Chapter 2: Paul the *Anargyros*: History, God-Talk, and Ecumenism in the Healing Praxis of Dr. Paul Farmer

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There once was a man named Paul who devoted his life to direct, hands-on care for the suffering needy. He began by doing night rounds on a team, combing the streets after dark for any "poor and old and sick." With others in this service, he cleaned bodies, mended clothes, and provided these individuals with food, money, and related health care services. Before long he was doing this 24/7. Those around him were so inspired by his example that he "organized and built up and instituted" similar services in other cities. He was constantly traveling, and his coworkers included rich and poor, men and women, ordinary people who became "fellow labourers and partners" in the work. His efforts were so effective that when he died, his body mere skin and bones, the activities he left behind "grew and increased and expanded everywhere ... to God's glory and the relief of the poor."

This story clearly evokes much that readers of this volume know and love about the late Dr. Paul Farmer. But in fact, this story is about another Paul, a man who lived about 1500 years ago. Written in Syriac in the late 560s CE by a monk named John of Ephesus, this narrative, about a man from Antioch, is one of fifty-eight biographical "histories" that describe inspiring people whom John says he met and knew personally. He calls them "saints," but sainthood in his world, the fraught political borderlands of the Roman Empire during the reign of the emperor Justinian, did not require any particular process of canonization as we know it today. His purpose for writing these lives, John says, was to leave "the pattern of their

¹ John of Ephesus, "Life of Paul of Antioch," in *John of Ephesus: Lives of the Eastern Saints (II)*, ed. and trans. E.W. Brooks (Patrologia Orientalis; Paris: Firmin-Didot, 1924), 671–676.

likeness for posterity,"² to inspire in his readers an eagerness to imitate them and enter heaven hearing God say, in the words of Matthew 25:34, "Come, you who are blessed." John categorized Paul of Antioch as simply a "divine man and strenuous worker." As far as we can tell, this Paul was not a priest, monk, trained physician, nor even a miracle worker. His activities were "ministrations" or "social services,"³ what the Catholic church today might call diaconal ministry. Insofar as Paul of Antioch's service included focused practices for healing, he models a type of healer-physicians in Christian history known as *anargyroi* (pronounced ah-NAR-gear-oi). In this essay, I summarize the characteristic nature and practices typical of *anargyroi* and then suggest how the life and theological ethics of the late Dr. Paul Farmer may offer us an exemplar of a modern *anargyros*.

Anargyroi: Unmercenary Healers

The word *anargyroi* (singular *anargyros*) is from the Greek, meaning those who provided health care assistance "without silver," that is, for free. Also called "unmercenary saints," these health care providers, typically found in texts from Mediterranean late antiquity, freely served the sick and needy in a deliberately equitable fashion—in so doing often challenging the normally corrupt social order in paradoxical ways. *Anargyroi* healing stories sometimes feel like parables missing a punchline.

Such holy healers were usually (but not always) martyrs. In life, they were said to have practiced medicine or to have been associated with skilled ascetic healers for whom social justice was part of their religious identity. God's healing power continued to work through their post-mortem remains and at their healing sites, typically Christian shrines or sometimes

² John of Ephesus, *John of Ephesus*, 2.

³ Susan Ashbrook Harvey, *Asceticism and Society in Crisis: John of Ephesus and the* Lives of the Eastern Saints (Berkeley: University of California Press, 1990), 34 and 99.

⁴ For a brief overview with more extensive bibliography, see Susan R. Holman, "Unmercenary Saints," in *The Encyclopedia of Eastern Orthodox Christianity*, Vol. 2, ed. John Anthony McGuckin (Hoboken, NJ: Wiley-Blackwell, 2010), 618–620.

extensive complexes that were part hospital, part church. Their fame drew hordes of sick supplicants who were then cared for by the *anargyroi*, who appeared in various guises. Such healing shrines were staffed by ordinary mortal volunteers, recovered patients, and attendants (sometimes churchowned slaves). Treatments might include pharmaceutical recipes, physical therapies, dreams, or miraculously painless surgeries that followed certain aspects of "standard" medical care but were judged far superior to ordinary doctors for various reasons. Patients typically sought help from *anargyroi* when for-profit efforts failed or "regular" doctors gave up on them.

