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SECULAR AND RELIGIOUS RESPONSES TO A CHILD'S POTENTIALLY FATAL ILLNESS IN THE CANARY ISLANDS $^{\rm 1}$

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In the summer of 1985 two-year-old Lucia, the only child of my friends on the island of Tenerife, Lourdes and Eligio², went cross-eyed. After she was given corrective glasses, and then had an operation, she began to have dizzy spells and be unsteady on her feet. Finally in February, 1986, after a bad fall and vomiting, she was taken to a hospital, where a large tumor was found in her brain. She was immediately operated on, and a valve was installed to relieve the pressure on the brain, pending the more complex removal of the tumor. The doctors were pessimistic. They said the chances were 95% that the tumor was malignant; that Lucia might not survive its removal, and that if she did her life would probably be short and unpleasant.

Her parents had to decide where the operation should be, and who should be the surgeon. In this crisis what was already a close family was fully mobilized and acted with great effectiveness. Minor disputes were forgotten, and one major dispute, in which a pair of in-laws had been out of touch for years, was resolved. All friends and relatives with access to medical knowledge (and there were many, for this was a middle-class couple) were mobilized, or pitched in, and within two days Lourdes and Eligio had information and evaluations of surgeons in their city, Barcelona, Pamplona, Sweden, Canada, and Boston. The couple weighed the factors of cost (foreign operations and private hospitals would sharply increase expenses as they would not be covered by Social Security), the reputations of surgeons, and the availability of the family help. A hospital and surgeon in Barcelona were chosen in part because Lourdes sister, a doctor, lived there. For all close to Lucia and her parents, this was a time of deep despair. The parents tried to act with Lucia as if there were nothing wrong, although the child was groggy, with a big bandage around her head. One of Lourdes sisters set up a bank account for Lucia's expenses, to which many relatives contributed. And all available siblings, close friends and work associates gathered daily at the island hospital while Lucia was there, as at a wake talking about completely irrelevant subjects, but also going over and over the diagnoses and the symptoms, making the unspeakable and manageable.

The parents and child flew to Barcelona, where for 10 days Lucia was given preoperative scans and tests. When it was time for the major operation, one of Lourdes sisters and one of Eligio's brothers flew in from the Canary Islands. Finally, three weeks after the tumor had been found, it was removed --the

² I have changed names and other non-essential details to protect the privacy of the persons involved.

size of an egg-- and found to be benign. Lucia recovered and returned to the Canary Islands, where gradually she regained her equilibrium. She is well at the time of this writing.

Some of the interventions on Lucia's behalf were to provide the parents with information, and others to gain careful treatment for Lucia from doctors and hospitals³. Through intermediaries the head of the local health system, the head of a local hospital, and the most expert pediatric surgeon were alerted; once the Barcelona hospital was chosen, ways were found to the head of the hospital, the vice-head of the hospital, the head of surgery, the head of oncology, the most expert pediatric surgeon, and one other doctor on the staff. The routes to these contacts are reflected in Figure 1. All of this kind of ntervention was by its very nature known at the time to the inner circle of friends and relatives.

But as Lucia's recovery progressed, news of another kind of intervention began to reach the couple and spread to family, friends, and neighbors: the ways people had tried to influence the outcome of the operation and the illness by supernatural means. It was only after I heard of some of these petitions that I began systematically to ask persons in contact with Lourdes and Eligio whether they had prayed for Lucia, and if so, to whom and with what conditions. While I have talked to all of the principal acquaintances and relatives of the couple, finding about 50 persons who intervened in some way, there are probably other, more peripheral kith and kin who also intervened, especially with prayers, and whose interventions are not reflected in this essay.

The religious help offered Lucia took many forms. A few interventions were by means of the institutional church. Lourdes and Eligio, who were not churchgoers, had Lucia baptized quietly in their home before taking her to Barcelona. A friend of Lourdes sister ordered a petitioner mass for Lucia in her parish church, and another friend of the same sister got her cousin, a bishop on vacation, to say special mass for Lucia.

But otherwise the prayers were private, made directly between people and the divine without clerical participation. In the families of the maternal grandparents and one of Lourdes's sisters, and in a household of maternal great aunts and uncles, in all of which the rosary is recited nightly, Lucia was remembered in the regular prayers. Similarly, two of Lucia's cousins in a church school prayed for her in the regular time for prayer petitions, "to God".

