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Death in a Birth Chamber

Birth Attendants as Expert Witnesses in the Canonization Process of Bernardino of Siena

At the end of June 1447, in the diocese of Rieti, Italy, a woman called Vannucia struggled reportedly three days in labour. Her mother Collacia started to believe that the baby in her daughter's womb was dead. Being afraid that Vannucia might also die, Collacia made a promise to the deceased Franciscan friar Bernardino of Siena. If the child could be baptized, she and Vannucia would visit Bernardino's shrine.¹ In the end, after another *votum* (vow), the outcome was fortunate and Vannucia had a healthy newborn.

This is one of four cases recorded in the canonization process of Bernardino of Siena (1380–1444) in which a child is thought to be born dead but later revived by divine intervention. Bernardino was an Italian friar minor, an observant reformer, a popular preacher, and one of the most famous characters of his own time in Italy. Even though he was charged with heresy in his lifetime by the pope, he had a strong *fama sanctitatis*, miracles occurred immediately after he had passed away and people thought that he was a saint. Bernardino's canonization process was opened only one year after his death and consisted of three investigations *in partibus*. The first investigation was held in L'Aquila in 1445, the second in the same place in 1447 and the last took place one year later in several different locations in Central Italy between Rome, Siena, Perugia, the March of Ancona and L'Aquila.² In addition to the testimonies about the saintly life of Bernardino, there were in total accounts of 162 *post mortem* miracles. Bernardino was canonized five years after the opening of the process.³ Three of the cases examined in this chapter are from the second investigation and the last from the third investigation.

¹ *Il processo di canonizzazione di Bernardino da Siena*, ed. L. Pellegrini, Grottaferrata, 2009, p. 206.

² For the precise locations see *Il processo*, ed. L. Pellegrini, p. 98.

³ On the details of the canonization process of Bernardino of Siena, see Letizia Pellegrini's introduction in: *Il processo*, ed. L. Pellegrini; L. Pellegrini, "Testifying to Miracles: A Report on the Canonization Process of Bernardin of Siena" in C. Krötzel & S. Katajala-Peltomaa (eds.), *Miracles in Canonization Processes: Structures, Functions, and Methodologies*, Turnhout, 2018, pp. 105–127.

In this chapter I will investigate what kinds of testimonies were given in the canonization process of Bernardino of Siena when something went wrong in a birth chamber. In the four birth miracle cases analysed here, an act of giving birth turned out to be a moment of death.⁴ I am interested in who the witnesses in these cases are, what their testimonies tell about birth attendants' expertise and authority during the birth, and what their abilities were to deal with death according to their testimonies. Since women were often called to witness about birth miracles, to study the above mentioned questions is important in better understanding how the trustworthiness and expertise of birth attendants were perceived by the commissioners in the canonization process of Bernardino of Siena. This can contribute to our knowledge on the use of different expert witnesses in medieval canonization processes.

Perils of medieval childbirth

Childbirth was one of the greatest perils in the medieval world. Even though we do not have much quantitative evidence from the Middle Ages, it has been estimated that infant mortality rate ran from 30 to 50 per cent.⁵ Medieval society had very limited resources to solve this problem. The Church recognized the dangers of giving birth and tried to help the mothers in labour. Many churches had relics which would offer hope for a safe delivery,⁶ and one method of religious help was invoking the saints. Miraculous cures formed one part of the "health care" in the Middle Ages and early modern period.⁷ Different healing methods were not mutually exclusive and did not compete with each other; it is more likely that they

⁴ I will offer no opinion on whether or not the infants in these cases were truly dead by our modern standards. What is important to me is the fact that the people present were convinced that the child was dead. Maria Wittmer Butsch and Constanze Rendtel have proposed that when a miraculously cured child was first seen as lifeless by the people present and then revived soon after the *votum*, he/she was probably not actually dead, but just suffering from difficult birth complications. Thus, according to them, medieval people misinterpreted the signs of life and death. M. Wittmer-Butsch & C. Rendtel, *Miracula - Wunderheilungen im Mittelalter*, Köln, 2003, pp. 163–164. Raymond van Dam has suggested that the biological approach to miracles depreciates their social and cultural context. R. van Dam, *Saints and Their Miracles in Late Antique Gaul*, Princeton, 1993, p. 84. This holds especially true in the resurrection miracles, since death is not only medical, but very much also a cultural and social phenomenon.

⁵ B. Hanawalt, "Medievalists and the study of childhood", *Speculum* 4 (2002), p. 450. L. E. Mitchell, *Family Life in the Middle Ages*, Westport, 2007, p. 153.

⁶ The Church's goal was to keep mothers alive. Easing the pain of a mother was not needed from the theological point of view. Pain during childbirth was the lot of Eve, a burden mothers were expected to bear. E. Baumgarten, *Mothers and Children: Jewish Family Life in Medieval Europe*, Princeton, 2004, p. 41.

⁷ M. Elsackers, "In pain you shall bear children: Medieval Prayers for a Safe Delivery" in A.-M. Korte (ed.), *Women and Miracle Stories: A Multidisciplinary Exploration*, Leiden, 2004, pp. 179–180, 205–206. J.H. Arnold, *Belief and Unbelief in Medieval Europe*, London, 2005, p. 94. I. McCleery, "Christ more powerful than Galen? The relationship between medicine and miracles" in M. Mesley & L. Wilso (eds.), *Contextualizing Miracles in the Christian West, 1100–1500*, Oxford, 2014, 127–154. J. Ziegler, "Practitioners and saints: Medical men in canonization processes in the thirteenth to fifteenth centuries", *Social History of Medicine* 12 (2/1999), 191–225.

complemented each other. The laity's spectrum of different supernatural healing methods was much wider than the thaumaturgical landscape offered by the Church.⁸

Childbirth or resurrection miracles in general are one of the rarest types of miracle in the medieval canonization processes. According to André Vauchez's categorization, in the 13th century only 1.2 per cent of miracles in the canonization processes concerned childbirth. In the 14th century childbirth miracles were recorded more frequently: between the years 1301–1417, 3.3 per cent of the miracles recorded in processes of canonization were related to childbirth. Still, this was the smallest of Vauchez's categorizations.⁹

The more frequent recording of birth related miracles from the 14th century onwards may have been due to a change in the way of invoking a saint or in the method of selecting the cases to be recorded. The number of childbirth miracles does not increase exponentially with time but their number varies from one canonization process or miracle collection to another. However, a clear shift is still apparent. Before the 14th century the recorded miracles were preponderantly so called "shrine miracles" which means that the invocation and the miracle took place at or near the saint's relics. Giving a birth at a shrine or undertaking a pilgrimage when one was pregnant was hardly an option so this made the recording of birth miracles very rare during the period when shrine miracles formed a clear majority. Another typical main category of miracles is called "distance-" or "invocation miracles". These are the miracles which occur far away from relics, such as at home or at an accident scene. In these cases a *votum* precedes a miracle and a pilgrimage and/or a votive offering was made afterwards in exchange for a cure. Both shrine and invocation miracles appeared throughout the Middle Ages but only from the beginning of the 14th century are the majority of the recorded miracles invocation miracles. Invocation miracles include severe and urgent illnesses or accidents which do not occur in shrine miracles. This meant that the range of infirmities became wider and thus childbirth miracles were also recorded more frequently.¹⁰

⁸ Some mineral stones were believed to be helpful in labour. One could also write sacred words on cheese or butter which a mother would then eat to help to deliver the child. Use of a *peperit* charm was also popular. N. Orme, *Medieval Children*, New Haven, 2001, p. 16. E. L'Estrange, *Holy Motherhood: Gender, Dynasty and Visual Culture in the Later Middle Ages*, Manchester, 2008, pp. 49, 55–58. A. Foscati, "La scena del parto: Nascita del corpo e salvezza dell'anima tra religione, medicina e 'magia' nell'altomedioevo," in C. Terranova (ed.) *La presenza degli infanti nelle religioni del Mediterraneo antico: la vita e la morte, i rituali e i culti tra archeologia, antropologia e storia delle religioni*, Rome, 2014, pp. 312–316.