Money was a sensitive point in medical service ethics long before Christianity.⁶ The stories from Christian healing shrines indicate both acceptance of ordinary physicians as having a valid vocation⁷ and also criticism of some of them, especially medics whose beliefs, economic practices, or attitudes implied greed, pride, blind loyalty to the traditions of Galen and Hippocrates, or theological "deviance" as defined by whoever was championing the holy healer. Despite "supernatural" claims, *anargyroi* healings typically used ordinary substances—sometimes in very strange ways. In fact, the intersection between miracle and "natural" cure in the ancient world was a mesh of slippage that lacked our categorizations

⁵ An essay that envisions one ancient Christian healing shrine based on archaeological and textual data is Béatrice Caseau, "Ordinary Objects in Christian Healing Sanctuaries," in *Objects in Context, Objects in Use: Material Spatiality in Late Antiquity*, ed. Luke Lavan, Ellen Swift, and Toon Putzeys (Leiden: Brill, 2007), 625–654. See also Ildikó Csepregi, "The Compositional History of Greek Christian Incubation Miracle Collections: Saint Thecla, Saint Cosmas and Damian, Saint Cyrus and John, Saint Artemios," PhD diss., Central European University, Budapest, 2007.

⁶ On public physicians including ethics and economic ideals, the classic source is Vivian Nutton, "Archiatri and the Medical Profession in Antiquity," Papers of the British School at Rome 45 (1977): 191–226. On the development of hospitals in Late Antiquity the literature is vast, but see especially Peregrine Horden, "Poverty, Charity, and the Invention of the Hospital," Cultures of Healing: Medieval and After (New York: Routledge, 2019), 33–62.

⁷ See, for example, Basil of Caesarea, *Asketikon*, Longer Responses (LR) 55, trans. Anna M. Silvas, *The Asketikon of St Basil the Great* (Oxford: Oxford University Press, 2005), 264–269.

of empirical "body/spirit" polarities." In dream incubation stories, holy healers are often described as looking just like an ordinary doctor. Ildikó Csepregi argues that the development of early hospitals, between the fourth and eighth centuries—which eventually expanded to (sometimes) include wards, medical rounds, and recognizable clothing and equipment—likely influenced how the sick, who (also) sought out healing shrines, viewed the *anargyroi* who healed them by dreams. Surviving oracle ticket fragments—answers for the patient who asked the saint for written advice or prescription—show how banal such treatment might be. One sixth/seventh century papyrus fragment from Egypt, for instance, simply reads, "Saints Kosmas and Damianos ... order your servant [..., son of] Gerontios, to bathe himself." 10

The most popular surviving story collections about unmercenary doctors are those for the above-mentioned Cosmas and Damian, ¹¹ Cyrus

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⁸ My purpose here is to summarize the *anargyroi* model and introduce it into discussion of Paul Farmer's medical ethics; space prohibits details here of the nuanced overlaps and differences between Christian *anargyroi* and non-Christian Asclepius healing shrines, or between *anargyroi* and the tradition of healing associated with non-medic martyrs and other "saints"; the literature is extensive. Most named *anargyroi* in Christian history are men, but the most famous woman's shrine with healing accounts is that of Thecla in Seleucia. Another "unmercenary" healing woman, Hermione, a name given to one of Philip the Deacon's daughters mentioned in Acts 21:8–9, is associated with Ephesus, is *not* a martyr, is credited with having received some medical training, and is venerated today on the Greek island of Chios.

⁹ Ildikó Csepregi, "Changes in Dream Patterns between Antiquity and Byzantium: The Impact of Medical Learning on Dream Healing," in *Ritual Healing: Magic, Ritual and Medical Therapy from Antiquity until the Early Modern Period*, ed. I. Csepregi and Ch. Burnett (Firenze: SISMEL, Edizioni del Galluzzo, 2012), 131–145. On the gradual institutionalization of hospital-like facilities in this period, see Mark Alan Anderson, "Hospitals, Hospices, and Shelters for the Poor in Late Antiquity," PhD diss., Yale University, 2012.

¹⁰ *P.Amst.* 1.22, ed. R.P. Salomons, P.J. Sijpesteijn, and K.A. Worp, trans. G. Schenke, online at Oxford University's "The Cult of Saints in Late Antiquity" database, csla.history.ox.ac.uk/record.php?recid=E06150.

¹¹ Ludwig Deubner, ed., Kosmas und Damian (Leipzig and Berlin: B.G. Teubner, 1907); and E. Rupprecht, Cosmae et Damiani Sanctorum Medicorum Vitam et Miracula e Codice Londiniensi (Berlin, 1935); for translation, see A. J. Festugière, trans., Sainte Thècle, Saints

and John, ¹² and Artemios. ¹³ Some were specialists; Artemios attracted those with hernias, and another *anargyros* popular in Egypt, Colluthus, seemed to have specialized in eye diseases. ¹⁴ Healings did not necessarily include the full gamut of the corporal works of mercy (discussed further below). However, in the various manuscript collections of healing stories, each person healed receives whatever is appropriate to her or his disorder, which may include cures that address social factors. The stories emphasize community efforts. Care usually involved attentive accompaniment and collective teamwork—sometimes ironically forced or tricked—that engaged other patients, local merchants, or clergy. Healing partners might also include the God-guided actions of living animals such as birds, snakes, and camels, in addition to the animal, vegetable, mineral, and environmental substances that underlie ancient medicine and curative recipes based in a theory of balancing wet, dry, hot, and cold humors.

