

A2. Bodies, Values, Materiality

A2:1 Pablo Gómez, *Embodied Economies of Freedom: Afro-Caribbean Corporeal Finance in the Seventeenth Century*

Drawing on previously unstudied notarial, governmental, and private records from seventeenth-century Havana, Cuba, this paper examines the first instances of the financialization of human bodies and their diseases as they emerged in Caribbean urban settings. Scholars have long discussed the relationship between human corporeality and economic systems, including slavery. They have, however, paid little attention to the specific intersections of bodies, disease, and economic value in pre-modern, *non-capitalist* contexts. In the 17th-century Caribbean, unlike what occurred in places such as the antebellum US South, strategies for the financialization of human bodies were used primarily by non-elite economic actors (including free and other enslaved individuals of color). The records examined in this paper reveal that early Afro-Cuban communities developed a sophisticated understanding of the valuation of their own bodies and diseases, using this knowledge to negotiate freedom for themselves and their families, improve working conditions, and seek legal redress for mistreatment and enslavement. The paper further shows that in these mercantilist, and crucially non-capitalist, spaces, vibrant financial markets centered on bodily value arose—especially during times of scarcity such as pestilences. For instance, the mid-seventeenth-century yellow fever epidemic that devastated Havana, spurred new models for fractioning the value of enslaved bodies in loans through financial instruments known as *retroventas*. In this context, both owners and captives collateralized debts using portions of the human body, allowing access to smaller, short-term credits. This fractioning of bodily value opened pathways to partial self-ownership, as enslaved individuals could purchase portions of themselves, and calculate the value of diseases and corporeal characteristics. In early modern Caribbean urban economies, the value of enslaved bodies, thus, was tied less to land and possibilities for production than to corporeal attributes. Bodies and their afflictions functioned as forms of “capital” within social and economic relationships in these precapitalist societies (capital, after all, also exists outside capitalism). The dynamics examined here thus challenge analytical trappings that center modern capitalism as the defining framework for examining the relationship between economic value and corporeality.

Learning Objectives

- Understand the dynamic history of medical ideas and practices, their implications for patients and health care providers, and the need for lifelong learning
- Promote tolerance for ambiguity of theories, the nature of evidence, and the evaluation of appropriate patient care, research, and education
- Recognize the dynamic interrelationship between medicine and society through history

A2:2 Adam Warren, *Ability's Experts: Healers and the Assessment and Diagnosis of Enslaved Litigants in Colonial Lima and Buenos Aires*

This paper considers eighteenth-century civil cases involving enslaved Africans in Lima and Buenos Aires as sites for articulating and negotiating ideas about bodies, health, disability, and fitness. Afforded permission to sue their owners in the Spanish Empire's courts, enslaved litigants navigated legal channels to gain what historian Michele McKinley describes as "fractional freedoms," incremental improvements in their circumstances such as permission to seek new owners, prevention of separation from kin, or the provision of medical care. Enslaved litigants petitioned for these gains by accusing owners of cruelty, neglect, or overwork; by claiming existing or resulting bodily injury, disease, or mental unwellness; and by invoking owners' obligations under Spanish law and in accordance with Catholic teachings about piety and charity. Central to their legal strategies was the act of drawing attention to their own bodies, describing them in vivid detail and asking that they be examined for evidence of the debilitating effects of slavery and mistreatment. To substantiate these claims, enslaved litigants petitioned to have physicians, surgeons, and other healers inspect them to make diagnoses of their suffering and debility. Looking comparatively at litigation in two urban centers of Spain's empire, this essay focuses on the central role that healers played as arbiters of enslaved bodily and mental fitness in its courts. Through an analysis of the *certificados* they created and entered into the legal record, it seeks to trace how they navigated, on the one hand, the emerging legal strategies and discourses of enslaved litigants regarding bodies, ability, and obligation, and on the other hand, the longstanding rhetoric and legal strategies of owners, who emphasized enslaved litigants' monetary value and capacity to labor. In doing so, this essay aims to identify and explain how healers' participation in the litigation of health and ability varied between these two slaveholding cities.