⁹ A. Vauchez, *Sainthood in the Later Middle Ages*, Cambridge, 1997, p. 468. Vauchez's categorization includes also infertility cures.

¹⁰ C. Krötzel, "Miracula post mortem: On Function, Content and Typological Changes", in C. Krötzel & S. Katajala-Peltomaa (eds.), *Miracles in Medieval Canonization Processes*, pp. 157–165. Hillary Powell argues that one reason for the scarce number of childbirth miracles might be that the deliverance from childbirth was not as meritorious as healing from other diseases. Thus, according to her, childbirth miracles were perhaps not recorded as gladly as healing from some disability, disease or trauma. H. Powell, "The 'Miracle of Childbirth': The Portrayal of Parturient Women in Medieval Miracle Narratives", *Social History of Medicine* 25 (4/2012), 795–811. Still, resurrection of a child, like that of

The genre of childbirth miracles consists of three different types. The most important type was resurrection miracles which were the ultimate miracles a saint could perform. Usually the prayer was only for resurrection for a brief moment so that the infant could be baptized. A prayer for resurrection could be made also for a dead or fatally ill mother and in some cases the *votum* was made for both mother and child. In addition to the resurrection miracles, two other types of miracles are those that help infertile parents and those that ease the pain of a mother in childbirth. In the canonization process of Bernardino of Siena, there are four stillbirth resurrections among the total of 162 miracles.¹¹

Even though they are few in number, childbirth miracle narratives are important source material for better understanding the actions and attitudes of the women who frequently attended the birth chamber and had the best knowledge on the subject. Recent studies on medieval childbirth miracles have scrutinized several different canonization processes from different centuries.¹² This chapter, however, concentrates on the cases recorded in one process in the 15th century Italy. Even though it has been questioned whether there were professionalized midwives in the Middle Ages,¹³ in the fifteenth century “midwife” had become a widespread occupational category. There were also medical texts directly addressed to midwives in the fifteenth-century Italy.¹⁴ In all four cases examined in this chapter, we find that an *obstetrix* is taking care of the parturient woman. We cannot be totally sure whether or not these four women were professionalized midwives but at least the notary distinguished them from the other birth attendants calling them an *obstetrix*. As the testimonies do not offer more background information on these women, I use the Latin term *obstetrix* instead of “midwife”.

The canonization process of Bernardino of Siena is particularly appropriate source for analysing birth miracles, since in this process the commissioners' questions are numerous and detailed. According to Letizia

any other person as well, was an ultimate manifestation of divine power and thus the most important of the miracles, which speaks against Powell's argument. D. Lett, *L'enfant des miracles: Enfance et société au Moyen Âge*, Paris, 1997, p. 66.

¹¹ In addition to these four cases, there is only one other case which is related to childbirth. In this miracle a safe delivery is prayed for after several miscarriages. *Il processo*, ed. L. Pellegrini, p. 416.

¹² See especially R. Wynne Johnson, *Praying for Deliverance: Childbirth and the Cult of the Saints in the Late Medieval Mediterranean*, Princeton, 2015; A. Foscati, “Retracing Childbirth Through Hagiographical Texts and Canonization Processes in Italy and France Between the Thirteenth and Sixteenth Centuries”, in C. Gislou Dopfel, A. Foscati and C. Burnett (eds.), *Pregnancy and Childbirth in the Premodern World*, Turnhout, 2019.

¹³ For the summary on the debate see F. Harris-Stoertz, “Midwives in the Middle Ages? Birth Attendants, 600–1300”, in S. Butler & W. Butler (eds.), *Medicine and the Law in the Middle Ages*, Leiden, 2014. According to Harris-Stoertz, midwives disappeared in the Early Middle Ages, re-emerged in the twelfth century and were well established by 1300, at least in North-Western Europe. For a comprehensive bibliography on the medieval childbirth and midwifery see R. Wynne Johnson, “Divisions of Labor: Gender, Power, and Later Medieval Childbirth, c. 1200–1500”, *History Compass* 14/9 (2016), 383–396.

¹⁴ M. Green, “Bodies, Gender, Health, Disease: Recent Work on Medieval Women's Medicine”, *Studies in Medieval and Renaissance History* 3 (2/2004). pp. 16–17.

Pellegrini, judicial scrutiny of miracles was on a higher level in Bernardino's process compared to those carried out before the Schism¹⁵ Moreover, the commissioners of the process were highly interested to hear about the possible remedies given to a miraculé, and who was in responsible of providing the remedies.¹⁶ The number of birth miracles in this process is also high enough, yet manageable, for a detailed case study. All this makes Bernardino's process relevant source material for conducting an investigation of birth attendants' testimonies in one canonization process.

Testimonies in the medieval canonization proceedings are regarded to be important sources on the actual care of parturient women.¹⁷ Of course, we have to bear in mind the fact that the testimonies have been filtered through the questions of the commissioners and the translation of a notary. Also, the accounts might have been given in a manner which would emphasize the merits of the saint. Even though we are not hearing women's voices per se and the recollection may not correspond to the actual course of events but was formatted to fit the pattern of a miracle, the narrations are based on the experiences of those ordinary women who witnessed the act of giving birth. For this reason the miracle testimonies can contribute to our understanding of the childbirth during the Middle Ages.

Vannucia's dead and malformed infant

We already learned at the beginning of the chapter of the allegedly miraculous case of Vannucia's childbirth in 1447. In Bernardino's process, each miracle is first presented as a short article, *articulus*, which gives the basic information about the event. The witnesses testified to these articles by verifying the content to be true and then answered the questions presented by the commissioners. As we take a closer look at the testimonies, we see the details which underlie the miracle itself. According to Michael Goodich, "the non-ideologically charged details and unrehearsed diversions from the standard miracle script" are most

¹⁵ L. Pellegrini, "Testifying to Miracles", p. 107. Rebecca Wynne Johnson has also noted that compared to other late medieval proceedings, Bernardino's process is characterized by an unusual precision of details in the questioning and the recording of the answers. R. Wynne Johnson, *Praying for Deliverance*, p. 129.

¹⁶ See for example *Il processo*, ed. L. Pellegrini, pp. 247, 264, 268, 468, 469, 482, 495, 509.

