

Magical healing in Spain (1875–1936): medical pluralism and the search for hegemony¹

Enrique Perdiguero

Was magic an essential part of the Spanish population's cultural repertoires for understanding and dealing with illness during the late nineteenth and early twentieth centuries? By 'cultural repertoires' is meant 'the ways in which people have conceived and explained illness and reaction against illness'.² For various reasons that will be discussed, the question is difficult to answer categorically, but in attempting to do so it is necessary to move beyond the typical generalizations found in the history of medicine. Like the other contributors in this volume, this chapter aims to explore the presence of magical elements in everyday life during the modern period, and thereby broaden the usual location of magical practice in the medieval and early modern periods.³ The chronological focus of the following discussion is defined by two major political events: the restoration of the monarchy and the outbreak of the Civil War.⁴ These years can be described as a period of far-reaching transformation in Spanish society. From a demographic point of view the most significant development was what can be described as the 'sanitary transition'. From a social, economic and political perspective the perception of the so-called 'social issue', which showed the weaknesses and contradictions in the socio-economic system, became sharper. The loss of Spain's last colonies in 1898 shook the national conscience. The country saw itself as being backward, and calls for national renewal became commonplace. In this situation social medicine claimed an important role for itself in the regeneration of the country.⁵

To assess the relevance of magic in the popular discourse and interpretation of illness it is important to consider the structure of health care more generally. This is a topic that still needs more in-depth research.⁶ Nevertheless, during the period concerned we can identify two main forms of collective medical care: charity provided by authorities and individuals, and so-called 'friendly societies'. Charitable health care funded by public authorities (municipalities, provinces and the central government) covered home and institutional help for those defined as poor and who clearly had no means to take care of themselves. But the authorities' provision for the

majority of the rural population was described as clearly inadequate by general practitioners, who kept demanding its nationalization. 'Friendly societies' were more or less widespread depending on regions. They were very important in Catalonia as a result of its large industrial workforce.⁷ Another arrangement particularly adopted by middle-class families was to pay a pre-determined fee for general medical cover. The popularity of such self-help strategies underlines the fact that despite efforts made in some quarters, a national medical welfare system failed to emerge before the Civil War.⁸ Only maternity was covered by national social protection after 1931 and only after hard negotiation.⁹ Although it would be too simplistic to say that the lack of a collective welfare system explains the continuation of magical means of dealing with illness, I do think there is a link, especially considering how this reality was used by general practitioners to justify both their attacks on popular medicine and their calls for the nationalization of medical provision. This situation has been described by one historian as the 'health care conflict'.¹⁰

The problem of sources

As the editors of this volume have already highlighted in some of their work, two key sources for understanding the role of magical healing during the period are folklore surveys and newspapers, though their use is fraught with problems.¹¹ The following discussion is based largely on the first of these two sources, with care being taken to ensure that the folkloric material used was collected in the period concerned.¹² Only occasionally are journalistic sources employed, and mostly in the restricted context of my own research on the local press of the town of Alicante.¹³ The study of the subject will undoubtedly benefit greatly from a greater awareness of the newspaper archive. Folklore sources for the period are abundant.¹⁴ The rise of the folklore movement, which spread through various areas of Spain, was complex and had different roots.¹⁵ The most significant attempts to involve Spanish intellectuals in the study of folklore were made by the group formed around Antonio Machado y Álvarez (1846–93) in the city of Seville. Their initiative only had an ephemeral success, although it acquired some relevance in Andalusia, Extremadura, Galicia and Madrid.¹⁶ Both the Machado y Álvarez group, and those whose approach was usually associated with nationalistic political beliefs, tried to find 'survivals' in popular culture.¹⁷ It is difficult, therefore, to assess whether their numerous collections of 'superstitions' accurately reflect widespread popular responses to illness, or whether they consist of 'rarities', which were recorded precisely because they were considered archaic remnants of belief.

This problem of interpretation has been faced by several researchers such as Ingrid Kuschick.¹⁸ Although her work, first published in 1989, was

meant to focus on 'the practices and conceptions of popular medicine in contemporary Spain' much of her discussion is based on folkloric, anthropological and medical writings from the early part of the century. But with the support of her own and others' field work she was able to contextualize and qualify the early ethnographic material. The result, though, is that her work tells us more about the situation of popular medicine at the beginning rather than at the end of the twentieth century. Another author who has analysed the problem of using folk sources to study cultural repertoires of illness is J. M. Comelles.¹⁹ One of his findings worth emphasizing here is the relevance he attributes to doctors as the main characters as far as ethnographic tasks are concerned. He sees them not only as folklore collectors but also as health professionals interested in fixing the cultural limits to their own health care activities. In practice this led to a whole range of medical discourses giving detailed descriptions of popular medical beliefs and action considered to be inferior or wrong. This kind of literature focused especially on mother-and-child health,²⁰ which makes sense considering the high infant mortality rates during that period.²¹ For the historian the problem posed by these sources lies in the preoccupation of medical authors to locate the world of 'popular beliefs' in the context of the 'irrational' supernatural, thereby ignoring other aspects of popular medicine considered less 'superstitious' that were also part of the cultural repertoires about illness.²²

An examination of the sources discussed above certainly proves the significant presence in Spanish society of diverse types of healers who applied magical procedures, although the data is rarely sufficient to conduct an in-depth analysis of the totality of their business. The existence of what we would nowadays call, using a rather unfortunate expression, 'culture-bound syndromes' is also evident.²³ Most of the diagnostic and therapeutic methods that will be discussed below also reveal the presence of medico-religious elements related to miraculous saints, pilgrimages and sanctuaries. However, I have not treated this matter in a systematic way, because this would lead us to another field of study that, albeit concomitant with our research, requires more dedicated attention. Obviously, it is often difficult to establish boundaries between more clearly religious elements and magical ones, simply because the population did not necessarily establish them.

Folk healers²⁴

It is difficult to use a single label to define the people who, despite not being health professionals, were seen by the population as a therapeutic alternative, and whose expertise included, in some way or other, the use of magic. The historiography has paid attention to this problem in recent years,²⁵ but it is far from easy to transfer words and concepts from one cultural context to another. In Spain, the most commonly used word for folk healers was and is

curandero. However, under the heading of *curandero*, folklorists and medical authors referred to various types of practices: healers who treated a wide range of illnesses; people specialized in curing specific culture-bound syndromes; healers of sprains, herbalists and bone-setters. The latter three groups mostly used empirical procedures, though magical elements were commonly present. The label of *curandero* was also given to other individuals who not only diagnosed and cured, but also practised fortune-telling, spiritualism and *sonámbulo* – which in Spanish not only equates with the English term for sleep-walking, but also concerned the possession of mesmeric powers.

