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THE KNIGHTS HOSPITALLERS AND THEIR ASSISTANCE ACTIVITIES IN THE IBERIAN PENINSULA (TWELFTH-THIRTEENTH CENTURIES)

*Los caballeros hospitalarios y sus actividades asistenciales en la península ibérica (siglos
XII y XIII)*

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ABSTRACT: The assistance to the poor and sick was the ideal that structured the life and work of the Hospitallers. This ideal was developed by the brothers of St John since their origin in Jerusalem and defined their character not only in the Holy Land, but also in their monasteries in the West. Not many studies explored the possible constitution of a common model of medical activities of the Hospitallers in the East and West. In this work the information provided by the sources on the assistance activity of the Order in the Latin Kingdom of Jerusalem will be compared with that of the priories of Castilla y León, Navarra, and the Castellany de Amposta for Aragón and Cataluña during the twelfth and thirteenth centuries. The results of this comparison will reveal the existence of the aforementioned common model and will bring light to some of the characteristics of the medical-care and assistance activities of the Hospitallers in the Iberian Peninsula, mainly those related with the funeral services.

Keywords: hospital assistance; common model; Hospitallers; Holy Land; Iberian Peninsula.

RESUMEN: La asistencia a los pobres y enfermos fue el ideal que estructuró la vida y obra de la Orden de los hospitalarios. Este ideal se desarrolló desde los orígenes de la hermandad en Jerusalén y definió su carácter no solo en Tierra Santa, sino también en los monasterios de Occidente. Pocos estudios exploran la posible constitución de un modelo común de las actividades médicas de los hospitalarios en Oriente y Occidente. Por ello, en este trabajo se comparará la información aportada por las fuentes sobre la actividad asistencial

de la Orden en el Reino Latino de Jerusalén con la de los prioratos de Castilla y León, Navarra y la Castellania de Amposta para Aragón y Cataluña durante los siglos XII y XIII. Los resultados de esta comparación revelarán la existencia de dicho modelo común y arrojarán luz sobre algunas de las características de las actividades asistenciales de los Hospitalarios en la Península Ibérica, principalmente las relacionadas con los servicios funerarios.

Palabras clave: asistencia hospitalaria; modelo común; Hospitalarios; Tierra Santa; península ibérica.

SUMMARY: 0 Introduction. 1 Some remarks on the presence of the hospitallers in the Iberian Peninsula. 2 Trans-Mediterranean connectivity and the dissemination of charitable assistance. 3 Spatial reproduction of the Holy Land. 4 Cemeteries and burial service. 5 Conclusions. 6 Works cited.

0 INTRODUCTION

The idea of providing medical attention to any person as an expression of the love owed to God and the concept of charitable hospital organization were current notions in late medieval Europe¹. Many hospitals were quasi-monastic institutions organized around a liturgical pattern². During the late Middle Ages, Europe experienced a time of religious enthusiasm which also led to the foundation of many hospitals administered by confraternities or other religious groups. Many of these were new foundations granted to the Knights Hospitallers soon after their establishment, while some were directly created by the Order³.

By the beginning of the fourteenth century, when the donations to the Order had decreased significantly⁴, the Knights Hospitallers were already responsible for a significant number of welfare institutions in the West. In providing care, the brothers were guided by the concept of «lordship of the sick and poor», which they took to extremes⁵. This idea of serving their «lords», as is evidenced in the rules and on some statutes of the Order⁶, was developed by the brothers of St. John in their origin as brethren in Jerusalem⁷. This was a distinctive feature of the Order that even its later militarization did not overshadow⁸. This ideal was reproduced in the Order's priories in Europe, just as it had occurred in the Holy Land, and adapted to the particular situation of each.

Providing practical help to the poor and the pilgrims became one of the main tasks of the Knights Hospitallers⁹. The Order's origin must be placed in the general movement

¹ Davis, *The Medieval Economy of Salvation*; Brodman, «Religion and Discipline».

² Horden, «A Non-Natural Environment»; Rawcliffe, «Medicine for the Soul».

³ Novoa Portela and Villalba Ruiz de Toledo, «La labor asistencial».

⁴ Reicke, *Das Deutsche Spital*.

⁵ Riley-Smith, *The Knights Hospitallers*, 69; Luttrell, «The Earliest Hospitallers», 41.

⁶ Delaville Le Roulx, *Cartulaire Général*, N° 70, 62-8; N° 627, 425-9.

⁷ Hiestand, «Die Anfänge der Johanniter».

⁸ Barber, «The Charitable and Medical Activities».

⁹ Luttrell, «The Hospitallers Medical Tradition».

of reformation of the Church and its spiritual renovation, promoted between the eleventh and thirteenth centuries¹⁰. Unlike the traditional Orders, which maintained a contemplative monasticism, distant from the *saeculum*, in the pursuit of God, the new ones tried to reach Him through war and, in the case of the Hospitallers, by assisting the poor and the sick¹¹.

Some studies have described the medical activities of a few particular priories of the Military Orders in the West¹², and several publications have addressed this question for those in the Holy Land¹³. However, except for Timothy Miller's 1978 article¹⁴, not many of them have explored in detail if there was a common background to the Hospitallers' activities shared in both the East and West, and how it was constituted. Addressing this question would further our understanding of the Hospitallers' role in the development of a hospital network in Europe during the late Middle Ages¹⁵.