Paul the Anargyros?

What then does such a model offer us as we consider the theological ethics of the late Dr. Paul Farmer? How might his health care practices be seen as similar to or different from those of that other Paul who began this chapter, the ordinary man from sixth-century Antioch? Why might we consider Paul Farmer an *anargyros*?

Côme et Damien, Saints Cyr et Jean (extraits), Saint Georges (Collections grecques de miracles; Paris: Éditions A. et J. Picard, 1971).

¹² Natalio Fernández Marcos, ed., *Los "Thaumata" de Sofronio: Contribución al estudio de la Incubatio Cristiana* (Madrid: Instituto Antonio de Nebrija, 1975). The best translation of these miracles of Cyrus and John is Jean Gascou, ed. and trans., *Sophrone de Jérusalem: Miracles des Saints Cyr et Jean, BHG I* 477–479 (Paris: De Boccard, 2006).

¹³ For Artemios, see Virgil S. Crisafulli and John W. Nesbitt, eds. and trans., *The Miracles of St. Artemios: A Collection of Miracle Stories by an Anonymous Author of Seventh-Century Byzantium* (Leiden: E.J. Brill, 1997).

¹⁴ On Colluthus as a physician, see especially Aaltje Hidding, *The Era of the Martyrs: Remembering the Great Persecution in Late Antique Egypt* (Berlin: DeGruyter, 2020), 67–98, doi.org/10.1515/9783110689686-003.

Paul the Anargyros: History, God-Talk, and Ecumenism

John's description of Paul of Antioch's work, like Farmer's, includes the core elements of the medical care of his day: typically bathing, food, and the application of various substances to, through, and around the body for restorative physical, mental, social, and spiritual balance. Also, like Farmer, Paul of Antioch, John suggests, energized a nonprofit model of accompaniment and free care, addressed social determinants of health in practical ways, and engaged enthusiastic partnerships, including savvy fiscal networking. John's readers would have understood Paul of Antioch to be doing what are popularly known as "the corporal works of mercy" based on Matthew 25:31-46, that is, serving the poor who, according to this scripture, literally manifest God's body through a moral mandate to provide basic economic, social, and cultural 'entitlements' to safe and adequate food, drink, covering, medical care, housing, and engaged, empathetic acquaintance with those sick, in prison, or dead. 15 In fact, despite this gospel text being stereotyped as acts of "mercy," it constructs these activities as ethical marching orders: a human rights mandate. 16

The medical behaviors of both Paul of Antioch and Paul Farmer may in fact fit only some *anargyroi* characteristics. Neither man, for instance, is imaged as a super-human miracle worker. However, there are, I suggest, sufficient intersections that make the *anargyros* a reasonable (though admittedly playful) model for us to think about Paul Farmer's theological ethics today. Since I bring this image here into discussion on religious ethics, and emphatically *not* to advance sainthood or hagiography for Paul Farmer, I focus in what follows below on *anargyroi* characteristics in terms of three non-miraculous or non-supernatural themes we see in these stories: (1) the corporal works of mercy for health equity; (2) ecumenicity, or non-judgmental engagement with religious diversity; and (3) attention to the importance of historical voices that may not otherwise be heard.

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¹⁵ Burying the dead is not named in Matthew 25 but was soon included in the "works of mercy" and was depicted in religious art with the other "works" throughout the medieval period.

¹⁶ Further discussed in Susan R. Holman, *Beholden: Religion, Global Health, and Human Rights* (New York: Oxford University Press, 2015), 83–122.

Corporal Works of Mercy

In working with the late Dr. Paul Farmer, between 2005 and 2018, as a writer-editor at a Harvard-affiliated hospital, school of public health, and associated academic programs and initiatives in Boston, I was constantly aware of how he seemed to consistently affirm religion and spirituality while avoiding what might be called 'god-talk.' Even when cornered on stage for a 2014 Harvard Divinity School event to discuss his book collaboration with Gustavo Gutiérrez, *In the Company of the Poor*, Paul doggedly fielded some HDS faculty's tough theological questions with answers that deftly shifted back to pragmatic measures of evidence-based health care delivery.¹⁷ Yet, I also knew, most obviously from Chapter 5 in *Pathologies of Power*, that he could at least use the "T" word, affirming the relevance of liberation theology for both his organization Partners In Health (PIH) and for health justice writ large.¹⁸ The Matthew 25 text is core to much of the focus on practical action in liberation theology.

