The year 2018 marked the centennial of the 1918 Influenza Pandemic, one of the deadliest outbreaks of disease in recorded history. To acknowledge the social impact of illness on humanity, and to highlight how historical research can shape our knowledge of medicine and the health sciences at a time when those fields of study are expanding here at Seton Hall, the History Department is hosting a two-day symposium on disease and wellness in historical perspective. Some of the questions we seek to investigate over the course of this symposium are as follows: How have notions of illness and wellness changed over time? In what ways have medical progress and discovery been shaped by wars and natural disasters? How did regimes of hygiene fashion social hierarchies or imperial policy? What have been the social, political, and economic consequences of the diseased body and/or mind in various societies? How do civilizations conceptualize disease and miracles within faith practices? How do public health and issues of social justice intersect?

Location: Seton Hall University, South Orange Campus
Keynote Address: Bethany Hall A
Symposium Sessions: Faculty Lounge, University Center
Thursday, February 7, Bethany Hall A
5:30-7:00  Keynote address: Alan Kraut, American University
Fearing Foreign Bodies: A Perennial Theme of American Nativism
7:45-10:00  Dinner: Office Tavern Grill, Summit

Friday, February 8, Faculty Lounge, University Center
8:45-9:30  Coffee and Introductions
9:30-11:00  Altered States: Sex, Drugs & Trauma
Moderator: Laura Wangerin, Seton Hall University
Chris Babits, University of Texas—Austin
Stoned, Horny, and Straight: Psychedelics and Sexual Conversion in an Age of Gay Panic
Robert J. Scholnick, College of William and Mary
Toward a New Medical Praxis: Walt Whitman on Trauma and Disability
Emine Evered, Michigan State University
Medicalization of Alcoholism and Turkish Prohibition

11:00-11:15  Coffee Break
11:15-12:45  Treatments Transformed: The Professionalization of Medicine
Moderator: Mark Molesky, Seton Hall University
Roberto Padilla II, University of Toledo
Microbes and Microscopes: Western Scientific Medicine and Cholera in Nineteenth Century Japan
Wenrui Zhao, Columbia University
Experiencing Eye Diseases in Early Modern Germany
Léonie Beaulieu, Université de Montréal
Jean Stanislas Mitié - Syphilis and Revolution (1780-1794)

12:45-1:45  Lunch Break
1:45-3:15  Imperial Health: Spirits, Sanitation & Sovereignty
Moderator: Kirsten Schultz, Seton Hall University
Patricia Martins Marcos, University of San Diego
Political Medicine and the Body Politic: Monarchy and the Sciences of Sovereignty in the Long Portuguese Eighteenth-Century
Yayra Sumah, Columbia University
Healing the Congo Dead
John William Rall, University of Alabama-Birmingham
Love in the Time of Nazism: Sterilization, Courtship, and Belonging in the Third Reich

3:15-3:30  Coffee Break
3:30-5:30  Roundtable Discussion and Closing Remarks
Moderators: Alan Kraut, American University and Thomas Rzeznik, Seton Hall University
6:00-8:30  Dinner: Giorgio’s Ristorante, South Orange
Fearing Foreign Bodies: A Perennial Theme of American Nativism
Dr. Alan M. Kraut
American University

Last autumn a former Immigration and Customs Enforcement (ICE) agent told a FOX News audience that the caravan of Central American migrants headed to the southern border of the United States might be carrying smallpox, tuberculosis, leprosy and thus posed a threat to American’s health and well-being. Such speculation has long fueled medicalized prejudice, a “double helix of health and fear,” that has become a recurring nativist theme designed to arouse Americans’ fear of the foreign-born. Anxieties about foreign bodies and contagion have been widespread throughout American history, often spiking at moments when new medical discoveries or medical crises have coincided with escalations in the numbers of immigrants or refugees, or a shift in the origins and identities of those at the nation’s doorstep. In the early twentieth century Italian immigrants were associated with the threat of polio and tuberculosis was characterized as the “Jewish disease,” or the “tailor’s disease.” Today other groups are similarly stigmatized. This presentation will explore several examples of how the threat of disease from abroad was used by nativists to cast newcomers as unassimilable. It will also explore the reaction of government and individual ethnic groups to the fears and anxieties aroused by the foreign bodies at America’s doorstep.
Session 1: Altered States: Sex, Drugs & Trauma

Chris Babits, University of Texas at Austin (chris.babits@utexas.edu)
Stoned, Horny, and Straight: Psychedelics and Sexual Conversion in an Age of Gay Panic

In a 1966 Playboy interview, Timothy Leary, a psychologist, contended that Lysergic acid diethylamide (LSD), a synthetic hallucinogen, facilitated heterosexual conversion in homosexuals and the celibate religious. Leary posited that LSD “puts you in touch with the wisdom of your body, of your nervous system, of your cells, of your organs.” According to Leary, LSD offered homosexuals and celibate monks, priests, and nuns the ability to realize, and act on, powerful heterosexual impulses. He discussed how LSD offered a cure for homosexuality, one of the “sexual perversions” caused by “dislocating childhood experiences of one kind or another.” In experiments with priests, monks, and nuns, Leary witnessed how heterosexual “life forces” combatted the “ritualized defenses and self-delusions” of institutional religion.

