding of past and present-day culture, ethics and politics.

## ABOUT THE ORGANIZERS

### Conference Co-Chairs:

**Aslihan Gürbüzel** is an assistant professor of Ottoman history at the McGill Institute of Islamic Studies in Montreal. She completed her PhD in History and Middle Eastern Studies at Harvard University in 2016. Her research and teaching interest include History of the Ottoman Empire, Islamic Political Thought, Religious Movements to 1800, and Manuscript Studies. She is currently working on her first book based on her PhD dissertation entitled "Teachers of the Public, Advisors to the Sultan: Preachers and the Rise of a Political Public Sphere in Early Modern Istanbul (1600-1670)."

**Faith Wallis** is a historian of medieval Europe, specializing in the history of science and medicine. She has published translations and studies of medieval time-reckoning (computus) and medicine. Her current research focuses on medical education and the transmission of medical knowledge in the 12th century. She is preparing an edition of the earliest commentaries on the Articella, the first anthology of medical texts designed to support formal teaching to be created in Western Europe, for the "Edizione nazionale Scuola Medica Salernitana" (Florence). The Articella marks the birth of academic medicine, and these commentaries allow us to reconstruct the intellectual dynamics of this crucial event. Prof. Wallis teaches undergraduate and graduate courses in the history of medicine, ancient medicine, medieval medicine, and general medieval history.

### Event Organizers:

**Amanda Rosini** is the CREOR Liaison Officer and a PhD Candidate in Biblical Studies at McGill University.

**Naznin Patel** is a CREOR member and a PhD Candidate in Religious Studies at McGill University.

**Courtney Krolikoski** is a PhD Candidate in History and Classical Studies at McGill University.

**Jacob Westermann** is a M.A. Candidate in Islamic Studies at McGill University.

## SCHEDULE OF EVENTS

| FRIDAY, APRIL 12TH<br>MCGILL UNIVERSITY | |
|---|---|
| CREOR – Graduate Student Conference – Medicine, Myth & Magic | |
| Registration: 8:30-9:00 | |
| Opening Address: 9:00-9:15 | |
| Session 1 – 9:30-10:40 | |
| Birks 100 | Grad Panel 1: Lore and Traditional Practices |
| Birks Chapel | Grad Panel 2: Modern Cults and Folklore |
| Break: 10:40-11:00 | |
| Session 2 – 11:00-12:10 | |
| Birks 100 | Grad Panel 3: Islamic Theology and Medicology |
| Birks Chapel | Grad Panel 4: Health and Christianity: Past and Present |
| Lunch: 12:15-13:15 | |
| Session 3 – 13:30-14:40 | |
| Birks 100 | Grad Panel 5: Intuition and Healing: Combining Modern Medicine with Tradition and Folklore |
| Birks Chapel | Grad Panel 6: Pagan Mythology and Christian Healing Practices |
| Break: 14:40-14:50 | |
| Session 4 – 14:50-16:00 | |
| Birks 100 | Grad Panel 7: South Asian Religions and Rituals |
| Keynote Lecture – 17:00-19:00 | |
| Rare Books Collection, Osler Library | **'Universal Medicine': Lessons from Seventeenth Century England**<br>Lauren Kassel, Professor, University of Cambridge |
| End of Day 1 | |

# SCHEDULE OF EVENTS

| SATURDAY, APRIL 13TH<br>MCGILL UNIVERSITY | |
|---|---|
| Registration: 8:30-9:00 | |
| **Panel 1 – Healing in Esoteric Traditions** 9:00-10:30 | |
| Birks 100 | **Aslıhan Gürbüzel** *(McGill University)* - Caring Recipes: The Circulation of Medical Recipes in Ottoman Sufi Circles |
| | **Assaf Tamari** *(Van Leer Jerusalem Institute)* - Asia Kartinah and His Book: The Secrets of the Torah as Medicines, and the Medical Discourse of Late Medieval Kabbalah |
| | **Justin Stearns** *(New York University Abu Dhabi)* - Treating the Body in a Sufi Lodge in Seventeenth Century Morocco |
| Break: 10:30-10:40 | |
| **Panel 2 – Conceptions of the Soul in Religio-Medical Traditions** 10:40-11:50 | |
| Birks 100 | **Naama Cohen-Hanegbi** *(Tel Aviv University)* - Seeing the Soul in Castilian Pastoral and Medical Literature,1360-1450 |
| | **Jeremy Phillip Brown** *(McGill University)* - The Penitential Discourse of Healing in Medieval Iberian Kabbalah |
| | **Tiffany Hoffman** *(Independent)* - Lovesickness: The Early Modern Spiritualization of a Secular Pathology |
| Lunch: 12:00-13:00 | |
| **Panel 3 – Visual Representations of Health and the Body** 13:00-14:30 | |
| Birks 100 | **Faith Wallis** *(McGill University)* - "*Medici ministri Dei*: Reflections on a Miniature from a Fourteenth-Century Manuscript of the *Canon* of Avicenna (Paris, BnF lat. 14023)." |
| | **Maja Dujakovic** *(University of Maryland University College)* - Between Torment and Regulation: Medicine, Religion and the Body in the Early Editions of the Shepherd's Calendar |
| | **Cecilio Cooper** *(Northwestern University)* - The Miracle of the Black Leg: Blackness, Amputation, and Production of Medical Knowledge |
| Break: 14:30-14:40 | |
| **Panel 4 – Medicine and Authority, Medicine as Authority** 14:40-16:10 | |
| Birks 100 | **Claire Elisabeth Preston** *(Queen Mary University of London)* - Thomas Browne's *Retreat to Earth* |
| | **Lucy Hennings** *(Exeter College, Oxford)* - From Poison to Bewitchment: Mysterious Maladies and Maleficium in Later Medieval English Politics |
| | **Jacqueline Holler** *(University of Northern British Columbia)* - Border Skirmishes and Contact Zones: Inquisitors, Women, and Medical Knowledge in New Spain (1530—1650) |
| Break: 16:10-16:20 | |
| **Panel 5 – Medicine and Charity** 16:20-17:50 | |
| Birks 100 | **Mary-Hague Yearl** *(McGill University)* - Give Blood and Receive the Spirit: The Incorporation of Bloodletting into Bloodletting |
| | **Mark Waddell** *(Michigan State University)* - "O Agent Beyond all Agents!" Innovation, Impiety, and the Weapon Salve in the Seventeenth Century |
| | **Kelly McGuire** *(Trent University)* - The Inoculated Body: Reading Providence in Eighteenth-Century Inoculation Debates |
| End of Day 2 | |

# SCHEDULE OF EVENTS

| SUNDAY, APRIL 14TH<br>MCGILL UNIVERSITY | |
|---|---|
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| **Panel 1 – Medical Charity in Practice** 10:30-12:30 | |
| Birks 100 | **Peter Murray Jones** *(Cambridge University, King's College)* - English Friars: Shaping Medical Knowledge and Practice |
| | **Mattia Cipriani** *(Freie Universitaet Berlin)* - Between Preaching and Medicine - A Practical Medical Education for Friars: The Case of Thomas de Cantimpré's *Liber de Natura Rerum* |
| | **Justin Rivest** *(University of Cambridge)* - The Priest as Physician: The Distribution of Drugs as a Form of Pastoral Care in Seventeenth Century France |
| | **Cory Andrew Labrecque** *(University of Laval)* - Hospes venit, Christus venit: The Ministry of Hospitality in the Xenodochium of Santa Maria della Scala |
| Lunch: 12:30-13:30 | |
| **Panel 2 – Responding to Shifting Medical Theories** 13:30-15:00 | |
| Birks 100 | **Abigail Agresta** *(Queen's University)* - Medicine and Religion in Late Medieval Valencian Plague Response |
| | **Julia Reed** *(Harvard University)* - Catholic Cooking in and for Mechanical Bodies: Religio-Medical Vegetarianism in Eighteenth Century France |
| | **Akif Yerlioğlu** *(Harvard University)* - Medicine and Alchemy in the Early Modern Ottoman World |
| Closing Address by Co-Chairs: 15:00 | |
| End of Day 3 | |