In the context of health professionals' efforts to achieve hegemony in health and illness management, the label of *curandero* was the most often used to refer to an unspecified reality considered as a 'moral illness that swarms everywhere like a confederate indestructible germ which poisons all it touches'.²⁶ *Curanderos* were regarded as people who had curative skills derived from their 'special gift', that is, as people whose activity was based not on their knowledge but on their 'power'. This feature additionally made it possible to distinguish them from other rivals of doctors who were labelled as 'intruders' or 'charlatans', although the limits separating them from *curanderos* with a 'gift' are blurred at times.²⁷

Reports of the population's frequent resort to folk healers are commonplace in medical literature, but it is difficult to find examples with enough data to draw a detailed profile of their characteristics. One exception is the case of José Cerdá Baeza, the 'Baldaet',²⁸ who practised his profession in Alicante.²⁹ He claimed to have a 'gift' and cured using 'magnetized' water. The reason for our detailed knowledge of him is because we have the reports of his prosecution. Although initially found guilty he was finally acquitted. Another example is that of the so-called 'apostles', three healers who became very famous in Madrid in the year 1884, to such an extent that the large number of people who wanted to be treated by them generated law-and-order problems.³⁰ As they stated at their subsequent trial, they cured by praying over the sick and prescribing water over which they had also said some prayers. In mitigation they asserted: 'They do not think water acquires any medical virtues or any new properties that distinguish it from ordinary water as a result of this process, pointing out that they only give it to comfort the ill, or as a souvenir for the spirit, having sometimes resorted to this method after having unsuccessfully applied other techniques'. They were less fortunate than El Baldaet, as the Supreme Court of Justice sentenced them to thirty days' imprisonment.³¹ However, their activities can still be traced after this sentence, since they went on to treat ill people using the same curative method and even, after offering their services in several cities, moved to El Baldaet's territory, the city of Alicante, which gave rise to conflict between them due to the similar healing methods they used.³² They also performed

their activity in other localities in the province of Alicante, in some of which similar *curanderos* practised their profession.³³

This type of urban *curanderos/as* was the one that received the most attention in medical journals. This was because they were seen as a major threat.³⁴ Nevertheless, references are not too illustrative about their practice, though it seems they treated all kinds of ailments, like the healer who settled in the city of Burgos, who said he could diagnose because 'he saw inside the human body, the same as one can see the water in a crystalline glass', or the *saludadora* who was recorded as practising in Madrid in 1887.³⁵ The word *saludadores* or *saludadora* did in fact refer to a more specific type of folk healer whose 'gift' usually concerned the cure of rabies, mainly using the saliva or the breath. In the eighteenth century such healers formed part of the municipal health staff.³⁶ In the period under study there is abundant evidence of their continued popularity as folk healers, as is proved by the performance in Orihuela (Alicante) in 1887 of the *saludador* called 'tío Matamadres', which ended in the death of a person suffering from hydrophobia.³⁷

Tantalizing but frustrating scraps of information regarding healers can be found in a series of articles written in the 1880s for the professional journal *La Fraternidad Médico-Farmacéutica* by a doctor working for the Alicante Town Council, Esteban Sánchez Santana.³⁸ Santana mentions, for example, an episode of mental derangement suffered by a woman in Alcoy (Alicante) after another woman with 'very bad antecedents' had given her 'a potion to cure the spell under which the ill woman was supposed to be'.³⁹ There are a few lines about a homicide caused by an accusation of bewitchment made by an old lady in the locality of Teya (Barcelona).⁴⁰ Folk healers mentioned include 'la Pelá', a specialist in cartomancy, and various *curanderos*, among who were specialists in all kinds of spells, including love charms.⁴¹ However, a clear and complete overview of healers will not be available until further newspaper and periodical research is conducted for other areas of Spain. All the same, it is worth observing that the information available suggests that urban *curanderos* were not part-timers but made their living from healing, even though they sometimes had no fixed fees and only received what was known as the *voluntad*, voluntary payment in cash or kind.⁴² The situation is less clear regarding rural *curanderos*.

Health professionals also reported on the existence of a specifically female category of folk healer who dealt with mother-and-child health. Although it is indeed mentioned, the use of magical procedures does not seem so important in references to this type of folk healers.⁴³ The main concern about these healers was their interference, based on the ignorance doctors attributed to women, during the birth⁴⁴ and, in particular, what was considered to be a very bad influence in the diet of children still on milk.⁴⁵

In Catalonia, the huge folklore compilation made by Joan Amades provides a detailed and thorough study of a wide range of healers. He makes a

distinction among those who really believed in their power and charged nothing for their performance and those who earned their living from healing. In Amades's opinion, both types were widespread, although he pays attention to those who considered their healing capacity as a 'gift' they obtained through different procedures. Amades classifies them in several groups depending on the activities they performed, though no precise information is provided about their relative importance and we cannot deduce how often the population resorted to them.⁴⁶ The fact that males prevailed among these folk healers is striking. As well as *saludadors*, who often did far more than cure rabies, there were *setens* (seventh sons); *xucladors* who were born on Saint Judas's Day and had the power to heal wounds by sucking on them; *endevinetes* born with the power to see inside the body to cure it; *caterins*, born on St Catherine's Day, who healed burns; *oracioners*, whose healing power was in proportion to the number of prayers they knew; *senyadors* who as well as citing incantations made the sign of the cross and marked the patient's ill area; *Samaires* who specialized in saying prayers that either gave luck or warned of the arrival of illness, and which could also be used negatively to make people emaciated.

The work by Amades is complemented by another Catalan folklorist, Cels Gomis.⁴⁷ He insists on the fact that the population trusted folk healers much more than doctors and cites numerous examples of these predominantly male healers' activities.⁴⁸ However, Gomis's work places more emphasis on the Catalan population's belief in the figure of the *bruixa* (female witch)⁴⁹ in the final years of the nineteenth century and the early years of the twentieth century. The witch was, according to the material collected by Gomis, a figure who could cure as well as cause illness. In fact, the main activities attributed to witches during the period under study in this chapter were those attributed to cunning-folk. He also underlines that all social classes asked for their help, including the aristocracy.⁵⁰

The presence of these women who could ambivalently cause and fight illness is common in the writings of other authors. Witches – *sorguin/sorguiñak* in the Basque language – received special attention in the works of Barandiarán, the renowned Basque ethnologist.⁵¹ Caro Baroja also dedicates a chapter of his well-known work to the role of Basque witches during the second third of the twentieth century.⁵² As well as 'witches', *astue*, or cunning-folk, also practised as *curanderas*.⁵³ *Saludadores* are also mentioned in the Basque region.⁵⁴ Barriola points out that the presence of *curanderos* who used spells and other magical procedures were more visible in the rural milieu of the region and says that the area where they performed their activity was very restricted, while empirical *curanderos* with the ability to massage, make poultices and prescribe potions were the best known and usually lived on their curative activities.⁵⁵