Thus, when I introduce Farmer's thinking to students in my theology courses these days, I typically begin by assigning (with Paul's permission) his never-published 2007 Address to the House of Bishops in New Orleans, a talk he gave on September 21, 2007, titled "Health, Human Rights, and the Corporal Works of Mercy: Reflections on New Orleans and Haiti." In this talk, he reflected on the devastation of Hurricane Katrina in August 2005 and explicitly named and defined in twenty-first century context each of the corporal works of mercy as "meaningful goals and directives" for what should have and could be changed in addressing the question, "How can faith-based and secular organizations move

¹⁷ Harvey Cox, "Liberation Theology Redux?" *Harvard Divinity Bulletin* (Summer/Fall 2014), bulletin.hds.harvard.edu/liberation-theology-redux/.

¹⁸ Paul Farmer, *Pathologies of Power: Health, Human Rights, and the New War on the Poor* (Berkeley: University of California Press, 2005), 139–159.

¹⁹ Paul E. Farmer, "Health, Human Rights, and the Corporal Works of Mercy: Reflections on New Orleans and Haiti," Address Given at the House of Bishops, New Orleans, Louisiana, September 21, 2007, unpublished manuscript, used with permission.

forward the social justice agenda?"²⁰ He explained this focus on the Matthew text by noting that PIH "is a secular organization, but I'd wager that almost all of us working together—and we are 5,000 people in nine countries—believe in the corporal works of mercy."²¹

Balancing medical care with religious praxis by applying scriptural care mandates was also part of the church-driven social welfare vision of many clergy and professional physicians in Christian antiquity, who also appealed for government policy support and philanthropic health care funding. Many of them worked in cities where the sick also frequented local Christian healing shrines. The fifth-century city of Cyrrhus, for instance, at what is today the border between Syria and Turkey, was the site of the oldest known Christian healing shrine for the anargyroi Cosmas and Damian. Yet, during exactly this same period, we know at least the name of one ordinary physician-priest, Peter. Peter apparently moonlighted as a medic in Cyrrhus while helping the city's bishop, Theodoret. We know from Theodoret's surviving correspondence that he was a bishop with an active social conscience, since he deliberately mentions that he paid for and directed efforts to improve the city's access to adequate water.²² It is Theodoret who first mentions Cosmas and Damian's shrine in the city,²³ and Theodoret who leaves us two brief recommendation letters for Peter. All we know from these letters is that Peter had been trained at the Harvard Medical School equivalent of his

²⁰ Farmer, "Health, Human Rights, and the Corporal Works of Mercy," 2.

²¹ Farmer, "Health, Human Rights, and the Corporal Works of Mercy," 2.

²² "From the revenues of my sees I erected public porticoes; I built two large bridges; I looked after the public baths. On finding that the city was not watered by the river running by it, I built the conduit, and supplied the dry town with water." Theodoret of Cyrrhus, *Ep.* 81, to Nomus, trans. Blomfield Jackson, in *Nicene and Post-Nicene Fathers* (*NPNF*), second series, vol. 8 (1892, repr. Grand Rapids: Eerdmans, 1983), 277; at p. 295 he mentions Peter in two recommendation letters, *Ep.* 115 (to Apella) and *Ep.* 114 (to Andiberis).

²³ For sources and the argument that the cult began in Cyrrhus, see Phil Booth, "Orthodox and Heretic in the Early Byzantine Cult(s) of Saints Cosmas and Damian," in *An Age of Saints? Power, Conflict and Dissent in Early Medieval Christianity*, ed. Peter Sarris, Matthew Dal Santo, and Phil Booth (Leuven: Brill, 2011), 114, n. 3.

day—under physician-teachers in Alexandria in Egypt—and that he needed these letters to find a new job because Theodoret was in theological trouble. These thin traces from one man's pen, that is, suggest a medical marketplace where both healing saints (Cosmas and Damian) and ordinary physicians like Peter inhabited similar clinical spaces, apparently without conflict. Both holy and ordinary doctors were also known for traveling from place to place to practice their skills. Perpetually dicey church politics had no discernible effect on the rapid spread of Cosmas and Damian's healing shrines and associated churches and monasteries across the empire over the following centuries, to Constantinople, Rome, and beyond.