¹⁷ F. Harris-Stoertz, "Midwives in the Middle Ages?" p. 61. On the use of miracle narratives in the research of medieval childbirth see also A. Foscati, "I miracoli del parto: personaggi e rituali nelle fonti agiografiche tra XIII e XVI secolo", *Reti Medievali Rivista* 19 (2/2018), pp. 63–83. R. Wynne Johnson, *Praying for Deliverance*. R. Finucane, *The Rescue of the Innocents: Endangered Children in Medieval Miracles*, New York, 2000. D. Lett, *L'enfant des miracles*; A. Fröjmark, "Childbirth Miracles in Swedish Miracle Collections", *Journal of the History of Sexuality* 21 (2012), 297–312. G. Signori, "Defensivgemeinschaften: Kreissende, Hebammen und 'Mitweiber' in Spiegel Spätmittelalterlicher Geburtswunder", *Das Mittelalter* 1 (1996), 113–134.

valuable information for social historians. Thus, one should keep an eye on “slips of the tongue”, as Goodich calls these irregular details.¹⁸

The death of a newborn differed in many ways from that of an adult or older child. In the Middle Ages, death was usually a communal situation in which other people actively took part. Even though a private moment of death was, at least to some extent, encouraged by the Church,¹⁹ it was common to die surrounded by family and friends. Great emphasis was given to the last sacraments.²⁰ Stillborn children, however, were not allowed to receive the last sacraments. Usually medieval childbirth may have been very gender specific situation, since men did not generally appear in the birth chamber. As things went wrong, this custom of men being excluded from the birth chamber was not, however, set in stone.²¹ Even though a birth is a celebration of a new life, in some respect those medieval women who attended a birth were always prepared for death, either that of the infant or the mother. As Marianne Elsackers has pointed out, for us who live in an “almost over-medicated society”, it may be difficult to understand how closely linked birth and death were in pre-modern societies.²²

According to the *articulus*, the miracle in Vannucia’s case did not take place instantly after Collacia prayed for Bernardino’s help. Collacia made her invocation on Monday evening. However, it was reportedly not until Tuesday morning that Vannucia gave birth to a baby girl. The child seemed to be dead and so malformed that the women taking part in the birth could not distinguish her nose from her eyes. Also, the child is told to have a livid skin colour. The *obstetrix*, whose name was also Vannucia, took the girl in her arms and declared that she was dead. When Collacia heard this, she prayed again for God’s help. In her heart she asked God to revive the child through the merits of Saint Bernardino, even for only just enough time for the girl to be baptized. Just a little later the child began to open her mouth and Vannucia put salt in

¹⁸ M. Goodich, “*Mirabilis deus in sanctis suis: Social History and Medieval Miracles*”, in K. Cooper and J. Gregory (eds.), *Signs, Wonders, Miracles. Representations of Divine Power in the Life of the Church*, Woodbridge, 2005, 135–156.

¹⁹ J. Nissi, “Who Will Accompany the Dying? The Communitarity of the Late Medieval Death in the *Ars Moriendi* - Guides”, in M. Piccat & L. Ramello (eds.), *Memento mori. Il Genere macabro in Europa dal Medioevo a oggi*, Alessandria, 2014, 515–530.

²⁰ On the last rites see for example S. Fallberg-Sundmark, *Sjukbesök och dödsberedelse. Sockenbudet i svensk medeltida och reformatorisk tradition*, Skellefteå, 2008.

²¹ For example a priest could enter a birth chamber in order to give the dying mother the last sacraments. See for example a case in the canonization process of Santa Francesca Romana: “*Quedam domina Perna, Pauli Johannes Jacobi, de regione Campitelli, cum per sex dies laboraret in puerperio et quasi iam morti propinqua sibi daretur a sacerdote confessio et sacre heucaristie comunicatio.*” *I Processi inediti per Francesca Bussa dei Ponziani (Santa Francesca Romana) 1440–1453*, P. Lugano (ed.), Città dei Vaticano, 1945, p. 185. In addition to priests, also husbands or doctors could enter the birth chamber in the case of emergencies. F. Harris-Stoertz, “Midwives in the Middle Ages?”, pp. 60–61.

²² M. Elsackers, “In pain you shall bear children”, p. 179.

her mouth and bathed her. When she was removed from the bathtub, Vannucia and Collacia took her into a church, where she was baptized by a priest. Later the same day the girl's appearance was normalized and she became healthy.²³

As we learn from this *articulus* narrative, Collacia's first invocation was left unfulfilled and she prayed again that the child would revive only for a brief moment so that she could be baptized. This type of *à répit* miracle is common among the birth miracles, which tells us about the importance of baptism and the desire to bury newborn children in consecrated ground.²⁴ Although performing of an emergency baptism in dangerous situations was generally encouraged by the Church, according to the source Vannucia did not baptize the child. Instead, she and Collacia took the child into a church to be baptized. Still, Alessandra Foscati has interpreted that Collacia might have actually baptized the baby when she put salt into child's mouth and bathed her. When a child was strong enough, she was carried to a church where a priest administered the sacrament. If Vannucia had indeed baptized the child, the priest's baptism would have been *sub conditione*, which means that it was valid only if the previous baptism had not been effective.²⁵ This is, however, speculation since the source is not explicit on the matter.

A point of interest is also the fact that the baby was seen to be "malformed" and then declared dead by Vannucia. Thus it seems that Vannucia had the authority to say whether or not the baby was alive. In cases like this the malformation or other injury was secondary to those praying for the child's recovery. Their foremost concern was the salvation of the child's soul and his/her recovery of life, not the possible disability which was not even mentioned in the *votum*.²⁶

The ultimate goal of canonization processes was to find out whether a case was a genuine miracle, therefore the need for Divine help needed to be attested first. Thus, commissioners were very interested in the ways people acknowledged the arrival of death. Especially in the cases of newborns, signs of death are observed in detail because in order to be baptized the child needed to be alive.²⁷ Thus, even the slightest

²³ *Il processo*, ed. L. Pellegrini, p. 206.

²⁴ A. Foscati, "I miracoli del parto", pp. 74, 80. A. Foscati, "La scena del parto", pp. 325–329.

²⁵ A. Foscati, "La scena del parto", p. 327.

²⁶ J. Kuuliala, *Childhood Disability and Social Integration in the Middle Ages*, Turnhout, 2016, p. 74.

²⁷ In addition to religious concerns, people were also motivated to observe the signs of death for temporal reasons. Even though inheritance or dynastic concerns are not expressed by those who testify in the miracle testimonies, this was a matter of great importance for families when an infant was born. For more information on inheritance see A. Foscati, "'Nonnatus dictus quod caeso defunctae matris utero prodiit'. Postmortem Caesarean Section in the Late Middle Ages and Early Modern Period", *Social History of Medicine* 32 (3/2019), 465–480; B.R. Lee, "A Company of

signs of life were crucial. An infant without baptism would not ascend to heaven. Although the unbaptized were not burdened by personal guilt, they were in a state of original sin which prevented them from seeing God face to face.²⁸

In the case of Vannucia, three witnesses were examined: Vannucia the baby's mother, Collacia, and Collacia's husband Petrucius. For some reason Vannucia the *obstetrix* was not questioned. In the canonization processes the first witness was usually regarded to be the most important one.²⁹ In Vannucia's case Collacia was the first to testify. Her testimony has the highest importance because she was aware of all the details during the course of events. She was the only one of the witnesses who had truly seen what happened during the birth. That is why she was questioned first and also her testimony is much longer than Vannucia's or Petrucius'. Collacia was also responsible for praying to the saint.