This article will contribute to that end by describing some characteristics of that common framework, showing how it informed the organization and the ideological orientation of the medical activities of the brothers in Europe and the Holy Land. It will assess its origins in the East during the Crusades, and then how the medical and assistance ideas and practices developed at the Hospital of St. John in Jerusalem were transferred to the Order's hospitals and possessions in the Iberian Peninsula¹⁶, where its presence is

¹⁰ For the general movement of reformation and spiritual renovation of the church in the West and the implication and consequences for the origin and participation of the Military Orders in it, see Ayala Martínez, «Reformismo e innovaciones espirituales». On the reformation movement of the twelfth century see the fundamental work of Giles Constable, *The Reformation of the Twelfth Century*.

¹¹ As Judith Bronstein has noted: «Esta drástica variación del monacato tradicional se debe a profundos y lentos cambios que se experimentan en Europa Occidental, principalmente desde la mitad del siglo xi. Entre los factores centrales de estos cambios se encuentran un resurgimiento espiritual que conduce a un mayor acercamiento de la sociedad cristiana hacia la religión y hacia la iglesia, una iglesia que se encuentra en pleno proceso reformador dedicado a una purificación interna y a la cristianización de la sociedad (...). La búsqueda del camino hacia la perfección se expresaba en esta época en la creación de diversos tipos de monacato. Entre ellos se encuentra el movimiento canónico, que en su vocación al servicio de los pobres va a ser muy influyente en la creación de la Orden del Hospital. Los monacatos «renovadores», principalmente Cluny, empujaron a la sacralización de los objetivos de la caballería, y al encauzamiento de la violencia en favor de los intereses de la cristiandad (movimientos conocidos como *Pax Dei*, *Tregua Dei*). La iglesia reformadora legitima la guerra por Dios y por la cristiandad como una Guerra Santa, reconociendo la lucha como una vía de salvación, como un instrumento de penitencia espiritual. Estos conceptos forman la base ideológica del movimiento cruzado, y permiten la creación de órdenes militares, que son el punto máximo en la evolución de esta ideología». Bronstein, «Financiando la Guerra Santa», 4.

¹² Le Blévec, *La Part du Pauvre*; Giordanengo, «Les hôpitaux arlésiens»; Barquero Goñi, «Los fines de la presencia».

¹³ Mitchell, *Medicine in the Crusades*, 46-107; Kedar, «A Twelfth-Century Description»; Edgington, «Medical Care»; Wagner, *Die Seuchen der Kreuzzüge*, 59-108; Greif, *Conocimientos médicos*, 59-139.

¹⁴ Miller, «The Knights of St. John».

¹⁵ Bronstein, «*Servus pauperum Christi*», 224-5; Luttrell, «The Hospitallers Medical Tradition». Cfr. Miller, «The Knights of St. John».

¹⁶ For the hospital activity of the Order in the Iberian Peninsula, see Madrid Medina, «La actividad hospitalaria».

first attested from the early days of the second decade of the twelfth century¹⁷ and expanded over Castile and Leon¹⁸, Navarre¹⁹, the Castellany of Amposta, in Aragon²⁰, and Catalonia²¹. For this I have searched for and compared information provided by documents referring to the healthcare institutions and activities of the Knights Hospitallers in their priories of the Iberian Peninsula and in the East²². The article also aims to compare the different priories and their peculiarities in the light of their specific geographical and political situations to unveil not only their common features in terms of their charitable-medical activities, but also their unique characteristics and particular developments²³.

This research seeks to shed new light on the general interpretation of medical attention and hospital care in the late Middle Ages by considering the «Revolution of Charity»²⁴ from the twelfth century as a process whose origin must be searched also in the East, rather than only in the West. It explores the integration in the late Middle Ages of the Eastern Mediterranean world and Western Europe, where the emergence of a particular hospital culture may have been informed by elements whose origins could derive from the caritative ideology imported from the East. In this sense, we can assume that the Hospitallers' foundation and the maintenance of charitable institutions in Europe were an instrument of ideological and political support for the Order, as it had been in the Latin East during the European occupation after the Crusades. Assuming the general interpretation of a well-integrated Mediterranean World with scientific and cultural

¹⁷ In 1309, Hospitaller Europe was divided into different priories creating a crystallised division of their existing possessions in the West. The first mention of a certain presence of the brothers of St. John in the Iberian Peninsula comes from a document dated to 1113 that mentions «the prevost Gerard» requesting alms from the (...) *dilectis fratribus episcopis, abbatibus, proceribus et ceteris per Yspaniam fidelibus* (...) for the (...) *Latorem presencium Palacium a Jerosolimitani Xenodochii*. Delaville Le Roulx, *Cartulaire Général* N° 31, 30. For a general description -among many others- of the priories, commanderies and castellanies of the Order in the Iberian Peninsula, see Riley-Smith, *The Knights Hospitallers*, 193-5.

¹⁸ Ayala Martínez, *Libro de Privilegios*, N° 5, 147; N° 7, 149; N°11, 154; N°52, 204; N° 67, 222; Delaville Le Roulx, *Cartulaire Général* N° 242, 182; N°369, 253; N° 380, 260. The statutes from the year 1294, Delaville Le Roulx, *Cartulaire Général*, N°4259, 650-1; See also, Delaville Le Roulx, «Note sur les sceaux», 55.

¹⁹ García Larragueta, *El Gran Priorado*, vol. 1, 55-6; Delaville Le Roulx, *Cartulaire Général*, N° 4259, 650-1; Delaville Le Roulx, «Note sur les sceaux», 55.