The kind of transaction that most surprised me was the "sacrifice", a self-deprivation like that suggested by the Catholic Church in Lent. In this case it seems to be a technique used in Lourdes's family, where for Lucia's help persons sacrificed temporarily or permanently pleasures as various as

³ Many Canary Islands families would have had extensive consultations with folk healers. Lucia was unusual in that she had neither been baptized nor *santiguado*, a rite in which a long prayer is recited over the recently born child for protection against evil spirits that bring physical and mental illness. And in fact a neighbor of Lourdes' sister, a *santiguadora*, daily called to inquire about Lucia and was eager to help.

eating bread, eating dessert, eating anything specially craved, smoking, scathing an itchy arm, and watching Dallas on television. This kind of petitioner sacrifice leaves no mark -no votive offering or candle, no religious purchase, no publicly worn habit, and thus it is externally impossible to detect. It may be far more frequent than one might suppose in Catholic practice. It is particularly well-suited to agnostics or non-believers, as it does not necessarily implicate saints, much less the Church. Indeed, three of the persons employing it were completely nonpractising and non-professing.

People made promises or prayed to specific saints --some, like the Virgen that is the patron of one of the Canary Islands. St. Pascual Bailón, St. Rita, Fray Leopoldo of Alpandeire, St. Gema, and St. Martin of Porres in particular shrines; others, like the Virgen de los Dolores and the Virgen Auxiliadora as embodied in particular pictures in the home, and others like St. Patrick and the Souls in Purgatory, without specific images or know shrines. Generally these were saints to whom the devotee had a prior relationship, "una devocion particular".

The prayers made included promises that if Lucia were cured, the promisor would go with Lucia to a given shrine. The most extravagant was Eligio's Brother's vow to go from the Canary Islands to Granada to Fray Leopoldo's shrine. Other intercessions included taking flowers to a shrine; lighting an oil lamp in the house to a saint until Lucia's case was resolved; saying a perpetual novena, or promising a mass if Lucia were cured⁴.

All of these contacts with the divine were made in the three weeks between the initial emergency operation and the final removal of the tumor, at the same time that contacts were being made with nurses, doctors, and hospital administrators. The religious negotiations fell into two broad categories: petitions which included a devotional effort made at least in part prior to the outcome; and the classic promises to be completed only if the outcome is favorable. The latter stance is exemplified by Eligio's mother, who promised to have a mass said at the shrine of St. Pascual Bailon in Vila-reial (Castelló), which is in her home region, if Lucia were cured. "And if she had not been cured?" I asked. "Le pongo un petardo!" (I'd give him a cherry bomb!) The former stance is exemplified by Lourdes' mother, who declared that she never makes promises of the nature of "I'll give you this if you give me that," for she finds them repugnant. Instead she says her prayers, makes her sacrifices at least in part in advance. She may continue them afterwards as well. For forty years she and her husband have been saying the rosary nightly as result of a promise for a sick child. If Lucia or her own sick child had not been cured, then she would not have felt

obliged to continue sacrifices or prayers. Only two persons that I know of received some kind of response before the final operation. A friend of Lourdes' sister consulted a magnetista, who asked for a photograph of the child, performed

⁴ More rural or less progressive families would have used religious curative techniques like the direct application to Lucia's head of scapulars, medals, religious pictures, sacred ribbons, and holy water.

a kind of divining operation with a Bonbrake pendulum, and reported that the child would recover. Lourdes' mother reached the same conviction in prayer with the Virgen de los Dolores, an internal reassurance that she felt was of divine origin.

The core of those participating in some way in the solution of Lucia's illness were the nuclear families of her parents. Ten of the twelve members of these two families provided some major help: secular, sacred, or both. And when these families of her present households, something was done from each of the nine households, and all but one of the five spouses of Lourdes and Eligio's siblings did something practical to help.

Involvement on the part of Lourdes' and Eligio's aunts and uncles was more spotty. The only religious interventions were by mree of Lourdes' mother's siblings who live together (they were the ones most close to Lourdes as she was growing up). Eligio only had one uncle, who lived far away, and neither he, nor Lourdes' father's siblings were particularly close to the couple, nor perhaps quite so devout, nor in a position to be of much practical assistance.

