

B4. Imperial Health, Colonial Bodies

B4:1 Kristin Brig-Ortiz, *Springs and Cemeteries: Urban Public Health, Water Management, and Burial Ground Surveillance in Colonial South Africa, 1880-1910*

As smallpox raged through Cape Town in 1882, colonial public health officials turned their discriminating eyes toward the Cape Malay community and its cemetery, Tana Baru. A largely Muslim population, the Cape Malay community had since 1804 buried their dead at Tana Baru, located in the neighborhood of Bo Kaap on the slope of Lion's Head Mountain. While scholars have discussed the racial and religious tensions that revolved around Tana Baru's later closure, newspapers and reports also discuss local anxieties over the relationship between the buried bodies, downhill drainage, and fresh-water springs. As one doctor put it, Cape Town needed to stem "the poisonous drainage from the Malay burial ground" and the public health threats it engendered. (Cape Times, August 11, 1882)

Like Cape Town, many late nineteenth-century Cape Colony and Natal urban centers became increasingly concerned about the sanitary nature of their burial grounds. Drawing on a wide variety of archival material, this paper argues that across nineteenth and early twentieth-century colonial South Africa, urban public health officials and elite white residents linked poor water management to inadequately designed cemeteries and graveyards to justify stricter regulations on where and how people buried bodies, especially for African, South Asian, and Chinese communities. Yet concerns about water were not limited to white populations; non-white and non-Christian residents used similar rhetoric to fight for their right to local burial grounds. As critical theorist Gautam Basu Thakur has noted, colonialism both creates and is entangled in "real and metaphoric ecologies of death and dying." (2016, 202-3) Building on Thakur and other scholars of death and the environment, I show how the Cape Colony and Natal city leveraged concerns about contaminated and ill-managed water to establish new ways of thinking about the dead body and its literal and figurative place in South African society.

Learning Outcomes

- Deepen understandings of the connection between illness and the urban body
- Recognize the dynamic interrelationship between medicine and society through history
- Analyze the relationship between environment and health

B4:2 Kalman Rotstein, *The Fear of Premature Burial and the Campaign for Death Certification in Fin-de-Siècle Britain*

In 1896, the Victorian social reformer William Tebb wrote in his book about the dangers of premature burial, “our churchyards and cemeteries ... are probably the silent witnesses of unnumbered unspeakable tragedies.” Historians have often considered the fear of premature burial as existing on the fringes of Victorian society, and hardly worth historical examination. This paper argues that the fear of premature burial remained widespread in late nineteenth and early twentieth century Britain. This paper explores how fin-de-siècle social reformers latched onto premature burial as a way to challenge medical authority by demanding that the medical profession discover an absolute sign of death. In Great Britain, prior to the twenty-first century, doctors did not have to be present to sign death certificates, and medical reformers used premature burial to advocate for legislation on death certification. Cremation activists also utilized the fear of premature burial to argue that cremation was the only way to avoid being buried alive. Overall, this paper helps us understand how a long-held concern frequently dismissed as a fringe theory by elite doctors, could nevertheless (and as late as the turn of the twentieth century) become something taken up by a diverse range of social reformers to promote a variety of causes.

Learning Outcomes

- Promote tolerance for ambiguity of theories, the nature of evidence, and the evaluation of appropriate patient care, research, and education
- Identify successes and failures in the history of medical professionalism.

B4:3 Ogechukwu Williams, *Bodies, Blame, and Birth: Historicizing Maternal Mortality Discourses in Nigeria*

This paper traces how a community in southern Nigeria have explained maternal death across a century and how these explanations shape grief, blame, and silence. Drawing on a 1912–1913 account in which Ibibio informants described women who died in pregnancy or childbirth as ritually “unclean”—their bodies left outdoors with signs of disgrace—and on oral histories conducted in 2021 and 2025 with members of the same community, I show both continuity and change in local moral worlds of reproduction. While early twentieth-century narratives framed maternal death as a sacrilege that polluted persons and places, contemporary accounts often relocate causality to women’s alleged moral failure (especially sexual infidelity), rather than to biomedical conditions or systemic barriers to care. Using a historical-ethnographic approach that combines archival reading with recent interviews, I analyze how ideas of pollution, transgression, and duty have traveled through time, and how they inform everyday talk about obstetric risk, responsibility, and bereavement.

Learning Outcomes

- Develop the capacity for critical thinking about the nature, ends and limits of medicine
- Deepen understanding of illness and suffering
- Recognize the dynamic interrelationship between medicine and society through history
- Recognize the impacts of cultural beliefs and practices on health-seeking behaviors