## KEYNOTE SPEAKER

**LAUREN KASSELL**, Professor of History of Science and Medicine at Cambridge University

Her books and articles have explored the importance of occult knowledge in the making of scientific knowledge in Elizabethan England. Her work has garnered widespread admiration for its profound mastery of medical, astronomical, and magical traditions. In this talk, she will discuss the relationship between medicine and religion through case studies from early modern England. The talk contrasts Robert Fludd's philosophical writings with the daily practices of Richard Napier, the astrologer-physician and Anglican clergyman, to think about recurring themes in the histories of medicine and religion: relations between spiritual and material bodies, alignments between theory and practice, shared and competing understandings between patients and practitioners. Through the English examples, and their particular inflection of what we might call medical demonology, it considers broader lessons for histories where religion and medicine meet.

***Keynote Event April 12th, 2019***

***'Universal Medicine': Lessons from Seventeenth Century England***

***McGill Department of Rare Books & Special Collections***
***McLennan Library Building 4th Floor - 3459 McTavish Street***
***Event Time: 5:00pm to 7:00pm***

***The keynote lecture will be followed by an exhibition of rare books from the collection of the Osler Library of the History of Medicine***

## CONFERENCE SPEAKERS

**NAAMA COHEN-HANEGBI**, Professor of History, Tel Aviv University

*Seeing the Soul in Castilian Pastoral and Medical Literature,1360-1450*

The working of the mind occupied the work of scholars of medicine, theology and natural philosophy of the late medieval period. Their shared interest in cognitive faculties, impact of imagination, memory and emotions on the mental capacities has been well documented (Haskell 2011, Carruthers 2008, Knuttilla 2004). These and other studies illuminated the inter-reliance of the disciplines and showed points of divergence and disciplinary singularity, with regard to both aim and theory. Thus far, most scholarly attention was given to the influential scholars of the era, those who worked in the leading academic centers. This paper draws attention to the ways this shared interest emerged in a relatively peripheral intellectual culture of Castile. Examining pastoral treatises alongside medical works produced mainly in Castilian, I look at visualizations and metaphors used to describe the soul and its faculties. These allow me to ask how disciplinary boundaries were maintained outside of the university milieu; To what extent regional contexts influenced modes of thinking about the soul; And finally, to what degree was there a specific regional interpretation to the relationship between medicine and religion?

**CLAIRE ELISABETH PRESTON**, Professor of Renaissance Literature, Queen Mary, University of London

*Thomas Browne's retreat to earth*

In *Urne-Buriall* (1658) Thomas Browne's comprehensive survey of mortuary custom through time and place, he comments repeatedly on the state of mortal remains in cremation, inhumation, and a variety of other styles of internment and disposal of bodies. Specifically, he is interested (as a natural philosopher and as a moralist) in what survives (teeth, skulls and certain bones, grave-wax, funeral offerings and accoutrements) and what does not (facial features, hair, skin, cause of death, and of course identity). In a very different essay, *A Letter to a Friend* (of unknown date but possibly coeval with *Urne-Buriall*), he addresses the same post-mortem evidence from the opposite position: his patient, who died of consumption, is memorialized in character as well as in body; and the nature of the disease itself is central to Browne's anatomy of the case. The *marasmus* or wasting associated with tuberculosis, as well as its febrile symptoms, suggest to Browne the living body as a grave in preparation, the dying patient in what he calls 'a retreat to earth', where the earth itself practices upon the human subject. This essay will consider the two works in confluence, as general and specific studies of the grave that feed and call forth a blend of medical, anatomical, anthropological, and historical evidence; it will suggest, among other contiguities, that the two works should be read almost as companion pieces composed within the same year or two when Browne was at the height of his powers.

**CORY ANDREW LABRECQUE**, Professor Theological Ethics, University of Laval

*Hospes venit, Christus venit The Ministry of Hospitality in the Xenodochium of Santa Maria della Scala*

For almost a thousand years (1090-1990), Santa Maria della Scala in Siena – arguably one of the oldest surviving hospitals in the world – opened its doors to pilgrims, travelers, the sick, the poor, and the *gittati* (little ones who were "cast off" and left on its steps). Making manifest the traditional adage of hospitality, undoubtedly inspired by the Rule of Benedict, here all guests who presented themselves were to be welcomed as Christ (chapter 53).

In this paper, I explore the relationship between religion and healing over the long history of Santa Maria della Scala, with special attention given to its central ministry of hospitality. The medieval complex was also known for its important commitment to the arts, the therapeutic benefit of which has largely been neglected by contemporary medicine. Accordingly, I will make reference to the mid-fifteenth century fresco cycle in the *Pellegrinaio* of Santa Maria della Scala that bears witness to its celebrated functions (sometimes a promotional manifesto, to be sure) and speaks to how and by whom these were carried out.

## CONFERENCE SPEAKERS

**JEREMY PHILIP BROWN**, Postdoctoral Fellow, McGill University

*The Penitential Discourse of Healing in Medieval Iberian Kabbalah*

The canonical gospels furnish some of the most well-known illustrations of how religious thought has framed illness as a divine punishment for human sin, and concomitantly, how it has represented healing as a sign of forgiveness. Indeed, even in our day, the entrenched intertwining of moral and medical discourses owes its complexity to this facet of Judeo-Christian cultural heritage. In this paper, I explore various ways in which the medieval Iberian kabbalah, and in particular the literature of the Zohar, contributed to the broader cultural project of pathologizing sin and framing its removal in therapeutic terms. The paper will present examples of the penitential discourse of healing from medieval kabbalistic texts in four areas of esoteric speculation: (1) angelology (especially lore concerning the archangel Rafael and his appointed task in relation to the repentance of Israel); physiognomy (concerning the appearance of facial blemishes as marks of sin and their disappearance through repentance); eschatology (on the expiatory role of the messiah in removing the infirmities brought upon Israel for their transgressions), and theosophy (the injuries caused to the limbs of the divine body, and their healing through penitential acts). In discussing these moralizing representations of infirmity in the medieval kabbalistic sources, I aim to demonstrate how they both play upon and in some instances subvert discursive patterns known from medieval Christian theology.

**LUCY HENNINGS**, Digital Fellow in the Humanities, Exert College, Oxford University

*From Poison to Bewitchment: Mysterious Maladies and Maleficium in Later Medieval English Politics*

While the importance of accusations of sorcery in late medieval politics has long been recognized, along with the connection between medical theories and magic in the construction of witchcraft, the link between these later cases and the earlier discourse of poisoning have let to be explored. It is this dynamic that this paper seeks to explore. Poisoning by its very nature shared a number of significant characteristics with magic, it was a hidden crime, and one that could easily be accused, but could not readily be diagnosed. On a more practical level, they were also acts that made use of potions and concoctions. In these political contexts, they both referred to corruption and malevolence. Why then, did the poisoner of the thirteenth century come to be replaced by the witch of the fourteenth?
To explore this question, this paper will compare accounts of poisonings and bewitchments from the thirteenth to the fifteenth centuries and consider them from three methodological perspectives. The first is the intellectual tradition: how did medical practitioners and theologians view these crimes and maladies? The second is the question of gender: to what extent were these accusations framed in terms of the identity and sex of the accused? The third strand is political: did these different crimes serve the same rhetorical purpose, and if so, did changing political contexts underlay the shifting patterns of accusation?