Only two of the dozens of Lourdes' and Eligio's cousins were involved and two of their many nieces or nephews. However, several of their friends and neighbors were mobilized, plus nearly a dozen of the fiends or colleagues of their siblings, and a couple of friends of their parents. So that of all the people I know about who intervened, about half were direct relatives or in-laws of the couple, and about half were non-kin. Those relatives, friends, and neighbors who did not intervene, as defined here, did not remain indifferent. Many were concerned, some intensely so. But in order to connect to the human or divine powers that be, one had to know them, or know someone who knew them. So that Figure 1 portrays merely the central actors in the high drama of Lucia's illness.

Essentially there were two generations of people involved: that of Lucia's parents, with ages ranging from 30-45, and that of Lucia's grand-parents, with ages ranging from 60 to 85. The generation of grandparents lived on other, more rural islands, worked in agriculture, rural commerce, or schoolteaching, and had few contacts with the medical establishment. So in that generation it came down to those who had personal religious patrons to whom to turn. Those without a history of devotion, presuming that they believed in such matters, would have no "pull" with the divine. The younger generation was spread out over three islands, Barcelona, and Madrid, had professions in pharmacy, architecture, medicine, technical school and college teaching, and agronomy, and were more able through acquaintances from school, work, or politics to find ways to key medical personnel. So there was a de facto division of labor between the two generations. While the younger generation did what it felt it could on the religious front, several of them either did not believe enough to make promises or prayers, or only felt right making sacrifices with a marginal religious content. Hence most of the divine helpers were reached through the younger one.

The contacts with the saints were always direct, though if pushed these people would allow that saints themselves were intermediaries with God. The route from the family to the key doctors was more complex, involving one or two intermediaries.

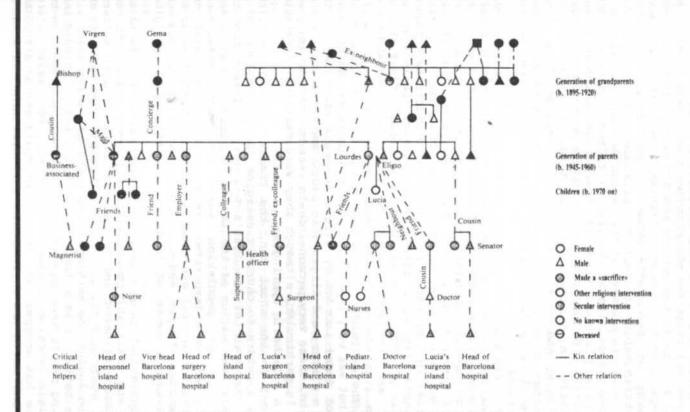


Figure 1. Lucia's heavenly and human medical helpers and how they were reached in February 1986 from the Canary Islands. Aside from Lourdes' and Eligio's siblings, aunts, and uncles, (which are not shown in hirth order), only persons who intervened in Lucia's case are shown.

Tab La H The kinds of in nte cerventions. secular and religious

These intermediaries, generally contacted by telephone, included: the sister of a colleague, an employer, two cousins of friends, a friend met in a flamenco dance course, old associates from political movements, and a former fellow teacher.

While not all relatives who attended church made promises for Lucia, all but one of the persons who did make promises involving saints were church attenders. Figure 1 reflects the massive falling-away in church attendance in Spain over the past 15 years, attributable in part to confusion as to just what Catholicism was in the wake of the Second Vatican Council, and in part to the dissolution of the Francoist Church-State alliance, which provided political and social rewards for church attendance and penalties for non-conformity. Lucia's family is quite presentative in that the older generation, on one side of rural anded origins and on the other of bourgeois military stock, still attends church, but only two of the twelve siblings of Lourdes and Eligio do. Only four of the twelve have baptized their children.

Lucia's crisis provided a test for the depth of this process of secularization, for all of these siblings had a heavily religious education and upbringing, and in the 1960's were still involved in the give-and-take of promises and novenas for the passing of examinations in their highly grade-conscious family. And in fact while some of them might be termed culturally anticlerical in a mild way, they have a more indifferent than an outright antireligious or atheist public stance. Lucia's baptism was done in private, "just in case". For Lourdes, "just in case" meant in case the saints or divine beings did indeed have an effect on lige and earth, and would be influenced by Lucia's baptism. The decision to baptize her was made entirely by her parents, but was very important to her grandparents. Nevertheless it did not impel Lourdes or Eligio to begin attending church. Lourdes, a sister, and Eligio also made some sacrifices, but as I have said, these very personal deals were not made to any power or being in particular, although they were certainly strategies learned in a Catholic upbringing.

