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FOREIGNERS AND THE PREVENTION OF THE PLAGUE IN EARLY MODERN BARCELONA (1629–51)

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ABSTRACT

Foreigners were a target of plague prevention policies in the early modern period. The implementation of mechanisms such as city lockdowns, health passes or quarantines was a standard procedure in the prevention of epidemics entering cities. This study examines Barcelona's response to both foreign and local outbreaks, with a particular focus on the preventive mechanisms applied to foreigners. An analysis of plague prevention measures between 1629 and 1656 allows us to systematise how information was gathered, study certain behaviours, what restrictions and exceptions were imposed, and the overall strategies to keep the plague from reaching Barcelona.

Keywords: Barcelona, plague, prevention, Consell de Cent, health

GLI STRANIERI E LA PREVENZIONE DELLA PESTE NELLA BARCELLONA MODERNA

SINTESI

Gli stranieri rappresentavano un obiettivo centrale delle politiche di prevenzione della peste durante l'epoca moderna. L'adozione di misure quali la chiusura delle città, i bollette di sanità e le quarantene costituiva una prassi consolidata per impedire l'ingresso delle epidemie nei centri urbani. In questo studio analizziamo le strategie adottate dalla città di Barcellona di fronte alle epidemie, sia di origine esterna che catalana, con particolare attenzione ai meccanismi preventivi applicati agli stranieri. L'esame delle misure attuate tra il 1629 e il 1656 consente di sistematizzare le modalità di raccolta delle informazioni, i comportamenti adottati, le limitazioni imposte, le proibizioni, le eccezioni e, in generale, le strategie volte a impedire l'ingresso della peste a Barcellona.

Parole chiave: Barcellona, peste, prevenzione, Consell de Cent, salute

INTRODUCTION¹

The control of epidemics in early modern cities was of great importance because of the impact they had on public health. The introduction of a plague epidemic into an urban centre could have catastrophic demographic consequences, with mortality rates exceeding fifty percent, often exacerbated by early modern treatments. Extensive research has been conducted in England, particularly London (Newman, 2012; Newton, 2018; Slack, 1985; Udale, 2022), but also Italy (Cipolla, 1976; 1981; Palmer, 1978; Henderson, 2019;2020; Alfani, 2013), Denmark (Christensen, 2003), these texts were produced from both the perspective of prevention and from action once the epidemic had been declared.

Barcelona has also been the focus of significant historiographical research on its plague outbreaks, particularly through the studies of José Luis Betrán. The city maintained a more or less constant relationship with the plague from the late Middle Ages onward. If we consider only the outbreaks that affected Barcelona after the Black Death (Günzberg Moll, 1989, 18–22) and its social impact (Arrizabalaga, 1991), there are twenty-one recorded epidemics between 1362 and 1589 (Betrán Moya, 2023, 223). The epidemic of 1589–1590, the last before those examined in this study, had a significant impact (Corteguera, 2005, 140–143). Despite the city's efforts to contain the outbreak as soon as reports surfaced, the plague struck Barcelona with devastating force. Mortality estimates vary widely, ranging from 11,723 deaths (Smith, 1936, 86) to more than 22,000, as cited by Núria Sales in *Segles de la decadència* (Sales, 1989, 254), based on some improvised calculations.

As a result, every possible measure had to be taken to prevent the plague from entering the city. The seventeenth century provides several epidemics that allow us to observe and systematise the actions of the *Consell de Cent*² in controlling access to Barcelona, making every effort to prevent the arrival of infected individuals or contaminated clothing. Based primarily on the documentation generated by the municipal government itself, this study will categorise the municipal government's preventive measures concerning foreigners during the successive plague outbreaks between 1628 and 1656. Regarding foreign epidemics, particular attention will be given to those that affected the Mediterranean region between 1628 and 1631, as well as the Naples outbreak of 1656.³ For those impacting Catalonia, including Barcelona itself, this study will consider the plagues of Regencós in 1629 and Tortosa in 1650. The Great Plague of London (1665–66), distant from a Catalan perspective, will be mentioned only in passing.

Henderson categorised plague responses into 'containment, mitigation, quarantine,' depending on whether the goal was to prevent the plague's arrival or alleviate

1 This article is based upon work from the COST Action CA22149 *Research Network for Interdisciplinary Studies of Transhistorical Deliberative Democracy (CHANGECODE)*, supported by COST (European Cooperation in Science and Technology).

2 Name of the municipal government institution of Barcelona, from the thirteenth century to 1714.

3 For a scientific and technical view of this mortality cf. Dean et al. (2018, 1304–1309).

its impact (Henderson, 2020) or the three points outlined by Palmer: preventing its origin in Venice, its importation, or its spread within the city (Palmer, 1978, 123). This study will focus on preventive action outside the city, which ranged from sealing off houses where infections were detected – similar to practices described in London by Newman (2012, 812) – to more symbolic actions aimed at reinforcing moral rectitude within the city. It was common practice to shut down gambling houses or brothels (AHCB, reg. delib., 159, fol. 323r), reflecting the classical perception of plague as divine retribution. In 1632, the viceroy even invoked the Generalitat's cooperation in border control by declaring, 'the plague was akin to war, a celestial war.' (Sans i Travé, 1999, 399). This standard measure – also used in London (Slack, 1985, 305) – will be set aside in favour of examining preventive actions outside the city walls and the targeting of foreigners as potential contagion sources.

This study on Barcelona follows the framework established by Betrán's extensive scholarship, particularly his notable work *La peste en la Barcelona de los Austrias* (1996). Furthermore, through meticulous archival research in Barcelona's municipal records, it will compare the strategies enacted by the Consell de Cent with those of other major European cities – such as Venice, Florence, and London. This comparative approach will determine whether the preventive measures taken in this Mediterranean capital aligned with or diverged from those of other leading early modern European urban centres.

BETWEEN RECEIVING NEWS AND THE CITY LOCKDOWN

The Value of International Intelligence

It is challenging to comprehend the mechanisms employed by the Consell de Cent to prevent the entry of plague into Barcelona – ranging from information gathering to blockades, arrests, and quarantines – without first considering the extent of its jurisdiction. As Esteve Gilabert Bruniquer described in Chapter 28 of his *Relació Sumària*:

The councillors of Barcelona are responsible for the guard and custody of the city, exercising jurisdiction over all persons, clothing, and goods in times of plague, or whenever there are reports or suspicions of contagious disease. They issue proclamations under penalty of death, erect gallows before the city gates, and have the authority to detain, investigate, and judge such matters, proceeding jurisdictionally without any limitation (Bruniquer, 1885, 60).