Turning to Alto Aragón, the area of the region nearest to the French

border, we find scattered data about *curanderos* whose 'gift' was transmitted as an inheritance, and was usually complemented by manual procedures or those based on the preparation of poultices or herbal remedies.⁵⁶ One of these families of healers was 'los Castros', who specialized in sprains, fractures and dislocations, and who transmitted their power from parents to children, but only through the male line.⁵⁷ Although this type of healer is said to have been the most widespread in this northern part of the country, additional cases are mentioned of healers whose diagnostic and therapeutic methods were hardly empirical and were based above all on the 'gift'. One of them was Baltasar Ena Mosené, from Ayerbe, who practised during the first half of the twentieth century and who diagnosed by touching. He attributed his 'gift' to an apparition he saw when he was a child. His therapeutic methods did not rely much on magic and he preferred using massage. Others, like Maria de Gregorier de Curtillas, who practised in the early years of the century, claimed their saliva had magical properties.⁵⁸

For Galicia, one can find numerous references to similar folk healers in various writings.⁵⁹ However, as in previous cases, these references are usually brief comments that only enable us to state that the role of these healers was very important in dealing with illness. However, in addition to the wealth of information provided in Victor Lis Quibén's work about healers who cured specific ailments, Lisón Tolosana's anthropological work contains a vast amount of information on the wider activities of folk healers in Galicia during the second half of the twentieth century, thus giving us a counterpoint which is revealing about the situation in previous decades.⁶⁰ In particular Lisón Tolosana provides a very detailed portrait of *bruxas* (witches) and *sabias* (cunning-women), which highlights the ambiguities reflected in their capacity to cause harm and illness as well as cure it – especially the *sabias*. These are mostly women, though some men perform these activities too. The ethnography-based description of the late 1960s and early 1970s characterizes them as women of a certain age who dealt with 'culture-bound syndromes'. Their therapeutic methods combined empirical and magical elements and, although the transmission of knowledge and therapies usually took place within the same family via women, what really matters once again is the fact of having a 'gift'. In the Galician material there is an emphasis placed on the ambiguity involved in the categories of *bruxas* and *sabia*. The latter tried to show that they were not harmful witches, but did not succeed completely. According to Lisón Tolosana, not every *sabia* was considered a witch, but every witch was considered a cunning-woman. Regarding the 119 examples of witches (twenty-seven males and ninety-two females) analysed by Lisón Tolosana, it is important to highlight that many of them started their activities while they were emigrants in South and Central America and they continued to practise their specialities when they came back to their home country.

Information is not so abundant for other areas of Spain, although data

on female specialists known as *santiguadoras* in the Canary Islands is very detailed.⁶¹ Otherwise there is some relevant source material regarding Asturias, Extremadura, Madrid and Andalucía.⁶² Broader folkloric compilations about the whole of Spain, which cover the first four decades of the twentieth century, also inform us of the presence of fortune-tellers and bewitchers.⁶³ As explained above, it is difficult to give an accurate assessment of the degree to which people resorted to these types of healer, but judging by the importance the sources place on illnesses that could be caused by other people and which, therefore, required the services of this type of specialists for their treatment, the role of these healers must have been a significant one. The next section is dedicated to those ailments.

The illnesses

The evil eye and similar ailments

In all the sources that have been consulted a lot of attention is paid to ailments with a 'personalistic' etiology, in the sense used by the anthropologist George Foster.⁶⁴ The main examples are the evil eye and demonic possession (*meigallo*, *endemoniados* or *endemoniats*). Once again, it is difficult to assess whether this great attention is in direct proportion to the relevance these ailments had in the popular cultural repertoires concerning disease, or whether they were deliberately collected and highlighted because they were good examples of the presence of irrational elements in the popular world. This is particularly evident in material collected by doctors and folklorist doctors. Enrique Salcedo, writing in the 1890s, dedicated a long chapter to the evil eye in which detailed explanations were given for the impossibility of its reality from the point of view of medical science.⁶⁵ The popular resort to *curanderos* for a cure was also associated with high child mortality rates – a problem health professionals were preoccupied with at the time.⁶⁶ However, the fact that a number of later anthropological studies have highlighted the importance of the evil eye and possession in understanding illness among the Spanish population of the second half of the twentieth century seems to suggest they were also relevant in the period concerned.⁶⁷

Willem de Blécourt has underlined the inconsistency of studies in which the evil eye is isolated from research on witchcraft as well as the fact that explanations about this ailment are insufficient, even in the largest and most thorough works dedicated to it.⁶⁸ In the abundant Spanish sources there is a clear tendency to link evil eye and witchcraft. They also reveal numerous regional terms and variations with imprecise limits, which often make it difficult to distinguish culture-bound syndromes. *Mal de ojo* or *aojo* were generally used in those areas where Spanish was the only language spoken by the population, as in Extremadura and the Canary Islands, for example.⁶⁹ In Catalonia, however, they spoke about the *ullpress* within the

somewhat larger concept of the *mal donat*, while *begizkoa* was used in the Basque Country and *mal de ollo* in Galicia, where considerable polysemy (multiple meanings) exists.⁷⁰

The social relevance of the evil eye in the period is well attested to in a survey conducted on birth, pregnancy and death by the section of Moral and Political Sciences of Madrid's *Ateneo* in 1901–2.⁷¹ Using the materials collected, not all of which were published at the time, Rafael Salillas produced a monograph that was entirely dedicated to the evil eye, in which he provided abundant information.⁷² However, his comments on the prevalence of the belief are not in keeping with other folkloric compilations. This was because Salillas based his study exclusively on the answers received by the *Ateneo*, which led him to say incorrectly, for example, that the evil eye was very unusual in the Basque Country, Navarre, Aragón and Valencia.⁷³ Once again the problem of sources is revealed.

Although the evil eye could affect people of all ages, as well as animals and crops, most reports say that children were the most likely to suffer and die from it. Frequent discussions have taken place about whether the *aojo* was voluntary or involuntary, but what is most important to highlight is that, when trying to find possible causes of the illness, the population often believed that some people deliberately caused it using the power of the sight. It is the bewitchment component that is most important. Envy as an expression of personal conflicts in predominantly rural areas – which does not mean the belief was excluded from the urban milieu – and its materialization in the *aojo* or the *mal donat* are often present in many of the descriptions. The *aojo* was most frequently caused by women, who were commonly described in terms of the classic witch-stereotype – old, marginal, ugly and poor. Gypsy women were frequently cited as a habitual source of evil eye.