We find a similar overlap of conventional Christian medics and shrines in the late sixth century Egyptian city of Antinoopolis, where a family-owned medical facility (a *xenon*, described in terms of hospital-like medical care)²⁴ coexisted with the large, and even today architecturally impressive, healing shrine for the *anargyros* St. Colluthus.²⁵ The Antinoopolis examples further hint at collaborative grouping of *anargyroi* rather than competition between them. Colluthus, Cosmas and Damian, Cyrus, John,

²⁴ The will of the public physician, Flavius Phoibammon, dated to 570 CE (*P.Cair.Masp* II 67151). For discussion, see James G. Keenan, "The Will of Flavius Phoibammon," in *Living the End of Antiquity: Individual Histories from Byzantine to Islamic Egypt*, ed. Sabine R. Huebner et al (Berlin: DeGruyter, 2020), 109–117. A translation is at Maria Nowak, *Wills in the Roman Empire: A Documentary Approach* (Warsaw: Journal of Juristic Papyrology. Supplement, 2015), 427–433.

²⁵ On the archaeological site, see Peter Grossmann, "Antinoopolis: The Area of St. Colluthos in the North Necropolis," in *Antinoupolis*, Vol. 2, ed. Rosario Pintaudi (Firenze: Firenze University Press, 2014), 241–300. For more on the papyrus tickets, see Lucia Papini, "Fragments of the *Sortes Sanctorum* from the Shrine of St. Colluthus," in *Pilgrimage and Holy Space in Late Antique Egypt*, ed. David Frankfurter (Religions in the Graeco-Roman World 134, 1998), 391–401; and Annemarie Luijendijk, "'If You Order That I Wash My Feet, Then Bring Me This Ticket': Encountering Saint Colluthus at Antinoë," in *Placing Ancient Texts: The Ritual and Rhetorical Use of Space*, ed. Mika Ahuvia and Alexander Kocar (Tübingen: Mohr Siebeck, 2018), 197–225.

and other *anargyroi* images line up together, life size, on several painted walls across monastic and church spaces from Egypt to Rome.²⁶

To explore details of even a few of the many individual healings in the anargyroi collections would push well beyond the limits of this chapter. But a quick sampling of select cures from the Cosmas and Damian stories illustrates their concern for the corporal works of mercy as well as ideals present in liberation theology. For instance, we see these anargyroi going out of their way to listen and walk long distances with afflicted, despairing, and angry patients, even to find them suitable employment (Mir. 18). They slip medicinal cures under their mattresses (Mir. 26). They rescue and treat at least one sick monk lying alone abandoned in a prison after he had badmouthed a politician (Mir. 47). They help a young couple feed their new infant through consultation and gently cure the mother's inflamed breast to avoid dangerous surgery (Mir. 29). They force rich and poor patients into conversations where each cures the other by apparent accident or nonsense (Mir. 34). In each of these stories, the anargyroi heal by interventions that address what we today call the social determinants of health, within a framework of accompaniment. In the ancient world of tiered social class assumptions and slavery, health equity ideals do not play out as democratically as we might wish. Yet the examples above suggest anargyroi whose standard operating mode connected responses to sickness and extreme poverty with politics, maternal-child health, and radical, personalized health care delivery measures, with a focus on effectiveness that has from the start also characterized the heart of Paul Farmer's work and life.

Ecumenicity

The *sui generis* power of Paul Farmer's theological ethical praxis was shaped profoundly by his cultural humility, his humor, and—my second theme here—ecumenicity. By ecumenicity, I mean his ready openness to

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²⁶ See images and discussion in Susan R. Holman, "Doctors in the Choir: Healing Embodiment and Ingestion in Early Church Space," *Journal of Early Christian Studies* 28, no. 2 (2020): 255–282.

welcome to the table (clinical space, mountain walk, or home visit) a wide diversity of ideological, religious, "spiritual," and secular views. As a non-profit health care delivery organization, PIH is unapologetically committed to applying the best evidence-based health care science and technology for all, but *Mountains Beyond Mountains* readers will remember how profoundly the young Farmer was shaped by a question an elderly Haitian woman asked him years ago. Cured of tuberculosis after a year of daily directly observed therapy (DOT), a year after she told him she knew that biological factors caused TB, she then admitted to believing that sorcery or voodoo [maybe also] caused her disease. When the then twenty-nine-year-old Farmer expressed his baffled confusion and asked why on earth, if she believed this, had she faithfully taken her medicines, she smiled at him as if he were a small child and asked, "Honey, are you incapable of complexity?"²⁷