At least in the short run, the chances of Lucia's crisis provoking a return to churchly religion for anyone involved is low. But the Spain of the 1980's was very different from the highly polarized nation of the 1890-1936 period, in which some segments of the population were violently, consciously anti-religious. On a deep level, as a reminder of mortality and a human lack of control over what is near and dear, I would say that to Lourdes, Eligio, and some of their siblings, Lucia's near death brought a sense of humility and modesty in religious matters.

The sophistication of this younger generation in professional matters, and their spiritual self-sufficiency, have left them rather unsophisticated and unprepared in devotional matters. Because I study such things, I have had people come to me who are unwell (including one anthropologist) and ask which saint will make them better. I am a dubious authority, but all around them these young people have experts in servants, concierges, and the rural-origin working class in general. For while church attendance has dropped off, in much of Spain shrine attendance and the creation of new shrines have not. Some saints or would-be

saints are considered by those in the know to be especially miraculous, and several of them were turned to on Lucia s behalf -Fray Leopoldo, St. Martin of Porres, St. Rita, and St. Gema. A friend of Lourdes who made her promise to St. Martin of Porres was introduced to the devotion by her mother's cleaning lady, who made a special trip to a rural shrine every couple of weeks, and once took her along. Martin of Porres (1579-1639) was only canonized in 1962. The St. Gema in a Madrid shrine became Lucia's helper through Lourdes sister's doorlady, an immigrant to Madrid from Jaen. The devotion to Fray Leopoldo, a Capuchin alms-gatherer who died in Grenada in 1956, has been actively spread through the Canary Islands and Andalucia by Capuchin Fathers going door to door. A little chapel to St. Rita (an Italian saint 1377-1447, and canonized in 1900, known as the Saint of Desperate Causes) was set up around 1980 in a tiny hamlet of one of the rural Canary Islands by a poor woman devotee, who raised the money going door to door. It was through this woman that Lourdes' uncle heard of the chapel and came to use it. Similarly, it was together with her servant and friend that Lourdes' religious sister made her promise to her island's major Marian shrine. The inter-class symbiosis with joint devotional objects as a central metaphor finds its ultimate expression in modern Europe in a number of socially significant visions by household servants, and in the wealthy families' adoption of famous visionaries as privileged household servants or protegees. In short, it would seem the younger, less religiously active generation has two kinds of sources of religious knowledge to fall back on: that of their childhood, still present in their parents and their memories; and that of a devotionally active service class, alert to the latest developments in divine power.

On the whole, women were more likely to contact saints, and women were the ones who activated the contacts to reach the doctors, even if those contacts originated in their husbands, brothers, or male friends. The religious and nurturing specialization of women may mask what is really a household division of labor. When I asked Lourdes' mother and father what prayers they had made, the mother said she had lit an oil lamp to the Virgen de los Dolores. The father agreed that she had lit the lamp, but said (and this was new to the mother) that for his part he considered the lamp to have been directed to St. Patrick. He not only considered his wife's action to be a joint one, but he considered the action to have separate, if equal, meanings. The men's relative inexperience in these matters can be seen in Eligio's brother. When Lucia recovered, he prepared to fulfill his promise to Fray Leopoldo in Grenada. His wife (who made no promise) and his mother in law made him wait until Lucia could conveniently accompany him, since she was the object of his promise and should be presented, cured, to the saint. He deferred to them in their domain.

Saints can be women as well as men, mothers (especially if one includes Mary as a saint) as well as fathers; but there are few women doctors in Spain in positions of authority. Not only were all of Lucia's doctors and their superiors men, but so were the final intermediaries through which the family had to go to reach them. Lucia's family did find ways to some of the nurses in the

island hospital, though not those directly involved in Lucia's care, and these nurses did help to find ways around the rules. Nurses decided whether Lucia's parents could spend the night in her room with her against the hospital rules, and Lucia and her parents were desperate when in spite of the Director's intervention, some members of the nursing staff still would not permit it. None of the nurses in Barcelona could be reached through contacts; instead they had to be dealt with by Lourdes and Eligio as they met them in the hospital. Some were very helpful, and when Lucia left Barcelona, siblings in the Canary Islands were asked to send local gifts to two nurses as well as the operating surgeons.