Given that the cause was considered supernatural, the elements used to cure and prevent it also incorporated the supernatural. Thus a wide range of amulets and charms were used, most notably the *higa* – where the thumb rises up between the ring and middle fingers, and the *evangelios*, a little cloth bag containing some verses from the gospels written on a piece of paper. The rituals used for the diagnosis of the ailment are also varied, but the most frequently cited is that in which oil drops are poured in a container with water, the subsequent behaviour of the drops telling whether the evil eye was present or not. The number of drops and what the oil is supposed to do are changing elements. What is perhaps most relevant in this context is that, despite the 'personalistic' etiology, it is apparently not always important to identify the person who had caused the evil eye. On many occasions it sufficed to have evidence of the fact that the illness was due to evil eye. On some occasions, though, it was indeed important to know who was responsible, as in some cases reported in Catalonia or Galicia.⁷⁴

What leads to suspicions of evil eye is the exhibition of a series of very

varied and even non-specific symptoms. The reports by medically educated people tend to associate the symptoms with a recognizable medical condition. Lis, for example, associated evil eye with deficiency diseases like rickets.⁷⁵ However, it is precisely the lack of specific symptoms that makes it difficult to distinguish evil eye from other culture-bound syndromes that sometimes present peculiar features but which, according to other accounts, represent a continuum in which it is difficult to differentiate one ailment from the rest. On the basis of his clinical and ethnographic experience, Lis himself often insists on this overlapping problem. He refers, for instance, to the *mal do aire* as a belief that is 'most widespread and vulgar, the one that is due to the most causes and the one with the widest range of symptoms'.⁷⁶ This polysemy often appears when it comes to giving names to this and various similar ailments. Take the *enganido*, for example.⁷⁷ This refers to an illness that is caused by the air emanating from objects, animals or people, which always has a supernatural origin based on the deliberate desire to cause harm. It is true that such etiologies are very wide; anything from pregnant women to the moon can trigger physical decay in others.⁷⁸ The moon is actually held to be responsible for a variety of this type of ailment, such as the *alunamiento* ('moonning') in Extremadura, which has been the subject of recent anthropological research.⁷⁹ Salillas also reflects on the problems of overlap between evil eye and similar 'entities' which had assumed a relevant role in various Spanish regions. This happened, for example, with the *mal de filu* in Asturias, in which the etiological process is similar to that of evil eye, but whose symptoms were apparently considered more serious.⁸⁰ The label used to name it refers to the thread with which the potentially ill person was measured in order to diagnose the presence of the ailment.⁸¹

Prevention, diagnosis and cure of these ailments, in which other people's will to cause harm may be present, involved the use of numerous amulets as well as rituals and avoidance behaviour. It is important to underline here the meticulousness with which some doctors illustrated, as richly as possible, every single aspect of popular actions linked with these illnesses. The aim of accumulating bizarre descriptions of the way the population responded to these ailments considered as 'imaginary', was to focus on the antagonistic relationship between the scientific progress doctors wanted to demonstrate and the perceived backwardness and gullibility that characterized popular beliefs and behaviour.

The endemoniados

Apart from the illnesses caused by the look or the influence of others, in which the bewitcher-victim-unwitcher triangle was more or less visibly present, there are others that could also be attributed to possession by demons or the spirits of the dead. This phenomenon, which is largely documented from the anthropological point of view in the Galicia of the late 1960s and the

early 1970s also appears in various sources from the late nineteenth and early twentieth centuries.⁸² It is also recorded in other regions like Aragón.⁸³ An outstanding example is that concerning the chapel of Zorita del Maestrazgo (Castellón), located in the intersection of the Valencia, Aragón and Catalonia.⁸⁴ Lisón mentions other sanctuaries and chapels that attracted those who considered themselves possessed: Santa María de Cervera (Lerida, Catalonia), Santa Orosia de Jaca, Torreciudad and the Monastery of Cillas (Huesca, Aragón), and finally the Santo Cristo of Calatorao and the Corporales of Daroca, both in the province of Saragossa.

Although Lis also highlights the overlapping between the *meigallo* or *ramo cativo* (the variant of the *endemoniados* in Galicia), and similar ailments we have already referred to above while dealing with evil eye, the truth is that what characterized the *endemoniados* was the fact that victims suffered the intrusion of demons or spirits, although that intrusion could be induced by another person, as with the evil eye. This is clearly explained in the sources, as, for instance, in some of the accounts from the late 1920s about the *endemoniats* of the sanctuary la Balma, whose journalistic structure confers upon them great value in accordance with recent re-evaluations.⁸⁵ The cause is not always directly related to individuals. Thus certain places (crossroads, paths, forests), certain times (around midnight), or simply on occasions when fear was felt, were circumstances believed to facilitate the invasion of demons or spirits. The solution to possession was often sought in visiting certain sacred sites, such as sanctuaries, chapels and monasteries, or *corpiños* as they are known in Galicia.⁸⁶ The name of *pastequeiros* was given to the experts in exorcising in Galicia (the exorcism they used being called *Pax tecun*). A thorough study was published by Lis about those who performed their activities in Santa Comba and San Cibrán.⁸⁷ They were all males. This was not always so, however, as shown in the case of the *caspolinas*, the female 'witches' who were in charge of exorcism ceremonies in la Balma (Zorita del Maestrazgo). These women took their name from Caspe (Saragossa), the locality they were supposed to come from, though they were actually native of other areas in Aragón.⁸⁸ The sources often refer to the stronger incidence of possession in women. Symptoms included restlessness, the tearing of their clothes, and the use of strange signs, such as the tying of bows.

The resort to sanctuaries and sacred sites in order to 'take out' the demons from the bodies of the 'possessed' easily fits in with wider popular religious behaviour, namely commending oneself to certain holy images or visiting sacred sites in search of a cure. The purely religious component is obviously more evident than the magical one here. In many of these cases, the cause of the illness was not necessarily considered 'supernatural', though God's power to send illness was widely acknowledged. This is the reason why I have not treated this topic, which, as has already been explained, shows very peculiar features and thus deserves a separate analysis.⁸⁹

Other diseases cured by supernatural means

The medical and folkloric sources also describe many other magic-based therapeutic procedures dedicated to treating diseases whose etiology was not usually popularly associated with the supernatural. The ones that were by far the most frequently cited concern children's hernias, erysipelas and warts, though many other illnesses could be mentioned. The procedures used to cure skin conditions such as warts and erysipelas were highly varied.⁹⁰ We find more consistency, however, in the numerous references to the healing methods for hernias.⁹¹ The ritual, which consisted of passing the ill child through a crack in a tree, the child being given and collected by people with names such as Juan (John), María (Mary) or Pedro (Peter), always had to be performed during the night of St John. After it had been performed, reciting the corresponding prayer, of which numerous variations existed, the tree's later 'behaviour' was the element that usually showed whether the healing had taken place or not. This is yet another example of the abundant presence of sympathetic magical elements in popular therapeutic procedures.