²⁰ Delaville Le Roulx, *Cartulaire Général*, N° 251, 190; N° 257, 195; N° 335, 235; N° 4259, 650-1; Delaville Le Roulx, «Note sur les sceaux», 55.

²¹ The Priory of Catalonia was created as a separate entity in 1319. Riley-Smith, *The Knights Hospitallers*, 193. For possessions in Catalan territory, see Delaville Le Roulx, *Cartulaire Général*, N° 251, 190; N° 335, 235 *et passim*. Also see, Miret y Sans, *Les Cases de Templiers i Hospitalers*. The presence of the Order and its medical-assistance activities in Portugal are excluded in this study. For a general reference, Oliveira, «Ordens Militares»; Fernandes and Oliveira, «Las órdenes militares».

²² Delaville Le Roulx, *Cartulaire Général*, N° 70, 62-8; N° 627, 425-9; N° 1193, 31-40, N° 3039, 51-4, *et passim*; Edgington, «Administrative Regulations»; Sinclair, *The Hospitallers' Riule*.

²³ The comparison of the history of medical activities of the Knights Hospitallers in the East and the West will benefit from the interpretation framed upon the notion of cultural transfer, for we are dealing here with a process which requires a discernment of changes involving moving cultural notions and ideas. Jaspert, «Mobility, Mediation and Transculturation», 137.

²⁴ Davis, *The Medieval Economy of Salvation*.

interconnections during the Middle Ages²⁵, this investigation also highlights the central—though persistently forgotten—importance of the medical advances developed in the Latin East during the Crusades and its impregnation in the West²⁶.

1 SOME REMARKS ON THE PRESENCE OF THE HOSPITALLERS IN THE IBERIAN PENINSULA

The Hospitallers started acquiring properties in the Iberian territory within a few years after the First Crusade in the Holy Land. By the end of the twelfth century, the Order—along with the Templars—, held important castles, churches, and estates in all Iberian kingdoms, not only on the frontiers with the Muslims but also in the hinterland. The majority of these possessions were administered by the priory of Castile-Leon and the Castellan of Amposta²⁷.

Among many other activities, the Hospitallers, and mostly the Templars, participated in the conquest of the caliphate territory, and both had to compete with regional military-religious orders such as Santiago or Calatrava²⁸. As Henry Sire highlighted, until the second half of the twelfth century, the Hospitallers were reluctant to become militarized²⁹. However, it was also in this period that «the use of the Hospitallers as a frontier force increased», leading to a «very gradual militarization of the Order in Spain (...) perhaps involved in the protection of pilgrims to Compostela, and culminating in the 1190s, when the Order possessed frontier castles and fiefs in Castile, Portugal, and Aragon were playing a significant part in the defence of all three kingdoms»³⁰.

After the battle of *Las Navas de Tolosa* in 1212, the Castilian Crown preferred to patronize the regional military orders it controlled directly. The Hospitallers' properties do not seem to have expanded much more and remained almost exactly as they were in the twelfth century. The brothers received fewer and fewer lands, so they committed themselves to the consolidation of their internal monastic life, and the military character of the Order waned in the late Middle Ages³¹. Instead, they further engaged in charitable

²⁵ Horden, *Freedom of Movement*.

²⁶ Rubin and Linde, «Western Medicine»; Rubin, «The Use of the *Jericho Tyrus*»; Greif, «Entre Oriente y Occidente».

²⁷ Borchardt, «The Military-Religious Orders», 116. On the presence and history of the Hospitallers and the Military Orders in the Iberian Peninsula see, among others, Barquero Goñi, *Los caballeros hospitalarios*; Rodríguez-Picavea, *Los monjes guerreros*; Lomax, *Las órdenes militares*; Izquierdo Benito and Ruiz Gómez coords., *Las órdenes militares*; Forey, «The Military Orders»; Josserand, *Église et Pouvoir*; Ayala Martínez, *Las órdenes militares*.

²⁸ Borchardt, «The Military-Religious Orders», 116. The «Reconquista» remained under control of the royal power and the Military Orders were not able to take over, like in the East, an independent policy on this matter. Forey, «The Military Orders».

²⁹ Sire, «The Character of the Hospitaller».

³⁰ *Ibidem*, 25-6; By the sixth decade of the twelfth century there is no doubt about the nature of the Order moving to an evident position of militarization. Ayala Martínez, *Las órdenes militares*, 46.

³¹ Sire, «The Character of the Hospitaller», 27.

assistance tasks such as assisting the sick and those injured in combat, burying people, and providing lodging for pilgrims and housing for elders.

2 TRANS-MEDITERRANEAN CONNECTIVITY AND THE DISSEMINATION OF CHARITABLE ASSISTANCE

Medieval hospitals performed many different functions, not only caring and curing. This was not necessarily a distinctive note of such institutions³². As Peregrine Horden has argued, historians have focused on medicalization, i.e., the arrival of physicians, creating the implicit teleological narrative that the only truly important hospitals of the Middle Ages were those capable of curing because they had doctors³³. However, late medieval hospitals were above all quasi-monastic institutions, with liturgy at the heart of their daily life, which was punctuated by the monastic hours more than by the ward round. As Horden notes, «the presence or absence of physicians was less decisive for our estimation of the hospital's therapeutic capacity»³⁴.