We find hints of similar complexity and ecumenical spirit (the latter, to be honest, only sometimes) in Christian *anargyroi* healing stories. For example, Sophronius, the seventh-century author who described Cyrus and John's healings at a shrine site now deep under water in Egypt's Aboukir Bay, was a man fixated on theological correctness. In his stories, the healers practiced heavy conversion pressure on some supplicants, withholding complete health until they admitted "right" doctrinal beliefs. However, these seventy stories of Cyrus and John's direct care for sick people, each identified by name, age, social class, hometown, and disease, also abound in rich and weirdly comic details that suggest a wider openness to cosmic forces. The children in these stories, for instance, sick as a consequence of domestic violence, eye infection causing blindness, or hunger that drove them to swallow snake's eggs or insect-infested reeds, are cured by methods that include serendipitous corrective accidents, bird

²⁷ Tracy Kidder, Mountains Beyond Mountains: The Quest of Dr. Paul Farmer, A Man Who Would Cure the World (New York: Random House, 2003), 35.

attacks, and one alarming entrance into the complex of a giant, keening mother serpent intent on getting her baby back.²⁸

Some of the Cosmas and Damian healings recorded by various authors over about 900 years (and rarely giving patients names) are more openly broad-minded, explicitly affirming that these healers cured orthodox, heretics, and pagans alike, even when the afflicted "misunderstood" them to be not Christian saints at all but the divine Greek twin gods, Castor and Pollux.²⁹ This ecumenism in (or in spite of) healing therapy, argues historian Phil Booth, images "an ideology within which ... a multiplicity of doctrinal meanings ... is both acknowledged and preserved."³⁰ These largely pre-Islamic Christian healing narratives often include "heretics" and Jews, but Muslims would soon join the religious mix in the crowds that met in such healing places across the ancient world.³¹

In global health equity today, differing tensions over what heals and how it heals typically fall more between religious claims and non-religious secularity. There is less tendency today for arguments over the conversion-based agendas that marked certain points in antiquity as well as the medical missions of the nineteenth and early twentieth centuries. Today, the idea of "ecumenical" in health care justice might be more usefully subsumed under "solidarity." Indeed, Farmer's House of Bishops address concluded with a call to such ecumenical solidarity that it is worth repeating here for its summons to diversity and speaking truth to power:

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²⁸ Discussed in Susan R. Holman, "Sick Children and Healing Saints: Medical Treatment of the Child in Christian Antiquity," in *Children in Late Ancient Christianity*, ed. Cornelia B. Horn and Robert R. Phenix (Tübingen: Mohr-Siebeck, 2009), 143–170; and Susan R. Holman, "Martyr-Saints and the Demon of Infant Mortality: Folk Healing in Early Christian Pediatric Medicine," in *Childhood and Family in Late Antiquity: Life, Death and Interaction*, ed. Christian Laes, Katariina Mustakallio, and Ville Vuolanto (Leuven: Peeters, 2014), 233–254.

²⁹ Mir. 9 (Deubner), discussed in Booth, "Orthodox and Heretic," 121ff.

³⁰ Booth, "Orthodox and Heretic," 114-128, 124.

³¹ See, for example, Ephraim Shoham-Steiner, "Jews and Healing at Medieval Saints' Shrines: Participation, Polemics, and Shared Cultures," *Harvard Theological Review* 103, no.1 (2010): 111–129; and Adam C. Bursi, "Fluid Boundaries: Christian Sacred Space and Islamic Relics in an Early Ḥadīth," *Medieval Encounters* 27 (2021): 478–510.

To paraphrase Martin Luther King, Jr.: "the arc of the moral universe is long, but it bends toward justice." If we can all privilege acts of solidarity, as embodied in the corporal works of mercy, it will be great news for our efforts to serve the world's poor and marginalized, and to stand in solidarity with them as they fight to improve their lives. ³²

Learning from History

The third and final principle I offer to connect Farmer's theological ethics of health care with the anargyros model is the importance of understanding and learning from history. "Old is the new new whenever history goes down the drain," Paul wrote. 33 His focus on close readings of historical factors marked his scholarship and teaching from the start, building on his high school experience working alongside migrant farm workers and his college fascination with Rudolf Virchow's 1848 Report on the Typhus Outbreak of Upper Silesia.34 Indeed, one of Paul's earliest publications in a religion-affiliated journal was an unsparing narrative of intersecting church-state travesties in the modern history of Haiti and how historical factors led to the 1989 election of Fr. Jean-Bertrand Aristide.³⁵ His quest to get to the root of pathologies depended on understanding history. In Fevers, Feuds, and Diamonds (the other Farmer reading I assign to my theology students), he considered its two hundred-plus pages of history about West Africa to be at "its heart." Forgetting the past, he insisted, "is one way that structural violence is cloaked, and why it's worth

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³² Farmer, "Health, Human Rights, and the Corporal Works of Mercy," 7.