All the available evidence undoubtedly confirms the presence of considerable belief in supernaturally-inspired illnesses and the resort to magical diagnostic and therapeutic means of cure during the late nineteenth and early twentieth centuries in Spain. Their significance in relation to other medical alternatives is more difficult to assess. However, it can be deduced from doctors' efforts to fight both folk healers and folk beliefs that they represented an important hindrance to the hegemony doctors wanted to achieve in the management of health and illness. Unfortunately, at present the sources we have used are insufficient to gain better knowledge of the reasons for the presence of magical elements in the management of health and disease, and of the characteristics both of healers and of the population who visited them. Many questions and issues remain unresolved. A sharper profile, for example, needs to be drawn between the practices of urban and rural *curanderos*. More attention must be dedicated to figures like the various kinds of cunning-women and somnambulists, who appear only tangentially in the documents we have consulted, and whose relevance elsewhere has been highlighted in other studies like those by the editors of this volume. More generally, much more research is required regarding questions of gender, which will shed light on women's fundamental role in health and disease management. Moreover, in a country like Spain, regional diversity must definitely be taken into account. Reaching general conclusions like those provided by Owen Davies for England is simply impossible considering the basic research material that has been considered so far for Spain.⁹² It remains for the future to try and learn why the magical element had acquired more or less relevance within the cultural repertoires applied by the Spanish population in dealing with illness. This will only be achieved when more thorough case studies provide

us with the context required to understand what really happened. The general survey offered in this chapter can only provide an initial guide to this complex matter.

Notes

- 1 I wish to thank Victor Pina for his translation into English and Josep M. Comelles for his help with the sources.
- 2 Marijke Gijswijt-Hofstra, Hilary Marland and Hans de Waardt, 'Introduction: Demons, Diagnosis and Disenchantment', in Marijke Gijswijt-Hofstra, Hilary Marland and Hans de Waardt (eds), *Illness and Healing Alternatives in Western Europe* (London, 1997), p. 1.
- 3 We must make clear at this stage that, the same as in other countries, this task is still far from complete in Spain. Research on magic and witchcraft in the early modern period has been abundant in recent years after the influence exerted one decade before by a work like that written by Julio Caro Baroja, *Las brujas y su mundo* (Madrid, 1961), as is attested by Ricardo García Cárcel in the prologue to one of the works belonging to this tradition: María Tausiet, *Ponzoña en los ojos. Brujería y Superstición en Aragón en el siglo XVI* (Zaragoza, 2000), pp. 7–17. In the specific case of the consideration of the supernatural when studying the conceptions of illness and the ways to face it, an additional element that makes the task more difficult in Spain is the excessive compartmentalization among disciplines such as History, History of Medicine and Social and Cultural Anthropology, which surely hinders fluent communication.
- 4 A standard account of this period can be found in Miguel Martínez Cuadrado, *Restauración y crisis de la monarquía (1874–1931)* (Madrid, 1991).
- 5 Juan Luis Carrillo edited a monographic study about the relationship between the 1898 crisis and medicine which was published in *Dynamis* 18 (1998) 21–314. See also the seminal work by Esteban Rodríguez Ocaña, *La constitución de la medicina social como disciplina en España (1882–1923)* (Madrid, 1987), pp. 9–51.
- 6 For overviews of rural health care from the point of view of health professionals, see Agustín Albarracín Teulón, 'La asistencia médica en la España rural durante el siglo XIX', *Cuadernos de Historia de la Medicina Española* 13 (1974) 123–204; Francisco Villacorta Baños, 'La opinión médica rural en 1924: resultados de una encuesta', *Estudios de Historia Social* 24–25 (1983) 165–85. See also Esteban Rodríguez Ocaña, 'Medicina y acción social en la España del primer tercio del siglo XX', in Carmen López Alonso (ed.), *4 siglos de acción social. De la beneficencia al bienestar social* (Madrid, 1985), pp. 246–62 and idem, 'La asistencia médica colectiva en España, hasta 1936', in José Álvarez Junco (ed.), *Historia de la acción social pública en España. Beneficencia y Previsión* (Madrid, 1990), pp. 321–59.
- 7 Rodríguez Ocaña, 'La asistencia médica', p. 331.
- 8 Rodríguez Ocaña, 'La asistencia médica', pp. 350–5.
- 9 Rodríguez Ocaña, 'La asistencia médica', pp. 336–50.
- 10 The expression is used in Llorenç Prats, *La Catalunya rànica. Les condicions de vida materials de les classes populars a la Catalunya de la Restauració segons les topografies mèdiques* (Barcelona, 1996), pp. 210–36.
- 11 Willem de Blécourt, 'The Witch, her Victim, the Unwitcher and the Researcher: The Continued Existence of Traditional Witchcraft', in Bengt Akarloo and Stuart Clark (eds), *Witchcraft and Magic in Europe: The Twentieth Century* (Philadelphia, 1999), pp. 158–62; Owen Davies, 'Newspapers and the Popular Belief in Witchcraft and

