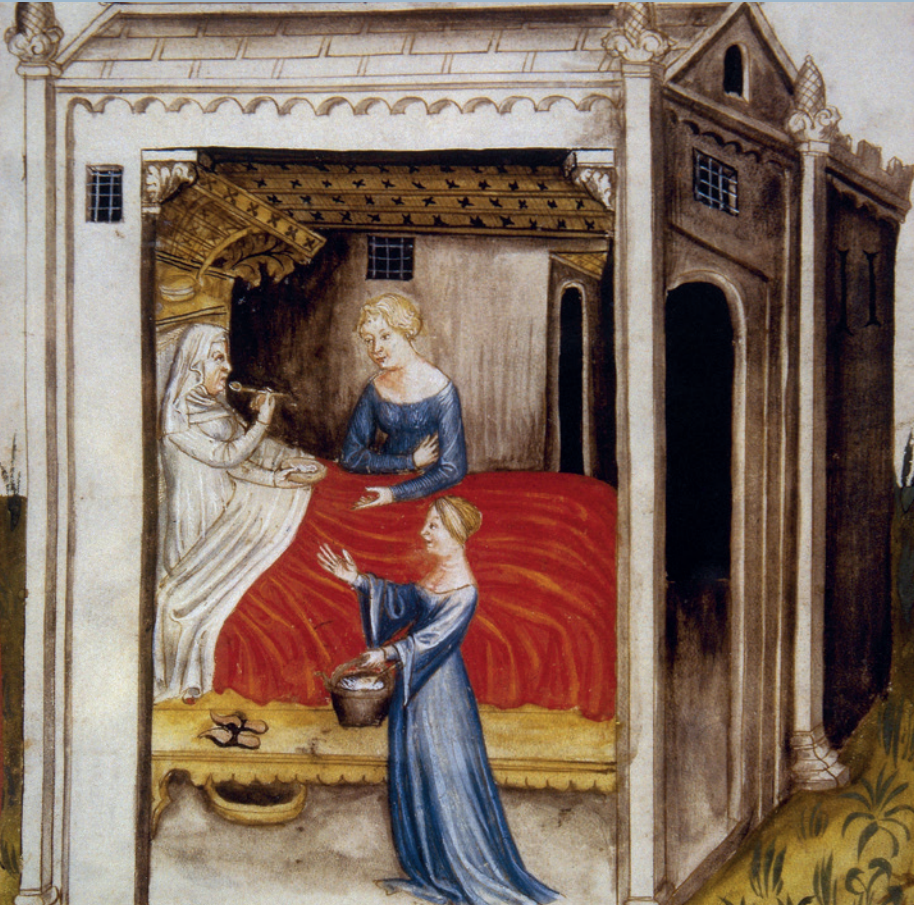


PREMODERN HEALTH, DISEASE, AND DISABILITY



Theresa A. Vaughan

# Women, Food, and Diet in the Middle Ages

## Balancing the Humours

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Women, Food,  
and Diet in the Middle Ages



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# Premodern Health, Disease, and Disability

*Premodern Health, Disease, and Disability* is an interdisciplinary series devoted to all topics concerning health from all parts of the globe and including all premodern time periods: Antiquity, the Middle Ages and Early Modern. The series is global, including but not limited to Europe, the Middle East, the Mediterranean, and Asia. We encourage submissions examining medical care, such as health practitioners, hospitals and infirmaries, medicines and herbal remedies, medical theories and texts, care givers and therapies. Other topics pertinent to the scope of the series include research into premodern disability studies such as injury, impairment, chronic illness, pain, and all experiences of bodily and/or mental difference. Studies of diseases and how they were perceived and treated are also of interest. Furthermore, we are looking for works on medicinal plants and gardens; ecclesiastical and legal approaches to medical issues; archaeological and scientific findings concerning premodern health; and any other studies related to health and health care prior to 1800.

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*Theresa A. Vaughan*

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*For Kieran, my love*



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# Introduction

## Abstract

The introduction provides an overview of the research problems and how they will be approached, focusing particularly on how understanding women, food, medicine, and diet in the Middle Ages by using anthropological and folkloristic approaches can add to the understanding of these issues for non-elite populations. Research questions include: What do we know about women as food producers, feeders, and nurturers? What can be said about women as practitioners of folk or traditional medicine? How does this contrast with the written record of theoretical medicine? Finally, what were the cultural aspects surrounding women, food, and health, and how did it determine proper eating, fasting, and body shape?