Barcelona's public health measures operated in phases, gradually tightening restrictions on movement and trade based on the severity and proximity of the epidemic. This is clearly reflected in the numerous public proclamations issued upon the confirmation of plague outbreaks, the majority of which focused on limiting commercial and personal contact with the outside world (AHCB, reg.

ord., 28, fol. 77v–84v). The primary concern was obtaining accurate information for public safety, as Palmer highlights with Venice's contacts with Constantinople (Palmer, 1978, 133). While seemingly obvious, reliable data on the health status of trading regions and towns was essential to prevent outbreaks. The Consell de Cent recognised this, understanding the difficulty of closing off a large city like Barcelona and the potential economic impact. Thus, knowledge of external events was vital, gathered through Barcelona's agents, the royal court in Madrid, or arriving merchants and sailors.

When a plague outbreak was declared, authorities banned trade with affected regions – with ships that had stopped in those areas – closed city gates, posted guards, and established quarantines for people and goods. To facilitate this process, Barcelona maintained a network of relationships and ensured the smooth flow of communication. The two main cities relied upon for this purpose were Perpignan and Girona. The former served as the true gateway to France and the principal channel of information from Narbonne (Betrán Moya, 1996, 264). Moreover, commercial contacts across the Pyrenees were a constant (salt, horses and mules, oil...). It was a much more dynamic area than it seemed and a proper network for muleteers, as demonstrated by the studies of Patrici Pojada (2012, 29–48; 2021, 53–85).

We can clearly establish how news of foreign contagions reached Barcelona and its immediate impact. Implementing specific measures and restrictions was much more difficult when it came to foreign outbreaks, often resulting in the blocking of trade with entire countries. For instance, on 13 December 1628, it was reported, 'in the city of Narbonne, houses had been closed due to the plague' (AHCB, reg. delib., 138, fol. 10v). A few months later, the channels of communication were widened. On 22 March 1629, the viceroy announced that the consuls of Perpignan had reported that the 'contagious disease' was worsening in Toulouse and that they were prepared to 'burn part of the town to save the rest,'⁴ while the situation in Narbonne was also deteriorating considerably (AHCB, reg. delib., 138, fol. 80v). Upon learning of the situation in southern France and seeking confirmation, a message was sent to Don Fèlix Malendrich, captain of the castle of Salses, located directly on the French border. In their deliberations on 24 April 1629, officials stated that Malendrich would need to report on areas in France with confirmed outbreaks and send updates as necessary if new cases arose (AHCB, reg. delib., 138, fol. 104v).

Moreover, just as they approved easing restrictions and other expenses in August 1629 (AHCB, reg. delib., 138, fol. 164v), a letter arrived from Perpignan warning that the plague had spread to Arles in Provence and other parts of France (AHCB, reg. delib., 138, fol. 170r). Only ten days later, on 25 August, it was noted, 'according to reports from various reliable sources, the plague

4 All the documents transcribed are originally in Catalan or Spanish.

in France is worsening so severely that it has engulfed most of Languedoc and Provence, reaching the border of Catalonia' (AHCB, reg. delib., 138, fol. 178v). From that point onward, authorities reinforced the closure of city gates and restricted access to Barcelona.⁵ As we will see, trade with France was halted, and entry from the French was prohibited. The flow of information remained constant, especially in Catalonia – Perpignan's consuls reported plague deaths in Thuir on 7 June 1630 (AHCB, reg. delib., 139, fol. 138v), by 13 February 1650, letters were sent to all cities, towns, and settlements 'as had been done in similar circumstances' to report the plague in Tortosa (AHCB, reg. delib., 159, fol. 107v).

When the Naples epidemic of 1656 was declared, Barcelona's response was similar. The difficult decade of the 1650s, marked by plagues and the challenge of controlling them in Catalonia, led to more rapid implementation of measures. In March 1656, authorities used ship captains to gather health updates from the Kingdom of Sardinia (AHCB, reg. delib., 165, fol. 99v), but by June, they had banned entry to vessels arriving from Cairo and Alexandria.⁶ Officials also urged vigilance and restricted trade with ships from Naples, Livorno, Nice or Sicily (AHCB, reg. delib., 165, fol. 162v). However, the final warning about the plague in Naples came from the consul in Genoa, who reported the situation there (AHCB, reg. delib., 165, fol. 195v–196r). Immediately, Barcelona asked the viceroy to alert all the towns and cities in Catalonia, ordering them to 'refuse entry to any galleys, ships, boats or other vessels coming from Naples, Sardinia, Civitavecchia, Bergamo or any other areas with confirmed or suspected plague' (AHCB, reg. delib., 165, fol. 198v). On 24 July 1656, a general alert was issued.

Another example is the Great Plague of London, which had limited repercussions in Barcelona. Far more significant was the August 1665 report from Pagan Doria, governor of Genoa's galleys, that 'five or six people were dying daily from contagion' (AHCB, reg. delib., 174, fol. 175v–176r) just a league from Toulon, compared to the September warnings about London's plague (AHCB, reg. delib., 174, fol. 187r). Months earlier, in March 1665, Marseille had been the focus of concern, with the authorities requesting health passes and sailors from two ships arriving from there (AHCB, reg. delib., 174, fol. 55r). Trade with England was banned then, and warnings persisted throughout the year. By August 1666, the ban extended to trade with Boulogne, England, Bruges, Nieuwpoort and Dunkirk. Violators faced the death penalty, and their goods and ships were burned (AHCB, reg. delib., 175, fol. 209r) – measures similar to

5 For this same plague, we have a quite similar description from the Florentine (Henderson, 2019, 25–27) and Danish perspectives (Christensen, 2003, 437–438).