The commissioners' first question for Collacia was whether or not she believed that the infant was truly dead. She said yes and she believed that the girl was saved because of the merits of Saint Bernardino. She reported that in addition to the girl's mother there were four women present: Collacia, Vannucia the *obstetrix*, and two other women named Lucia and Rita. Afterwards Collacia's husband also saw the child when they took her to the church. When the girl was born and declared to be dead by Vannucia, Collacia asked her to baptize the child, but Vannucia said that it would not be possible, since she was dead.³⁰ After Collacia had prayed again for God's help and the baby was revived, Vannucia put a small amount of salt into her mouth and placed her into a warm bath. In the Church salt has a religious and sacred character. Salt was used to prepare an infant for the baptism before entering the church. It symbolized the wisdom which a child received when he/she was baptized.³¹ In addition to its religious meaning, salt was also connected to humoralism. This is explained by a 13th-century Franciscan friar, Bartholomeus Anglicus, in his definition of *obstetrix* in his encyclopaedia "*De Proprietatibus Rerum*":

Women and Men: Men's Recollections of Childbirth in Medieval England", *Journal of Family History* 27 (2/2002), pp. 92–100.

²⁸ On *limbus puerorum* see for example D. Lett, *L'enfant des miracles*, pp. 214–218; A. Prosperi, *Dare lanima. Storia di un infanticidio*, Turin, 2005.

²⁹ S. Katajala-Peltomaa, *Gender, Miracles, and Daily Life*, Turnhout, 2009, pp. 56–57.

³⁰ *Il processo*, ed. L. Pellegrini, p. 223.

³¹ B. Hanawalt, *Growing up in Medieval London. The Experience of Childhood in History*, New York, 1993, p. 45. F. Mershman, "Salt", in *The Catholic Encyclopedia*, New York, 1912. Retrieved April 1, 2020 from New Advent: <http://www.newadvent.org/cathen/13403b.htm>. In Renaissance Italy there was also a specialized salt for pregnant women or new mothers. The 16th-century childbirth majolica wares included a *saliera*, a small vase for salt. J. M. Musacchio, *The Art and Ritual of Childbirth in Renaissance Italy*, New Haven, 1999, pp. xiii, 101–106.

A midwife is a woman who has the art to help a woman in childbirth so that she bears and brings forth her child with less woe and sorrow. And so the child should be born with less difficulty and sorrow, she anoints and forments the mother's uterus and helps and comforts her in that way. Also she draws the child out of the uterus and ties his navel four inches long. With water she washes away the blood of the child and rubs him with salt and honey to dry up humours and to comfort his limbs and members, and swaddles him in clothes and cloths.³²

Even though the baby had begun to open her mouth, she still looked as good as dead. Collacia described her skin colour as livid and black. Black colouration on a dead body was perhaps a sign of livor mortis, which is caused by a settling of blood in the lower parts of body. In the canonization process of Bernardino, in addition to this case, there are two other cases in which the skin of a dead body became livid. Interestingly, in one of these cases the deceased's skin is also described as both livid and black.³³ Black colouration, on the other hand, is mentioned five times as a sign of death in 29 resurrection cases of Bernardino's process.³⁴

Vannucia had her turn to witness after her mother. She told the commissioners that at the time she was very ill and did not remember the incident well. She had heard afterwards everything from her mother and it was all as described in the *articulus*.³⁵ Petrucius does not have much to add to what was known already. He testified that he saw the baby when she was taken to the church. He recalled that all he could see was the baby's face which was covered in blood. Afterwards he was told what had happened. As a counter gift the whole family visited Bernardino's shrine.³⁶ We might assume that as a male witness Petrucius' testimony would verify what his wife had told previously. In the Middle Ages women had inferior legal status to men and their words were in general not treated as significant as men's. Women's right to testify in legal matters was restricted, the *Decretum* of Gratian (c.1140) even forbids women from testifying. Still, in the canonization processes they appear as witnesses. The number of women witnesses varies in different processes but if women possessed first-hand knowledge on the miracles, they were called in to testify.³⁷

³² F. Harris-Stoertz, "Midwives in the Middle Ages?", pp. 82–83.

³³ *Il processo*, ed. L. Pellegrini, p. 233, 424.

³⁴ In comparison, in the miracle collection of James of the Marches which was collected at the end of the 15th century in Southern Italy, the black colour is mentioned in a total of 21 cases of the 52 death cases in the collection. J. Nissi, "Quomodo scit quod mortuus erat? Signs of Death in 15th Century Italy", *SVMMA* 7 (2016), p. 86. Nowadays livor mortis is generally seen as purple. However, colour perception varies historically and culturally. In medieval symbolism black was a symbol of death, sin and hell. On the history and symbolism of black colour see: M. Pastoreau, *Black: The History of a Color*, Princeton, 2008.

³⁵ *Il processo*, ed. L. Pellegrini, p. 223.

³⁶ *Il processo*, ed. L. Pellegrini, p. 223.

³⁷ S. Katajala-Peltomaa, *Gender, Miracles, and Daily Life*, pp. 28–38. For example in the cures of childhood impairments women from outside the family were considered as important witnesses. J. Kuuliala, *Childhood Disability*, p. 30.

Women are the main actors in the childbirth miracles, thus their role as witnesses is emphasized in these cases. Still, the appearance of women is not limited to the birth miracles in Bernardino's process but they appear also in other types of miracle testimonies.³⁸

Birth in a *hospitale*

The next case analysed is the only one which does not occur in the house of the delivering mother. According to the *articulus*, in 1446 when Margarita de Basilea was in her eighth month of pregnancy, she entered the *hospitale* of Saint Louis in L'Aquila with her husband. She was struggling so much that the *obstetrix* and other women who were helping with the birth thought that she would die. Finally the baby's feet came out of the mother's womb and the women pulled the child out only to find out that he was dead. Bucia, an approximately 50-year-old *obstetrix*, declared that the baby was dead and she was greatly grieving³⁹ for the condemned soul of this infant. Again, a brief resuscitation is prayed for in order to be able to baptize a child. Reportedly Bucia asked all the people present to pray for God's help that the child would revive through the merits of Saint Bernardino for a moment so that she could baptize him. After the prayer the baby started to move his lips which allowed Bucia to baptize him, and she gave him the name Nicholas. Then Bucia bathed him and he got well enough to suckle milk. Later when the mother had breastfed her baby he was shown to his father completely well and unharmed.⁴⁰

In this case the first witness is Margarita Capite de Istrie, who was a governor of the *hospitale* of Saint Louis. It remains unclear what kind of institution the *hospitale* was and we do not know why Margarita de Basilea gave birth there. Perhaps they were travelling and did not have a better place to give birth. From the 12th to the 15th century most of the hospitals were charitable institutions for the poor or travellers.⁴¹ However, Rebecca Wynne Johnson has suggested that the *hospitale* of Saint Louis could have been actually a secular inn or a hostel for travellers, since the governor Margarita de Capite Istrie was a married woman.

³⁸ In Bernardino's process see for example the case of a crippled boy called Ascencius in which there are five women witnesses. *Il processo*, ed. L. Pellegrini, pp. 56–59. In the first investigation *in partibus* almost every second case includes at least one woman witness.

³⁹ On the sorrow at the death of an infant, see N. Archambeau, "Tempted to Kill: Miraculous Consolation for a Mother after the Death of Her Infant Daughter", in E. Carrera (ed.), *Emotions and Health, 1200-1700*, Leiden, 2013, pp. 47-66.

⁴⁰ *Il processo*, ed. L. Pellegrini, p. 207.

⁴¹ M. Green, "Bodies, Gender, Health, Disease", p. 14. For medieval hospitals see for example: J. Henderson, *The Renaissance Hospital: Healing the Body and Healing the Soul*, New Haven and London, 2006; B.S. Bowers (ed.), *The Medieval Hospital and Medical Practice*, Padstow, 2007.