**Keywords:** folk medicine, traditional medicine, medieval women, theoretical medicine

What can we know about women, food, and diet in the Middle Ages? Here, I cover a number of different interrelated topics having to do with medical dietary recommendations for women from the theoretical and practical medical traditions, the basis for those recommendations, and what we can learn about the folk traditions surrounding women, food and medicine. The book goes on to explore the themes of women and food more generally in the Middle Ages, with some parallels drawn with the Early Modern to contemporary issues involving diet, gendered roles in preparing and eating food, and medical views of women and food. Thus, this book is not exclusively about the medieval tradition of theoretical medicine and the role of food in medicine as it pertains to women. Instead, I seek to situate that tradition within the greater cultural context of women of all social classes, gendered expectations for women in gathering, preparing food, and feeding others, and the gaze on the female body and how it has been understood by the medical world as well as other quarters.

I write this book not as an historian, but rather as someone trained in both anthropology and folklore in the United States, with the particular

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views of culture as a whole and folk culture that that education entails. Having spent most of my research career on gender and foodways, my turn to these subjects in the Middle Ages was as a result of establishing a teaching career in a field somewhat outside of my training: for the last twenty years I have taught in a department of Humanities and Philosophy, where I bring perspectives on both Western and non-Western cultures to students. Many of my departmental colleagues, from whom I have learned much over the years, are historians, art historians, archaeologists, classicists, philosophers, and those specializing in interdisciplinary humanities. My research career has been influenced by their focus on more conventional subjects in Western Civilization. I combine a curiosity for material and cultural artefacts with a focus on the subaltern – of those aspects of cultures and peoples that are part of the common person – of the folk, if you will.

In doing research on medieval foodways, I was struck by the fact that a number of the sources I read mentioned how little we know about women as cooks specifically, and how little we knew about women and food in general. The everyday lives of women who tended kitchen gardens, nursed children, and fed their families were not significant enough to have been recorded in any direct way. It is assumed, based upon the available evidence, that women's roles within the home as cooks and nurturers are fairly similar among the non-elite of many cultures. But what can we really know?

Food also formed the basis of the medieval healing system – of the humoral system as conceived by the Greeks – as a means to correct imbalance and maintain health. How did this pertain to women in particular? Could an understanding of women and food in the humoral system also tell us something about the nature of women and of their relationship to food? Interest in food, gender, and the humoral system led me to a better understanding of the expectations and restrictions placed on women's bodies in the Middle Ages. And, of course, none of this could be completely understood within its cultural context without some understanding of religion.

Essentially, what can we learn about women and food in the Middle Ages? That is my basic research question. I approach it through the lens of anthropology, but primarily through that of folklore studies. I rely on the work of historians, literary scholars, and archaeologists for source material and methods of approaching it. There are no new texts uncovered here; rather, I try to find a way of looking at existing information to see what we might be able to divine about women and foodways of all social strata.



To address the questions of women and food in the Middle Ages, this work explores a number of topics:

- 1 What do we know about women and food production?
- 2 What do we know about women as feeders and nurturers?
- 3 What do we know about women as practitioners of informal/traditional medicine?
- 4 How did theoretical medicine view the relationship between food and health, particularly as it pertained to women?
- 5 How did food appear in folk beliefs about women and health?
- 6 What were cultural expectations of women's bodies – both fed and abstinent?
- 7 How did cultural ideas about beauty and body size affect women's bodies?

Many of the medieval manuscripts on health have been identified, and a number have been studied in some depth. While I do not uncover any new texts nor suggest any heretofore undiscovered relationships between the various strands of medical learning, I hope this work adds to the academic conversation on medical texts by looking specifically at dietary recommendations for women's health, attempting to uncover both the humoral and cultural reasoning behind those recommendations. To accomplish this, I consider advice on diet and health from a number of sources. A brief look at contemporary cultural concerns about diet and health demonstrates that those same concerns, though framed differently, are present in medieval medicine. After all, we are all inheritors in one way or another of the Greek medical tradition, and Hippocrates' famous declaration, 'Let food be thy medicine, and medicine be thy food'.

However, looking at these texts still leaves us with many questions. Did medieval people follow this advice? Was it only intended for or followed by the aristocracy, who by the High Middle Ages could afford to hire academically trained doctors to prescribe diet and medicine for their health concerns? Did the advice for women in these guides become part of folk medicine, or the advice of traditional healers? Did folk medicine influence the written medical tradition?