In most hospitals and ambulatory clinics there is someone to talk to, who thereby accrues a certain public importance and provides information, though not control, to the patient and family. These persons are usually auxiliary personnel such as orderlies or nursing assistants. For most of society's powerless, they are as close to the medical hierarchy as one can get, but they are rarely useful, because of their subaltern position, in arousing doctors' interest in a patient. If Lucia came from a less well-connected or virtuosic family, some of the chains of contacts, instead of reaching doctors, would have ended in nurses and other auxiliary personnel.

There are some ways that saints are similar to doctors. Like doctors they are thought to have the power of life and death. Saints have specialities many people consider the saints to be arranged in a hierarchy, and each devotee seems to have an opinion on which saints are most effective. Both saints and doctors inspire a certain amount of awe on first approach. There are striking differences, however. Saints can be approached directly by anybody, rich or poor, who has taken the trouble to know them, which is not difficult. Saints have more time to listen to problems than doctors do, especially the doctors who serve the poor of Spain through the Social Security system and public hospitals. It is usually easier to love the saints.

It is because of these differences between saints and doctors that poorly connected people, poor people, rural people, and particularly the women of these categories, more likely try and influence the saints. By and large, among Lucia's relatives, those people who could get through to the doctors spent their time trying to influence them, but the two enterprises were by no means exclusive, and those like Lourdes' father who were both religiously inclined and well-connected did both.

Broader implications. The high number of interventions and its relation to medical prestige.

Lucia's maternal great aunt, Asunción, lay between life and death for months in late 1986, until she died of heart failure. For Lucia a nation-wide medical establishment was quizzed and alerted; for Asuncion local doctors would do. (When she was younger she had herself examined by doctors on two other islands.) For Lucia ten saints were contacted, not to mention a bishop and magnetist, in a desperate attempt for a miracle. For Asunción only four saints were contacted, and the prayer was,

"que sea lo que Dios quiera," -let God's will be done. Part of the explanation for this difference can be seen in mortality statistics: only about 800 girls age 1 to 4 die every year in Spain; in Asunción's 75-79 age group about 24,000 women die each year. In the Western world life at a young age is more highly valued than life at an old age, and young death is known to be unusual. Or put another way, death and dying is respected for the old, and challenged as unnatural for the young. The arousal of doctors would have been infinitely more difficult for Asuncion than for Lucia, as most anyone with a grievously ill elderly parent knows from bitter experience.

Nonetheless, there are many Lucias in Spain. About 4000 children from age 1 to 14 years die in Spain annually, and about 21,000 persons age 15-44, after which age the death rate rises dramatically. And a conservative guess is that 4 or 5 times as many must survive life-threatening illnesses or accidents.

The anguish and energy devoted to saving these lives, even in families not as large as those of Lourdes and Eligio, adds up to an enormous, continuous force. We can assume that this force will be directed both to human practitioners and to the saints. It is a force that among other things creates and feeds hierarchies.

Ease of transportation and communication, and frequent medical conferences permit many doctors to compete in a national prestige market. There are famous doctors. Spanish villagers are as glib with the names of specialists in the provincial capital as are American college students with the names of professors. Like Lucia's family, the middle class uses medical specialists nationwide, and for the wealthy, information and access to experts throughout the Western world are readily available. It is interesting in Lucia's case how attentions weredirected to hospital administrators as well as to the surgeons and their direct superiors. For the recipients of this attention there is a geometric progression of reputation, prestige and power, assuming they are reasonably good at their work. The interventions in Lucia's case help to explain inductively why in Spain medical reputations are so inflated, and it provides the kind of building block from which the reputations are made. This power accrues as well to the feeders in their connection networks -the intermediaries in Figure 1 capable of getting their attention. It also accrues to the institutions to which they are affiliated, which have an interest in letting their doctors' reputations be known.

Lourdes' and Eligio's intense efforts to gain the interest of doctors and administrators in Lucia are responses to the nature of Spain's Social Security system, in which, since the clients do not pay the doctors, doctors have no reason to be especially interested in any particular case. If Lourdes and Eligio could simply have found a good doctor and paid him or her as private patients, their task would have been simpler. The latter is what wealthy persons might do. It is also what some relatively poor or rural families do, if they are unable to connect with the Social Security specialists. Rather than trust in the state medical bureaucracy in its unalerted form, they scrape together the money to pay a private doctor.