6 In fact, it was the first ban for all cities. As Palmer explains in the case of Venice, 'once an area was known to be infected, it was possible for Venice to place it under a ban prohibiting travel to and from the area including commercial relations' (Palmer, 1978, 134).

those described by Cipolla or Palmer for the fifteenth century (Cipolla, 1976, 28; Palmer, 1978, 156–160). Information about the plague reached the municipal government of Barcelona via the viceroy's court.⁷

As Betrán Moya points out, in a premodern society – where scientific understanding of the plague was still lacking and would only emerge in the late nineteenth century with Alexandre Yersin – plague containment was more of a political than medical matter (Betrán Moya, 2023, 224).⁸ When the threat of plague was confirmed in neighbouring regions, Barcelona activated its political and control mechanisms. The city government mobilised the *Dotzena de morbo* ('Dozen of Disease' in original Catalan), a commission charged with deliberating and deciding on public health matters – a body grown from an initial membership of eight (Betrán Moya, 1993). Their work, alongside that of the Consell de Cent's councillors, accelerated preventive decision-making to contain the spread of disease. Municipal containment teams – modelled after Italian systems (Cipolla, 1986, 13–25) – went far beyond this: health officials (*morber*⁹), plague wardens, port guards, gatekeepers, physicians, surgeons... all operated under the jurisdiction and supervision of the municipal authorities.

In this sense, tensions between Catalan governing bodies (the Consell de Cent versus the *Diputació del General*) also played out through jurisdictional disputes. One such example occurred in January 1630. While it is true that the Generalitat had no authority over municipal policy, the city councillors ordered a general inspection of clothing in all the city's shops. Since textiles fell under the jurisdiction of the Generalitat, it filed a formal complaint. The municipality justified the measure by citing 'the threat of the plague' and their suspicion that infected fabrics might be present, insisting that their sole intention was to burn any contaminated materials found (Sans i Travé, 1999, 304).

The Plague within Catalonia: Dispatch of Physicians, Information and Prevention

When the plague appeared in Catalan territory, the Consell de Cent increased its control and information measures.¹⁰ Barcelona's leadership extended its influence, using its political authority to force neighbouring towns to impose restrictions (under threat of losing trade rights with the capital), sending physicians to verify outbreaks, and pressuring the viceroy to enforce broader trade

7 For the total number of reports of contagion received by Barcelona between 1458 and 1678 cf. Betrán Moya (1996, 266–268).

8 This becomes especially clear when compared to later quarantine measures, such as those described by Pere Salas Vives (2002, 55–82) for the case of Mallorca, and the number of state and municipal political actors involved in them.

9 A public official tasked with monitoring public health, particularly contagious diseases.

10 This text focuses on Barcelona, but there are studies on other Catalan cities such as Lleida (Roca Cabau, 2018, 15–39; 2020, 7–38) or Tarragona (Solà Colomer, 2021, 273–312).

and movement restrictions across Catalonia. Two declared plagues illustrate this: the successfully contained 1629 outbreak in Regencós and the 1650 outbreak in Tortosa – which was not stopped.

The first suspicion of contagion in Regencós arose on 12 December 1629. A complex mechanism was immediately implemented to protect Barcelona: the *veguers*¹¹ were instructed to refuse entry to anyone from the affected areas without a health pass.¹² Even those arriving from neighbouring villages had to present these documents (AHCB, reg. delib., 139, fol. 10r–v), as described by the English traveller Fynes Moryson as ‘this paper is vulgarly called *Bolletino della sanità*;¹³ and if any man want it, he is shut up in the *Lazareto*, or pest-house, forty days, till it appeare he is healthfull’ (Bamji, 2019, 441).

As Henderson described in his *Florence Under Siege*, for a health pass to be considered valid in the Italian case, it had to contain the following information:

In order to assess the validity of the pass they had to ascertain that it contained the person’s name, father’s name and surname, the place of origin and an attestation that they had been resident there for at least 22 days, along with an account of the places they had passed through, and where they had entered the Tuscan state (Henderson, 2019, 27).

It should be noted that the first news reports were always general in nature. For Regencós, a small town in Girona’s Empordà region, officials stated only that ‘at the Regencós site, within the territory of Begur Castle, in the diocese of Girona in the Empordà, in the house of T. Masó, three or four people had died from a certain contagious illness with some bizarre lumps’ (AHCB, reg. delib., 139, fol. 11v). That same day, a letter from Mataró’s magistrates traced the outbreak to the same source: Regencós.

To verify the claims, the Consell dispatched physician Joan Francesc Rossell and surgeon Onofre Soler,¹⁴ whose confirmation of the plague alarmed Girona’s officials (AHCB, reg. delib., 139, fol. 20v). For further confirmation, a second team – physician Joan Pau March Stalpí and surgeon Pere Bosch – was sent to conduct physical examinations. Their conclusion was unequivocal: ‘the disease in these areas is undoubtedly the plague’ (AHCB, reg. delib., 139, 25v–26r). Strict measures followed swiftly.

The 1650 Tortosa outbreak followed a similar pattern. While the one from Regencós had been imported from abroad, presumably through Lloret de Mar

11 *Veguers* were the district leaders of the highest-level regional division of Catalonia, a *vegueria*.

12 This refers to the system of printed documents certifying the good health of the traveller’s place of origin, including his name and, typically, a brief description. Their use began in the Duchy of Milan in the fifteenth century and spread to other territories during the sixteenth century (Palmer, 1978, 137; Cipolla, 1976, 25–29).

13 In this text the standardised term ‘health pass’ is used, but in the original Catalan it appears as *Botlleta de salut*, a very similar term to the Italian described here.

14 With a daily wage of four pounds and four *sous* (Betrán Moya, 1996, 271)

and some French fabrics (AHCB, reg. deliber., 139, fol. 26r), the one from Tortosa had arrived from the south. Its spread to different parts of Spain can be traced from Alicante, where it was found in 1647 (Nadal, 1973, 41–43). Reports emerged that ‘in three or four houses in Tortosa, several people had died from a contagious plague disease’ (AHCB, reg. deliber., 159, fol. 104v). The Consell appointed physician March Jalpí and surgeon Joan Mates to investigate, instructing them to relay updates immediately via courier if new information arose en route (AHCB, reg. deliber., 159, fol. 104v). Unlike foreign outbreaks, firsthand assessments by Consell-appointed experts were critical to determining the threat level, particularly in confirming whether deaths stemmed from plague.