Manuscripts here yield only limited evidence. The medieval manuscripts were written by the learned and literate. The writers themselves, depending upon the time period in question, came from the upper social strata – either trained in the ecclesiastical tradition, as clerics, or from the aristocracy and haute bourgeoisie. Literacy would, of course, eventually expand to other portions of the population, but the fact remains that we see folk culture





and traditional learning mainly through the eyes of observers, rather than actors within that tradition.

The fields of folklore and anthropology have long grappled with understanding the traditions and practices of non-literate, non-hegemonic populations. While current trends in folklore and anthropology focus on the traditional cultures of living people, each field has a strong tradition of historical study as well, and of grappling with artefacts – be they material, verbal, or ritual – and expanding outward to understanding their place in a wider cultural field.

To offer a variety of approaches to this topic, I utilize a number of types of evidence and analyses. The goal here is to gather evidence from what we already know and look at it in a new light, to see what new things we can determine about the questions at hand. This is not to neglect the considerable work already done on the Middle Ages by historians, historical anthropologists, archaeologists, and literary scholars: this work would not be possible without all the groundwork achieved in these fields pertaining to food and health, as well as the experience of gender. Rather, this book builds on that earlier work.

In Chapter One, 'Women as Healers, Women as Food Producers', we look broadly at the role of women in many cultures as both the immediate providers of food, and of basic medical treatment for the family. In many cultures and time periods, women have been seen as the primary food providers and healers for the family, especially in non-aristocratic classes. Women's diets and food prepared by women carry unique symbolic meanings related to the role of women in society and in the family. An increasing array of literature on feminist approaches to foodways have helped to uncover women's work in the home and the symbolic and cultural load women carry in nurturing through food and healing. Some of that literature, I suggest, is particularly pertinent to the study of women's diet and health in the Middle Ages.

It can be difficult to truly view women's role as food providers and family healers in the medieval world. Long associated with domestic spaces in the Western world, women were less visible than men as public actors, and therefore their lives are less accessible to us. To complicate matters, most written records that come down to us from the medieval period were written almost exclusively by men. When focusing on medieval food and cuisine, we are faced with a relative abundance of written records, but again they are also primarily ecclesiastical and aristocratic. When literacy is confined to those two groups, it is logical that most written accounts will be from and about those groups. If we want to look closely at women and food in the Middle Ages – women as cooks, managers of the domestic



space, food vendors, and as consumers, we are hindered by the availability of material as well. There is an abundance of evidence for food production and consumption among the aristocracy, but if we wish to look at women as cooks, we are thwarted even within the aristocratic class, as the grand kitchens of the aristocracy were run and staffed almost exclusively by men. Ecclesiastical writing, aside from records of purchase and consumption by convents and monasteries, view food through the lens of Christian teachings on abstinence and avoidance of gluttony, also associating food with sexuality. Such writing is nearly always prescriptive rather than descriptive.

So, what can we learn about women and food in the Middle Ages, especially beyond the convent or the manor house? Positive examples can be found in, for example, conduct literature; negative examples appear in genres such as the *fabliau*. This chapter addresses some of the literature on women as consumers and producers of food, with implications for understanding the cultural significance of diet and women's health in the Middle Ages.

In Chapter Two, 'Medieval Theories of Nutrition and Health', the two threads of Greek medicine are examined for their insights into how the body uses food and gender differences in the way food was processed, with emphasis on the Hippocratic tradition as seen in Galen. An understanding of humoral theory, on which much medieval medicine was based, is necessary to follow the arguments of later medical writers about how food influences health, and what food is recommended both for the maintenance of good health and the treatment of disease. Humoral theory also explains how diet is often related to disease, and how dietary remedies can help cure various medical conditions. This chapter also covers some of the trends and modifications to humoral theory made during the medieval period.

While humoral theory is often complex, this brief overview necessitates some simplification. An emphasis on the differences in dietary needs by age, gender, and state of health is explored to better understand why certain dietary recommendations were made specifically for women's health. While most medieval medical authors had access to the same texts or copies of texts, those texts may have been fragmentary, corrupted, or incomplete. Changes in medical theory, particularly beginning with the establishment of medical schools in the 1100s, are also apparent in medical texts. The arrival of systemized and translated Arabic texts, themselves drawn largely from the medicine of ancient Greece, also changed the medical landscape. However, most of the work addressed in this book is ultimately traced back to the original Greek ideas of diet and health.