³³ Paul Farmer, *Fevers, Feuds, and Diamonds: Ebola and the Ravages of History* (New York: Farrar, Straus, and Giroux, 2020), 344.

³⁴ On which see especially Leon Eisenberg, "Rudolf Ludwig Karl Virchow, Where are you Now That We Need You?" *The American Journal of Medicine* 77 (1984): 524–532.

³⁵ Paul Farmer, "The Power of the Poor in Haiti," *America Magazine*, March 9, 1991, 260–267.

³⁶ Farmer, Fevers, Feuds, and Diamonds, xxvi.

looking for accounts from those unlikely to have the chance to air their views or relate their experiences."³⁷

This focus on voice and memory also threads heavily throughout the *anargyroi* healing stories. Such accounts are typically presented as the sometimes-literal narrative control of the sick poor themselves, often illiterate "little people," who may even jostle to make sure the writer gets their story in their words and even in their desired sequence related to other people's stories.³⁸ Even if we maintain an attitude of beneficent skepticism about whether what these voices say "actually happened," historicity or lack thereof is not the point. The point is: what do such stories suggest about what the narrator(s) considered important—or not—to their life and culture, experience of suffering, and quest for health?

Farmer's emphasis on learning from history was never about hagiography. It was about being aware enough to name and trace what went wrong and how it perpetuates structural violence and preventable pathologies. And sadly, the *anargyroi* tradition itself is not immune from perpetuating such wrongs. Perhaps the most troubling example of this is in the Cosmas and Damian tradition's persistent re-telling of the so-called "miracle of the black leg." This is the first image you may see if you happen to Google these two healers on a whim.

Appearing late, in the fourteenth century *Golden Legend* and illustrated in Florence by about 1370,³⁹ this story tells of a church verger with a leg cancer. Seeking cure, he experiences a dream in the Church of Saints Cosmas and Damian in Rome in which the saints surgically replace his rotting leg with the leg of a newly deceased African man who is buried in a nearby church cemetery. Waking, the (racially white) verger finds

 $^{^{\}rm 37}$ Farmer, Fevers, Feuds, and Diamonds, 316.

³⁸ Mention of people jostling to be heard, written down verbatim, and being included in his book before or after specific others' stories, is especially evident in Sophronius's *Miracles* of Ss. Cyrus and John.

³⁹ On its legacy in art history, see, for example, Kees Zimmerman, ed., *One Leg in the Grave Revisited: The Miracle of the Transplantation of the Black Leg by Saints Cosmas and Damian* (Eelde, Netherlands: Barkhuis, 2013).

himself with a healthy black leg, and the African's tomb, opened, verifies the switch. As this healing story was repeated and illustrated across the centuries, its implied purpose was to praise God for healing saints who do such obviously strange and wonderful things.

But confronted with the long persistence of this tale in religious healing accounts, especially considering Cosmas and Damian's global popularity still today, 40 I hear Paul in my head asking the obvious question: How is this good for the man who died? The African, buried in a churchyard, was apparently also a Christian. If the saints are so amazing that they can raid grave sites with impunity and surgically switch out legs without pain, why didn't the anargyroi heal the African—or maybe even bring him back to life? As Micah James Goodrich has recently charged in an eloquent critique, this tale, with its "nonconsensual seizure of a Black man's body for the benefit of a white man," is "as pseudo-historical and fantastical as it may be ... a reflection of a medieval medical imaginary that deliberately relies on racial violence to effect a salvific cure."41 Indeed, in the complex racial and locational diversities that characterize the origin debates over who Cosmas and Damian were (if they existed at all, of course), even the earliest texts that suggest them as racially Arabs seem soon hijacked into multi-institutional imperially financed sites in Constantinople and Rome, with prioritized medical care normalizing the race of whoever's voice finds the most eloquent painter and publisher. Paradoxes are not without deeply disturbing associations. Holy healer stories can be used all too easily for unholy ends; this too is history. This too Farmer constantly reminded his readers, as his books and bedside teaching parsed out stories of rights and wrongs, of places and cases of structural violence that were, as he told the

⁴⁰ For the intersection of these *anargyroi* with modern medicine today, see, for example, Jacalyn Duffin, *Medical Saints: Cosmas and Damian in a Postmodern World* (New York: Oxford University Press, 2013). See also Jillian Harrold, "Saintly Doctors: The Early Iconography of SS. Cosmas and Damian in Italy," PhD diss, University of Warwick, 2007.