The fact that it was governed by a secular woman indicates that it was not a charitable institution operated by a religious order.⁴²

Margarita's role as a first witness emphasizes her importance as a reliable and respected witness in the eyes of the commissioners. Margarita said that the infant was dead when he was born. When the commissioners asked how she knew this, she replied that she did not touch the baby but she saw how the *obstetrix* Bucia palpated the child and rolled the baby in her hands to see if he was alive. When Bucia saw that there was no *spiritus* in the child, and that he neither breathed nor moved, she declared the baby dead.⁴³ When Margarita was asked whether the child looked dead to her, she answered yes. Margarita recalled how they prayed for Bernardino's help and when they finished the invocation they heard that the boy started to cry. The commissioners were interested to hear how much time elapsed between the child's birth and the moment he started crying. Margarita told them that it was a time equivalent to reciting eight or nine pater noster.⁴⁴

The second witness is Margarita Petri de Subaudia. Reportedly she saw how Bucia performed tests to see if the baby was alive but she also touched the baby with her own hands. The commissioners were interested to hear what kind of tests Bucia had performed. Margarita told that she put crushed garlic (*alium pistum*) into the boy's mouth, pulled his ears with her fingers and placed her ear over his heart. By any of these means Bucia could not find signs of life in the infant's body, which led them to pray for divine help.⁴⁵ Finally the commissioners asked whether the baby was baptized after he woke up. Margarita replied yes and he was given the name Bernardinus.⁴⁶ Placing an ear over the heart is clear evidence of trying to hear a

⁴² R. Wynne Johnson, *Praying for delivery*, p. 145. Religious orders did have charitable institutions in L'Aquila. Bernardino's fellow friar John Capistrano founded the Ospedale S. Salvatore in 1446/47 for curing the sick and hosting pilgrims. This new hospital united smaller Aquilano hospitals and was called Ospedale Maggiore. P. Langer, "One Saint and Two Cities, Bernardino da Siena at L'Aquila", in M. C. Ferrari (ed.), *Saints and the City, Beiträge zum Verständnis urbaner Sakralität in christlichen Gemeinschaften (5.-17. Jh)*, Erlangen, 2015, p. 279.

⁴³ "*Interrogata quomodo hoc sciret, quod fuit mortuus, dixit se non tenuisse puerum in manu, sed vidit quod obstetrix tenebat et revolvebat eum in manibus aspiciendo eum si vivebat vel non; et videns quod in eo non erat spiritus, neque anhelitus, nec se movebat, dixit eum esse mortuum.*" *Il processo*, ed. L. Pellegrini, p. 228.

⁴⁴ *Il processo*, ed. L. Pellegrini, p. 228.

⁴⁵ "*Interrogata quale experimentum dicta obstetrix fecit, dixit quod apponebat alium pistum ad os dicte creature, ac etiam stringebat digitis aurigulas, et manum apponebat erga cor, et in omnibus hiis non videbatur... quod dicta creatura aliquem vite spiritum in se habebat...*" *Il processo*, ed. L. Pellegrini, p. 229.

⁴⁶ In the *articulus* the baby is called Nicolus. *Il processo*, ed. L. Pellegrini, p. 229. Even though every layman, if necessary, could perform emergency baptism, midwives were the only laypersons who were instructed to do it. G. McMurray Gibson, "Scene and Obscene", p. 15. On the guidance and regulations of emergency baptism, see: G. Smoak, "Midwives as Agents of Social Control"; K. Taglia, "Delivering a Christian Identity, Midwives in Northern French Synodal Legislation, c. 1200–1500", in P. Biller & J. Ziegler (eds.), *Religion and Medicine in the Middle Ages*, Suffolk, 2001.

heartbeat. Pulling the ear indicates that Bucia tried to see if the baby reacted to pain. To put crushed garlic in a baby's mouth might also have been a way to see if the baby reacted to an unpleasant stimulus. All these details were recorded as they verified the death of the infant and hence gave evidence of the miraculous powers of Saint Bernardino.

Finally, we have Bucia's testimony. She testified that she was asked to come into the *hospitale* to help with the labour. Bucia was probably known for her experience, which led the staff to call for her help. When she saw that the baby was coming feet first she told the other women to take a hold of the baby's heel and drag him out because it seemed to her that the baby was dead. Bucia herself put her foot on mother's groin and pressed against it while the others pulled the baby out.⁴⁷ There are no mentions that Bucia had tried to turn the baby around or otherwise change his position. Of course, it may be that it was already too late for turning the baby. Bucia told the others to simply pull the child out of the mother's womb.⁴⁸

Bucia's actions had an immense influence on the newborn's health and condition but it is unsure whether the commissioners were aware of this. For them, they were likely not an important aspect in giving testimony to the miracle, so we cannot be sure how accurately all of Bucia's actions during the birth were recorded. When asked how Bucia knew that the child was dead, her only argument was her experience. She did not list any signs of death on the baby's body but just settled for saying that she had been involved in over 140 births and in none of them had the babies looked anything like this. The final indication for her seems to have been the umbilical cord which had been wound three times around the baby's throat. Even though she removed the cord she could not see any signs of life and thus was sure that the child was dead. When the women had said their prayer and the child had moved his lips Bucia told the other women to bring water so that she could baptize him. In the end Bucia was still asked if she blew into the boy's mouth, ears, and nose (*ossitavit sive insufflavavit in os, aures et nares pueri*). She replied that she did not because she did not see it to be necessary since the boy appeared to be dead.⁴⁹

Bucia's deposition is important in understanding the role of birth attendants' testimonies in validating a miracle. Bucia emphasized her own experience by mentioning the number of births in which she had been involved with. Her fame was known in L'Aquila as she was collected to assist in this particular birth. The

⁴⁷ *Il processo*, ed. L. Pellegrini, p. 229–230.

⁴⁸ In the medieval and Renaissance obstetrical instructions the advice is to turn the infant around inside the womb and never to pull it violently out of the mother. On the advice given by the famous 12th century *Trotula*, see M. Green, *The 'Trotula': An English Translation of the Medieval Compendium of Women's Medicine*, Pennsylvania, 2002, p. 80. On Renaissance authors Michele Savonarola's and Eucharius Rössling's advice see M. Green, "The Sources of Eucharius Rösslin's *Rosegarden for Pregnant Women and Midwives* (1513), pp. 180–181.

⁴⁹ *Il processo*, ed. L. Pellegrini, p. 230.

commissioners were also interested to hear about the tests which Bucia had performed in order to be assured of child's death. All these details indicate that an *obstetrix* could have similar role in validating a birth miracle like doctors (*medicus*) had in other healing miracles in which they appear occasionally as witnesses. Doctors could with their expertise exclude natural or medical causes as the reason for a recovery. They testified that a patient would not have been able to recover without the intervention of God.⁵⁰ As Bucia's testimony indicates, skilled birth attendants could do exactly the same thing in birth miracle cases. Doctors or surgeons may have also been involved in a birth, but only if the mother was seriously ill or if surgery was required.⁵¹ In the birth miracles of the canonization process of Bernardino of Siena, there are no mentions of doctors.⁵²

The boys who wore the Franciscan habit

⁵⁰ J. Ziegler, "Practitioners and saints: Medical men in canonization processes in the thirteenth to fifteenth centuries"; D. Lett, "*Judicium medicine and iudicium sanctitatis*. Medical doctors in the Canonization Process of Nicholas of Tolentino (1325): Experts Subject to the Inquisitorial Logic", in S. Katajala-Peltomaa & K. Salonen (eds.), *Church and Belief in the Middle Ages. Popes, Saints, and Crusaders*, Amsterdam, 2016, pp. 153–169.