**ASSAF TAMARI**, Research Fellow, The Polonsky Academy for Advanced Study in the Humanities and Social Sciences, The Van Leer Jerusalem Institute

*'Asia Kartinah and his book: The Secrets of the Torah as Medicines, and the Medical Discourse of Late Medieval Kabbalah*

Despite over a century of academic study of the Kabbalah – one of the key spiritual and social phenomena of Judaism in the high and late middle ages and up to our days – almost no account at all has been given to the place of medical knowledge and practice in its literature. This is especially surprising, as the kabbalists were particularly famous for their highly anthropomorphic theosophy on the one hand, and, on the other, for their deep interest in theurgy, i.e. rectifying this divine body, practiced in a highly embodied manner, relying first and foremost on the *Mitzvot*, the Jewish practical precepts. Moreover, not only were many of the early kabbalists physicians, in accordance with the prevalence of those among elite Jewish intellectuals, the medical metaphor was quite common among their Christian

counterparts in south-western Europe. Indeed, when reading kabblistic materials composed in the period, in Provence and the Iberian Peninsula, one finds ample evidence of medical knowledge and considerations.
My proposed paper will discuss some aspects of the place medical discourse holds in the Zoharic literature, the quintessential composition of classical Kabbalah, composed, at least in its lion's share, in Castile during the last decades of the 13th century. I will begin by exploring some different uses of medical terminology and knowledge in various parts of this composition, asking about their rhetorical status within the homiletical nature of this literature. The main focus of my paper, however, will be on the possibility of a kabbalistic medical practice. I will Analyze one Zoharic narrative, depicting a miraculous ideal physician, *'Asia Kartinah*, and his book, containing medical secrets based on the Kabbalah, and the way this narrative is utilized to discuss the ideal kabbalist, in his practice, as no less than the healer of the *Shekhinah*, the exiled and fragile feminine aspect of the Godhead.

**JUSTIN RIVEST**, Leverhulme Trust Early Career Fellow, Cambridge University

*The Priest as Physician: The Distribution of Drugs as a Form of Pastoral Care in Seventeenth-Century France*
My talk will explore the role of parish priests in both organizing and providing basic medical care to the sick poor in rural villages in seventeenth-century France, focusing particularly on the charitable distribution of medicinal drugs. The role of priests in handing out drugs to the sick poor of their parish originated as local initiatives. Eventually, the 1670 French Assembly of the Clergy mandated a centralized distribution network to cover the whole of France. A mixture of local charity and royal subsidies financed the production and distribution of drugs, allowing them to be compounded in massive quantities (hundreds of thousands of individually packaged doses) and shipped annually to local parish priests, to be dispensed at their discretion. The expansion of this charitable provision relied on a network of local elites, women religious, and bishops who published dozens of circulars to rally awareness, financial support, and participation. These texts explicitly argued that the priestly vocation necessarily included a dimension of basic medical care. My talk will explore the theological and historical underpinnings of this view of pastoral care and the priestly vocation in these texts. I will explore the ways in which they appropriated and deployed examples of pastoral behavior ranging from the Church Fathers to recent Catholic Reformation saints and the close ties between healing bodies and saving souls (particularly those of Protestants). Most interestingly, I will explore how some authors sought to place miraculous and natural healing on the same footing by arguing that the success of every drug ingested by a patient depended not only upon its inherent natural properties, but also upon a small miracle or a manifestation of the grace of God, allowing priests to imitate the healing ministry of the original apostles.

**JUSTIN STEARNS**, Associate Professor of Arab Crossroads Studies, New York University of Abu Dhabi

*Treating the Body in a Sufi lodge in Seventeenth Century Morocco*
This paper will explore the nature and status of medicine in seventeenth century Morocco and its relationship with the religious sciences of the period. It argues for Morocco's vibrant intellectual life being deeply integrated into Sufi networks of study and transmission. Scholars of the natural sciences in Early Modern Europe have long been attentively critical of the teleological retroprojection of the science/religion binary into the pre-modern period and have carefully described the ways in which medical and religious discourses were at times mutually constitutive. Precisely because of the narratives of Middle Eastern decline that achieved dominance in both Europe and the Middle East in the nineteenth century, research into the history of the natural sciences (including medicine) there has been largely directed towards the so-called Golden Age of Islamic science that subsequently influenced European thought through a series of translation movements. This paper argues that a renewed focus on the complexities of the productive relationship between medicine and religious discourses in Early Modern Morocco will not only deepen our understanding of the period's intellectual landscape but helps revise of overall understanding of the intellectual history of the pre-modern Middle East.

## CONFERENCE SPEAKERS

**PETER MURRAY JONES**, Postdoctoral Fellow and Librarian, King's College, University of Cambridge

*English friars: shaping medical knowledge and practice*

For more than three centuries English mendicants cultivated medical knowledge and practiced medicine on religious and lay patients. Books, archives and buildings were destroyed or lost as a result of the dissolution of the English friaries by 1538, obliterating much of the evidence for this interest in medicine. But enough fragments remain in scattered manuscripts and records for it to be possible to draw a surprisingly vivid picture of the medical culture of the friars. The prominent role they played as confessors to the great gave them the opportunity to minister to the bodies as well as souls of their patrons. The kind of medicine they cultivated and practiced was distinctive in its commitment to alchemy, astrology and experimental knowledge. Friars also played a major role in abridging and translating medical knowledge for lay consumption. This paper will not be able to do full justice to the friars' medical achievements in England but will argue that this intersection of religion and medicine has been unjustly neglected.

**MATTIA CIPRIANI**, Postdoctoral Fellow von Humboldt Foundation, Freie Universitaet Berlin

*Between Preaching and Medicine. A Practical Medical Education for Friars: The Case of Thomas de Cantimpré's Liber de Natura Rerum*

Between 1245 and 1255 / 1260 ca., the Flemish Dominican friar Thomas de Cantimpré (1201-1270 / 1271) wrote and expanded his Liber de natura rerum at least five times. This massive encyclopedia – widely used, for example, by Albert the Great and Vincent of Beauvais – was written with the double purpose of providing fellow Preachers with (1) preaching suggestions, and (2) a correct understanding – and, consequently, teaching – of the concrete, natural world (viz. man, animals, plants, stones, etc.). Starting from the Liber's "Third expansion" (1250 ca.), Thomas' additions increased enormously, mainly regarding practical medical suggestions. To this end, the Dominican friar carefully selected and integrated a series of new technical sources, both from the "old", monastic medicine (viz. the anonymous' Physica Plinii, etc.) and the "modern", Salernitan School (viz. Bartholomaeus' Practica, etc.), but, curiously, he did not use the newest, most "contemporary" Arabic translations (viz. the Avicenna's Canon, etc.). In doing so, Thomas showed his intention to train the Dominicans to be more than just "pure" preachers, but rather first-aid doctors "in the field" as well. The paper aims to better understand one of the most influential texts from the European Middle Ages on Nature. Its objectives are three-fold: firstly, to discuss how the Flemish friar evolved his explanation about man's body from something merely religious and useful for preachers to something "truly" medical; secondly to show how he concretely did this, i.e. how he selected, copied, "pasted" and integrated his new sources into the expansions of his Liber; and thirdly, to investigate the Dominican, historical reasons behind Thomas' decision to render his text even more practical.