Note that the older generation in Figure 1 had little access to this network. As more and more of Spain is socially mobilized,

more and more persons will be able to consider medicine on a national scale, and the reputations of certain doctors, hospitals, and even folk healers will become even more inflated. Symptomatic of medical power is the failure of the social democratic government of Felipe González to enforce even mild reforms limiting the accumulation of medical positions by the most prominent doctors while there are thousands of other doctors unemployed.

The special interest a doctor took in Lucia was a favor, and favors could be asked in return. Within a couple of months after Lourdes' father contacted a doctor in Madrid, a friend of that doctor, a biologist, happened to come to the island to see about investing in a shellfish hatchery. For two days Lourdes' father rove him around the island, scouting out likely sites. The medical alert for Lucia fit into a network of exchanges that eventually will accrue not just to the doctors prestige, but also, however indirectly, to their practical benefit.

Implications for religious organizations .

The medical analogy is useful for pointing out the extent to which the saints and their keepers, like the doctors and their hospitals, are competing in a national or international prestige hierarchy. As in medicine, the high stakes sharpen the competition. In Lucia's case little money or goods went either to the saints or the doctors (to the saints the odd mass, a gift of maybe 1000 pesetas or a bottle of oil when the shrine is visited; to the surgeons presents costing 20,000 pesetas, but no direct medical costs, as the operation was covered by Social Security). Rather the saints like the doctors earn goodwill and prestige. I did after all, hear about these promises and devotions once Lucia was cured. While votive offerings in the form of wax or tin limbs and body parts, photographs, and paintings of accidents are rather out of style in most parts of Spain, there are vestiges here in the flowers the uncle brought to St. Rita -flowers that other visitors to the shrine will see, and know that they were brought in gratitude by a satisfied devotee. And the general idea of votive offerings -- not only as a token of gratitude, but also as a public testimony of the saint's power, is maintained by the informal diffusion among a wide circle of friends of the saint's positive response to prayer.

It is upon such cases, and a multitude of less urgent problems, that the extensive network of shrines in Central and Southern Europe (and in most of the world's religions) is based. Shrine offerings help maintain entire communities of monks and nuns in some places. Most of the shrines in Spain are operated by diocesan clergy. Such is the case with the Virgin who is the patron saint of the major island where Lourdes' sister lives. Her walk to the shrine with her maid and her maid's daughter will bring prestige and probably alms to the Virgin, and also to the clergy who maintain Her.

Such is also the case with St. Martin of Porres and St. Rita, whose devotees will visit them in churches and chapels where diocesan clergy say mass. But Martin of Porres was a Dominican, and his image wears the Dominican habit; Rita was an Augustinian nun, and devotion to her in urban Spain is generally channelled

through Augustinian houses. Their help for Lucia, then, to some extent will redound to their orders, as with that of St. Gemma, Fray Leopoldo, and Pascual Bailon, who will be thanked in shrines directly operated by Passionists, Capuchins, and Franciscan nuns, respectively. About a third of the 20 most important shrines in Spain are operated by religious communities.

Most of the male religious orders were turned out of their houses in Spain in the 19th century, and their entailed property was sold at auction. Their re-entry later in the same century was slow, and one of the ways they made their mark was through parish revival missions, in which the saints of the order were propagated with lithographs and confraternities. Proposing the lives of their saints as exemplary was an important psychological stage in the stimulation of vocations. The propagation of order saints and devotions was particularly critical for religious communities that were not primarily teaching orders, and who therefore did not have a ready-made source of vocations.

The history of the industrial propagation of particular saints, critical for the survival of shrines and the growth of the saint's prestige, goes back to the very beginnings of mass-produced literature. In the first years of the 16th century, religious prints were being sent from Flanders to Spain in their tens of thousands at a time. Some of the early Spanish printed books were shrine histories, which gave a miraculous pedigree, account of miracles, and examples of shrines' specialties.

In the late 19th century, however, the competition of saints for veneration was stepped up by the publication of monthly or bi-monthly magazines dedicated to their devotions. A large part or these magazines, which in effect served and still serve as mail order shrines, is dedicated to the listing of persons grateful to a particular saint for favors and excerpts from the letters of grateful devotees. Such publications are important as regular reminders to subscribers over a wide area of a given saint's power, the same kind of reminder that is still provided in some regions by the regular visit of the shrine representative with a small replica image, or the circulation on a monthly basis among a group of families of a small image with an alms box.