This intelligence-gathering often transcended formal political channels. For instance, a Capuchin friar in Tortosa informed the Provincial Vicar of Barcelona’s Capuchin Monastery about the outbreak (AHCB, reg. deliber., 159, fol. 105r), prompting swift communication to civic authorities. Similarly, on 30 May 1650 (Clara, 1982), a private citizen in Girona, ‘zealous for the common good of the homeland,’ sent a letter warning of plague in the city. Barcelona immediately sent physicians Dimas Vileta and Lluís Mora to verify the claims (AHCB, reg. deliber., 159, fol. 234r). When their initial assessment doubted that it was the plague (*no sie specie de mal contagiós de peste*) (AHCB, reg. deliber., 159, fol. 245r), additional experts – Joan Argila and Jaume Teixidor (Betrán Moya, 2012, 269) – were hired at 400 pounds each to corroborate (AHCB, reg. deliber., 159, fol. 329r).

Once contagions were confirmed, the dispatched physicians underwent their own quarantine. Those sent to Regencós were isolated for forty days in a private tower in Horta near Barcelona (AHCB, reg. deliber., 139, 63r–63v). For Tortosa, messengers were ordered to return on 22 February 1650, but had to quarantine before re-entering Barcelona (AHCB, reg. deliber., 159, fol. 113r). The ones dispatched to Girona were quarantined in a tower owned by a Dr Argila outside the city – a stark illustration of class disparities in quarantine conditions. To prevent contact between the tower’s resident farmer and the quarantined, the Consell stationed guards as a precaution against both contagion and potential issues (AHCB, reg. deliber., 159, fol. 305r).

The First Perimeter of Lockdown: Closing the City Walls

Faced with these challenges, one of the Barcelona government’s initial actions was to shut the city gates and increase security at those that remained open. The logic behind closing gates and bolstering guards was clear: fewer entry points meant tighter control. This was standard practice during all plague decrees in Barcelona at the time. Following the first reports of contagion in Narbonne and Toulouse in December 1628, the Consell de Cent ordered both the construction of barracks for gate guards and the installation of gallows (AHCB,

this, shifts began at midday instead. Keys were entrusted to the highest-ranking guard of each shift, following a strict social hierarchy: *militar* (in Catalan nomenclature, a person with noble privilege), citizen, merchant, artisan, or labourer. Penalties for tardiness or absence varied by status: 60 sous¹⁷ for nobles or citizens, 40 for merchants, and 20 for artisans or labourers (AHCB, reg. delib., 138, fol. 115v).

On a practical level, the city gates were to be opened daily to allow farmers with fields outside the walls to tend to their land while preventing crowds that could let the sick slip in unnoticed. A warning bell would ring one hour before closure. No one without a health pass from their place of origin was permitted entry. The gate of Sant Daniel was also ordered shut (AHCB, reg. delib., 138, fol. 116r) – a measure reminiscent of Michel de Montaigne’s infamous exclusion from Verona during a plague.

Lockdown measures escalated rapidly. By 13 May 1629, with confirmed reports of worsening outbreaks near Narbonne, the Portal de l’Àngel was closed, leaving only Sant Antoni, Portal Nou, and Portal de Mar open (AHCB, reg. delib., 138, fol. 121v). Foreigners – especially the French, even those with passes – were explicitly barred, including beggars and vagrants.¹⁸ Guards from closed gates were reassigned to open ones. Farmers were required to submit lists of workers exiting daily to ensure their return (AHCB, reg. delib., 138, fol. 122r). Practical innovations emerged: guards at Sant Antoni and Portal Nou issued lead tokens stamped with the date to those leaving the city. Without returning the same day with the token, re-entry was denied (AHCB, reg. delib., 139, fol. 27v). A similar system was imposed in 1651 during Barcelona’s plague (Betrán Moya, 1990; 2024), with those exiting marked to prevent unauthorised return (AHCB, reg. ord., 33, fol. 14r).

This model of gate closures, guard reinforcement, and movement control became a recurring strategy to deal with plagues and other sanitary protocols. By April 1650, during the Tortosa plague, only Portal de l’Àngel and Portal de Mar remained open (AHCB, reg. delib., 159, fol. 183v) – a shift from 1629 that sparked fresh complaints. Many farmers from Sant Antoni and Portal Nou protested, as the closures forced them to detour through crowded inner streets (AHCB, reg. delib., 159, fol. 357r) – that could also be filled with the sick, exacerbating tensions between public health needs and economic livelihoods.

17 Catalan currency (one pound = 20 sous) official equivalents: in coins from other regions, one ducat = 24 sous and one florin = 17 sous (Ventura, 1984, 441).

18 Measures against the poor enacted in Barcelona are similar to what other authors have pointed out. Based on Pullan’s (1999, 101–124) study, Henderson also states that the authorities used the disease as a justification to take measures against the poor members of society (Henderson, 2019, 25). Slack went further, saying that the ‘public health programme’ in Norwich in 1603 was ‘designed with the poor in mind’ (Slack, 1985, 306).

Establishing a Sanitary Perimeter: The Deployment Beyond the City Walls

We have examined the standard measures for controlling city access for foreigners and locals. Limiting entry to specific gates allowed thorough health pass checks and reduced infection risks. Beyond gate closures, the Consell de Cent enacted broader strategies, showcasing its jurisdictional reach. It was unable to enforce closures of mountain passes, nor did it have the capacity to extend beyond municipal boundaries, for it lacked the capacity to deploy troops outside the walls to patrol the passes and limit trade, as Florence did during the same epidemic in the summer of 1630 (Henderson, 2019, 27).

Nevertheless, the Consell de Cent had other preventive mechanisms at its disposal. In 1629, with plague confirmed in southern France and Regencós, a secondary perimeter was established outside Barcelona – a next line of defence to complement the city gates. This outer perimeter served as a first line of defence, as a first filter, working with the gate inspections to ensure the population's safety.

We will first examine the outermost checkpoints from the perspective of the city. These were intended to create a perimeter blockade, acting as a sanitary filter to reinforce internal security. With the blockade of external passes and at



Fig. 2: External perimeter for access control to Barcelona established during the 1629–30 plague. Land-based controls are in green, maritime controls in blue. Detail from the map *La Catalogne, dédiée au Roy*, by Placide de Sainte-Hélène, 1707 (BnF Gallica).

sea, the perimeter could be easily established, primarily due to the concentration of transportation through these channels, just as Palmer described in the case of Venice and the Adriatic (Palmer, 1978, 136). This involved checkpoints at key transit points: two for land trade and travellers (Hospitalet and La Trinitat) and two for maritime traffic (Montgat and Cap del Moll, the harbour entrance).