**TIFFANY HOFFMAN**, Independent Scholar

*Lovesickness: The Early Modern Spiritualization of a Secular Pathology*

The concept of lovesickness illuminates the early modern medical attempt to resituate the body—traditionally conceived of as the site of fleshly disease and corruption, a pathway to sin—as the spiritualized gateway to God. With reference to a range of seventeenth-century theological, biblical and Galenic-medical treatises, this paper traces the historical spiritualization of the secular pathology of lovesickness— detailing its origins in scripture, its links to the cognate states of love, desire and eroticism, its premodern medical and religious links to the body and its processes of the gut and bowels, its centrality to ideas about religious change in Reformation England, along with its overarching significance to Christian mysticism. From its focus on scatology, to its engagement with notions of ecstatic union, and provocative metaphorical treatment of hunger, eating and desire, Shakespeare's play *A*

## CONFERENCE SPEAKERS

*Midsummer Night's Dream,* as I will show, comically evokes the medical history, religious language, and bodily imagery and sensations of lovesickness in its effort to motivate a spiritually transformative moment of mystical consciousness and conversion in the ass-like character, Bottom.

**MAJA DUJAKOVIC**, Leverhulme Trust Early Career Fellow, Cambridge University

*Between Torment and Regulation: Medicine, Religion and the Body in the Early Editions of the Shepherd's Calendar*

Focusing on the early editions of the Calendar (up to 1520s), my paper will explore the divergent ways in which the body was represented in the book. In accordance with the late-medieval Christian doctrine, the Calendar emphasizes salvation and preservation of the soul, while the body, depicted through a striking image of the decomposing cadaver or portrayed in the harrowing scenes of corporeal torture and punishment in Hell, is identified as a source of sin and decay. Such a portrayal of the body, however, is at odds with anatomical illustrations in the book, which incorporate existing and emerging medical knowledge regarding human anatomy and remedial treatments. In images such as the Vein Man, a popular medieval representation of the so-called bloodletting figure, or the Human Skeleton, an anatomical illustration based on the late-fifteenth century teachings of the French physician Richard Helain, the body is scrutinized, carefully regulated and ultimately mended with medical treatment or with the aid of celestial objects. By closely analyzing a selection of images and discussing the overall layout of the book, my paper will consider how the Calendar traversed multiple meanings of the body that were converging at the turn of the fifteenth century

**ABIGAIL AGRESTA**, Marjorie McLean Oliver Post-Doctoral Fellow, Queens University

*Medicine and Religion in Late Medieval Valencian Plague Response*

Historians of medieval and early modern medicine have long acknowledged the importance of religion to an overall understanding of pre-modern public health efforts. Urban rituals like rogation processions, however, are still mostly studied in isolation from municipal public health initiatives. This paper examines how the city council of Valencia, Spain responded to plague from the fourteenth century to the early sixteenth. It shows how the city council's understanding of plague transformed over the course of this period from a focus on corruption to one on contagion, following the example of Italian cities several decades earlier. This shift is visible not only in the council's material responses to plague, but also in its religious ones. As the material focus shifted from street-cleaning to quarantine, the religious rituals the council organized came to emphasize protection rather than purification. This shift included the novel introduction of some elements that have long been considered primitive aspects of medieval piety, like processions dedicated to specific saints. In Valencia, therefore, the introduction of quarantine, long considered a milestone in the secularization and modernization of public health, was linked to the rise of what Carole Rawcliffe has called "talismanic" rituals to counteract the plague. Both together constituted a shift in the council's understanding of plague, from internal corruption to external threat.

**KELLY MCGUIRE**, Associate Professor of English, Trent University

*The Inoculated Body: Reading Providence in Eighteenth-Century Inoculation Debates*

This paper explores the role of the British clergy in popularizing the practice of inoculation in the first half of the eighteenth century. Contrary to expectation, as the practice gained support after several decades of experimentation, men of the clergy ventured so far as to call it a heaven-sent blessing. According to the (admittedly controversial) William Dodd who mounted the pulpit at the Anniversary Meeting of the Smallpox

Hospitals in 1767 to extol the work of the institution and its donors, inoculating physicians were merely intervening at the behest of God. Where others saw irresolvable contradiction, clergymen like Dodd insisted that physicians also performed God's work and acted in accordance with his will: those who survived inoculation did so by divine grace as did those who ultimately succumbed to the disease. Focusing on Anniversary Sermons and the medical pamphlets that formed an integral part of the inoculation debates, this paper examines how variations on Mather's notion of "Angelical Conjunction" help produce an idea of an "inoculated body" that, far from perverse and unnatural, is sanctified by certain strains of religious discourse.

**MARK WADDELL**, Associate Professor of History, Michigan State University

*"O Agent Beyond all Agents!" Innovation, Impiety, and the Weapon Salve in the Seventeenth Century*

In 1631, an obscure English clergyman named William Foster published a scathing attack against a wondrous but controversial medical remedy. The remedy in question, the weapon salve, was thought to heal wounds quickly and painlessly over distances of several miles when applied only to traces of the patient's blood. In an era of medical innovations and magnetic experiments the salve was merely one marvel among many, but Foster decried its mysterious efficacy as the devil's work and accused the salve's loudest proponent in England, the physician Robert Fludd, of dabbling in sorcery. Why did this particular remedy inspire such furious reactions? More critically, how do the religious responses to its purported cure help us understand wider issues of proof, plausibility, and piety in the first half of the seventeenth century? Foster's concerns about sorcery and diabolism overlapped with a more general anxiety about innovations in medicine and natural philosophy, and accusations of impiety were an effective way for traditionalists to reinforce long-held positions threatened by a changing intellectual landscape.

**JULIA REED,** PhD Candidate & Lecturer, Harvard University

*Catholic cooking in and for mechanical bodies: religio-medical vegetarianism in 18th century France*

In 1709 the Jansenist physician Philippe Hecquet lamented the lack of a "Catholic cook" in French cuisine. For Hecquet, "Catholic cooking" was necessary to France's physical, moral, and spiritual health, and promoted informed postlapsarian vegetarian diets as physical and spiritual exercises. France's Catholic population was becoming increasingly immoderate with the rise of secular cookbooks and urban gastronomy, Hecquet argued, and a Catholic cook would draw both from the theological authority of the confessor and the medical authority of the physician in order to prepare both physically and spiritually healthy foods. A proper Catholic diet was lean, vegetarian, and bland, moreover, because it was truly more nutritious, as it best approximated the prelapsarian diet in Eden and the mechanical basis of digestion. Hecquet's work, including the Treatise on the Lenten Disputations (1709) and his later Theological Medicine (1733), both made explicit 17th and early 18th century medical and theological debates about chemical and mechanical models of the living body and its proper nourishment. In the first part of the paper I will explore the changing understandings of digestion in 17th-century European medicine, before turning to Hecquet's approach to "theological medicine" and recommendations for a vegetarian postlapsarian diet as emerging from both his medical training and Jansenist piety.

**JAQUELINE HOLLER,** Associate Professor of History, University of Northern British Columbia

*Border Skirmishes and Contact Zones: Inquisitors, Women, and Medical Knowledge in New Spain (1530—1650)*

This paper considers the confluence of religion and medicine in inquisitorial encounters with women from the early sixteenth century to the middle of the seventeenth. It examines how, in interviews with women confessants, inquisitors positioned themselves as both theological and medical authorities. Nowhere was this more evident than

in the encounters of the Holy Office with scrupulous self-denouncers, whose distraught confessions demanded the parsing of confessants' spiritual and natural health. At the same time, inquisitors were called upon to assay women denounced as practitioners within the realm of women's healing, which often involved the use of birth charms, relic practices, and herbal remedies. These latter cases suggest both the activities of inquisitors as quasi-medical authorities and the limits of their powers in crossing into realms (particularly childbirth) construed as "women's matters." Thus, I argue here that while inquisitors often deployed and judged medical knowledge and a quasi-medical perspective on their confessants, their encounters with women's healing often faltered at the door of the birth chamber. The borders between medicine and religion were thus less evident, in this premodern context, than the boundaries between men and women.