⁵¹ Hanawalt, *Growing up in Medieval London*, p. 42; M. Green, *Making Women's Medicine Masculine*, Oxford, 2008, p. x. G. McMurray Gibson, "Scene and Obscene: Seeing and Performing Late Medieval Childbirth," *Journal of Medieval and Early Modern Studies* 29 (1999), 7–24. Only women of wealthier families could expect a visit of a doctor. M. Green, "The Sources of Eucharius Rösslin's Rosegarden for Pregnant Women and Midwives (1513)", *Medical History* 53 (2009), p. 184. Midwives, on the other hand, were supposed to help every woman, regardless of one's rank. G.L. Smoak, "Midwives as Agents of Social Control: Ecclesiastical and Municipal Regulation of Midwifery in the Late Middle Ages", *Quidditas* 33 (2012), pp. 89–90. Even *obstetrices* could handle complicated medical operations. In addition to the cases presented in this paper, see for example a case in the canonization process of Saint Louis of Toulouse, in which a mother had been in pain for three days and the child was believed to be dead inside her. She could not give birth naturally so the *obstetrix* had to place her hand inside the mother and expel the dead and fetid infant from mothers' stomach. "...*et per triduum fuit in tanto dolore et angustia quod puer mortuus est et transversatus in ventre...et quattor diebus portavit ita mortuum; et eum non posset secundum naturam exire, fuit extractus de ventre ministerio obstetricum per instrumentum naturale mulieris predicte.*" "*Et ista que loquitur in adventu suo posuit manus suas et extraxit puerum de ventre matris sue mortuum et fetentem...*" *Analecta Franciscana: sive, Chronica aliaque varia documenta ad historiam fratrum minorum spectantia, edita a patribus collegii S. Bonaventurae*, Florence, 1951, pp. 166–167. Of interest is also the fact that if doctors treated pregnant women's injuries or sicknesses, they were sometimes not able to give them the remedies which they normally would have given to a patient. See for example a case in the canonization process of Santa Francesca Romana. A pregnant woman called Gentilescha fell and hit her head severely, but was not given remedies by the doctors because of her imminent birth. "...*unde accidit quod quodam semel cum a quibusdam nupciis, ut dictum est, ornata redirect, a scala prope domus decem et septem graduum capite deorsum verso cecidit; septem mensium pregnans erat; ex quo casu caput et oculi non immerito maximam receperunt inflacionem. Cui medici propter vicinum partum remedium adhibere non poterant.*" *I Processi inediti per Francesca Bussa dei Ponziani*, ed. P. Lugano, p. 163. A woman in the miracle collection of James of the Marches was likewise denied the medical remedies because of her approaching birth: "*In Napoli un gentil domina che se chiama Madama Johannella Caragula... essendo piena de vii mese se infirmo gravamente de una sciesa grandissima. Et con febre continua et sopra quella haue tre parasissime... et li medici per rispetto dela creatura che hauea i corpo non la possuano aiutare con nulla medicina.*" *Miracoli di Jacobo della Marcha*, Vatican City, Biblioteca Apostolica Vaticana, Vat.lat. 7639, p. 20.

⁵² According to Alessandra Foscati, doctors or surgeons (or male medical experts in general) do not appear in the birth miracle narratives before the 16th century. A. Foscati, "I miracoli del parto", pp. 68, 72.

Our third case is also a breech birth. According to the *articulus*, on the last day of April in 1447 Antonius Andree Morello's son was born dead. He was pulled out of the mother's womb by his legs like the boy in the previous case. When all the women present noticed that the boy was dead, a woman called Sancta Petrutii shouted out loud: "Oh Saint Bernardino, make a dead boy alive and wake up this boy". All the women started to pray and immediately the infant began to move his lips and breathe. An about 60-year-old *obstetrix* Angelucza de Symone baptized him and named him Bernardinus after the saint.⁵³

Angelucza is the only witness in this case. Her testimony is very informative and longer than any other testimony in the four cases discussed here. Angelucza said that she was fetched by the child's father, Antonius, to help with the birth because his wife was in danger of dying. In the *articulus* it is stated that it was a woman called Sancta Petrutii who first shouted out for Bernardino. Angelucza, however, said that she was the one who asked Bernardino to restore the dead boy to life.⁵⁴ At this point no *votum* was made. Angelucza simply asked Bernardino to revive the infant: "*O sancte Bernardine, fa de lu morto vivo, reviva questo citulo*".⁵⁵ Rebecca Wynne Johnson suggests that this "sing-song prayer", as she describes it, is closer to a charm than a prayer.⁵⁶ The other women joined the prayer and Angelucza bathed the child and saw how he started to move which was a sign for her to baptize him. The commissioners asked if the boy was dead when he was pulled from the mother's womb. Angelucza replied yes. She knew this because he was not moving at all. She said that she had seen plenty of similar cases but other babies had revived when she just bathed them. Thus, according to her, those other children had come back to life without divine help. In this case she and all the others as well believed that the baby was saved by Saint Bernardino.

In the end the commissioners asked if she was the one who made the *votum*. She said that it was not her. Previously she had stated that she had prayed for Bernardino's help. There was, however, no mention of a *votum*. Interestingly she adds that she did not hear that anyone had made a *votum*. Only later had she heard that the child's father had made one. He had promised that the child would be named Bernardinus and would wear the Franciscan habit. The commissioners understood that Bernardinus was not the name which Angelucza gave him when she baptized him. She said that she first named him Johannes.⁵⁷ In the

⁵³ *Il processo*, ed. L. Pellegrini, p. 214.

⁵⁴ This is a good example how witnesses may have exaggerated their role in the course of events. On this subject see L. Smoller, "Miracle, Memory, and Meaning in the Canonization of Vincent Ferrer, 1453–54", *Speculum* 73 (1998), 429–454.

⁵⁵ *Il processo*, ed. L. Pellegrini, p.270.

⁵⁶ R. Wynne Johnson, *Praying for Deliverance*, pp. 184, 282.

⁵⁷ "*Interrogata si ipsa testis fecit votum, dixit quod non, neque audivisse aliquem facientem, sed tamen postea audivit dici quod pater fecit votum, videlicet quod dictus puer portare deberet habitum Sancti Francisci et imponeret sibi*

articulus it is said that the *obstetrix* baptized the child giving him the name Bernardinus out of respect for the saint.⁵⁸ Most likely the new name was given only later when things had settled down and Angelucza had also heard of the *votum* which the father had made. Generally it was a common custom that a father had the privilege to name a child. For example, in late medieval and Renaissance Florence this paternal naming culture prevailed.⁵⁹ Still, as Sari Katajala-Peltomaa has shown based on the cases in the canonization process of Nicholas of Tolentino, women also promised to name a child after the saint who was invoked.⁶⁰

Antonius was apparently not present in the birth room, since Angelucza reported in her testimony that there were only women present during the birth. Still, we are told that he actively took part in the process. First, he was told to fetch Angelucza to help with the birth. Then, according to Angelucza he also made a *votum* to saint Bernardino. Antonius' actions back up the suggestions made by several scholars: even if men were not in the same room, they were aware of how things were proceeding inside the birth chamber and they could also influence the events in different ways.⁶¹ Men could help women in ritualistic ways, such as praying or making a *votum*, but also in very concrete ways, such as calling for extra help.