Learning Objectives

- Deepen understanding of illness and suffering
- Recognize the dynamic interrelationship between medicine and society through history
- Identify successes and failures in the history of medical professionalism

A2:3 Elizabeth O'Brien, "*She answered everything except [where the fetus was]*": *Medicine and evangelization in the Santa Clara de Asís Mission, 1777-1833*

This article analyzes medical practice and evangelization at the Santa Clara de Asís Mission in Alta California, paying particular attention to abortion, pregnancy, and their relation to the baptismal sacrament between 1777 and 1833. Most of the available sources correspond to the leadership of Father José Viader, who left behind a 700-page scrapbook in which he detailed having performed the first cesarean section in Alta California in 1799. The paper argues that Viader and other missionaries viewed indigenous Ohlones women's reproductive behavior as evidence of spiritual and cultural imperfection. Priests complained that fornication and abortion were among the "most dominant vices" of Ohlone women. In a 1792 writing, for example, José Longinos Martínez claimed that the Ohlones always induced abortion during their first pregnancy because they believed that their future children would be born dead if they did not terminate the first pregnancy. I argue here that Franciscan resistance to secularization manifested through discourses about the need to perfect the body and discipline reproductive activity. In other words, how was spiritual chaos understood in reproductive and embodied terms in Alta California? As other authors have pointed out, and as my previous work has shown, a paternalistic and pro-natalist rhetoric extended to a strong concern for the baptism of individual souls. In 1833, for example, Father Francisco García Diego y Moreno wrote that an Ohlone man came to him to inform him that his wife had miscarried; Diego y Moreno rushed to his house, desperate to baptize the fruit of conception. To his dismay, he was unable to do so: "...no matter how much I begged and pleaded with her to tell me where the fetus was, I could not get it! The sick woman answered everything except this, and so to this day I do not know where she threw or hid the child." Whereas my previous work on cesarean operations in indigenous missions tended to underemphasize local factors, in this paper I take a local approach to Bourbon reproductive politics. This approach is inspired by *The Gray Zones of Medicine* and other works that highlight embodied medical interactions.

Learning Objectives

- Contribute to history of pregnancy, reproduction, and abortion
- Contribute to histories of non-allopathic medicine

A2:4 Mariana Labarca Pinto, *Medical Opinion at the Real Audiencia: How Healers Inspected, Interpreted, and Valued the Human Body in Eighteenth-Century Chile*

Drawing on eighteenth-century judicial records from early modern Chile, this paper examines how medical practitioners and healers from diverse backgrounds engaged with the human body to produce expert testimony—and how social, economic, and institutional forces shaped their opinions.

In late colonial Chile, Spanish royal courts frequently summoned medical practitioners and healers to provide expert assessments on bodily injuries, illnesses, the health condition of defendants, or the causes of death. These early modern courts became fertile arenas for debating how the human body should be understood, interpreted, and valued. Within this context, healers interacted with judicial authorities and litigants to define the meanings of bodily signs, diagnostic categories, and disease prognoses. Practitioners were required to read bodily signals through observation, examination, touch, pulse-taking, and interrogation to extract their significance. Issuing a medical opinion in court thus entailed direct engagement with the body's materiality—a process where multiple gazes and gestures converged, entangled with personal ambitions, economic interests, and social reputations.

Moreover, medical declarations carried tangible legal consequences, influencing both the practitioner's standing and the outcome of judicial proceedings. This paper explores how these factors shaped the ways in which practitioners inspected bodies, described wounds and illnesses, and determined causes of death. Ultimately, it considers how Chilean colonial society—through its judicial apparatus and healing agents—evaluated and ascribed value to the human body and its ailments. Such evaluations reflected broader social hierarchies and material concerns: the status of the examined person, the cost of treatments and medicines, and the potential legal repercussions. Together, these dynamics reveal how the corporeal map of the sick or deceased was configured before the Royal Court.

Learning Outcomes

- Identify successes and failures in the history of medical professionalism
- Understand the dynamic history of medical ideas and practices
- Develop de capacity for critical thinking about the nature, ends and limits of medicine