The hospitals of the brothers of Saint John were no exception. Their practice varied from region to region, though, for as Helen Nicholson has emphasised, «at one location, the Hospitallers cared for the elderly, at another, they lodged pilgrims, at a third location, they did neither»³⁵. The presence of doctors was less relevant than religion, which was the true medicine of the hospitals. Treatment was not only physical, but spiritual, and the care they offered was associated not only with medical therapies, but was also sacramental³⁶. The «spiritual medicine» of the hospitals in the medieval world was genuinely medical, not only in theological but also in physical terms: body therapies were complemented and subordinated to those of the soul³⁷. Failing to consider this has led historians to either overestimate or neglect the charitable activities and the assistance provided by the Hospitallers' houses in the West, as they were deemed «non-medical». Furthermore, Anthony Luttrell has also brought attention to other functions that are not strictly medical in present-day terms but which were central to the Hospitallers activities, namely providing lodging, death-care facilities, and posthumous prayers for individuals and couples. According to Luttrell, these were also «forms of welfare that generated funds which did not support the poor and sick through donations from the wealthier, but catered for

³² Rawcliffe, «Medicine for the Soul»

³³ Horden, «A Non-natural Environment», 141.

³⁴ *Ibidem*.

³⁵ Nicholson, «Charity and Hospitality».

³⁶ It is for this reason, as James Brodman stated, that hospitals during the late Middle Ages were sacred places and not, like in the Modern Age, secular institutions. Brodman, «Religion and Discipline», 123. Therefore, it is difficult to distinguish the physical treatment from the spiritual, due to their inseparable character during the Middle Ages. Yearl, «Medieval Monastic Customaries», 179.

³⁷ More importantly, even the giving of the sacraments had significant effects in the patient's recovery and the relief of sickness. Horden, «A Non-Natural Environment», 141-2.

individuals of some means who invested their own capital or incomes, often according to precisely worded contracts»³⁸.

In the Iberian Peninsula, from as early as the first half of the twelfth century there are instances of family donations for the salvation of their souls. For example, in the Priory of Castile, in 1118 two couples and one individual donated the monastery of Taniol and half of San Mamez to the Hospital for the poor:

*Ego Martinus Gonzalviz, et uxor mea Elvira, et ego Sebastianus Gonzalviz, et Melendus Bufino, et uxor mea nomine Maria Erpiillo, donatores sumus domino Deo et ad ipso Hospitale Jherosolimitano, et ad pauperes vel fratres qui sunt de prefato Ilospitale. (...). Hoc quod est super scriptum donamus ad prefato Ilospitale propter Deum et remedium anime nostre vel parentum nostrorum*³⁹.

Similarly, some small monasteries and their hospitals in the Iberian Peninsula have not been considered as true hospital institutions on the basis that they failed to meet the standards of the Hospital of Saint John in Jerusalem. The degree of medicalization of the *Informorum Palacium* in the Holy City, however, is debatable⁴⁰, and its character was not completely «medical» in the modern sense. Indeed, patients had to confess their sins before being admitted to the hospital for their attention⁴¹. Also, as set in the document known as «Pray for the Sick», the priests of the Order recited prayers every night to bring spiritual attention to the convalescent in their hospitals in Jerusalem and Acre⁴².

As a result of these historiographical biases, historians have privileged the study of documents apparently confirming the relevance of the medicalization of the Order's welfare buildings. However, the presence of the Hospital's assistance institutions can be traced in all the priories in the Iberian Peninsula. In his major study of the Order of St. John in the Priory of Navarre, Santos García Larragueta stated that «la Orden de San

³⁸ Luttrell, «The Hospitallers Medical Tradition».

³⁹ Delaville Le Roulx, *Cartulaire Général*, N° 44, 37. For other cases of donations of monasteries to the order from families seeking their salvation in the afterlife, see Barquero Gofi, «Los hospitalarios», 63-6. On hospital buildings on the Way of St. James, in exchange for prayers for the salvation of the soul, see Martínez de Aguirre, «Templars, Hospitallers, and Canons», 295.

⁴⁰ If we pay attention to the rule and some statutes of the Order where the medical activities in the Hospital of St. John are described (see note 20), we will find that there were four wise doctors with their assistants administering some common therapies to the sick (basically the assignment of special foods) according to the Hippocratic-Galenic medical knowledge, but mostly cleaning, feeding and observing their healing evolution, besides praying for their recovery and salvation. That is to say, assisting and *caring* for the sick, which is something not distinguishable, in the Middle Ages, from *curing* the sick. Indeed, the importance of assistance over any kind of modern appreciation of medical therapies is reinforced by the mention in these documents of the presence of sisters taking care of pregnant women and their babies (see also note 20). Lastly, it is worth mentioning that the anonymous description of the medical activities of the Hospital of Jerusalem, which could lead us to believe in a much more important medicalization of this institution, should be dated to a later period than the twelfth century, which is usually the accepted date for the writing of this text. Kedar, «A Twelfth-Century Description», 4. If it was written at least one century after, then the information given by this source may be reconsidered. Greif, «Un análisis interdisciplinario».

⁴¹ Delaville Le Roulx, *Cartulaire Général*, N° 70, 67.

⁴² Le Grand, «La Prière des Malades» Cf. Sinclair, «The French Prayer».

Juan tuvo también, en pequeña escala, actividades hospitalarias»⁴³. He noted, however, that except for the hospitals in Cizur la Menor, Bargota⁴⁴ and Cogullo, we do not have information of any other institution of this kind, and also argued that those attested were of little importance, «no justificando los ingresos de la orden en el priorado las instalaciones hospitalarias tan pequeñas del mismo»⁴⁵. And yet he acknowledged that some hospitals existed⁴⁶, and also referred to documents showing how the Hospitallers were acting as guardians and caretakers of orphans⁴⁷.