The checkpoints at Montgat, La Trinitat, and Hospitalet shared clear directives. Guards were issued stamps bearing the cross of Santa Eulalia¹⁹ (marked B X A), with additional letters denoting their location: S for Spitalet (Hospitalet), T for Trinitat, and M for Montgat. These seals had to be distributed to each of the guards so that they could stamp the health passes they deemed to be correctly issued – each stamp included the date and the guard’s name. This is reminiscent of what Bamji said about patents and using images or prints ‘aimed to make the creation of fraudulent copies more difficult, since it was harder to reproduce a woodcut design than pure text’ (Bamji, 2019, 446). Crucially, no passes from plague-infected zones like France or Begur were validated, regardless of documentation, whether coming by sea or land. In fact, Betrán already categorised the passes into three categories based on their level of security: clean, doubtful, and dirty. Essentially: those with no connection to areas with declared disease, those suspected of contact with infected areas, or those originating from infected zones (Betrán Moya, 1996, 282).

At Montgat, guards used boats to intercept ships from the Levant, directing them to dock for health pass inspections – those without valid passes were denied entry (AHCB, reg. delib., 139, fol. 30r–31r). The aim was to ensure the first contact with the boats occurred far from the city, minimising immediate risks and preventing those without proper health passes from approaching. The Cap del Moll checkpoint was responsible for inspecting all boats or ships that tried to enter the dock, whether from the east or the west, ‘going one mile out before the boats approached the dock’ (AHCB, reg. delib., 139, fol. 31v). Thus preventing contact between incoming ships and those already quarantined. Afterwards, guards soaked health passes in vinegar for disinfection, verified Montgat stamps, and recorded crew and passenger names, nationalities, and cargo details in logbooks. If any ship approached without permission, the guard would ‘fire at the ship the first time without a bullet, and then follow with bullets in case they refuse to obey’ (AHCB, reg. delib., 139, fol. 31v).

After this first line of perimeter control, with health passes checked and stamped, the port guard at Cap del Moll would take these passes to the councillors. In addition, they would keep a book with the names, surnames, and nationality of sailors and passengers, as well as the clothing they wore (AHCB, reg. delib., 139, fol. 32v). These books, made simultaneously as memorials, would be sewn and stored. The Consell de Cent even authorised arming these guards with arquebuses and muskets on the boats if necessary (AHCB, reg. delib., 139, fol. 26r). At Sant Antoni Gate, only individuals with same-day, stamped passes from Hospitalet were permitted entry (AHCB, reg.

19 Patron saint of Barcelona. According to tradition she was martyred in the time of Diocletian in Barcino itself, crucified on an X-shaped cross. Her cross is characterised by a marked vertical inclination.

delib., 139, fol. 54v). Those arriving via Montgat or Trinitat were rerouted to Portal Nou. A total ban applied to paupers, vagrants, beggars, and all French nationals – even with valid passes (AHCB, reg. delib., 139, fol. 55r).

Public decrees imposed harsh penalties for harbouring unauthorised persons, such as paupers, pilgrims or French with health passes not sealed by the guards of Hospitalet, Trinitat, or Montgat: 100 lashes and three years on the galleys (AHCB, reg. ord., 28, fol. 80r–v). These measures, different from the previously analysed, aimed to distance Barcelona from the contagion. In the other plague analysed here, the devastating outbreak of 1651 coincided with a time of war, making it impossible to implement policies outside the city. Sanabre notes that in 1651, ‘during the first quarter of the year, more than half of Barcelona’s inhabitants fled in search of greater safety for their health’ (Sanabre, 1956, 486). From August 1651 to October 1652, the Catalan capital suffered both a health disaster and the subsequent siege and famine that led to the city’s surrender to the forces of Philip IV of Spain. The diarist of the Consell de Cent (*Manual de Novells Ardits*), in his entry for 19 September 1652, lamented: ‘by the grace of God, this City now endures the three harshest punishments with which His Divine Majesty saw fit to afflict the people of Pharaoh: Plague, War, and Famine’ (Schwartz i Luna & Carreras i Candi, 1916, 312). This description hardly seems exaggerated when considering population data, with deaths estimated between 22,000 and 27,000 out of a population of approximately 45,000 (Cristòfol i Escorsa, 2020, 112). A year when the heart of Catalonia would follow Barcelona into the calamities of war and pestilence, even the Generalitat’s governing council relocated to Terrassa (Enrich Pola, 1993). Indeed, the outbreak that had originated in Valencia in 1647 (Peset et al., 1975, 197–231; Vilar Devías, 1992, 119–146) had a direct impact on the development of the Franco-Spanish War and Philip IV’s recapture of Barcelona (Marimon i Lluçà, 2016, 67–78).

FOREIGNERS AND THE GOVERNMENT’S DIRECT ACTIONS

Barcelona’s Main Limitation on Foreign Action: The Blockade of Entry by Sea

Barcelona’s identity as a maritime power was central to its economic vitality. As the Consell de Cent noted in its January 1630 public health ordinances, the city feared outbreaks precisely ‘for being a maritime hub and the extensive trade conducted here’ (AHCB, reg. ord., 28, fol. 77v–78r). This was no revelation – it is well known that the main economic activity of early modern cities with naval or fluvial prospects came through this route. The dynamism of the arrival of different types of boats and cargoes was a clear hallmark of Barcelona at that time, and it is the meticulous management of maritime traffic by the Consell in times of crisis that underlines the economic primacy of the port. Although entry was not denied outright, it was usually ensured by quarantining persons or goods (ten, twenty, or forty days). These passes functioned alongside pest houses, quarantines for travellers, or facilities for inspecting and certifying imported goods or textiles (Bamji, 2019, 442).