They are particularly crucial in spreading the cult of holy persons who are not yet saints, like Fray Leopoldo. Every two months I receive a Fray Leopoldo Boletín, now in its 30th year. The latest issue has 4 pages of articles and notices of interest to pilgrims, 1 page of advertisements of books about Fray Leopoldo and other Capuchin holy people, and 18 pages of favors by Fray Leopoldo, mostly in southern Spain. Others I have seen include El Mensajero del Sagrado Corazon, Guadalupe, El Santo (about San Antonio de Padua), Redención (Passionist saints), El Rosario, and a multitude of leaflets for yet-to-be sainted holy people as well as yet unapproved Marian devotions based on recent apparitions.

Unlike the shrine histories of the past, current devotional literature does not normally contain salutary tales about the people who neglected to fulfill their promises only to have the ailment or accident re-occur, worse than ever. The old idea of divine chastisement for non-fulfillment is still present in older devotees, but in most clergy and younger lay persons it is out of keeping with more modern notions of a loving, merciful God, which

is coextensive to the saintly intermediaries. Fulfillment of promises is rather a moral duty, like those of any friend patron-client relation. If promises are not fulfilled, then for a future crisis one would feel uneasy asking the same saint again. As of this writing, only some of the promises for Lucia have been completed -- the ones to more local shrines. Those to shrines will await a favorable combination of distant circumstances. Many of the people in Figure 1 had other promises to saints pending in this way. Lourdes cousin who made a promise to the Souls in Purgatory perhaps did not make her promise to Fray Leopoldo because she already had pending a visit to him for a grandchild that recovered from meningitis. And people know that if they are genuinely unable to fulfill a vow, any priest can opprove its substitution by another, feasible sacrifice. Like private doctors in present-day Spain, religious ost organizations find aggressive collection procedures (the emphasis on divine punishment) distasteful.

Finally a word about authentication. It enormously facilitates the cult of a saint (or a version of Mary) if its images can be displayed in churches, and it can be referred to in print as a Saint, or approved. The power generated by the thousands of cases like Lucia's among dozens of persons in each case, can help legitimate a holy figure, first in the dioceses which must support applications for sainthood, and second in the Vatican authentication. The canonization of Fray Leopoldo is moving forward relatively fast largely because of the devotional momentum of his cult.

The existence of international religious orders, which spread word of their holy people across diocesan and international boundaries, gives them a great advantage in the promotion of saints. Similarly, the long drawn-out process of approval, through which evidence of broad and deep devotion must be maintained, demands an organization with an institutional dedication that extends beyond a single generation of enthusiasts, and which can maintain for decades or even centuries a "procurador" to plead the saint's case.

Each order in Spain has one or several persons part of whose task is to provide a verifiable outlet for lay devotion to holy persons up for approval as saints, and many of these procurators are in charge of several holy reputations, some of which are dormant in terms of public veneration. Massive lay devotion to one of these would-be saints will inevitably make the procurator pay more attention to that case. In the Fray Leopoldo newsletter there is in every other issue a short list of persons giving thanks for favors done by the Blessed Diego José de Cádiz, the Capuchin famous in the 18th century for his revival meetings. Whether Diego de Cadiz or Fray Leopoldo becomes a saint first will depend on the Roman Curia and the Pope. In their decisions factors will intervene like the strategic need to promote certain virtues, the inopportuneness of certain religious stances, and geopolitical considerations. But popularity also plays a part, and in this respect Fray Leopoldo has already won in the competition for the attention of the Capuchins and the people of Andalusia. Most of the most popular saints named in the 20th century, like Gemma Galgani and Thérèse de Lisieux built up a substantial devotion before they were named.

By the same there this is an unspoken competition among the saints of different orders, and between these generalized, more international saints (Lucia's family prayed to saints that were Italian, Peruvian, Spanish and Irish) and the local shrines, one of a kind, under diocesan control, like the different versions of Mary that are the patron saints of six of the Canary Islands.