“Stoned, Horny, and Straight” examines Leary’s LSD treatments with homosexuals and religious celibates to better understand how notions of wellness and disease have changed over time. I argue that on the one hand, Leary’s therapeutic interventions challenged the sexual conservatism of the postwar period and on the other, upheld the heteropatriarchal norms of the fifties and sixties. Leary thought that LSD, when coupled with sexual experimentation, helped homosexuals and religious celibates embrace their heterosexual identity. “Stoned, Horny, and Straight” also explains why Leary’s sexual conversion experiments failed to catch on. Indeed, Leary abandoned these therapeutic interventions because of tectonic shifts in how psychologists viewed pathology and identity. Beginning in the early-to-mid 1970s, Leary listened to gay liberation activists declarations that “Gay is Good,” determining that sexual reorientation was not ethical.

Robert J. Scholnick, College of William and Mary (risch@wm.edu)
Toward a New Medical Praxis: Walt Whitman on Trauma and Disability

No major nineteenth-century American poet was more deeply engaged with medicine than Walt Whitman (1819-1892). In the 1840s, he considered becoming a professional lecturer on health and wrote scathingly on current medical practice. In an editorial in the Brooklyn Eagle entitled “Is Not Medicine Itself a Frequent Cause of Sickness?” he asserted that the “violent stimulants and narcotics which are favorites with a majority of the physicians, cannot be used without the most serious and permanent effects on the system….Doctors and apothecaries pretend to know altogether too much.” As a therapeutic nihilist, he may be associated with such physicians as the Bostonian Jacob Bigelow, who stated that it was “the unbiased opinion of most medical men of sound judgment” that “the amount of death and disaster in the world would be less, if all disease were left to itself.” But one syndrome that Whitman realized demanded immediate intervention was the trauma experienced by both soldiers and civilians in the Civil War. A devoted nurse in the D.C. hospitals, he developed a praxis for treating the syndrome, which he outlined first in newspaper dispatches and then in the autobiographical Specimen Days and Collect (1882). Exploring Whitman’s prescient insights into the means of addressing disability and trauma, this paper also argues that the poet provides us with an invaluable means of comprehending the evolution of medicine in nineteenth-century America.

Emine Evered, Michigan State University (evered@msu.edu)
Medicalization of Alcoholism and Turkish Prohibition

Alcoholism as a disease was a novel concept when Dr. Benjamin Rush and others began to advance arguments about addiction by the late eighteenth century. Both within and beyond an emerging United States, this perspective found receptive audiences over the coming century amid the global rise of temperance politics. Though his critique of Gay Panic focused exclusively on spirits—and not beer or wine, Rush’s contention that alcoholism progressed to inflict additional physical and psychological harms (e.g., fevers, jaundices, palsy, epilepsy, insanity, and other afflictions) became commonplace. Notions of “hereditary alcoholism” likewise appeared alongside eugenics’ nineteenth-century ascendancy. My paper examines how medicalization of alcoholism found its way to the Ottoman Empire (1300-1922) in the late 19th century and influenced a temperance movement that led to a short-lived prohibition in 1920. The Ottoman Empire had a sizeable Muslim population and many definitions of Islam banned alcohol consumption. Although alcohol flowed in many parts of the empire and public drunkenness was subject to punishment, due to imperial transformations, drinking became habituated during the 19th century. The spread of alcohol consumption, especially sprituous liquor – both domestic and foreign – generated an interest in temperance, especially among medical professionals. Utilizing many of the arguments circulating in European and American medical circles, physicians in late Ottoman Empire focused on encouraging moderate consumption and eventually collaborated with religious establishment to bring a “bone-dry” prohibition in 1920.

In my research, based on analysis of medical books and journals, pamphlets, temperance posters and other promotions, advice literature, newspapers, and magazines from the late Ottoman and early republican eras, I demonstrate the confluence of medical and moral efforts in the making of national prohibition.

Session 2: Treatments Transformed: Professionalization of Medicine

Roberto Padilla II, University of Toledo (roberto.padillaii@gmail.com)
Microbes and Microscopes: Western Scientific Medicine and Cholera in Nineteenth Century Japan

This study examines shifts in how Japan’s medical community understood cholera in the nineteenth century. It focuses on the intersections between institutional policies, advances in medical knowledge and the lingering perception that cholera was a continental Asian illness. In the period under study Japanese medical institutions viewed Western scientific medicine as a marker of modernity, that if properly adapted, could usher Japan into the ranks of modern nations. In addition, despite confirming that by 1885 cholera had become endemic in Japan, the Japanese army medical bureau and the Japanese government’s Central Sanitary Bureau consistently viewed cholera as a Chinese or Indian disease. I argue in Japan medical policies coupled with a limited geographical understanding of cholera had a devastating outcome for Japan in the Sino-Japanese War (1894-1895). During the campaign the Japanese army
Mittié’s discourse on syphilis through his work mirrors the political transformations of the era, along with the medical project and language put forward by the revolutionaries.