- Magic in the Modern Period', *Journal of British Studies* 37 (1998) 139–65; idem, *Witchcraft, Magic and Culture 1736–1951* (Manchester, 1999), pp. 168–74.
- 12 The dates of publication are, however, wider. Especially the Civil War (1936–39) acted as a distorting element and materials collected in the late 1920s or 1930s did not see the light until the 1940s or even much later.
 - 13 Enrique Perdigüero, 'La "Fraternidad Médico-Farmacéutica. Revista Quincenal de Medicina, Cirugía y Farmacia" (Alacant, 1886–1888): la lluita per l'hegemonia en la gestió de la salut y la malaltia', in *Llibre d'Actes. Catorzè Congrès de Metges i Biòlegs de Llengua Catalana* (Palma, 1995), vol. 2, pp. 630–6. See also Agustín Albarracín Teulón, 'Intrusos, charlatanes, secretistas y curanderos. Aproximación sociológica al estudio de la asistencia médica extracientífica en la España del siglo XIX', *Asclepio* 24 (1972) 323–66.
 - 14 An extensive but incomplete relation can be seen in Joan J. Pujadas, Josep Maria Comelles and Joan Prat, 'Una bibliografía comentada sobre Antropología Médica', in Michael Kenny and Jesús M. De Miguel (eds), *La Antropología Médica en España* (Barcelona, 1980), pp. 323–53.
 - 15 See, for example, Angel Aguirre Baztán (ed.), *La Antropología cultural en España. Un siglo de Antropología* (Barcelona, 1986); idem, *Historia de la antropología española* (Barcelona, 1992); and Carmen Ortiz García and Luis Ángel Sánchez Gómez (eds), *Diccionario histórico de la antropología española* (Madrid, 1994).
 - 16 Encarnación Aguilar Criado, *Cultura Popular y Folklore en Andalucía (Los orígenes de la Antropología)* (Seville, 1990).
 - 17 See the characterization of the 'ideal types' of the different scholars of folklore in the diverse Spanish nationalities in Joan Prat i Carós, 'El discurso antropológico y el discurso folklórico en el Estado Español: un ensayo de caracterización', in *IV Congreso de Antropología* (Alicante, 1987, unpublished).
 - 18 Ingrid Kuschick, *Volksmedizin in Spanien* (Münster, 1989). I have used the Spanish translation *Medicina popular en España* (Madrid, 1995). See pp. xv–xvi and 1.
 - 19 The author of numerous publications of which the following are of most interest: Josep Maria Comelles, 'Medical Practice and Local Knowledge: The Role of Ethnography in the Medical Hegemony', in Yasuo Otsuka, Shizu Sakai and Shigehisa Kuriyama (eds), *Medicine and the History of the Body* (Tokyo, 1999), pp. 261–83; Josep Maria Comelles, 'De las supersticiones a la medicina popular. La transición de un concepto religioso a un concepto médico', in Xosé Manuel González Reboredo (ed.), *Medicina popular e Antropoloxía da Saúde* (Santiago de Compostela, 1997), pp. 247–80; and Angel Martínez Hernáez and Josep Maria Comelles, 'La medicina popular. ¿Los límites culturales del modelo médico?', *Revista de Dialectología y Tradiciones Populares* 64 (1994) 109–33.
 - 20 Esteban Rodríguez Ocaña and Enrique Perdigüero, 'Ciencia y persuasión social en la medicalización de la infancia en España, Siglos XIX–XX', Practices of Healing in Modern Latin America and Spain Conference (New York, 2001, unpublished).
 - 21 Elena Robles and Lucia Pozzi, 'La mortalidad infantil en los años de la transición: una reflexión desde las experiencias italiana y española', *Boletín de la ADEH* 15 (1997) 165–99.
 - 22 Comelles draws his attention to the lack of information about behaviours which were not considered erroneous: Comelles, 'De las supersticiones a la medicina popular', pp. 275–6.
 - 23 As has been highlighted from Medical Anthropology this label fell into the trap of considering Biomedicine as the 'golden standard'.
 - 24 Relevant for this whole chapter is the discussion carried out by Kuschick, *Medicina popular*, pp. 130–7. Although the study refers to the present, because of

- the materials used, some of its conclusions can more easily be applied to the early twentieth century.
- 25 See Gerda Bonderup, 'Danish Society and Folk Healers', in Robert Jütte, Motzi Eklöf and Marie C. Nelson (eds), *Historical Aspects of Unconventional Medicine* (Sheffield, 2001), pp. 76–7. As examples of papers about specific types of folk healers we can cite some works of the editors of this volume: Willem de Blécourt, 'Cunning Women, from Healers to Fortune Tellers', in Hans Binneveld and Rudolf Dekker (eds), *Curing and Insuring. Essays on Illness in Past Times: The Netherlands, Belgium, England and Italy, 16th–20th Centuries* (Hilversum, 1993), pp. 53–5; Willem de Blécourt, 'Witch Doctors, Soothsayers and Priests. On Cunning Folk in European Historiography and Tradition', *Social History* 19 (1994) 285–303; Owen Davies, *Cunning-Folk: Popular Magic in English History* (London, 2003); idem, 'Cunning-Folk in the Medical Market-Place During the Nineteenth Century', *Medical History* 43 (1999) 55–73; idem, *Witchcraft*, pp. 214–70.
 - 26 Enrique Salcedo y Ginestal, *Madre e Hijo. Doctrina científica y errores vulgares en Obstetricia y Ginecología* (Madrid, 1898), p. 23.
 - 27 'Intruders' were, in this context, people who were not, but passed themselves off as, health professionals; while *charlatanes* (quacks) are people who, with or without a title, devoted themselves to boasting about their healing skills. There was still another last group whom doctors were concerned about: the people who sold secret remedies, known as '*secretistas*'. See, about these different figures, Albarracín, 'Intrusos'. For example of studies in other countries see, among others, Roy Porter, *Health for Sale: Quackery in England, 1650–1850* (Manchester, 1989); Matthew Ramsey, *Professional and Popular Medicine in France, 1730–1830* (Cambridge, 1988).
 - 28 Catalan diminutive used to indicate a physical disability.
 - 29 Enrique Perdigüero, 'Healing Alternatives in Alicante, Spain, in the Late Nineteenth and Late Twentieth Centuries', in Gijswijt-Hofstra *et al.*, *Illness and Healing*, pp. 206–13.
 - 30 *El Siglo Médico* XXXI (1884) 446. Cited by Albarracín, 'Intrusos', pp. 363–4.
 - 31 *El Siglo Médico* XXXII (1885) 839. Cited by Albarracín, 'Intrusos', p. 364.
 - 32 *Buenas Noches* (Alicante), 13 Dec. 1886. Dr Zechnas (Esteban Sánchez Santana), 'Siempre lo mismo', *La Fraternidad Médico-Farmacéutica* 16 (1887) 241–2; *Buenas Noches* (Alicante), 6 May 1887; *La Fraternidad Médico-Farmacéutica* 24 (1887) 369–72.
 - 33 *El Constitucional* (Alicante), 7 Nov. 1885; *La Fraternidad Médico-Farmacéutica* 12 (1887), 177–8; Dr Zechnas, 'Siempre lo mismo', *El Semanario Católico* (Alicante), 26 May 1883, 307–8.
 - 34 The concern about the abundance of folk healers in Madrid is reflected by folklorists themselves using the medical press as their source. See Luis de Hoyos Sainz and Nieves de Hoyos Sancho, *Manual de Folklore. La vida popular tradicional en España* (Madrid, 1947), p. 228.
 - 35 Ramiro Ávila, *Medicina Rural*, 25 March 1882. Cited by Salcedo, '*Madre e Hijo*', p. 39; *El Siglo Médico* XXXIV (1887) 464. Cited by Albarracín, 'Intrusos', p. 365.
 - 36 See José Miguel Sáez and Pedro Marset, 'Profesionales sanitarios en la Murcia del siglo XVIII. Número, evolución y distribución', *Asclepio* 45 (1993) 73; Enrique Perdigüero and Josep Bernabeu, 'La asistencia médica pública en el Alicante del siglo XVIII: los médicos de la ciudad', *Canelobre* 29–30 (1995) 166.
 - 37 *La Fraternidad Médico-Farmacéutica* 16 (1887) 255–6.
 - 38 Perdigüero, 'La "Fraternidad Médico-Farmacéutica"'.
 39 *La Fraternidad Médico-Farmacéutica* 1 (1886) 16.
 40 *La Fraternidad Médico-Farmacéutica* 11 (1887) 176.
 41 *La Fraternidad Médico-Farmacéutica* 14 (1887) 209–12.