In her testimony, Angelucza said that when the boy had been pulled out she put him on the ground. This is an act which is also repeated in the final birth case in which Nicolaus Paulini's son was found to be dead when he was born. Just like Antonius in the previous case, Nicolaus Paulini and his wife promised to name their child after Bernardino, dress him in the Franciscan habit for two years and take him to Bernardino's shrine if God would rescue him.⁶²

nomen Bernardinus. Interrogata quale nomen ipsa sibi imposuit pro prius, dixit Johannes." Il processo, ed. L. Pellegrini, p. 271.

⁵⁸ "...quem obstetrix illico baptizavit imposito eidem nomine Bernardino ob reverenciam beati Bernardini." *Il processo*, ed. L. Pellegrini, p. 214.

⁵⁹ C. Klapisch-Zuber, *La maison et le nom: strategies et rituels dans l'Italie de la Renaissance*, Paris, 1990, pp. 87–93.

⁶⁰ S. Katajala-Peltomaa, *Gender, Miracles, and Daily Life*, p. 232.

⁶¹ A. Foscati, "I miracoli del parto", p. 74. F. Harris-Stoertz, "Midwives in the Middle Ages?", p. 73. R. Finucane, *Rescue of the Innocents*, pp. 33–35. B. R. Lee, "A Company of Women and Men", pp. 92–100.

⁶² "*Bernardinus, filius Nicolai Paulini, de civitate Esculana, mortuus natus, emisso voto per parentes de imponendo sibi nomen Bernardini si, meritis et intercessione beati Bernardini, vitam ei Deus omnipotens restitueret, nec non quod per annos duos eum habitu Sancti Fancisci induerent et ad corpus ipsius beati Bernardini Aquilam ducerent, statim dictus puer vivus apparuit, et usque in hodiernum diem incolumis et sanus perseverat.*" *Il processo*, ed. L. Pellegrini, pp. 423–424.

Naming a child after the saint who had rescued him/her was a usual way to honour the saint in question. It was a public and long lasting gift to the saint. It did not, however, bring any material benefit to saint's shrine or religious order. To dress a child in the Franciscan habit would emphasize even more the parents' devotion to Bernardino, but also to the Franciscan order. It was very visible act of devotion. This kind of counter gift to a saint was not exceptional in the fifteenth century Italy. In the canonization process of Bernardino of Siena, a mother of a boy who was run over by horses promised also to wear her son in the Franciscan habit for one year.⁶³ Similarly in the canonization process of Santa Francesca Romana, children are promised to wear white clothing which was distinctive to Francesca's congregation.⁶⁴ The ultimate gift parents could give to a saint was to promise that a child would enter a religious order. Child oblations to a saint was a custom which had a biblical role model and this kind of practice is depicted in the miracle collections of Southern and Central Europe during the early and high Middle Ages. Even the canonization process of Nicholas of Tolentino (1325) presents an example of a child oblation.⁶⁵ In Bernardino's cases the boys are promised to wear the habit only for a certain period of time.

In the case of Nicolaus Paulini's son, there are three witnesses: Cassandra, Nanna, and Mariana Vannini. The first of them, Cassandra, said that she knew the baby was dead because he did not cry. He also did not move or have the typical skin colour of a newborn. According to Cassandra, the baby remained like this for about fifteen minutes. This is a typical testimony in a birth miracle. The deponent is trying to convince the commissioners of an occurred miracle by explaining the signs of death and giving an estimation of the elapsed time between the arrival of death and the resurrection.⁶⁶

Cassandra reported that Nanna placed the child on the ground. Placing a dead infant on the ground is similar to a custom which was also practised when older people died. In the canonization process of Bernardino of Siena, there is one case in addition to these two birth cases where a deceased is placed on the ground. In this case a man asked to be placed on the ground as he was dying.⁶⁷ This resembles

⁶³ *Il processo*, ed. L. Pellegrini, pp. 415, 492–293.

⁶⁴ *I Processi inediti per Francesca Bussa dei Ponziani*, ed. P. Lugano, pp. 324, 326.

⁶⁵ S. Katajala-Peltomaa, *Gender, Miracles, and Daily Life*, pp. 233–234. C. Krötzel, *Pilger, Mirakel und Alltag. Formen des Verhaltens im skandinavischen Mittelalter*, Helsinki, 1994, p. 317–318.

⁶⁶ On the signs of death in Italian hagiographic material see J. Nissi, "Quomodo scit quod mortuus erat?"

⁶⁷ *Il processo*, ed. Pellegrino, p. 535. I have found similar cases from Swedish 15th-century canonization processes and miracle collections. However, a contemporary Italian canonization process of Santa Francesca Romana includes no mentions of placing dead people on the ground. For the Swedish cases see for example "Miracula defixionis domini", ed. T. Lundén in *Göteborgs Högskolas Årsskrift 1994:4*, Göteborg, 1990, pp. 38, 70. In these cases it is reported that a deceased was placed on the ground "as the custom was with the dead people" or "as the custom was with those who are prepared to be buried".

Bernardino of Siena's own request at the moment of his death. Bernardino wanted to die with his feet touching the ground.⁶⁸ Already Guglielmo Durando, a 13th century liturgist and a bishop of Mende, recommended that those who are at the agony of dying should be placed on the ground on ashes or on straw. Following this instruction, the late medieval books of hours depicted dying people placed on a straw mat, on a regular mat or rolled in a straw mat.⁶⁹ An ascetic moment of death is also a topical element in the biographies of saints.⁷⁰ Thus, for older people, dying on the ground was an act of devotion. However, if the deceased was placed on the ground after he/she had died, it was most likely an act which was done before the deceased was rolled in linen or prepared in whatever way the corpse was handled.⁷¹

The commissioners asked if Cassandra touched the child's body or tried to find a pulse, to which she replied negatively. She said that there was a little time between the invocation and the resuscitation. During this time Nanna blew into the child's ears (*insufflaviv in aures infantis*).⁷² This is the second time we encounter insufflation or blowing into the mouth and ears in the birth miracles of Bernardino of Siena. In the previous case the *obstetrix* did not insufflate but the commissioners asked whether she had done so. Insufflation is the same kind of ritual as putting salt into the baby's mouth; it prepares a child for baptism. Its purpose is the expulsion of evil spirits but it also symbolized the Holy Spirit.⁷³ Insufflation seems to have been a practice used in Italy in the mid-15th century and known to the clerical men of canonization processes, since insufflation is also mentioned in 1450 at Viterbo in the case of a semi-dead infant in the canonization process of Rosa of Viterbo.⁷⁴

⁶⁸ Bernardino's last moments are explained in Fra Giuliano da Milano's letter to the observant convent of Milan. The letter is edited by F. Donati in *Bullettino senese di storia patria*, volume primo (1894), pp. 70–76. For a more recent edition see S. Boesch Gajano & M. Rita Berardi (eds.), *Civiltà medioevale negli Abruzzi*, L'Aquila, 1990–1992, 2 vols., here vol. 2 (1992), p. 452. See also P. Langer, "One Saint and Two Cities", p. 275.

⁶⁹ D. Alexandre-Bidon, "Immagini del cimitero Cristiano del medioevo" in A.L. Trombetti Budriesi (ed.), *Un gallo ad Asclepio. Morte, morti e società tra antichità e prima età moderna*, Bologna, 2013, pp. 279–280.