**CECILIO M. COOPER**, PhD Candidate African American Studies, Northwestern University

*The Miracle of the Black Leg: Blackness, Amputation, and Production of Medical Knowledge*
Before an angelic audience, Cosmas and Damian amputated the limb of an Ethiopian (or a Moor) and transplanted it onto a Roman church official to replace his cancerous limb. The earliest iteration of this supernatural feat was documented in the medieval hagiography The Golden Legend (or The Lives of Saints). While early modern portrayals of the twin saints' activities abound in various mediums, this paper examines the subset of paintings that depict the Miracle of the Black Leg (or The Miracle of the Moor's Leg). Renderings by Spanish and Italian artists comprise the majority of MoBL imagery, which also include woodcuts, sculptures, and drawings. The images raise provocative questions at the intersection of medical ethics and spiritual belief. The black body is supernaturally invaded and fragmented in this case as an experiment to determine whether Roman and Ethiopian limbs could be seamlessly grafted together. How could early modern thinkers reconcile positivist assertions about innate biological difference with the compatibility of flesh for cross-racial transplantation? The MoBL not only anticipates medical advancements though the lens of miraculous healings but also exemplifies how European somatic integrity is imagined as constituted through African corporeal loss

**AKIF YERLIOGLU**, PhD Candidate Middle Eastern Studies, Harvard University

*Medicine and Alchemy in the Early Modern Ottoman World*
Recent European contributions on al/chemical medicine to the Ottoman reading public.
Deriving its tenets from alchemical philosophy and idiosyncratic interpretations of Christianity, al/chemical medicine has been among the most curious medical trends throughout history. Thanks to the followers of Swiss alchemist and physician Paracelsus (d. 1541), his fragmented and sometimes contradictory ideas were molded into a coherent medical theory that defied Galenic humoral medicine and attracted many scholars in Europe and beyond. According to the Paracelsians, from the creation of the universe to the workings of the human body, everything could be viewed as an alchemical process, just like their novel cures that relied on distillation and other al/chemical operations. These discussions inevitably influenced the Ottoman world as well, first via European physicians practicing in the Ottoman lands, then with the help of translations of some basic texts on al/chemical medicine, especially throughout the eighteenth century. In this project, I will demonstrate how their familiarity with alchemical tradition helped Ottoman physicians incorporate al/chemical medicine into their medical culture.

**MARY HAGUE-YEARL**, Osler Library of Medicine, McGill University

*Give Blood and Receive the Spirit: The Incorporation of Bloodletting into Bloodletting*

## CREOR GRADUATE SPEAKERS

**Madhusudan Rimal**, Ph.D. Candidate, University of Alberta, Panel 1

*Psychiatry in Indian Traditional Medicine*

Ayurveda, an Indian traditional medical system, is an all-embracing system of medical teachings which encompasses a number of different historical lines and layers. The term āyurveda means, literally, "the knowledge or science (Sanskrit veda) for longevity (āyus)". There are eight branches of āyurveda. One of the divisions of āyurveda is called bhūtavidyā (studies of disorders or possessions). This paper argues that a characteristic of Indian traditional medicine, āyurveda covers important aspects of psychiatry even though like other traditional and ancients of medicine there is the absence of a distinct discipline that is comparable with psychiatry as it has developed in Western medicine. What are those indicating factors that show the characteristics of psychiatry in āyurveda? Is there any religious connotation in those characteristics? How often does the distinction between religious meaning come into the idea of psychiatry in the Indian traditional medical system? These are the major dealing matters in my paper.

**Taylor A. Hughes**, M.A. Student, McGill University, Panel 1

*Presentiment as Omen and Symptom of Death: A Comparison of Spiritual Custom and Medical Practice*

Premonitions, death omens, and a sense of foreboding have been interpreted seriously as signs of coming tragedy in many cultural and spiritual traditions. These 'presentiments,' feelings of dread or foreboding, were understood in a range of spiritual terms and experiences, such as the coming of the angel of death or other religious or folkloric figures coming to usher the dying into the next life. They allowed the dying time to prepare for their upcoming demise, to make sure that they could achieve the ideal 'Good Death,' of vital importance in the 19th century. Modern medicine reframed these omens as a 'sense of impending doom,' symptomatic of underlying physiological responses and systemic breakdowns that accompany potentially fatal conditions. A feeling of dread is listed as an early sign of serious conditions including heart attacks, anaphylactic reactions, and cardiac tamponade. There are also accounts relayed by modern palliative care workers and other caregivers that describe dying individuals who appear to know when the end is coming or have visions of religious figures or dying loved ones in their final days. How can we view this 'sense of impending doom' as a medical symptom in light of the past importance as a spiritual sign? Can we view medical and spiritual experience in concert? Why are people so concerned with predicting death? This paper will compare the ways premonitions of death and tragedy are understood in historical and modern contexts to unpack the alliance between medicine and spirituality at the end of life.

**Michelle Sraha-Yeboah**, Ph.D. Candidate, York University, Panel 1

*Bridging the Divide between Religion and Psychology: Resistances, Rituals, and Responsibility*

The essay discusses the intersection of mental health practices, racialized bodies, and religion. In particular, it addresses Western psychiatry's colonial exclusion of religion in mental health service delivery for Black communities. I discuss the history of the relationship between religion and mental health in Indigenous West African practices of psychotherapy, and the importance of including this traditional knowledge to address mental health for Africans in the diaspora. By way of comparison, I explore under what conditions Eastern religious practices, such as mindfulness and yoga, have been able to successfully permeate mental health practices in the West, and interrogate the neoliberal conditions that have enabled this appropriation. I conclude by addressing the secular, neoliberal state's role in impacting the provision of religious interventions in mental healthcare. Placing religion at the forefront of the conversation may establish a concept of mental health that prioritizes the cultivation and preservation of racialized groups' mental wellbeing.

## CREOR GRADUATE SPEAKERS

**Claire Litt**, Ph.D. Candidate, Queen's University, Panel 2

*Medusa's Blood Stones*

Blood, stones, and snakes were a symbolic material triad that appeared in magical bloodstone amulets created in Byzantium and the broader Mediterranean basin during the 2nd-6th centuries. The analysis of these intertwined symbols illuminates a supernatural framework that originated in Greek mythology and pre-Christian deities. Women used these supernatural symbols, in conjunction with Christian prayer and traditional Greco-Roman medicine, to understand their reproductive health. While this paper agrees with the traditional interpretation of magical bloodstone amulets as charms against bleeding, it argues that the understanding of how the amulets functioned, both within their symbolic framework and practically as medical substances, has been overlooked. Additionally, it re-examines the historiography's view that women were objects upon which magical amulets operated to instead suggest that women were active participants in a supernatural medicine that protected their own health.

**Jacob Goldowitz**, Ph.D. Candidate, University of British Columbia, Panel 2

*Blood, Body, and Soul in Carolingian Medicine (ca. 800-900 CE)*

Medicine in early medieval Europe cared less about spleens and toads and more about the significance of the relationship between the soul, the body, and the world. Even the practice of phlebotomy, or bloodletting, had religious significance. Building on recent research that has underscored the spiritual dimensions of medicine in the early Middle Ages, I argue that we can more clearly see innovation in Latin medical texts between ca. 800 and 900 CE if we read them as an anthropological project that was pursued by collecting, excerpting, and rearranging the medical knowledge that had been inherited from antiquity. Manuscripts containing lists of the humours, the quadrants of the body, the times of the year, the periods of life, and the properties of natural substances, were potent guides to the unity of creation and the spiritual meaning that imbued the everyday. This paper reveals the entanglement of medicine and religion specifically in Brussels Bibliothèque Royale Ms. 1301-15, a ninth-century manuscript that demonstrates both complementarity and conflict in the ongoing transition of medicine from ancient pagan to medieval Christian ontological frameworks. Within this manuscript, two versions of a spurious dialogue between Plato and Aristotle over the use of phlebotomy and the seat of the soul in the body exemplify medieval medicine's concerns during the Carolingian period.