All this was done without considering the total closure of certain markets. This was summarised in June 1630 when the jurors of the city of Valencia wrote to the councillors of Barcelona asking about the health situation in France, doubting whether to allow entry to boats with clothing coming from there. The answer to the city of Valencia was clear:

in the present city, by royal edicts published by the viceroy and by the city, trade with the whole of France has been prohibited, and they do not allow the entry or inspection of people, ships or clothes coming from that kingdom, and ships coming from the east are not allowed entry without inspection. And if they are French ships, even if they come from other parts, and have not been loaded in France, we will give clearance to the goods if they are not the property of the French themselves, and we will not admit French ships or sailors at all (AHCB, reg. delib., 139, fol. 144r–v).

The trade ban extended beyond Barcelona, prohibiting all Catalans from dealing in French goods – both inside and outside the city (AHCB, reg. ord., 28, fol. 79v). These policies are almost identical to those described by Carlo Cipolla for the case of Florence in 1652: ‘Banishment or suspension’ depending on the degree of intensity applied to specific areas, where ‘no person, boat, merchandise or letter’ could enter unless it was through specific spaces designated for quarantine (Cipolla, 1981, 19).

This is one example of restrictions imposed by the Barcelona government on plague-affected countries, but there were others. Restrictions targeted both goods and people within the city. In April 1629, French citizens imprisoned in the Casa dels Àngels were ordered to leave the *vegueria* of Barcelona within four days or face 100 lashes (AHCB, reg. delib., 138, fol. 121v). Nonetheless, the two control mechanisms previously mentioned control mechanisms – health passes and quarantines – must be considered, along with the supply challenges they created for the city. It was, therefore, essential to balance health security and the supply of goods. In 1651, they were forced to reopen gates ‘to avoid starving their population’ (Alfaro Pérez & Marichalar Vigier, 2020, 32).

The Consell de Cent had the final say in whether foreign boats, in constant quarantines, were allowed into the city. Yet, there were vast differences in the decisions the councillors made based on the origin of the boat, its captain, or the nature of the goods. This is evident when they addressed the arrival of several vessels on the same day. On 29 December 1629,²⁰ three vessels received starkly different treatment: the first, a Catalan boat captained by Villar, was allowed in; the second, under Roig de Canet, carried goods from Genoa and, though it had not docked in any French port, had undergone transshipment near the islands off

20 I have adapted the year to the current way of expressing dates, because at the time they started the year on Christmas Day, so in the documentation we read 29 December 1630.

Marseilles – yet both the vessel and its cargo were cleared.²¹ In contrast, a French boat arriving from Ibiza with salt and a passenger was allowed to unload the salt – ‘for salt consumes anything bad’ and because the Genoese Jacomo Rabelle handled the cargo – and the passenger. However, the authorities ruled that ‘the boat and the sailors, being French, should not be allowed to enter and should leave’ (AHCB, reg. delib., 139, fol. 23v–24r). As Newman notes of London, the authorities acted when France or the Netherlands ‘suffered an outbreak and ordered customs officials to turn away or quarantine infected ships’ (Newman, 2012, 815), something very similar to what Christensen describes for Copenhagen (Christensen, 2003, 439).

The dual control was very restrictive, aiming to check the captain, the origin, the cargo, and the recipients to prevent the entry of disease. Sometimes, the restrictions were not lifted, even if everything was in order. On 2 March 1650, Captain Jacques Michel’s ship from Marseille, ‘despite the fact that the patents are clean and show good health,’ was ordered to quarantine at the Llobregat River at his own expense (AHCB, reg. delib., 159, fol. 119v). By April, all trade with Marseille was banned (AHCB, reg. delib., 159, fol. 183r).

The control of boats described here was customary in other European cities – during the plague outbreaks of 1628–31 in the northern Mediterranean or the plague in Naples in 1656, dozens of boats were inspected, stopped, quarantined and returned to the sea. Clothes were burned, people changed into clean garments, and letters were disinfected with vinegar – burning the infected clothing was key, as it prevented the possible smuggling of clothes abandoned by the sick or the dead, as described by Alfaro Pérez (2020, 19–20) in the case of Cabra (Córdoba). Disinfection methods varied by material, as detailed by Forn i Salvà (1993, 74–75), including vinegar and bleach for metals, boiling water for gold and silver, and hot vinegar for wooden crates, bedding was oven-dried as well as books and paper, cloth and linen aired and perfumed if delicate, and paintings had to be brushed with hot vinegar. To illustrate the level of control in this area, according to the ordinances of 1630, the importation of letters from France or Regencós without informing the councillors was punishable by five years of galley service (AHCB, reg. ord., 28, fol. 82r).

However, most boats carried textiles or salted fish, often discarded or returned to sea depending on their origin and quarantine status. Yet shortages of certain products could cause supply problems, so exceptions were allowed without completing the quarantine. On 15 February 1630, 1,500 *cuarteras*²² of Sardinian wheat were allowed ashore ‘given the city’s urgent need for grain’ (AHCB, reg. delib., 139, fol. 69r).

21 These temporary quarantines were carried out at the mouth of the river Llobregat or in the ravines of La Llacuna, halfway between the gateway of Sant Daniel and the monastery of Los Ángeles (Betrán Moya, 2023, 228).

22 The measure for grain equivalent to 69,518 litres in Barcelona.

Regulating maritime trade was essential but not the only focus. After the 1630 gate closures, muleteers from Tarragona and Lleida were also barred from entering. The morbers ordered them to unload their clothing outside the Sant Antoni gate to be assessed and checked along with the invoices and health passes (AHCB, reg. delib., 139, fol. 24v). The investigation of these products revealed that some of the clothing had come from France. Upon discovering some clothing had come from France, authorities contacted the Lleida and Tarragona city councils to trace its origin and verify whether it had been bought in Zaragoza or at the Barbastro fair (AHCB, reg. delib., 139, fol. 33r–v), and an internal investigation was launched in Barcelona with the recipients of the clothes.

Anyone who violated these restrictions, by land or sea, would face legal consequences. Whoever they were, even the municipalities. Just as the town of Hospitalet was asked to capture three Frenchmen who had disembarked in January 1630 (AHCB, reg. delib., 139, fol. 57v), trade with Lloret or Sant Feliu de Guíxols was suspended because they were considered to be trading with French ships during the suspension, which posed a threat (AHCB, reg. delib., 139, fol. 26v).