- 42 However, there are reports of clearly swollen fees like the 20 pesetas charged by the female healer from Alcoy for breaking a spell: *La Fraternidad Médico-Farmacéutica* 1 (1886) 16; *La Fraternidad Médico-Farmacéutica* 11 (1887) 176.
- 43 See for example, Salcedo, *Madre e hijo*, pp. 384–437.
- 44 See as an example Dr Zechnas (Esteban Sánchez Santana), ‘Cuestión vital’, *La Fraternidad Médico-Farmacéutica* 10 (1887) 145–7.
- 45 A classic formulation in this respect is that by Juan Aguirre Barrio, *Mortalidad en la primera infancia. Sus causas y medios de atenuarla* (Madrid, 1885), pp. 168–70. The work about Catalonia carried out through medical topographies also gives us abundant information about this phenomenon: Prats, *La Catalunya rànica*, pp. 225–36.
- 46 Joan Amades, *Folklore de Catalunya* (Barcelona, 1969), vol. III, pp. 944–52.
- 47 Cels Gomis i Mestre, *La bruixa catalana. Aplec de casos de bruixeria, creences i supersticions recollits a Catalunya a l’entorn dels anys 1864 a 1915* (Barcelona, 1987).
- 48 Gomis, *La bruixa catalana*, p. 137.
- 49 I use ‘witch’ in English every time the word ‘bruja’ appears in the sources, which always conveys the connotation of causing harm and illness. The word for male witches is *bruixots*.
- 50 Gomis, *La bruixa catalana*, pp. 43, 87–9.
- 51 A compilation of his writings on this topic can be found in José Miguel Barandiarán, *Brujería y brujas en los relatos populares vascos* (San Sebastián, 1998). They are materials collected since 1921 in the Basque region.
- 52 Caro, *Las brujas y su mundo*, pp. 280–97. This work, originally published in 1961, has been translated into the main European languages.
- 53 José Miguel de Barandiarán, ‘Paleoetnografía vasca’, in *Obras Completas* (Bilbao, 1975), vol. V, pp. 256 and 278.
- 54 Ignacio María Barriola, *La Medicina Popular en el País Vasco* (San Sebastián, 1952), pp. 125–33.
- 55 Barriola, *La Medicina Popular*, pp. 17, 135–51. See also the same author’s book dedicated to one of these healers who performed his activities in the early nineteenth century and whose descendants continued to practise until the twentieth century: Ignacio María Barriola, *El curandero Petrequillo* (Salamanca, 1983).
- 56 Rafael Andolz, *De pilmdadores, curanderos y sanadores en el Alto Aragón* (Zaragoza, 1987), pp. 39–43, 53–5.
- 57 Andolz, *De pilmdadores*, pp. 11–15.
- 58 Andolz, *De pilmdadores*, pp. 81–8.
- 59 Among others: Bernardo Barreiro, *Brujos y astrólogos de la Inquisición de Galicia y el famoso Libro de San Cipriano* (Madrid, [1885] 1973), pp. 52, 88, 94–5, 108, 126; Víctor Lis Quibén, *La Medicina Popular en Galicia* (Pontevedra, 1949), pp. 15, 18; Jesús Rodríguez López, *Supersticiones de Galicia y preocupaciones vulgares*, (8th edn, Lugo, [1895] 1979), p. 158.
- 60 Carmelo Lisón Tolosana, *Brujería, estructura social y simbolismo en Galicia* (Madrid, 1983). More data can be found in Carmelo Lisón Tolosana, *Las brujas en la Historia de España* (Madrid, 1992), pp. 299–350.
- 61 José Pérez Vidal, ‘Contribución al estudio de la medicina popular canaria’, *Tagoro* 1 (1949) 31, 35, 72; Domingo García Barbuzano, *Prácticas y creencias de una santiguadora canaria* (10th edn, Gran Canaria, 1998); idem, *La brujería en Canarias* (6th edn, Tenerife, Gran Canaria, 1997), pp. 75–105.
- 62 Eugenio Olavarría y Huarte, ‘El Folk-lore de Proaza’, in Antonio Machado y Álvarez (ed.), *Biblioteca de las tradiciones populares españolas* (Madrid, 1885), vol. 8, pp. 231, 273; Isabel Gallardo de Álvarez, ‘Medicina popular y supersticiosa. Mal de ojo’, *Revista de Estudios Extremeños* 1–2 (1947) 182–3; Eugenio Olavarría y Huarte, ‘El Folk-lore de