This is the case of Lope Martínez de Belzunce. In May 1198, he donated an important amount of money to the hospital, in exchange for which he asked the brothers to take care of his son should he die: *Et mando quod si migravero ut hospitalarii sancti Iohanis teneant meum filium cum sua hereditate ex hac Penthecosten usque octo annos et dent ei in unoquoque anno pro veste sua XL solidos*⁴⁸. Similarly, in his testament, dated to August 1259, Don Pedro Garcés de Uarriz made a post obitum donation of land and properties to the Hospital and declared that the prior should be *tenedor et poderoso de mias creaturas de pareila ata que sean en edat de doze ainos, et de todo quanto io don Pero Garceic et creaturas de dona Albira Semeneic mia muiller que fo, havemos*⁴⁹. These documents show that the Hospitallers were active in Navarre as guardians and caretakers of orphans, which in turn demonstrates the relevance of the medical-assistance activities they performed, even if there is no clear reference to how much of the revenues of the Order in the region were devoted to sustaining charitable institutions.

Childhood care was also a part of the assistance activities of the Order in the central convent in the Holy Land. Indeed, in the statutes of the General Chapter during the magisterium of Roger of Moulins it was set that even pregnant women and babies *fucent fait por les enfans des femes pelerines qui naissent en la maison, si que il gisent à une part soul, et que li enfant alaitant n'en aient aucun ennui par la mesaise de lor mere*⁵⁰.

In the territories of the Castellany of Amposta there is also information about many assistance institutions in different localities. Only in the province of Huesca there were those of Berbegal, Huesca, Jaca, La Litera, and the Monastery of Sigena of the sisters of St. John; and there were others in the provinces of Lleida, Barcelona, and Valencia⁵¹. The same goes for the Priory of Castile, where an important part of the Order's income went to assistance and health activities, for which many donations were received⁵². Charity

⁴³ García Larragueta, *El Gran Priorado*, vol. 1, 247.

⁴⁴ There was a hospital in Bargota entrusted to the Order that started functioning in the beginning of the thirteenth century. See more on this in Pavón Benito «El convento de Bargota». On recent excavations in the site of this commandery in the Priory of Navarre, see Unzu *et al.* «El Hospital de San Juan de Jerusalén».

⁴⁵ García Larragueta, *El Gran Priorado*, vol. 1, 248-249. Cfr. Barquero Goñi, «Los fines de la presencia», 103.

⁴⁶ García Larragueta, *El Gran Priorado*, vol. 2, doc. 126, doc. 331.

⁴⁷ García Larragueta, *El Gran Priorado*, vol. 1, 248, n. 44.

⁴⁸ García Larragueta, *El Gran Priorado*, vol. 2, doc. 98;

⁴⁹ *Ibidem*, vol. 2, doc. 382.

⁵⁰ Delaville Le Roulx, *Cartulaire Général*, N° 627, 426.

⁵¹ Madrid Medina, «La actividad hospitalaria», 589-90.

⁵² *Ibidem*, 591-5; Barquero Goñi, «Los fines de la presencia», 99-103.

functioned as a legitimizing tool for the elites, be them nobles, ecclesiastics, bourgeois or members of the royal family⁵³.

These charitable donations were also a medium in the pursuit of health and salvation. For example, already in 1126 King Alfonso VII donated the *villa* of Atapuerca to the Order of St. John to build an *albergueria per ad opus de illos pauperes*⁵⁴. Given that it was also located in the Way of St. James, we can assume that the aim was also to provide care for travellers in prospect of sanctification, as Christ preached in the Parable of the Good Samaritan⁵⁵. Similarly, in 1156, Eldonza Pérez donated a hostel built by her and her sister to Santa María de Almaraz and to the Order of Saint John, declaring that the Hospitallers *semper faciat ibi mercedem ad ipsos pauperes et misericordia que ibi occurrent*⁵⁶.

During the twelfth and thirteenth centuries, many more donations were made to the Hospital under similar statements⁵⁷, which it is a measure of the importance that was granted to the healthcare and assistance provided by the Order⁵⁸. For instance, in the *villa* of Santa Eulalia, which was close to Sangüesa (Navarre), Sancho Jordan donated to God and to the hospital of Jerusalem *unum solarium (...) unde faciant ibi fratres Hospitalis domun ad servicium pauperum*. It was located next to the hospital of Santa Eufemia, in the Way of St. James⁵⁹. In the same vein, in 1175, Don Gascon de Murel and his wife Stephanía donated a hospital built also in the Jacobean route⁶⁰.

The donation made in 1171 by Rodrigo Suárez and his wife, Urraca Alfonso, is also noteworthy. They donated the hospital of Seixas with all its belongings to the brothers. The document states:

*damus et concedimus nostrum hospitalem, quem fundavimus et fecimus et est in Seixas (...) qui illos qui ibi habitaverint et ipsos pauperes, qui ibi advenerint per quem se contineant bene. Et si Dominus illum tantum creverit, qui inde plus haberi possint, habeant (...) in toto benefactum, que fuit et factum fuerit in Hospitale Hyerusalem*⁶¹.

Here again is a donation made for the *pauperes dominis* as it was in the *domus Dei* in Jerusalem. Behind the foundation and purpose of these institutions, there is no mention of physicians or any indication of medicalization. As we can see in the next section, the

⁵³ While not the object of this article, it is nonetheless worth mentioning the relevance that these donations had in the constitution of a political network between the most powerful members of the medieval Iberian society and the brothers of the Military Orders, mostly those of the Temple and the Hospital. Thanks to the international connection of the former with the Holy Land and their participation in the general movement of reform within the Church they enjoyed an extraordinary reception among the nobles, kings and counts. More on this in Pavón Benito and Bonet Donato, «Tramas sociales y religiosas».