**Daniel Whittle**, M.A. Student, McGill University, Panel 2

*"Do you Believe in Magic?": Observing the Constructions of Authority and Efficacy by Derveni Author*

My study explores the interaction between textuality and authority, particularly how aspiring experts, including certain philosophers and religious actors, used "authoritative" writings, often poetry, to legitimize the lifestyles they advocated. As Peter T. Struck (2004) has shown, this relationship has a particular history and one that was inseparable from intellectual developments of the late Classical and Hellenistic periods. This was a time when conceptions of and criteria for expertise—whether in the realm of philosophy, medicine, religion, or some other area—were still ill defined. Within this context, I am most interested in would-be specialists of divine wisdom, initiation rites, and other practices involving the gods and similar beings (heroes, the dead, etc.) who employed exegesis and literary composition to justify not only their own status, but also the need for and efficacy of the services they brokered. In particular, I will focus on what I will call the "apology of efficacy" within the Derveni papyrus—a source written by a would-be public intellectual. Interpreting a poetic cosmogony credited to the mythic writer Orpheus, this author responded to an intellectualized—and highly competitive—atmosphere of textual interpretation

to argue for the primacy and exclusivity of his rites, at the expense of various Orphic and other rivals. By juxtaposing himself with figures like Plato, Hippocrates, and other critics of "jack of all trades" intellectuals, the Derveni author' attempts to situate himself as an expert of all these many "disciplines"—in so far as these categories (i.e. magic, philosophy, medicine, and physics) were even distinguishable for the majority of the author's contemporaries—to broaden the applicability of his writings and further broker his own individual efficacy as a public intellectual.

**Seyed Abbas Zahabi**, Assistant Professor, Islamic Azad University, Panel 3

*Avicenna's Approach to Health: A Reciprocal Interaction between Medicine and Islamic Philosophy*

This paper elucidates how Avicenna's philosophy is associated with theory of health and illness. As the most important physician and philosopher in the Islamic world, Avicenna (980-1037) is influenced by both ancient Greek tradition and Islamic teachings. According to him, the soul and body are two intertwined substances from which all human beings are composed. This reciprocal interaction between soul and body is essential in analyzing his medical concepts related to "health" and "illness". He distinguishes between soul and spirit (≈ *rūḥ*) and also proposes a hierarchical system of spirit through which he illustrates a special type which is called "*Rūḥ Bukhārī*" (= *RB*). Health and illness are totally related to the condition of *Rūḥ Bukhārī* (*RB*). As a technical term that has been used by Avicenna and other Muslim scholars, *RB* plays the principle role to explain health and illness. Through this term, Avicenna describes both causes and cures for physical and psychological illness. As an invisible, fluid, and light substance which is scattered throughout the body, *RB* is the mediator of the soul and body. Therefore, the human soul controls and manages the body through *RB*. Faculties of the soul firstly penetrate into this type of spirit, and then enter the body's organs. Diagnosis and treatment of most diseases are also completely related to gaining a precise knowledge of *RB*.

**Naznin Patel**, Ph.D. Candidate, McGill University, Panel 3

*Magic and Miracles in Marsilio Ficino and Avicenna*

Marsilio Ficino suggests that it is possible to affect others, persons or things, with a potent gaze that can harm or heal. It is also possible to send objects flying with the power of the mind, or even control the winds. In Book XIII of the *Platonic Theology*, Ficino uses miracles as the fourth (and final) sign that points to the immortality of the soul. Miracles are presented as the last in this set of signs because they are a combination of reason's power over the imagination and the soul's sovereignty over matter. Ficino describes miracles not as something supernatural but as a work of wonder. For Ficino magic is part of the fabric of the universe, and he considers it as nothing more than an extension of natural philosophy. But magic is not limited to acts of wonder, Ficino's theory of the soul insists, firstly, on the intimate relationship between mind, soul and body, and secondly, on the divine and angelic status of the higher part of the rational soul. This allows the body to interact with other bodies without having to make any contact with them. This paper explores Ficino's thaumaturgy in relation to his theory of the angelic soul which is derived from the Arabic philosopher Avicenna's theory of prophecy. Ficino makes significant modifications to the theory in order to adapt it into his own system which is much more ambitious in the role it seeks to assign the human being within the cosmos.

**Joseph Leonardo Vignone**, Ph.D. Candidate, Harvard University, Panel 3

*"The Physician's Malady": Contagion and the Limits of Medicine in Late-Medieval Islam*

Modern scholars of Islam have conventionally held that the concept of contagion was categorically rejected by late-medieval Muslims. This putative rejection has been explained through the Ash'ari critique of direct causality

predominant in the era–i.e., that effects do not proceed from their causes but are rather determined by God, whose acts of creation constitute the "natural" course of events. Physicians of the late-medieval era are thought to have shrunk from accepting contagion so as to avoid contravening this theological position. In this paper I argue that while they lacked our modern theory of contagion, these physicians were aware that the sick could plausibly transmit disease to others by physical means. To demonstrate this aspect of late medieval medicine I analyze an unstudied manuscript (CBL Ar 5162) by the Ash'ari physician Ibn Ayyūb al-Qādirī (d. 1463). Here al-Qādirī describes how detritus emitted by bodies ill with conjunctivitis, tuberculous, elephantiasis, prurigo, plague, smallpox, measles and leprosy could move through space to infect the healthy. More importantly, al-Qādirī addresses the controversial topic of contagion not by referencing its Ash'ari critique in great detail, but by situating medicine within an epistemological framework that admits the limitations of the discourse itself in fully accounting for infectious disease. In so doing he argues for the utility of ancillary sciences–among them astrology, demonology and angelology–in determining the ultimate etiology of disease. I argue that this intervention is of greater help in understanding how late-medieval Muslims theorized contagion than are references to extraneous critiques of causality.

**Monica Marcelli-Chu**, Ph.D. Candidate, University of Toronto, Panel 4

*The Shape of the Rational Soul: Remembering the Body in Thomas Aquinas' Account of the Spiritual Nature of the Human Person*

Charles Taylor has critiqued the current state of ethics in the modern West for neglecting to pursue an understanding of the meaning of the good, and instead taking for granted that the goods of freedom and autonomy simply are the goods according to which all other ethical questions are measured. Taylor contrasts this approach with the way in which pre-Enlightenment thinkers pursued ethical questions, namely, out of a deliberate reflection on the good, including visions of the good and what it means to do the good according to the particular vision at work. In this paper, I pursue one such vision of what is good for the human person, according to Thomas Aquinas, in which the good is what the human person pursues according to her intellectual and appetitive faculties; in other words, according to her rational nature. While previous scholarship on Aquinas has tended to focus on the rational aspects of human nature, recent literature has begun to appreciate the role of the bodily passions.
In this paper, I show how the passions give particular shape to the rational soul. I argue that the integration of the passions points to the fundamental way in which the body is meaningfully included in Aquinas' definition of human nature, which is maintained in his account of the moral and spiritual growth of the human person.