- Madrid', in Antonio Machado y Álvarez (ed.), *Biblioteca de las tradiciones populares españolas*, (Madrid, 1884) vol. 2, pp. 86–7; Luis Montoto, 'Costumbres populares andaluzas', in Antonio Machado y Álvarez (ed.), *Biblioteca de las tradiciones populares españolas* (Seville, 1883), vol. 1, pp. 90–1. Alejandro Guichot y Sierra, 'Supersticiones populares andaluzas', in *El Folk-lore andaluz* (1881–82), pp. 271–2, 418 (facsimile edn, Seville and Madrid, 1981).
- 63 Hoyos and Hoyos, *Manual de Folklore*, pp. 207–10, 228.
- 64 George M. Foster, 'Disease Etiologies in Non-Western Medical Systems', *American Anthropologist* 78 (1976) 773–82.
- 65 Salcedo, *Madre e Hijo*, pp. 759–821.
- 66 Salcedo, *Madre e Hijo*, p. 819.
- 67 In addition to the rich material provided by Lisón in *Brujería*, numerous studies have been carried out that are collected in the bibliographical references of the work by Antón Erkoreka, *Begizkoa. Mal de ojo* (Bilbao, 1995), pp. 38, 153–67. We ourselves have been able to check the importance of evil eye when it came to facing children's diseases in the south of the current province of Alicante: Enrique Perdiguero, 'El mal de ojo: de la literatura antisupersticiosa a la Antropología Médica', *Asclepio* 28 (1986) 47–71.
- 68 De Blécourt, 'The Witch', pp. 192–7; Alan Dundes (ed.), *The Evil Eye: A Casebook* (Madison, 1992); Amica Lykiropoulos, 'The Evil Eye: Towards an Exhaustive Study', *Folklore* 92 (1981) 221–30; Clarence Maloney (ed.), *The Evil Eye* (New York, 1976).
- 69 Gallardo, 'Medicina popular'; Pérez, 'Contribución', p. 78. See also the information collected by Kuschick, *Medicina Popular*, pp. 21–3, 34–7, 44–7, 58–9, 112–29.
- 70 Amades, *Folklore*, vol. 3, pp. 933–44; Gomis, *La bruixa catalana*, pp. 141–2, 149; Resurrección María de Azkue, *Euskaleriaren Yakintza. Literatura popular del País Vasco*, (2nd edn, Madrid, 1959), pp. 121–7; Barandiarán, 'Paleoetnografía Vasca', pp. 288–96; Lis, *La Medicina Popular*, pp. 89–110; Vicente Risco, 'Apuntes sobre el mal de ojo en Galicia', *Revista de Dialectología y Tradiciones populares* 17 (1961) 66–92.
- 71 See the annotations in Antonio Limón Delgado and Eulalia Castellote, *Costumbres populares en los tres hechos más característicos de la vida, nacimiento, matrimonio y muerte (1901–1902). Edición crítica de la información promovida por la Sección de Ciencias Morales y Políticas del Ateneo de Madrid* (Madrid, 1990), 2 vols; and numerous editions have been published of the materials corresponding to specific regions among which it is worth highlighting, for the quality of the report, the annotated edition of Antonio Bethencourt Alfonso, *Costumbres populares canarias de nacimiento, matrimonio y muerte* (Santa Cruz de Tenerife, 1985). For a contextualization of this survey, see Carmelo Lisón Tolosana, 'Una gran encuesta de 1901–1902. Notas para una historia de la Antropología en España', in idem (ed.), *Antropología social en España* (Madrid, 1971), pp. 91–171; and also Ángel Aguirre Batzan, 'La antropología cultural en España. Un siglo de antropología', in Aguirre Batzán, *La Antropología cultural en España*, pp. 36–8.
- 72 Rafael Salillas y Panzano, *La Fascinación en España. Estudio hecho con la información promovida por la Sección de Ciencias Morales y Políticas del Ateneo de Madrid* (Madrid, 1905).
- 73 Salillas, *La Fascinación*, p. 21.
- 74 Gomis, *La bruixa catalana*, pp. 142–4; Risco, 'Apuntes', pp. 89–90; Lis, *La Medicina Popular*, pp. 97–8.
- 75 Lis, *La Medicina Popular*, p. 95.
- 76 Lis, *La Medicina Popular*, p. 31. Throughout his monograph on witchcraft in Galicia, Lisón also repeatedly insists on the topic of overlapping.
- 77 Barreiro, *Brujos y astrólogos*, pp. 64–5; Marcial Valladares, 'Medicina popular', in

- Antonio Machado y Álvarez (ed.), *Biblioteca de las tradiciones populares españolas* (Madrid, 1884), vol. IV, p. 129; Kuschick, *Medicina popular*, pp. 17–21.
- 78 Lis, *La Medicina Popular*, pp. 33–4.
- 79 See Yolanda Guío Cerezo, 'El influjo de la luna: acerca de la salud y la enfermedad en dos pueblos extremeños', *Asclepio* 40 (1988) 317–41; Salillas, *La Fascinación*, pp. 46–7; Gallardo, 'Medicina popular', p. 186.
- 80 Salillas, *La Fascinación*, pp. 45–7.
- 81 Another example of this ailment can be found in Salcedo, *Madre e Hijo*, pp. 682–3.
- 82 Carmelo Lisón Tolosana, *Demonios y exorcismos en los siglos de oro* (Madrid, 1990), pp. 8–9; Lis, *La Medicina Popular*; Rodríguez, *Supersticiones de Galicia*, pp. 204, 215, 233–6, 251–2.
- 83 Andolz, *De pílmadores*, pp. 92–3; Antonio Castillo de Lucas, 'Los endemoniados', *Clínica y laboratorio* 42 (1946) 447.
- 84 Alardo Prats y Beltrán, *Tres días con los endemoniados. La España desconocida y tenebrosa* (Barcelona, 1999). The original edition was published in Madrid in 1929.
- 85 Álvor Monferrer, *Els endimoniats de la Balma* (Valencia, 1997).
- 86 Carmelo Lisón Tolosana, *Endemoniados en Galicia hoy* (Madrid, 1990), pp. 5–65. In general, all sanctuaries in Galicia that specialized in the *endemoniados* (possessed) were and are known as *corpiños*, and the ailment itself is called 'mal de corpiño'.
- 87 Lis, *La Medicina Popular*, pp. 239–57.
- 88 Prats, *Tres días*, p. 100.
- 89 See, on this subject, the classic study by William A. Christian Jr, *Religiosidad popular: estudio antropológico en un valle español* (Madrid, 1978). In this context are also of interest works on ex-votos, numerous at present; see, as an example, Salvador Rodríguez Becerra and José María Vázquez Soto, *Exvotos de Andalucía: milagros y promesas en la religiosidad popular* (Seville, 1980).
- 90 Information about them can be found, among other works, in: Amades, *Folklore de Catalunya*, pp. 997–8, 1005–6; Barandiarán, 'Paleoetnografía vasca', p. 269; Gomis, *La bruixa catalana*, pp. 135, 152–3; Guichot, 'Supersticiones populares andaluzas', pp. 296–7, 412, 417; Pérez, 'Contribución al estudio de la medicina popular canaria', pp. 47–8, 72; Salcedo, *Madre e hijo*, pp. 744–6. See also Kuschick, *Medicina popular*, pp. 62–3.
- 91 See, for example, Barandiarán, 'Paleoetnografía vasca', p. 283; Barreiro, *Brujos y astrólogos*, pp. 227–8; Gomis, *La bruixa catalana*, p. 186; Sergio Hernández, 'Supersticiones populares', in idem, *El Folk-lore fexenense y bético-extremeño 1883–1884* (facsimile edn, Seville, 1988), pp. 136–7; Pérez, 'Contribución', 73–6; Rodríguez, *Supersticiones de Galicia*, p. 137; Salcedo, *Madre e hijo*, pp. 699–703. See also Kuschick, *Medicina popular*, pp. 26–7.
- 92 Davies, *Witchcraft, Magic and Culture*, pp. 271–93.