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## **Abstract**

Indigenous Ancestors and Healing Landscapes. Cultural Memory and Intercultural Communication in the Dominican Republic and Cuba.

### **The research and its objectives**

Until recently, only a few studies have investigated in depth the impact of the European colonization on the indigenous populations of the Caribbean. The aim of the Nexus 1492 project is to bring new insights into the histories and legacies of the indigenous Caribbean across the historical divide created by European colonization and the ensuing complex intercultural dynamics over the past five centuries. Within Nexus 1492, the subproject Landscape Transformations, this study focuses on current healing practices in relation to European colonization and the profound demographic changes that have taken place. More specifically, this research examines current Dominican and Cuban healing landscapes from a cultural memory perspective.

The main problem that informs this research is: how do healing landscapes encapsulate cultural memories of the indigenous past? In order to gather a better understanding of the contemporary healing landscapes, this study offers insights into how contemporary medicinal cultures have been historically constructed. Fieldwork was carried out in order to explore how community members relate some landscape features to the indigenous past and how these associations play a role in traditional healing practices. A further analysis of the historical and ethnographic data allows us to situate the concept of healing landscapes within current landscape theories.

By presenting data on current, non-institutional healing practices, this study highlights their continuous importance and recognizes their significant value as a part of Caribbean heritage. This research draws attention to the need to include contemporary local epistemologies as an important departure point for inclusive medicinal histories.

In combination with other projects within Nexus 1492, this investigation provides glimpses into results of landscape transformations in the Caribbean after the European conquest, and by this means it hopes to contribute to the deconstruction of colonial discourse about the past. More specifically, the collected data on healing landscapes offer a contrast to the prevalent representations of present-day Caribbean societies in terms of uprooted hybridity or impurity, and as being too fragmented (among others by colonization) to have any spiritual relation with local landscapes.

### **Theoretical and methodological perspective**

By combining data from ethnographic fieldwork and critical historical analysis, this thesis explores the contemporary character of the healing landscapes and their historical background. Concretely, it follows the recommendations of previous studies to examine the relation of medicinal practices with indigenous ancestors. Before discussing the medicinal history as well as the ideas, narratives and cultural practices that are presented in the second part of this dissertation, it was necessary to reflect upon the origins of the historical genesis of representation of the indigenous peoples of the Dominican Republic and Cuba through the lenses of colonial authors.

A review of the primary and secondary historical sources focused on cultural and religious transformations and their role in the medicinal histories of the region. This concerned documents relating to colonial history of the indigenous peoples on both islands after the encomienda period. This review was

further situated within the broader demographic history of the region and local histories of sites where the fieldwork was conducted.

The main corpus of knowledge originates from ethnographic fieldwork, interactions with local experts and mentors in the field. This data collection in the field focused on healing landscapes that were defined as agents that were said to promote physical, mental, and spiritual health. Following this definition this study has collected many examples of the human interaction with divine and ancestral beings residing or manifested in places, vegetation, and natural features. The concept healing landscape integrates insights from previous botanical and anthropological studies with landscape theories and fieldwork data on present-day healing practices.

The memory approach was motivated by the popular ideas about contemporary healing practices as being indigenous heritage. These ideas seemed to contradict the widely accepted narratives about the national history wherein indigenous ancestors did not survive the European conquest and colonization. The concept of 'cultural memory' helped this study reflect upon how people engage with the past through healing practices, and how these practices in turn are continuations and/or reinterpretations of past beliefs, knowledge and customs. Previous memory studies offered us broader insights into the power dynamics, particularly their influence on people's perception and engagement with the past. This approach allowed us to consider the emic vision of the past as an integral part of the context and mechanism of transmitting medicinal cultures. The combination of landscape and memory studies allowed us to contextualize the ideas about spacialization of memory as an integral part of people becoming reflexive of their own past within the Caribbean context.

## **Main results**

The history of healing landscapes has developed within a profound landscape transformation, including material and conceptual aspects. The colonization of the landscape implied large scale expropriation of lands and natural resources, spiritual conquest, and profound loss of ancestral medicinal cultures and knowledge. The colonization of Hispaniola and Cuba triggered also introduction of new religions and cultural synergy of medicinal cultures, while part of indigenous botanical knowledge was circulated through the world. Various authors (Pané, Fernandez de Oviedo, Monardes, Méndez Nieto, Breton, Sloane, Górdon y de Acosta) provide information about the indigenous co-authorship of the biography of healing landscapes. The indigenous healer and carriers of the knowledge were longer active then previously argued. Simultaneously, the circulation of medicinal knowledge was marked by high intra and interregional mobility of the carriers of this knowledge. The healers from across the Atlantic Ocean and even from the American mainland equally contributed to the rich current medicinal practices.