**Heather McIntyre**, M.A. Student, University of Ottawa, Panel 4

*"Man's Redemption of Man" – medical authority and the challenge of faith healing in North America, 1840 – 1930*

This paper will describe the reaction of doctors to the 19th-century faith healing movement and will argue that doctors adopted the mantle of religious authority to justify their exclusive claims of knowledge about the body. In this period doctors were professionalizing, imposing new standards of education and forming new professional associations. Increasingly, they called medical care outside of this system "quackery" or incompetence. However, their claims clashed with those of the Protestant faith healing movement. This movement arose in the United States and spread quickly to Canada. Following the logic of other health reformers like hydropaths, faith healers argued that illness was an unnatural state for humans; rather than having purely physical causes and cures, the person must place their full trust in God and obey God's laws for the body in order to be healed. In response, doctors elaborated that modern medicine was the method of healing which God intended and an expression of his gift of rationality to mankind. Although this idea had been present since the 17th century, as demonstrated in "Divine Doctors and Dreadful Distempers" by Christi Sumich, the 19th century developed an emphasis on the scientific and rational as a God-given part of man's nature. This work will challenge the assumption that physicians' claims of rational advancement were

areligious or that they had a "secular" quality – rather, they sacralized the work of medicine and argued that the doctor carried out God's will by caring for patients.

**Rachel Engler**, Ph.D. Candidate, Columbia University, Panel 4

*Faith and Healthcare in Oral Roberts's Tulsa*

In the pages of Oral Roberts's *The Outreach*, published ahead of the 1965 opening of the charismatic preacher's Oklahoma university, James C. Spalding, doctor and university consultant, described a facility to be called the "Health Resources Center," visualized in a black-and-white rendering as a glowing white dome surrounded by a ring of what appear to be ferroconcrete, umbrella-like structures. "As you enter the building," Spalding writes, "you will be surrounded by an atmosphere of health—paintings which illustrate the magnificence of God's creation, along with moving anatomical reproductions showing man in motion [...] A plastic man will be on display with the inscription 'Your body is the temple of the Holy Ghost' (1 Cor. 6:19)." This campus health center, designed in a futuristic idiom, represents a particularly resonant intersection of modern medicine and faith healing traditions: as such, it was both an expression of Roberts's desire to found a Christian university defined by its technological sophistication and a reflection of his own background in the Pentecostal Holiness movement. This paper considers the architecture and function of Roberts's health-related facilities. From the proposed Health Resources Center, described above, to the controversial City of Faith, a hospital complex constructed in Tulsa between 1979–81, I use structures associated with Roberts, an icon of postwar television evangelicalism, not only to explore a particular meeting of technology and faith in North American religion but also to consider the role of bodily presence at a moment when postwar mass media were transforming built ritual space.

**Manvir Singh**, Ph.D. Candidate, Harvard University, Panel 5

*The cultural evolution of shamanism*

Shamans, including medicine men, mediums, and the prophets of religious movements, recur across human societies. Shamanism also existed among nearly all documented hunter-gatherers, likely characterized the religious lives of many ancestral humans, and is often proposed by anthropologists to be the "first profession," representing the first institutionalized division of labor beyond age and sex. In this presentation, I propose a cultural evolutionary theory to explain why shamanism consistently develops and, in particular, (1) why shamanic traditions exhibit recurrent features around the world; (2) why shamanism professionalizes early, often in the absence of other specialization; and (3) how shifting social conditions affect the form or existence of shamanism. According to this theory, shamanism is a set of traditions developed through cultural evolution that adapts to people's intuitions to convince observers that a practitioner can influence otherwise unpredictable, significant events. The shaman does this by ostensibly transforming during initiation and trance, violating folk intuitions of humanness to assure group members that he or she can interact with the invisible forces that control uncertain outcomes. Entry requirements for becoming a shaman persist because the practitioner's credibility depends on his or her "transforming." This contrasts with dealing with problems that have identifiable solutions (such as building a canoe), in which credibility hinges on showing results and outsiders can invade the jurisdiction by producing the outcome. Shamanism is an ancient human institution that recurs because of the capacity of cultural evolution to produce practices adapted to innate psychological tendencies.

## CREOR GRADUATE SPEAKERS

**Veronica Isabella D'Orsa**, M.A. Student, Concordia University, Panel 5

*The Holy and Hated Leper: Leprosy as Abject in the Medieval Imagination*

A prominent tension runs throughout the scholarship of leprosy in the Middle Ages. Some scholars, such as Peter L. Allen and Susan Zimmerman, suggest that despite the portrayals of lepers as holy and sacred in some materials, they are ultimately seen as monstrous outcasts; however, their words also suggest that lepers were considered holy. Many sources reinforce this, whether these are hagiographies, penitential manuals, and even the writings of laypeople, all of which feature protagonists that give lepers a kiss. As such, I pose the following question: what is it that renders the figure of the leper both repulsive yet simultaneously attractive to the medieval imagination? As Julia Kristeva argues in *The Powers of Horror: An Essay on Abjection*, the abject, as something that blurs the boundaries between categories, causes reactions of repulsion and horror, but it also simultaneously proves to be a source of attraction. The leper, as a figure who is neither quite living or dead, embodies this sort of boundary crossing. By using the notions of abjection and the sublime, I argue that the leper embodies this simultaneous disgust yet attraction as a way for medieval thinkers and laypeople alike to understand the disease. To explore this connection, I will analyze two fifteenth-century English texts, namely the *Book of Margery Kempe* and a penitential manual known as *Jacob's Well*. The crux of my argument is centered upon the leprous kisses in these works and looking at the ways they represent the grotesque, abject, and sublime elements of leprosy.

**Sonya Pihura**, Ph.D. Candidate, McGill University, Panel 5

*Religion and Ritual in Anglo-Saxon Medicine*

In the medieval world, medicine was inextricably tied to religion and ritual. This complex interweaving of beliefs is evident in Anglo-Saxon medical literature, where herbal remedies and medicinal drinks are prescribed alongside amulets, charms, and prayers. While in the past, many of these remedies were chalked up to superstition, more recent scholarship has begun to discuss the complexities of Anglo-Saxon medical thought. This paper will contextualize the use of religious and ritual elements and discuss which ailments were more likely to warrant such measures. To begin with, this paper will discuss the types of remedies that were employed by the Anglo-Saxons. There are essentially three broad groups: strictly herbal remedies, remedies that employ incantations, prayers, and rituals as part of the preparation of herbal remedies, and the use of specific rituals and charms as a form of healing. The paper will examine the context of these beliefs and rituals, as well as their origins and uses. Furthermore, the paper will consider the number of remedies found in each category and will discuss which ailments were more likely to be treated with religious and ritual elements. Some illnesses are presumed to have a natural source, such as a persistent cough, and were thus treated with simple herbal preparations. Illnesses which were less understood, such as epilepsy, were attributed to the interference of elves, and were thus treated with magical and religious practices. This aspect is important to consider, as it can shed light onto how different illnesses and injuries were conceptualized.

**Austin Simoes-Gomes**, M.A. Student, University of Toronto, Panel 6

*Trans-Himalayan Healing Traditions*

In the various ethnic communities, throughout Nepal, there exists a wide array of indigenous healing traditions. One of the most popular modes of healing involves visiting someone who becomes possessed by either deities or local spirits. These healers employ a wide array of healing methods that range from empowered substances to healing massages. Among the Newars of the Kathmandu valley, women known as dyaḥ māju, become possessed by the

goddess Harati and perform healings. While in the Tamang setting, people like Lhamo Drolkar, a lha bzhugs mkhan (one to whom the gods descend) officially recognized by the 14th Dalai Lama, gets possessed by a srung ma, a female demonic dharma protector. Also, in the Tamang context, Boudha Maa, a Tamang Buddhist woman gets possessed by a Newar Hindu goddess, Banglamukhi. In the hidden Himalayas, near Simikot, local Nyinba shamans usually also get possessed by srung ma. This paper will employ a comparative approach to analyze 'healing through spirit possession' traditions present in Nepal with an emphasis on the Newar dyaḥ māju, Tibetan and Tamang lha bzhugs mkhan, and other traditions practiced by Nepal's indigenous Himalayan communities. I will use my own ethnographic work with Newar dyaḥ māju, and Tamang and Nyinba healers as the basis for this investigation. By focusing on both the healing practices and empowered substances these practitioners use, this essay will place all these modes of ritual healing in intellectual conversation to further contextualize these sets of practices and their practitioners according to the broader Nepali religious setting.