In the context of this competition, a successful promise entails dissemination of a saint's success, and the shrine newsletters play on this understanding, exist because of it. Devotees are enthusiastic promoters, collaborators with the shrine keepers for the renown of their helper. The older shrine histories were more candid than the modern ones in mentioning the saints and shrines that were tried and failed, as well as the fact that doctors had tried and failed, before their saint or Marian devotion was tried and proved successful. Now there is no way to hear about a saint failing (and it is still rare in Spain for doctors to be sued for malpractice). A saint is in a no-lose situation. If a saint proves ineffective, the human petitioner might decide not to, try the same saint on another occasion, but the failure is not mentioned. The religious promises for Lucia were never brought up until it became clear that she was well.

Implications for state formulation

Votive devotion predates the modern state in Europe. Its congruence with patron-client relations has been widely discussed. The existence of this unseen network of local, regional, national, and transnational allegiances, as with the all-human networks of contacts leading to doctors, provide tissue or fabric for the growth or composition of social or political communities, for the different groupings of social beings among which polities and citizens are constantly choosing. While the nature of the human-divine relation seems to vary according to human hierarchical deportment (in Spain shifting over the past centuries from more formal to more affectionate), among practising Catholics and many nonpractising ones, the formation of ongoing relations with divine figures has been a constant core of religious activity, and the practice of these relations cannot help but reinforce similar relations in the social and political arena.

I leave as open questions whether, as may be the case with the generation of Lourdes and Eligio, people with more access to worldly power (in this case medicine) are now using the saints less; and whether when power is more evenly distributed the need for heavenly helpers or friends decreases. At least in some parts of Spain that does not seem to be the case since the death of Francisco Franco and the establishment of parliamentary government. At any rate one would first have to evaluate whether in fact since Franco's death more people, or simply different people, have access to power, since the age-old systems of enchufe and personal contacts are still heavily used.

Implications for the study of religion

What is taken as the unit of study affects what one sees as the total picture of religious devotion. If, as in several works

of myself and others, a sacred figure or a shrine is taken as the focus of attention, and the nature of vows is evaluated from votive offerings or written testimonials, then one gains little idea of the way that a large number of persons are interceding with a number of saints over a single given incident or illness. If the unexamined assumption is that for every need there is a single vow made to a saint who is already the personal patron of the devotee, or to a specialist saint generally used for that particular purpose, one loses sight of the competition of saints and their keepers for the same kind of case, one overestimates the number of cases, and one underestimates the number of persons on whom a given crisis makes an impact. One also, by extension, underestimates the changing nature of the status of saints in the ystem, for many of them, as we have seen, are not consulted or

chanked at shrines at all.

Another way I had previously considered the problem, precisely to get around some of these problems, was to centre on a person or a number of persons (but without considering them in the form of working social sets) and asking what promises the person had made or what shrines the person had gone to. This strategy also missed the fact that for every important crisis there are a multiplicity of vows from different people.

I think that my background of United States Protestantism, in which one's own salvation is foremost, and really one's own business, unconsciously led me to assume that Spaniards' relations with the saints would primarily be on their own behalf. If Lucia's case is at all representative, people's interventions with the divine in Spain are preponderantly for the benefit of others.

The advantage of centering on the incident and the entire social network that deals with the incident is that it provides a more complete picture of religious interventions. And in the process, the relevance of parallel or congruent secular interventions become clear.

This approach also provides a way to get at the composition of the ephemeral informal groups that at any one time make people's lives meaningful. By following interventions in a life-threatening crisis, one can see, as the people themselves see, who friends and significant kin really are. A personal crisis in a social group is like a coup or a revolution in a wider society in that it exposes significant breaks or fault lines by the subsequent alineations of persons or classes.

A central focus on a particular holy figure may lead to excessive concentration on the tactics and strategies of the shrine keepers and the saint promoters, and the implication that in essential ways devotion is being provoked. The danger, of course, is an eternal one for social scientists, whose disciplines grew up as a way to explain the world as an alternative to religion. The danger is the reduction of the religious impulse to a dependent variable, in this case as the product of the manipulation of a priestly class, or the people who really control the society. But there can be no mistake, living the anguish born of love for Lucia, that the irreducible unit, the motor force of the religious and secular interventions came from intense human feeling. This feeling was not aroused by the competitive marketing practices of shrine tenders, religious

orders, or doctors. It is the basis of their power, not the product of their power. It seems to me that until basic, universal feelings such as love, fear, sorrow, and fun can be incorporated into social scientific understanding, then the risk of reductionism of religion and most of meaningful human experience will always be with us. It is out of the demands of such feelings that religious regime and states are created, respond, and are maintained.