The overview of the demographic and medicinal histories of Hispaniola and Cuba suggest that Ortiz' hypothesis of the failed indigenous transculturation needs to be revised. Some registers kept brief references about the long-continued presence and social integration of the indigenous descendants in several urban and rural settlements in both study regions during the colonial period. Without doubts, the ancestors of originally non-Caribbean background numerically outweighed the numbers of indigenous descendants. The question about the indigenous contribution to the transculturation process of medicinal cultures remains open. The colonial emphasis on race should not blind us to the multiple ways in which indigenous descendants were able to maintain distinct ethnic identities, continue medicinal cultures and transfer their knowledge and culture to the next generations.

Part II, which comprises chapters 6 through 9, presents some facets of the present-day healing landscapes, including landscape symbolism that emerges from the significance of natural resources in daily life, agricultural, ritual time and the liminal life period of diseases.

Landscapes hold great importance in individual health and wellbeing as well as for communal quality of life. The realm of ecological knowledge in the domain of foodways, crafts, and agriculture also reflects cultural and linguistic continuities and changes in the use of flora from the time of the ancestors. The collective prayers, the use of the lunar calendar and other customs securing the harvest or invoking rain were among the discussed examples.

Among the most important actors that promote physical, mental and spiritual health are healers, ritual specialist and spiritual mediums that act as mediators between the visible and invisible worlds. Healers, ritual specialists and devotees interact with various landscape features in order to improve their health and wellbeing. Various examples from 21 Division, Roman Catholicism, Regla de Ocha and Spiritism of Cord show how Dominican and Cuban landscapes are charged with rich symbolism and values which are often activated during healing practices. The diagnosis and remedies are sought through careful application of plants, interactions with divine, spiritual, and ancestral beings that are invoked at home altars, but also at natural shrines, or manifested in different natural elements.

The religious life and healing practices at various caverns and bodies of water tell about the more or less conscious ways of remembering the indigenous ancestors. The invocation of the indigenous ancestors within the present-day Cuban and Dominican religions shows how contemporary communities in their own terms reconnect to the surrounding landscapes and locate themselves within their past. The selection of these places and their symbolism offer a contrast with historical descriptions; others suggest continuities and discontinuities of ancestral practices of different origins. The multiple meaning of certain trees such as the silk-cotton tree, places like the Waterfall in Barajagua or the patronal celebration of Saint Francis in cave in Bánica are testimonies about the richness of the cultural heritage of these communities. Also, many other examples show us how new meanings of places and flora were created in conjunction with the memory of the indigenous predecessors.

The journey seeking information on healing practices in the context of the Greater Antilles in terms of continuities of particular ancestral worldviews is highly complex and without definitive conclusions. This discussion offers us points of reflection about the importance of recognition of subaltern ancestral voices in medicinal histories. Following Ortiz's metaphor of the counterpoint this study concludes that cultural memory can serve as one of two sides of the counterpoint by creating a contrast to the bias inherent in colonial archives. Needless to say, this memory is, to a certain degree, carries imprints of the five hundred years of cultural hegemony. The fragmentation of the memory by conquest, colonization, and forced assimilation together with the profound demographic and cultural changes have created obstacles to reconstruct the histories of those ancestors that have been historically marginalized.

Cuban and Dominican medicinal histories tell about devastation, diseases, deaths and appropriation of the natural resources and knowledge. At the same time, together with the information retrieved from present-day healing landscapes, these are also testimonies of survival, creativity, resilience and capacity to heal, and find unity in dehumanizing and alienating atmospheres of violence and exploitation. The contemporary healing landscapes are also testimonies of multidirectional exchanges of peoples, their worldviews, illnesses and remedies. The current medicinal practices show how Cuban and Dominican ancestors improvised and learned in new unknown environments, passed on ecological insights often articulated in a set of cultural practices and teachings to the next generations.

## **Future directions**

Healing traditions still constitute an important part of medicinal cultures (even those in the Diaspora) and are combined/integrated with institutional medicine. More systematic and interdisciplinary studies combining phytochemical, pharmacological evaluation of herbal medicine, the dispensing practices, dosage in combination with other herbs and medicine are necessary to secure the wellbeing of the population. The existing medicinal cultures, which are complex and manifest in various ways, deserve more attention from an emic perspective, which often benefits from long term observations and learning.

Future studies on medicinal histories will be able to create inclusive histories, including the history of healing traditions of historically marginalized peoples. Despite their biased nature, the colonial sources are often the only references to the medicinal practices of enslaved population and indigenous descendants. Likewise an analysis of components of the organic residues of the pharmaceutical containers as encountered at sites such as the convent in La Vega Vieja are likely to create valuable data for medicinal histories. In combination with historical inventories about the medicines these are likely to inform us also about the incorporation of the native and exotic remedies within these settings.

The rich oral traditions presented here provide valuable historical information and invite further studies to consider their value in the historiographies. The spatial character of remembering, combined with various cognitions of time, are important starting points for studies and policies aiming at understanding and securing the preservation of tangible and intangible heritage.

The quality of any future systematic study of religiously important sites and ancestral places such as caverns relies upon the respectful inclusion of the spiritual leaders and local mentors in the field. The future research including archeological excavations of spiritual important ancestral sites needs to respect the rights of the communities to co-design and co-direct investigations as a part of their Free, Prior and Informed Consent.