⁴¹ Micah James Goodrich, "Medical Violence and the Medieval 'Miracle of the Black Leg,'" *Synapsis* (2020), hmedicalhealthhumanities.com/2020/10/08/medical-violence-and-the-medieval-miracle-of-the-black-leg/.

New Orleans Bishops, "inextricably linked in history—and also in my own recent experience." 42

Conclusion

In suggesting that theological ethics might envision the late Dr. Paul Farmer as an *anargyros*—a holy but often very strange and eccentric healer model based in the religious history of late antiquity—I purposely invite a light-hearted image into conversations about philosophical-ethical complexity and liberation theology. The anargyros model is by no means the only possible model for connecting these three themes in Farmer's work with pre-modern Christian, theological, or ethical history. Indeed, Farmer's health justice ethics might more logically appear to fit historic Christian texts such as Basil of Caesarea's fourth-century sermons, which preached radical divestment and material equity and condemned cancerous systemic debt bondage. Or we might think we hear Paul in Gregory of Nyssa's and Gregory of Nazianzus's sermons mandating social welfare and hands-on attention to deformed, homeless beggars on the basis of divine incarnation, philanthropic compassion, and equal human rights.⁴³ These are the commonly cited ancient voices in occasional papal documents that connect patristic history with liberation theology, environmental ethics, and Catholic social thought. 44 Such homiletic texts may resonate more than the anargyroi healings for structured theological ethics in the preferential option of health care for the poor.

I have left Basil and his contemporary homiletic family and friends out of this discussion here because they are, fundamentally, prescriptive. As useful as such writings may be for faith-based social models today, they are

⁴² Farmer, "Health, Human Rights, and the Corporal Works of Mercy," 1.

⁴³ Discussed at length in Susan R. Holman, *The Hungry are Dying: Beggars and Bishops in Roman Cappadocia* (New York: Oxford University Press, 2001).

⁴⁴ See, for example, Brian Matz, Patristics and Catholic Social Thought: Hermeneutical Models for a Dialogue (Notre Dame: University of Notre Dame Press, 2014); and Johan Leemans, Brian J. Matz, and Johan Verstraeten, eds., Reading Patristic Texts on Social Ethics: Issues and Challenges for Twenty-First Century Christian Social Thought (Washington, DC: Catholic University of America Press, 2011).

texts and voices chiefly about what one *ought to do*. The *anargyroi* stories, in contrast, purport (whether we believe them or not) to carry the voices of ordinary poor, sick people and their healers and neighbors on what actually happened, however illogical, subversive, outrageous, or disturbing. Such voices matter in global medical ethics related to religion because people around the world today continue to give credit to non-rational healings, and to tell stories that may be "rational" when understood historically within particular cultural cosmologies.

Laced with humor, like a beloved trickster committed to paradoxical and subversive justice, the anargyros, like the late Dr. Paul Farmer, enacted healing that affirmed what it could mean to be fully human. And like the anargyros, it was Paul's methods, as a "divine man and strenuous worker," that often upend our assumptions about resource and energy limits (including our own) for "staff, stuff, space, and systems" in the economic logic of health care delivery. Even detached from miracles, the tradition of the ancient holy healer and their patients' narratives speaks to the theological ethics of Farmer's work and thought through the three values discussed in this essay: their practice of the corporal works of mercy, their recognition and (sometimes) affirmation of diversity, and their attention to the historical voices of those "unlikely to have the chance" to otherwise speak to efforts for health care justice. Such stories, like Paul Farmer's life and work, continue to invite us to engage in practical, creative, radical system re-thinking for the sake of what in Judaism is called tikkun olam, the healing of the world.⁴⁵

⁴⁵ On *tikkun olam*, see for example, Gilbert S. Rosenthal, "Tikkun ha-Olam: The Metamorphosis of a Concept," *The Journal of Religion* 85, no. 2 (2005): 214–240; as it inspires modern global health efforts, see for example, Peter J. Hotez, "Science Tikkun: A Framework Embracing the Right of Access to Innovation and Translational Medicine on a Global Scale" [Editorial], *PLoS Neglected Tropical Diseases* 13, no. 6 (2019): e-0007117, doi.org/10.1371/journal.pntd.0007117. See also Paul Farmer, "Haiti's Wretched of the Earth," *Tikkun Magazine* 19, no. 3 (2004): 23–61.

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