⁵⁴ Ayala Martínez, *Libro de Privilegios*, N° 19, 162-3.

⁵⁵ Martínez de Aguirre, «Templars, Hospitalers, and Canons», 297.

⁵⁶ Ayala Martínez, *Libro de Privilegios*, N° 70, 226.

⁵⁷ *Ibidem*, 226-7.

⁵⁸ See Barquero Goñi, «Los fines de la presencia», 100-3.

⁵⁹ García Larragueta, *El Gran Priorado*, vol. 2, doc. 4.

⁶⁰ *Ibidem*, vol. 2, doc. 47.

⁶¹ Archivo Histórico Nacional, Órdenes Militares, carp. 574, N° 7.

same spirit of recreation of the Holy Land in terms of assistance was operating in terms of space assistance reproduction.

3 SPATIAL REPRODUCTION OF THE HOLY LAND

From the eleventh century throughout the Middle Ages, the Iberian Peninsula and the Holy Land were well connected and integrated. Contrary to what has been assumed, this intensified during the following century. Not only did several bishops from Iberia attend the Council of Clermont in 1095, but many «Hispanics» from *Occitania* and the Catalan territories participated in the first Crusade and even migrated to the Latin States, showing the deep connection between these regions. In the same sense, in the Iberian Peninsula the veneration of the Holy Places —much more significant after the conquest of Jerusalem in 1099— was reinforced by the construction and dedication of churches and chapels and the transfer of relics, as well as some other materials which reconstruct or were reminiscent of the Holy Places in Jerusalem and the East⁶².

The Hierosolymitan model was recreated *in situ* in different places in the Iberian Peninsula and informed the social construction of space. Starting in the eleventh century, the number of buildings that bore the name of the Holy Sepulchre or alluded in architectural terms to the church in Jerusalem increased considerably. At the same time, this veneration was also manifested in the *translatio* of relics through the Mediterranean Sea. Relics of the Passion and souvenirs of the Holy Land, like the water of the Jordan, the Holy Sepulchre's relics and the *Vera Cruz* expressed those Mediterranean ties. They were a mechanism by which Jerusalem and the Holy Places were «transferred» visibly and tangibly to the West⁶³.

The same process could be attributed to the Hospital and the reproduction of its ideal space in the Iberian territories. The Military Orders in the Iberian Peninsula were heavily influenced by artistic models from Europe and the Near East⁶⁴, and this was more specifically expressed in their attempts to reproduce the architecture of the Holy Land in their buildings.

As Javier Martínez de Aguirre has noted, around 1200 a particular kind of construction emerged along the Way of St. James that was characteristic of the houses of the Hospitalers, the Canons of the Holy Sepulchre, and the Templars, whose churches «included architectural elements with funerary connotations (...) sometimes directly evoked Jerusalem»⁶⁵.

This is clearly expressed in the complex that includes the church of San Juan de Acre in Navarrete, on the Way of St. James, near Logroño. The ground plan combines the Greek cross with a semi-octagonal east end, which evokes the church of the Holy

⁶² Jaspert, «Cataluña y Jerusalén», 9-17.

⁶³ *Ibidem*, 39-40.

⁶⁴ Baldó Alcoz, «Influencias mediterráneas», 823, 829-33; Baldó Alcoz, «La arquitectura de la Orden», 341.

⁶⁵ Martínez de Aguirre, «Templars, Hospitalers, and Canons», 299.



Figure 1. San Juan de Navarrete today. Taken from Larrauri Redondo and Losantos Blanco, *San Juan de Acre*, 122.

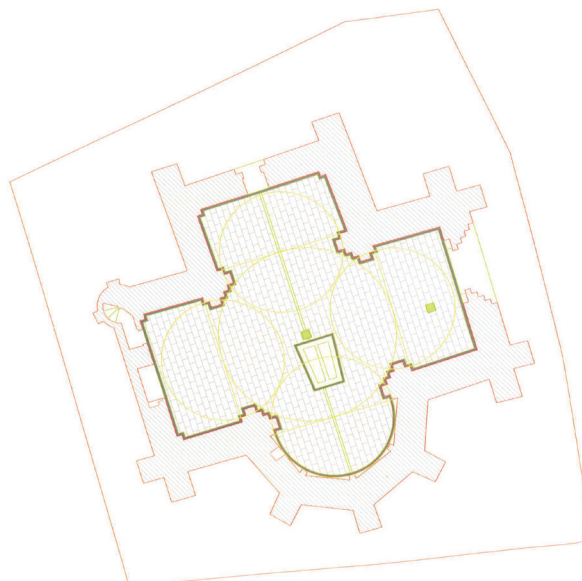


Figure 2. Chuch of St. John of Navarrete. Floor plan. Taken from Larrauri Redondo and Losantos Blanco, *San Juan de Acre*, 122.

Sepulchre⁶⁶ and establishes a connection between the funerary function for the founder and the use of a centralized plan (in this case with the shape of the Greek cross).

On a theoretical level, death and the cross were identified and projected onto the architecture⁶⁷. As Bango Torviso argued, it was associated to a particular funerary purpose related to the Military Orders, being the examples of Torres del Río (Navarre), Eunete (Navarre), or Vera Cruz (Segovia) idealized replicas of the Holy Sepulchre⁶⁸.