Quarantines, Lazarettos and the Entry of Foreigners into the City

One of the most recurrent measures – a standard practice documented during most early modern epidemics – was constructing (or repurposing) lazarettos outside the city walls to isolate the sick arriving at the gates, with a duality in quarantine implementation identical to that proposed by Arrizabalaga (1999, 17). Newman described the dual measures implemented by the authorities in London, noting the ‘shutting up of houses and the pesthouse’ (Newman, 2012, 812); Florence even quarantined the entire population for forty days. The result was a lower mortality rate than its neighbours, around twelve percent (Henderson, 2020, 267).

In the early seventeenth century, the primary lazarettos were the Convent dels Àngels (known as *dels Àngels Vells*) and the Monastery of Sant Francesc de Paula, where travellers suspected of having the plague were quarantined. During the 1651 outbreak, these lazarettos were reinforced by the Convent de Jesús (Observant Franciscans) and the Convent de Nazaret (Betrán Moya, 2023, 227–233), thereby alleviating pressure on the General Hospital.

Concerning lazarettos during the severe plague epidemic of 1651, the Convent of Jesús was the primary location. On 28 January, it was recommended that the monastery hospitalise those infected with the plague (AHCB, reg. delib., 160, fol. 99r), with the installation of temporary shelters. The municipality allocated funds to cover the remuneration of the physicians and officials assigned to care for the infected. Agustí Amer received an initial transfer of 2,000 pounds on 14 September 1651 (AHCB, reg. delib., 160, fol. 113r) to cover their salaries. Thereafter, remuneration was made directly to the physicians, surgeons, or friars present (AHCB, reg. delib., 160, fol. 458r–459v).

In addition to significant plague outbreaks, other, more informal mechanisms were in place to control access to the city. For instance, in 1629, the Consell de Cent decreed that only the sick could enter through the Portal de Tallers. A physician and a surgeon were to be present to examine their health. They would work in two shifts (10 a.m. and 4 p.m.) to avoid overcrowding, allowing only those who did not show signs of the plague to enter. A house was to be set up outside the portal, equipped with six beds with straw mattresses, to accommodate the sick until the inspection. During this period, a guard was to be present to ensure that no one entered without the explicit order of the physician (AHCB, reg. delib., 139, fol. 27r).

In 1629–30, a significant issue in Barcelona was the control of hostels and inns that housed foreigners. Analogous to Florence, taverns constituted a pivotal area of action. Henderson's account highlights the closure of taverns and the subsequent demands by innkeepers for their reopening and for 'travellers with a health pass to be admitted' (Henderson, 2019, 30). In Barcelona, the initial plague prevention measures on 13 May 1629 ordered the closure of all taverns around the city under penalty of 'confiscating all their wine,' as well as prohibiting anyone from hosting individuals privately, 'under penalty of one hundred lashes' (AHCB, reg. delib., 138, fol. 122v). In a subsequent public decree, the penalty for privately sheltering a French individual was ten years of galley service (AHCB, reg. ord., 28, fol. 78v).

In October 1630, following a rumour that foreign agents were spreading the plague, strict actions were taken against foreigners in Barcelona. Inns and hostels were inspected, and a decree offered a 1,000-pound reward for capturing foreigners suspected of bringing the plague (AHCB, reg. delib., 139, fol. 189r). All foreigners who had arrived within the past two months were ordered to leave within 24 hours 'under the penalty of death'. Subsequently, new regulations required foreigners to register with authorities and prohibited inns from hosting them without a health pass. Goods from outside Catalonia also faced a forty-day quarantine (AHCB, reg. delib., 139, 191r–192v), and a new dual system was introduced at the city gates: supplies entered through Sant Daniel Gate – opened for this purpose – while people used Portal Nou (AHCB, reg. delib., 139, fol. 192v).

During the 1651 plague, the entry of foreigners into the city was directly prohibited. This was due to the necessity of conducting a thorough cleansing of houses where contagion had occurred, a task that required the city to be as empty as possible. Thus, on 18 June 1651, they ordered that from the day of the decree's publication, 'no person from outside the city dare or attempt to enter it without express permission' (AHCB, reg. ord., 33, fol. 13v). It did not take long for further problems to arise, as from August onwards, Barcelona would be subjected to a siege by Spanish troops.

Nonetheless, not all entries (and quarantines) of foreigners were carried out through lazarettos, barracks or taverns; they often depended on the social status of the people involved. In January 1630, Lorenzo Boniero, sent by the Princess of

Piedmont to congratulate the Queen Elisabeth of France, Queen of Spain, on the birth of her son (Prince Balthasar Charles), Captain Luis del Castillo, Don Luis de Gaitán de Ayala (son of the Count of Villafranca), Don Diego de Covarrubias and Don Cristóbal de Gaviria all arrived without prior notice. After swearing that they had never set foot on French soil, they were examined by a physician and given new clothes – they were then allowed to enter Barcelona (AHCB, reg. delib., 139, fol. 35r).

A more remarkable context, the Queen of Hungary's arrival in February 1630, amid a Mediterranean plague outbreak – while northern Italy was completely infected (Alfani, 2013) – posed a health risk. Officials required a list of her entourage to prevent unauthorised entries (AHCB, reg. delib., 139, fol. 62v). This network of influence extended beyond her immediate circle: a stranger arriving from Madrid was detained at the Portal de l'Àngel and refused entry to the city. It turned out that he was the nephew of Father Quiroga, the Queen's confessor, and he was allowed in (AHCB, reg. delib., 139, fol. 104r). The same happened to couriers sent by the Queen of France, who had to pass through plague-infested areas (AHCB, reg. delib., 139, fol. 122v), and to horses, which, after being disinfected, were loaded onto Captain Joan Goday's boat (AHCB, reg. delib., 139, fol. 137v).

This was to be expected. Similar actions were seen during other plagues, but with more systematic quarantine locations. On 15 December 1657, it was reported that the extraordinary papal nuncio, Carlo Bonelli, was arriving in the city on his way to the court. For this reason, he was offered the Torre de Bellafilla outside the city to undergo a more comfortable quarantine before continuing his journey (AHCB, reg. delib., 166, fol. 27v). The same place was used for the quarantine of the Duke of Terranova (AHCB, reg. delib., 166, fol. 291r) and the Marquis of Castelrodrigo (AHCB, reg. delib., 165, fol. 261v). Such differences in treatment based on social status did not have a significant impact, as evidenced by Newman's in his article on London: 'while the poor faced significant difficulties, their aid status changed little, and quarantine and plague presented less of a threat to their livelihood or to the livelihood of the most affluent' (Newman, 2012, 816).