⁷⁰ M. Goodich, "The Death of a Saint: A Hagiographical Topos", in Katariina Mustakallio et al (eds.), *Hoping for Continuity. Childhood, Education and Death in the Antiquity and the Middle Ages*, Rome, 2005, 227–238.

⁷¹ Sometimes unbaptized children were treated quite harshly since they could not be buried in the churchyard. For example, in the canonization process of Nicholas of Tolentino a father decided that his dead baby should be buried in a garbage heap. *Il processo per la canonizzazione di S. Nicola da Tolentino*, ed. N. Occhioni, Rome, 1984, testis CCLXVII, CCLXVIII, CLCCLXIX. Cited in S. Katajala-Peltomaa & V. Vuolanto, *Lapsuus ja arki antiikissa ja keskiajalla*, Tallinn, 2013, p. 33.

⁷² *Il processo*, ed. L. Pellegrini, p. 537.

⁷³ "Insufflation" in F.L. Cross & E.A. Livingstone (eds.), *The Oxford Dictionary of the Christian Church*, Oxford, 2005, p. 844. The practice was already mentioned in the 3rd century treatise generally known as *Apostolic Tradition* and conventionally attributed to Hippolytus of Rome. In the early Christian communities insufflation was done by a bishop to those who converted to Christianity. *The Apostolic Tradition of Hippolytus*, ed. B.S. Easton, Cambridge, 1934, pp. 44–45. For a Biblical reference see John 20:21–22.

⁷⁴ R. Wynne Johnson, *Praying for Deliverance*, p. 263–264.

The second witness in the case was a 65-year-old *obstetrix* Nanna. She also told them that the baby was dead because he did not cry. Also, he could not support himself (*nec se sustinebat*) which perhaps means that the child was completely slack and immobile. The commissioners asked whether the baby moved while he remained on the ground. According to Nanna he did not. While the mother and other women prayed to Bernardino, Nanna gave the child the usual remedy she was accustomed to do. By this she meant blowing into the baby's ears and rubbing onion into his mouth (*fricando cepe per os eius*). After this the baby began to breathe. Her estimation of the time was half an hour. At the end of her testimony Nanna said that she was accustomed to cases like this and had been involved in several similar cases. Despite her obstetrical skills she still believed that the baby was rescued by Saint Bernardino.⁷⁵

The final witness is a goldsmith (*aurificis*) Mariana Vannini. Her testimony does not give much new information but what is interesting to us is the final question which the commissioners put to her. She was asked if she believed that the boy was saved by Saint Bernardino or by the usual remedy given by the *obstetrix*. Mariana replied that she did not know. She was only sure that the boy was dead when he was born.⁷⁶ The question indicates that the commissioners saw Nanna's actions as worldly medicine; their effective use may have lessened the likelihood of divine intervention. This means that these kinds of actions in the birth chamber were probably commonly agreed on and well known in 15th-century Italy.

Since Mariana's testimony does not add any new information to what we already knew, it raises the question of why she was questioned in the first place. In her testimony, her occupation draws one's attention. A goldsmith was a high-ranking artisan and thus a distinguished member of a community. In addition to gender, in medieval society a person's reliability and trustworthiness were connected to wealth and position.⁷⁷ As in the case of Petrucius, Mariana's testimony might be seen as confirmation of the words of previous witnesses. Since the notary had not decided to name Mariana as ordinary *honesta mulier* or *domina*, her profession seems to separate her from other women in the process. It was rare that women were identified by their own occupation: instead they were identified by their husband's or father's name.⁷⁸ This is also the case in the canonization process of Bernardino. Apart from Mariana, there are no mentions of other high-ranking woman artisans in the whole process.

⁷⁵ *Il processo*, ed. L. Pellegrini, pp. 537–538.

⁷⁶ "...dixit ignorare, suo tamen iudicio infans mortuus natus est." *Il processo*, pp. 538.

⁷⁷ Katajala-Peltomaa, *Gender, Miracles, and Daily Life*, p. 42.

⁷⁸ M. Green, "Documenting medieval women's medical practice", in L. García-Ballester, R. French, J. Arrizabalaga & A. Cunningham (eds.), *Practical Medicine from Salerno to the Black Death*, Cambridge, 1994, p. 329.

Conclusions

The testimonies of birth attendants were important for the commissioners of canonization processes since the affirmation of death as well as resuscitation attempts were crucial information when deliberating whether a birth case could be labelled as miraculous. All the witnesses in the cases studied in this chapter are women except for one man. The *obstetrices* who appear in these cases are elderly women, between 50 and 65 years of age. The fact that the *obstetrices* are summoned particularly in the case of an emergency indicates that they were well known for their abilities to help in childbirth. They also instructed other women during the birth so they were in charge of the care giving in the birth chamber. The authority of these women is underlined by the fact that they sometimes performed an emergency baptism or similarly refused it if it was not possible to baptize a child. Their expertise is also revealed by the questions they were asked: they were thought to possess expert information about the state and health of the newborn. The birth attendants used their experience as proof of the reliability of their words and thus tried to make their testimonies more trustworthy and consequently themselves as more significant members of the community.

In these cases the women taking part in childbirth were aware of the ways of recognizing a dead baby. If the life of a newborn was questionable it was an *obstetrix* who made the required tests to see if an infant was dead or alive. The commissioners were highly interested to hear how the women knew if a baby was dead or not. This way these sources uniquely reveal to us how a community functioned and what the birth attendants' strategies were if a birth did not go according to plan. Still, one has to keep in mind that hagiographic genre emphasises certain stereotypical elements which were regarded as proof of narrative's reliability. In birth miracle narratives resuscitation attempts, investigating the signs of death, placing a dead infant on the floor, or estimating the elapsed time between the birth and the resurrection are certainly elements which were recorded to emphasize the desperate situation before the allegedly miraculous healing. Also, praying to a saint stands out in the miracle testimonies as its core element. In a birth miracle narrative the *obstetrix* had the main role in the birth chamber during the birth but if the birth turned out to be a death moment, other women or even men could step in and play an important role by praying for a saint's help. At this point making a *votum* was as important for the community as the earthly remedies an *obstetrix* could offer, or at least this is the impression we get from these sources.

The testimonies of birth miracle cases increase our knowledge on the use of expert witnesses in medieval canonization processes. Like medical men in other healing miracles, *obstetrices* testify that nothing but a miracle could have caused the recovery of a newborn. To testify about their vast practical experience and the physical investigations which they performed were ways to construct their reliability. Also, when an *obstetrix* testified that she was asked to come and assist in childbirth when things were going wrong, she was stressing that her fame as a childbirth expert was known in her community. Therefore, in addition to studying birth miracle testimonies as an evidence of the care of the parturient women, similar attention should be paid to the ways how birth attendants build their trustworthiness and status as expert witnesses in canonization processes.

Keywords: hagiography, 15th century, Italy, medicine, childbirth, death

Abstract: In the canonization process of Bernardino of Siena there are four cases in which an infant is thought to be born dead but later revived by divine intervention. This article investigates the depositions given in these cases. The testimonies of birth miracle cases increase our knowledge on the use of expert witnesses in canonization processes. Like medical men's testimonies in other cases, birth attendants' testimonies were used to evidence that nothing but a miracle could have caused the recovery of an infant. The testimonies reveal to us how a community functioned and what the birth attendants' strategies were if a birth did not go according to plan. The *obstetrix* had the main role during the birth but if it turned out to be a death moment other women or even men could step in and play an important role as they prayed for saint's help.