The complex of San Juan de Acre was founded in the late twelfth century by a noblewoman, María Ramírez, whose sisters had previously founded hospitals on the Way of St. James and donated them to the Hospitallers as well⁶⁹. She was buried there, and the place was given to the Hospitallers in the year 1212, which to judge from the remaining architecture and sculptures probably corresponds to the time when the complex was built. It therefore seems possible that the brothers of St. John directed the works, in which case they would have been responsible for the adoption of a centralized plan with the Greek cross for a place designated for burial (and salvation) —in this case, of María Ramírez—, something other Military Orders in the Iberian Peninsula were also doing⁷⁰. Donating hospitals to the Hospitallers, particularly in a pilgrimage area like the Way of St. James, but also elsewhere in their priories more generally, contributed to the reproduction of that spatial ideal, and with it to the evocation of the Order's charitable activities in the Holy Land. This may also explain why people like María Ramírez increasingly aimed to be buried in the Hospitallers' grounds, given the Order's aura of holiness attached to their presence in the Holy City. To be buried in the properties of the Hospitallers⁷¹ in Iberia could be like dying and being buried in Jerusalem, and this could be interpreted as yet another kind of assistance provided by the brothers in the Iberian Peninsula.

This idea is reinforced by the fact that the Hospital was recognized by its benefactors and administrators as a unitary body whose functions were associated with the mythical site it referred to, something that María Bonet Donato has emphasised in her study about the Order in Aragon. Donations made to the Hospital are clearly addressed to the «Holy Hospital of Jerusalem» or to «Saint John and the Hospital in Jerusalem»⁷². The Hospital, like the Temple, were identified as organizations linked to the Holy Places, and there is evidence that the brothers even accompanied people in their pilgrimage to the Holy Land⁷³.

⁶⁶ Larrauri and Losantos Blanco, *San Juan de Acre de Navarrete*.

⁶⁷ *Ibidem*, 134.

⁶⁸ Bango Torviso, *Alta Edad Media*, 184.

⁶⁹ Martínez de Aguirre, «Templars, Hospitallers, and Canons», 297.

⁷⁰ Rich men and women were in charge of building hospitals under the belief that this action would result in a benefit for them in the afterlife. Martínez de Aguirre, «Una arquitectura del camino de Santiago».

⁷¹ On the importance of the funerary elements and components of the military orders, see Cortés Arrese, *El espacio de la muerte*.

⁷² Bonet Donato, «The Identity of Hospitallers», 42.

⁷³ Pavón Benito and Bonet Donato, «Tramas sociales y religiosas», 201. Since the eleventh century, visiting the Holy Sepulchre consisted in a personal penance, activity that took a particular relevance since the First Crusade in the Holy Land. Jaspert, «Cataluña y Jerusalén», 26-7; Riley-Smith «An Army on Pilgrimage», p. 105. Indeed, some people even made their *peregrinatio* to die in the Holy Land like Bernardus Willelmi,

4 CEMETERIES AND BURIAL SERVICE

In 1143, William, Patriarch of Jerusalem, donated a church at Akeldama —south of the city, just beyond the Pool of Siloam— to the Hospital with all the land that belonged to it under a particular sentence, which inevitably sparks our attention:

*ego Willelmus, Dei gratia sancte Iherusalem patriarcha, omnibus, tam presentibus quam futuris, notum facio quod ego ecclesiam quamdam, que in agro qui Acheldemach dicitur sita est, ubi peregrinorum sepeliuntur corpora, cum tota ejusdem agri terra, ab antiquis Surianis, nobis presentibus, divisa, Hospitali quod est in Iherusalem habendam in perpetuum concessi, ac privilegii mei munimine confirmavi*⁷⁴.

As Malcom Barber noted in the light of this document, by 1143 the Hospitallers already maintained a cemetery for the burial of pilgrims at Akeldama⁷⁵, thus also bringing this specific service to the poor. As seen in the previous section, dying in the Holy Land and being buried in it, was a particular form of penance for pilgrims in Jerusalem —and, of course, a guarantee of salvation—. Given what we have seen about the recreation of space and architectural models in the Order's priories in the Iberian Peninsula, we could therefore expect that similar donations were also made. Some of the holiness of the Hospitallers' lands and churches in the Holy Land may have been transferred to the priories in the West, which would explain the increasing interest shown by lay people in choosing for burial sites like the complexes held by the Hospital in the Way of St. James⁷⁶.

The same spirit can be observed in some particular agreements made by the Hospital with the ecclesiastical hierarchy in Toledo, which belonged to the priory of Castile. Between 1228 and 1233, the archbishops in this city signed at least three agreements with the Hospitallers by which the statute of the Order's churches in the archdiocese was regulated. Among other things, it was stipulated that five of these churches —Santo Domingo in Guadalajara, San Juan, Santa Cruz de Toledo, Malburguet y Talavera de la Reina— could not have congregations nor receive tithe. However, believers could choose to be buried in these churches on the condition that a fourth of their donations should go to a parish of the archdiocese⁷⁷. The agreement implicitly acknowledges that the Hospitallers received donations for the burial services they provided.

Similarly, in the Kingdom of Navarre, the agreement made in 1173 between the Prior of the Hospitallers, García Ramírez, and Forto, Prior of Santa María de Tudela⁷⁸ regarding the tithes of the Church of Calchetas evidences the importance that people

who made a donation of his lands in Oliana (Lleida) to the *sancto Johanni et Hospitali Jherusalem in servicio pauperum* with *Raimbaldus de Rauca* and *Raimundus Pandulfi* as witnesses, after *Tripolitana urbe detentus ab egritudine qua obit*. Delaville Le Roulx, *Cartulaire Général*, N° 75, 72.