Session 3: Imperial Health: Spirits, Sanitation, and Sovereignty

Patricia Martins Marcos, UC San Diego (pmarcos@ucsd.edu)

Political Medicine and the Body Politic: Monarchy and the Sciences of Sovereignty in the Long Portuguese Eighteenth-Century

In 1742, the French Ambassador declared that Portugal was “a Monarchy without a Monarch.” The king was ill, as was the body politic. The agonies of D. João V’s (r. 1707-1750) endured for eight more years and suspended decades of reformist rule. Building on the history of medicine, I explore the significance of this neglected moment. The King’s illness brought to the fore key questions about government – who rules, how, and to what end? – at a time of changing political paradigms. This paper resorts to Kantorowicz’s two-body model while also reimagining it. Beyond the king’s transcendent and mortal body, the fight for political power which ensued in the aftermath of D. João V’s seizures, opposed two somatic worldviews: the “body of the confessor” and the “body of the anatomist.” In 1742, while the physician was brought to heal, it was the confessor who ultimately took charge. In 1792, however, things had changed. When D. Maria I’s (r.1777-1792) madness seized her ability to govern, the handing of executive power to the Prince had become an exclusively medical matter. This paper demonstrates how the Sovereign’s incapacitated body became a site of dispute between competing views of Monarchy – divine or constitutional – in the aftermath of the French Revolution. I argue that grave illness decentered the place of the Prince in the midst of the Body Politic while giving the physician key political functions. The outcome was the dissemination of executive power among secular institutions and the demise of the transcendental Monarch.

Yayra Sumah, Columbia University (yayra.sumah@columbia.edu)

Healing the Kongo Dead

When the prophetic healing movement known as ‘Kimbanguism’ erupted in Belgian Congo in the 1920s, one colonial doctor in Leopoldville urged his colleagues to “try to prove to the natives who have taken recourse to the practices of Kibangu’s disciples…the effectiveness of European medicine and our scientific methods of healing.” Yet thousands of believers flocked to the prophet Simon Kimbangu, to heal from the ‘attack’ ‘domination,’ and ‘eating’ by violent spirits. Offering the Holy Spirit as a healing medicine for the assaults from the realm of the dead, Kimbangu merged an older Kongo healing tradition with the legacy of 20th century Protestant Christianity.

Scholars of this movement suggest that the influenza pandemic of 1918 was a central trigger, causing so much devastation that the search for healing ensued. Yet when Simon Kimbangu and the prophets (bangunzas) healed, they healed spirits. Healing the spirits of the dead – the ancestral spirits – was done by laying hands and by raising the dead. Scholars also see the Kimbanguist refusal of colonial medicine as a sign of anti-colonial resistance. Indeed, in colonial medicine, ‘hygiene’ was a signifier for racial separation and medical passports were a tool of customary spatial control. But in the Kimbanguist movement, the biomedical realm was not what was...
really at stake. Rather, illness and suffering were linked to the spiritual condition - to the cosmological wounds stemming from the workings of ancestral spirits (bakulu/bisimbi/nkisi) and witchcraft power (ndoki), which menaced people in the aftermath of the First World War.

John William Rall, University of Alabama-Birmingham (jwrall@uab.edu)

Love in the Time of Nazism: Sterilization, Courtship, and Belonging in the Third Reich

This paper presents case studies from archival collections and oral testimonies that investigate aspirations to love and companionship by individuals forcibly sterilized by the Nazi state. I argue that sterilized individuals, in their pursuit of partners under Nazi rule, confronted and contradicted social normativity established by racialized health regimes. Through increasingly complex health legislation, growing social services, and victimizing medical procedures, Nazi authorities tried to impose onto German society their own imaginings of health and welfare grounded in exclusionist ideas of racial wellbeing and population policy. These efforts were, in many ways, epitomized by the violent process of forced sterilization. Forced sterilization at once marked over 400,000 German bodies as ‘unworthy’ of participation in a Nazi ‘national community’ while simultaneously celebrating traditional gender roles of motherhood and fatherhood. Through forced sterilization, Nazi policy makers and healthcare officials became gatekeepers of idealized social roles and community belonging.

In spite of these mechanisms of exclusion, sterilized individuals attempted to find their own avenues to inclusion. This paper focuses specifically on how men and women pursued aspirations to love, companionship, and family life—aspirations that health officials intended to close off. By creating relationships and building families, sterilized individuals tried to claim their own unique sense of belonging while simultaneously complicating the violent social hierarchies that typified German society under Nazi rule.

Acknowledgments

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