In Chapter Three, 'The Special Problem of Nutrition and Women's Health', we move beyond general humoral theory to those texts which spend at



least some time talking about health concerns specific to women. Medieval literature on women's medicine is relatively scarce; how then do we understand recommendations and practices specific to women? The *Trotula* was a foundational text, cited for several hundred years. Women's health was mentioned occasionally in other medical texts: I emphasize Hildegard of Bingen as a female author working within both the theological and medical traditions. These texts are examined within the context of humoral theory. While both the *Trotula* and the works of Hildegard are addressed in much greater detail in Chapter Five, they're included here as part of a textual tradition on women's health.

A survey of medical texts, and those on natural philosophy focusing on reproduction and female anatomy, helps to understand how the female body was viewed from several different vantage points – humoral theory certainly, but also anatomy and, surprisingly for contemporary readers, theology. What was it about the nature of the female being that made it prone to certain illnesses? Here, again, we see Greek ideas wend their way through the medieval tradition – sometimes strikingly misogynous in tone. Humoral theory was sometimes used to justify anti-feminist medical viewpoints. Female bodies were weaker than male bodies; more delicate and prone to certain illnesses. Pregnancy, a condition unique to women, was viewed as a natural state, but one in which the body should be treated as if it were ill. Often, dietary recommendations for the ill or recuperated are reflected in those recommendations for pregnant women.

Chapter Four, 'Theoretical Medicine vs. Practical Medicine', investigates the problems of separating medicine as written and presumably practiced by academically trained physicians from more common remedies used by local healers, midwives, and wise women. A distinction must be made between the theoretical medicine of academically trained doctors and the practical medicine of midwives and traditional healers, perhaps better classified as 'folk medicine' or 'traditional medicine'. Historians have studied the changing role and status of traditionally trained midwives. In the later Middle Ages, midwives were partially displaced by academically trained doctors for both the aristocracy and the bourgeoisie. While the extent to which midwives were supplanted by male doctors may have been overstated, the rise of medical schools and of academically trained physicians did cause change in the medical landscape.

The practical medicine of midwives and traditional healers is, of course, more difficult to document as it was not primarily a written tradition. Some traces of it may exist in the *Trotula*. Some may be found in other kinds of records, folktales, legal proceedings, trials for heresy, herbals and other



illuminated manuscripts, and in fragmentary ways in a number of sources. We know quite a bit about folk medicine in a number of contemporary cultures – how much of what we know may be applicable to the fragmentary evidence from the Middle Ages?

Chapter Five, ‘The *Trotula* and the Works of Hildegard of Bingen’, offers a more thorough examination of the most common medieval text about women’s gynaecological and reproductive health, in part with the aim of trying to understand how these works might be related to folk medicine. The *Trotula*, traditionally attributed to a female author, is examined as an historical document and a possible record of both theoretical and practical medicine in twelfth century Salerno. The *Trotula* itself, really three different texts that explore aspects of women’s health, cosmetics, and beauty, is in reality only partially written by a woman or her students. However, its importance as an authoritative text attributed to a woman cannot be overemphasized. The portion that may have been written by Trota or her students is, in fact, more practical and less theoretical than the other two parts. Can this offer us some insight into folk medicine, at least in Salerno and surrounding regions?

Within the *Trotula*, dietary recommendations offer us a look into the role diet was thought to play in women’s health. Some of its recommendations are analysed within the framework of humoral theory. Is it possible to determine which dietary recommendations were theoretically determined by humoral theory, and which may have come from folk medicine? To what extent did humoral theory reach the understanding of diet among the common people? It is impossible to know the answers to these questions with certainty, but literature on folk medicine and traditional healing may help to sort out some of the text, and provide suggestions for areas of further inquiry.

We also take a look at an author whose recommendations existed outside of mainstream theoretical medicine. In contrast to the *Trotula*, Hildegard of Bingen’s texts addressed medicine and natural philosophy through a highly idiosyncratic theoretical framework. The two relevant books, among the many written by Hildegard (or at least attributed to her), are entitled *Physica* and what has come to be called *Causae et Curae*.

Hildegard’s works are not exclusively focused on women’s health and reproduction, but they do address these topics within a theological framework that treats understanding the body as a microcosm of God’s creation. Here, they are examined for instructions on women’s health, and particularly for dietary recommendations specific to women and reproductive health. How much of Hildegard’s recommendations reflect her knowledge of folk medicine and traditional healing, and how much are they simply reflective



of her own brand of theology? Do they offer a window into the larger culture of diet and health in Germany of the 1100s, or are they simply cut from the cloth of Hildegard's imagination? There is no doubt that Hildegard's mind was sharp and expansive, as she wrote on so many subjects, but she was also a person of a specific time and culture. It is conceivable that traditional medicine is found in her recommendations.