⁷⁴ Delaville Le Roulx, *Cartulaire Général*, N° 150, 121-2.

⁷⁵ Barber, «The Charitable and Medical Activities», 160.

⁷⁶ Javier Martínez de Aguirre describes the churches of the Orders of the Holy Land (The Hospitallers, the Templars and the Order of the Holy Sepulchre) located in the Way of St. James and their hospital activities and burial functions. Martínez de Aguirre, «Templars, Hospitallers, and Canons», 293.

⁷⁷ Barquero Goñi, «Hospitalarios y obispos en Castilla», 108.

⁷⁸ García Larragueta, *El Gran Priorado*, vol. 2, doc. 45.

granted to being buried in the Order's lands. Among other things, this agreement establishes that only the usual inhabitants of the place could be buried there and that those who wanted to be buried in Tudela should do it without any opposition from the Hospitallers⁷⁹: *Et faciant ibi baptisterium et cimiterium, set non baptizent neque sepeliantur ibi aliquos nisi cotidianos habitatores illius loci et eorum filios. Si vero populos et parrochiani illius loci in ecclesiis Tutelanis sepeliri voluerint, nullum impedimentum ab Hospitalariis habeant*⁸⁰.

Again, these documents clearly express the sacralization of the burial space that derived from its association to the lands belonging to the brothers in the Holy Land. The importance that this was granted is even clearer in the following example. It is a document dated to 1263 by which the commander of Portomarín received the knight Pedro Eanes and his wife María Fernández as confreres, on the condition that they should be buried in the Hospital's grounds.

*Ena era de mil douscentos setenta e quatro a tres días do mes de outubro. Sabida cousa sea a todos los que son presentes como a os que han de vir, que os freires do Ospital, por consello outorgamento de todo o comento de ese mesmo lugar a vos Pedro Eanes, cabaleiro, e a vosa muller María Fernández recibimos por confreires do Ospital e de sepultura e quando quisedes a orden damos vos o pan e auga y a morte do Ospital, convén a saber: e eu Pedro Eanes en sembla con miña muller María Fernández así nos outorgamos por confreires do Ospital así como diz de su e se orden quiseremos recibir, non debemos outra receber senon a orden do Ospital e non debemos fisar outra sepultura senon a sepultura do Ospital e nos comendador y o comento de subsodito a vos Pedro Eyanes e a vosa muller María Fernández damos e outorgamos en todos voso días*⁸¹.

Similar situations occurred in the commanderies of the Order in Catalonia and Aragon. Many noble men and women became confreres of the Hospitallers and donated important properties and rights to the brotherhood for the spiritual service of salvation and for burial in the Order's lands⁸². As we saw previously, these forms of care provided the brothers with a source of income, as individuals of some means invested their wealth in the Hospital's convents to live the rest of their lives in those hallowed spaces and rest in them. There was no need to travel to the Holy Land to procure for spiritual salvation. Thanks to the Hospitallers there were lands in the Iberian Peninsula where that could also be obtained.

⁷⁹ As Javier Martínez de Aguirre noted: «las fundaciones sanjuanistas resultaban muy atractivas como lugar de enterramiento y suponían una amenaza para el sostenimiento económico de iglesias grandes y pequeñas». Martínez de Aguirre, «Ambición arquitectónica», 174.

⁸⁰ García Larragueta, *El Gran Priorado*, vol. 2, doc. 45.

⁸¹ García Tato, *Las encomiendas gallegas*, doc. 70, 170-1.

⁸² Bonet Donato and Sanmartí, *Els Hospitalers al Pallars*, 27-32.

5 CONCLUSION

In the early years of the first half of the twelfth century, the Hospitallers received important donations for their charitable activities. Assuming that medicalization was not the distinctive feature of hospital assistance in the Middle Ages, but an ideal model constructed and reproduced by the historiography, we can give a more precise assessment of the care provided by the brothers of Saint John. This allows for a more accurate evaluation of the significance of their activities, not only in the Holy Land—under the aegis of the hospitals in Jerusalem and Acre—, but also in the seemingly «less» important possessions in their priories in the West. In the Iberian Peninsula, charitable activities were an important feature of the Hospital. By performing them, the brothers imported and reproduced within the local framework the sanctity of the Holy Places, creating spaces whose connotations in relation to spiritual health and salvation were like those of their houses in Jerusalem.

This realisation provides a useful framework for future investigations on the spread of hospital models in pre-modern Europe. To begin with, the beginning of the diffusion of hospitality in the Iberian Peninsula, commonly studied for the period from fifteenth century onwards, may need to be situated earlier, in the twelfth or the thirteenth centuries⁸³. Finally, this study has shown not only the centrality that the Hospital had in the Iberian Peninsula in terms of providing a model for assistance, but also the importance it had in defining the identity of the Order. This identity directly connected the houses and commanderies of the Hospitallers in the West to the Holy Land, as a link was established between their properties in Europe and Jerusalem through the medical and hospital activities the brothers originally developed in the Holy City, and reproduced in the hospitals elsewhere in their priories, as we have seen for the case of the Iberian Peninsula. The donations they received for the care and burial service they provided attest to the interest they elicited among many wealthy men and women in all regions where they were present.

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⁸³ Cfr. Villagrasa-Elías, «El viaje de lo escrito», 15.

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