Finally, soldiers, a prominent group in early modern cities, were potential plague carriers,²³ posing sanitary risks wherever they went. Galleys, for instance, were particularly problematic due to their maritime mobility, frequent port stops, and royal privileges. While they spread news, they could also spread disease. On 10 April 1630, five Genoese galleys arrived and were interrogated to confirm they had not touched French soil (AHCB, reg. delib., 139, fol. 96r). By 31 May, the Naples squadron anchored in Barcelona reported, 'yesterday there were [dead] in the number of twenty-two or more' the previous day, raising the issue of burial (AHCB, reg. delib., 139, fol. 136r). Leaving the bodies near Portal de Mar or burying them by the sea risked 'the foul odour caused

23 A good example of disease transmission by soldiers during this period is the discovery of *Salmonella enterica*, a disease associated with burials in Mexico, in the remains of soldiers from the siege of Barcelona in 1651–52 (De Dios et al., 2021).

both by the severity of the disease and the heat of the season' (AHCB, reg. delib., 139, fol. 136v). Eventually, it was agreed to bury the Christians in the Montjuïc mass grave, although it was not clear what to do with the Muslim indentured labourers.

This was not the only apparent instance of foreign soldiers and plague entering Barcelona, land troops were also problematic. During the Siege of Barcelona, amid the plague outbreak of 1651–52, the French garrison entered closed houses to search for clothing and other items. The problem was that these houses were closed because their residents had the plague, and the municipality closed them off trying to limit its spread. By breaking into the houses and using contaminated clothing, the soldiers became infected and contributed to the resurgence of the plague (AHCB, reg. delib., 161, fol. 107r). Something similar happened to the Irish soldiers in 1653 when the city was again under Philip IV's monarchy. There was an increase in infections 'caused by soldiers who came to the present city from infected areas, especially the Irish soldiers, whose dead are found in the streets every day' (AHCB, reg. delib., 162, fol. 213r). For this reason, the City Council demanded that they be removed from the city and that barracks be built for them (AHCB, reg. delib., 163, fol. 16r).

CONCLUSIONS: FOREIGNERS AND PLAGUE PREVENTION IN BARCELONA

Preventing an epidemic from entering an early modern city was crucial to avoiding a demographic catastrophe. As we have seen, during the period under study, Barcelona employed prevention systems that closely resembled those of other early modern cities – particularly the Italian model described by Cipolla and Henderson. The city's response relied on essential procedures for receiving and verifying information about contagion, which dictated further measures: closing the city gates, establishing perimeters, banning trade with infected regions, adapting lazarettos or building control barracks, strictly enforcing health passes, and ordering quarantines of goods or people.

As demonstrated in this study, Barcelona's preventive mechanisms differed little from those of other early modern cities. The Consell de Cent exercised jurisdiction over public health by establishing committees and offices, issuing ordinances, and erecting gallows to enforce compliance. While its authority extended within city limits, broader control required coordination with the viceroy and the Diputació del General. As evidenced, the authorities' concerns followed the principles of information, prevention, and containment – strategies that fit within an early modern framework where scientific understanding of disease transmission was nonexistent, aligning Barcelona's approach with most European cities.

Foreigners were a focal point for the city – not due to anti-foreigner policies, but because their origins and travel routes were unknown, they posed a contagion risk. Unless from a plague-affected country, they could enter Barcelona with health passes verifying their place of origin and travel history. Depending on the circumstances, they might be quarantined. Seen as both a potential danger and a target for

political intervention, foreigners were subjected to perimeter controls designed to filter external contacts and limit contagion. Strict regulations on their entry and tight restrictions on incoming ships underscore the challenges early modern cities faced in balancing public health and economic stability. These measures, while preventive, often caused shortages that were equally harmful – especially when under siege, as during the plague of 1651–52, when the *Dietari del Consell de Cent* eloquently summarised the crisis as ‘plague, war and famine.’

Finally, it is essential to highlight the social and political dimensions of these restrictions. Soldiers were vectors of disease transmission but enjoyed the protection of royal authority. On the other hand, access restrictions were apparent during the 1629–30 plague. In peacetime, as in 1651, the full extent of the *Consell de Cent*’s limitations becomes obvious. They essentially barred entry to Barcelona for the poor and the French – as well as residents of *Regencós* and *Begur* – others, with health passes, could enter. These containment policies targeted specific social groups, with foreigners being a central focus, reflecting the broader social and political dimensions of public health measures.

TUJCI IN PREPREČEVANJE KUGE V NOVOVEŠKI BARCELONI

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POVZETEK

Ta študija proučuje strategije barcelonskih mestnih oblasti za zajezitev epidemij v zgodnjem novem veku, s posebnim poudarkom na ukrepih po izbruhih v Regencósu (1629), Tortosi in Gironi (1650). Raziskava temelji na analizi dokumentacije Consella de Cent, sejnim zapisnikom in odlokom. Identificirane strategije – zbiranje informacij, vzpostavljanje karantenskih zapor in obročev, izdajanje zdravstvenih prepustnic ter izvajanje karanten za ljudi in blago – so analizirane v barcelonskem kontekstu ter primerjane s strategijami drugih mest, zlasti italijanskih, pa tudi Londona in Københavna. Analiza sestoji iz več faz. Najprej je raziskan proces zbiranja informacij v Barceloni, pri čemer so upoštevani mreža vpletenih mest, interakcije na različnih ravneh ter zdravstvene inšpekcije, ki so jih pošiljali po vsej Kataloniji. Nato razprava prouči različne stopnje izvajanja karanten in njegove posledice. Kar zadeva ukrepe, uperjene proti tujcem, članek obravnava sistem nadzora zdravstvenih prepustnic, pomorskih blokad in uvedbo karanten. Obenem na širši analitični ravni prouči širši vpliv naštetih ukrepov, vključno z ustanavljanjem lazaretov za izvajanje karanten, vlogo vojakov kot prenašalcev kuge ter diferencirane nadzorne mehanizme glede na družbeni status.

Ključne besede: Barcelona, kuga, preventiva, Consell de Cent, zdravje

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