In Chapter Six, 'The Legacy of the *Trotula*', we look more closely at the *Trotula*'s influence on later texts, and textual traditions that existed apart from the *Trotula* and its legacy. An examination of other texts that address diet and health, particularly women's health, reveals how interpretation of the *Trotula* evolved over time, as understanding of diet and health evolved. By the fifteenth century, ideas springing from humoral theory were still present, but as more people became literate, general guides for understanding of animals, plants, and spices and their properties became popular among the aristocracy and haute bourgeoisie.

Of key interest are the various versions of the *Regimen sanitatis* produced in the fourteenth and fifteenth centuries. While not specifically focused on women's health, they did feature diet, health, and to some extent, cooking. Platina's *On Right Pleasure and Good Health* is another example of an author building upon both medical theory (as it came to be understood by learned lay people) and *Regimina sanitatis* and their careful descriptions of all things edible to recommend what he considered to be the best medical practices. These texts are examined for dietary recommendations most pertinent to women and women's concerns. Finally, late texts addressing women's health, such as Michele Savonarola's *Regimine pregnantium*, and pseudo-medical texts, such as *De secretis mulierum*, analyze diet and women's health recommendations through the misogynistic lens of men whose view of women was particularly problematic.

In Chapter Seven, 'Women's Diets and Standards of Beauty', we look at not just the recommendations for good health and the amelioration of gynaecological health issues, but also how dietary recommendations for women were connected to standards of beauty. What role did diet play in expectations for women's beauty and attractiveness? How did the expectations for the appearance of a woman's body relate to her weight? Were obesity's effects on beauty as well as health similar to current standards? Evidence suggests that until the later Middle Ages, obesity was not necessarily viewed as an aesthetic problem, but was viewed morally as indicative of a lack of self-control and indulgence in the sin of gluttony. By the Early Modern period, it was also of great concern as an impediment to fertility. How does this manifest (or does it manifest) in the medical texts, both for



women's health in particular and general recommendations on diet? In this case, works on the anthropology of the body suggest that what women eat and how they look are deeply embedded social constructs revealing cultural attitudes towards gender difference, women's roles, and worth.

Chapter Eight, 'Religious Conflict and Religious Accommodation', addresses the role played by Church teachings against gluttony and on the inherently sinful nature of women in dietary recommendations for health. The Church had much to say about the virtues of fasting and meat avoidance in the spiritual health of both men and women. The conflict between recommendations for bodily health and spiritual health is examined, highlighting the sometimes-uneasy compromise between medical and ecclesiastical dietary recommendations, particularly for women.

The works of Hildegard are especially important in observing one synthesis between the two points of view. In addition, texts such as *De secretis mulierum* by Pseudo-Albertus Magnus, first introduced in Chapter Six and steeped in the anti-feminist tradition, are instructive in showing the extent to which Church attitudes could be at odds with the more neutral stance of medical texts. As we have seen, anti-feminist traditions in the area of women's health and physiology go all the way back to ancient Greece, but the concept of sin fed directly into such phenomena as holy anorexia, self-denial, and endurance of illness as a form of self-mortification.

The final chapter, Chapter Nine, is entitled 'Evolving Advice for Women's Health Through Diet'. It provides a summary overview of how dietary advice for women changed from Galen through the Early Modern period, and anticipates some of the changes taking place in dietary recommendations during the Renaissance and beyond. While this is a long arc of history, certain trends can be traced. The literature from folklore and anthropology will also prove useful here. How do cultural attitudes towards diet change?

A summary of the main arguments and findings of the previous chapters places humoral theory and its dietary implications within the context of other global dietary theories and practices. What can other cultures in other contexts tell us about informal learning of foodways, changes in traditional medicine, modified roles for women, and popular religion as it relates to food culture?

Ultimately, examining the interrelationship between medicine, health, nurturing, sexuality, and women's bodies may lead to new ways of looking at or understanding women's lives and bodies in the Middle Ages. Looking at both the culture of the elite and the non-elite may also inspire new attempts to understand the traditional, informal culture of diet and medicine alluded to by some medical and non-medical texts.



Cultural attitudes toward health and illness, toward food and cuisine, toward women and female bodies always inform and underlie texts that purport to be scientific and medical. Each text is written within a nested series of cultural assumptions, some clearly evident, others less so. People who were not part of the literate tradition had as distinct and coherent a culture as did those of the literate classes; attitudes toward women and health are also present there, even if we can understand them only imperfectly.