**H.S. Sum Cheuk Shing**, Ph.D. Candidate, University of Chicago, Panel 6

*Medieval Chinese Buddhist and Daoist Healing Solutions: Spell Formulae and Recipes from Dunhuang*

The interstices between religion and medicine has increasingly been viewed as an important area in the study of medieval Chinese religions. On the one hand, indigenous religions such as Daoism and the manner in which they integrate curative and salvific technologies reveal fascinating perspectives about intertwined Sinitic religious and medicinal practices. At the same time, the role of Buddhism has been hailed as an influential force in the transmission of previously unknown therapeutic ingredients, models, and practices. Building upon such scholarship, this presentation proposes to interrogate the way in which medieval Chinese religious practices, reflecting both Buddhist and Daoist inclinations, invoke the use of medicinal substances for a variety of purposes such as the expulsion of insect venom, resurrection of the recently dead, and the attainment of various physical and spiritual benefits. Taking the manuscript corpus of Dunhuang, located in the northwestern region of China, as the primary source for my investigation, I analyze a host of spell formulae and recipes found across manuscripts such as Pelliot Chinois 2703 (with the variant copy P.2637), 3749, 4038 and Stein 5598. Simultaneously, I read these texts against canonical counterparts to better understand their textual development and the potential networks of transmission involved. Recognizing the lack of a clear demarcation between what may be strictly classified as religion or medicine in these primary materials, I provide a synchronic presentation of how Buddhist and Daoist practitioners in eighth to tenth century China deftly wielded and combined knowledge of pharmacology and religious techniques to address a diverse range of needs and concerns.

**Tahereh Tavakkoli**, M.A. Student, McGill University, Panel 6

*Tshe dbang; Tibetan Longevity Ritual*

*Tshe dbang* is a Tibetan Buddhist longevity ritual which means "life-span". The main goals of this ritual are attainment of a healthy and long life, preventing untimely death, and recovering health of body and mind. In fact, this ritual can protect or improve the life force *(srog)* and soul or the subtle life-essence (*bla*). Moreover, it can restore the positive life force which is lost or decreased due to the negative forces. This longevity ritual includes taking herbal pills or drinking consecrated water or nectar which are empowered by Rin po che or monks through a complicated rite of meditation techniques and visualization. By visualization, Rin po che generates himself as a long-life deity and transmits the deity's power and her spiritual abilities to laity. Consequently, the empowered nectar and pills do not just possess a kind of transcendental force, but they are *per se* the immanent deity, and all the participants are involved in a process of incorporation with deity or a kind of "embodiment". For lay people, this ritual includes a favorite "blessing-power" (*byin rlabs*) exploited through a ritual engagement by a lama, without commitment any especial practice. Even the laity should not necessarily understand the texts and lama's speech. Most of the

participants claim that they receive the *byin rlabs* and magical power the very moment when the lama touches their head or when they get the consecrated pill and water. This ritual shows how supernatural ideas and religious belief can transfer to material substances and respond to the peoples' contemporary needs.

**Colby Gaudet**, Ph.D., Concordia University, Panel 7

*"Ô filles folles": The Possessed Girls of Bas-de-Tousquet and the Culture of Sang-Mêlé*

In September 1810, in an isolated Acadian parish at the southwestern tip of Nova Scotia, two teenaged girls were perceived by their community as possessed by ill forces and exorcised. Rosalie Cottreau underwent a popular rite of exorcism that involved a charm made of dirt, urine, nails, and the heart of a black hen. Rosalie's friend, Anne Doucet, was treated with a purification by water. She was taken to a river and plunged four times from a canoe. Using the published transcription of a trio of letters describing this incident, the parish's register, and relevant secondary scholarship, I will interpret the possession as a product of the village's troubled social state—described by the resident missionary Jean-Mandé Sigogne as libertine, debauched, drunken, and incestuous. The families involved in the incident were mixed-blood ("sang mêlé"), descended from an Acadian Métis group of the prior century. They formed what Sigogne calls a "detested caste." They were mixed in a double sense—mixed from marriages with the Mi'kmaq and mixed with themselves through generations of endogamous unions. Their mores breached the standards of Sigogne's Jansenist theology (whose sermons emphasize redemption from sins of the flesh), and the possession of Rosalie and Anne is symptomatic of this breach responding to Sigogne's moralization of the mode de vie of these villages. The incident sheds light on the layered constructions of Acadian resettlement culture.

**Aaron Ricker**, Ph.D., McGill University, Panel 7

*"Medicine, Myth, Magic, Marketing: SBNR Consumer Cult(ure) and Doctor Bronner's Magic Soapbox."*

Discerning North American consumers in the 21st-century are used to reading product labels and resigned to the fact that their jargon and its relevance can at times be hard to understand. Even so, the 4000 words squeezed onto a Dr. Bronner's ALL-ONE! Magic Soap bottle have the power to stun many readers, defying both polite shop talk and the niceties of grammar and style: "As teach for 6000 years the African shepherd-astronomers Abraham & Israel, since the year One: 'LISTEN CHILDREN ETERNAL FATHER ETERNALLY ONE!' Exceptions eternally? Absolute None!"
The medical meets the mythical in the way Dr. Bronner is identified variously in the labels as an Essene sage, a rabbi, a minister, Albert Einstein's nephew, and always, of course, a doctor (none of which seems to have been factual). The self-mythologizing meets the magical in the various identifications of Dr. Bronner's teachings as the supernaturally-revealed "Truths" of great seers from Abraham to Einstein. The magical then meets the medical again in Bronner's holy hygiene system, as seen for example in the New Age health advice of his "Essene Scrolls." Using the classic work of Jeremy Carrette and Richard King on the commodification of "Spiritual But Not Religious" values, and the recent work of Kathryn Lofton on consumerism as spiritual experience and cultic practice, my presentation tries to make historical sense of the way Dr. Bronner's snake-oil sermonizing weaves the medical, the mythical, and the magical into a unique brand of SBNR missionizing/marketing.

**Valerie Thomas**, Ph.D. Candidate, Concordia University, Panel 7

*Spirituality and Death in Modern Public Health Care Institutions*

How is spirituality translated in secular healthcare institutions? How are spiritual concerns expressed and cared for in this fast paced and ever-changing context? How and where does the missing link in the healthcare system emerge and what cultural repertoire do we have to address it? With the development of the field of palliative care since the

1970's, we have been shaping new ways of accompanying people suffering from terminal illness. This field has the potential to revolutionize ways of thinking about medicine, of living and dying as it places medicine in a posture of reciprocity and of relationality. What happens when such a model of care integrates a 'spiritual dimension' into its framework and separates it from the notion of religion? Through a perspective of sociology of emotions and of theological ethics we will explore practices, theories and perspectives on how spirituality fits into a palliative and holistic model of care that evolves within a secular biomedical institution. We will consider the body/mind divide as well as the spirituality/religion divide. This will reflect both my research done in this area as well as my experience working as a spiritual care practitioner in palliative care. There is ample discussion around dying with dignity. There is also perhaps a need to consider what it means to care with dignity and what that dignity is founded on to better prepare through policy and curriculum for a bridge we must and will all cross.

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