

Welfare in an Italian City-State: Siena and the Hospital of Santa Maria della Scala

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Si delinea la storia millenaria dello Spedale di Santa Maria della Scala di Siena, mettendo in luce in modo particolare i collegamenti fra il massimo ente assistenziale e l'evoluzione della città e dello stato di Siena durante i secoli di indipendenza politica. Lo Spedale di Siena fornisce un caso significativo di struttura cittadina laica creata nel medioevo per far fronte ad esigenze analoghe a quelle demandate allo welfare state in tempi più recenti. L'ente nacque con la ripresa ed incremento dei traffici lungo la via francigena, proprio come avvenne per la città medievale. La prima menzione esplicita allo Spedale della Scala si trova in un documento del 1090. In origine fu un ospizio per pellegrini, organizzato presso la cattedrale in ottemperanza alla norma canonica che imponeva ai vescovi di predisporre uno xenodochio. Ben presto conquistò l'autonomia; fu guidato da un capitolo di laici che eleggeva un proprio Rettore. Più tardi lo stesso governo comunale impose il suo controllo diretto sullo Spedale, eleggendone il Rettore e i Savi nei consigli cittadini. Dopo la guerra di Siena, i duchi, poi gran duchi, di Toscana a loro volta esercitarono un controllo sullo Spedale attraverso un rettore e una 'consulta'. Verso la fine del '700 l'immenso patrimonio fondiario dell'ente fu alienato nel quadro delle riforme leopoldine; durante l'800 lo Spedale diventò un policlinico, legato alla Facoltà di Medicina dell'università, secondo i nuovi orientamenti della scienza medica.

Durante il medioevo e nei primi secoli del periodo moderno, lo Spedale svolgeva tre funzioni principali: il ricovero e la cura dei malati; la distribuzione gratuita o la vendita a basso prezzo del pane e il ricovero e la cura dei trovatelli. Faceva fronte a questi impegni mediante il lavoro volontario degli oblati e i lasciti dei cittadini. Il patrimonio fondiario, alla fine forse il più grande della Toscana, era organizzato in 'grance', centri di organizzazione della produzione (assicurata da numerosi poderi lavorati a mezzadria) e anche di assistenza e cura per le popolazioni delle campagne.

In un volume che ha la finalità di porre in una prospettiva storica questioni di fondamentale importanza per il mondo odierno, in questo caso il dibattito sul futuro dello welfare state, è utile sapere come i problemi dei bisognosi venivano affrontati in altre epoche. Talvolta si ritiene che i compiti di cura venissero affidati unicamente alle famiglie e alla chiesa, e che solo dopo la rivoluzione industriale fossero assunti dallo stato. A Siena, come in altre città europee, importanti funzioni assistenziali venivano assicurate dal potere politico fin dal medioevo.

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PREMISE

This chapter traces the history of a significant welfare institution, the *Spedale di Santa Maria della Scala* (“Hospital of Saint Mary of the Stair”) over a very long period of time – nearly 1000 years. In a volume which aims at bringing historical perspective to bear on current strategic issues, in this case the welfare state and its future, it seems useful to ask whether and how the needs which the welfare state is intended to satisfy were dealt with in earlier times. Often we find it said that the welfare state took over functions that were carried out formerly (inadequately) by the family or the church. This is an oversimplification. Not only in contemporary Europe and in antiquity, but in the middle ages and the early modern period as well, European cities and states directly assumed complex functions in order to care for the ill and the needy, to organise provisioning and deal with personal and collective emergencies: famine, dearth, plague, siege and natural disasters – and they too built up or lost political consent in the process. The case which we will examine here, that of the principal welfare institution of the Tuscan republic of Siena, for many centuries constituted a successful and constantly evolving model, first church-based, then run by a lay order, later directly governed by the city itself. Subsequently it continued to carry out welfare functions in novel political and welfare frameworks as Siena became part of larger state structures: the Grand Duchy of Tuscany, the Napoleonic Empire, the Kingdom of Italy and, finally, the Italian Republic in its European context.

THE BEGINNINGS

The first document which explicitly mentions the Hospital of Santa Maria della Scala is dated 29 March 1090. Until that moment we can only make conjectures. However, it is reasonable to suppose that the first origins of what was to become the Hospital of Santa Maria della Scala go back to an even earlier period when the city itself seems to have returned to life after centuries of obscurity. Like Siena itself, the Hospital grew at a lively rate because of its location on the ‘via Francigena’, the route which led from the Kingdom of the Franks to Rome, the heart of Christianity. Pilgrims and travellers going and coming from Rome stimulated the rebirth of the ancient Tuscan centre around its bishop and the bishopric; in the same way the Hospital was born and grew. At first it was simply one of many places where pilgrims found shelter, provided on the basis of the canonical norms which ordered bishops’ sees to maintain a *Xenodochium*, according to the Christian idea of the duties of the faithful towards those who abandoned their belongings and their well-being, even temporarily, for devotional reasons.

The Sienese *Xenodochium*, the pilgrim’s hospice which in time would become one of the greatest Italian Hospitals, was not built on the ancient fortified hill of Castelveccchio, the oldest part of the city, but rather on an adjacent high piece of land known by the name of Santa Maria’s Hill, where in those same years the Cathedral was being built. This hill was slowly transformed into a sort of ‘sacred mountain’, a complex of places, objects and activ-



Fig. 1
View of the Hospital of Santa Maria della Scala.

ities held in veneration by the citizenry. Around the Cathedral (the ‘Duomo’) and the Hospital were to be found the Baptistry, the Cemetery, family and guild chapels and altars, seats of confraternities, relics and works of art – very often dedicated to the Virgin Mary. In the middle of the 15th century, asked to describe the outer appearance of the Hospital, the Sienese officials could say that it “is located and placed in front of the Cathedral church of the same city of Siena and is in the middle of a beautiful and wide piazza surrounded on three sides by the main house and buildings of the said Hospital and on its front and facade are painted certain stories of the most blessed Virgin Mary and they are the most fitting that there are in the world” [Source 1]; continuing their description, they referred to the Church, the chapels and the holy relics brought from Constantinople, writing with pride and affection of the cheerful, brightly coloured facade of the time – so different from the Gothic severity of the facade we see today – and of the relics, which included, it was believed, the cap and the belt of the Mother of Christ.

In Siena, devotion to Mary gave a particular flavour to civic religious sentiment, and, to a large extent, to civic ideology as well. In the interwoven complex of religious feelings and attitudes towards holy things, the Hospital itself had a major role [Source 2]. In times of danger the city consecrated herself to the “Madonna of the Vow”, an ancient and revered painting; but – beyond the formal gesture – people thought that communal support and personal contributions of Sienese citizens to the Hospital, dedicated to Mary and named after her, helped to preserve both Siena and her populace from disaster. To clarify the connection between the human and the divine level, we may quote a measure voted by the city council in 1433 which proposed remedies for some difficulties which the Hospital had,

because otherwise, it was stated, it would be impossible to carry out “the usual well-ordered things done to revere the glorious Virgin Mary, very particular advocate of this city, which she has succoured and saved from dangers without number” [Source 3]. The well-being of the Hospital in final analysis was essential in order to ensure benevolent influences over the city’s destiny.

From an urban planning point of view, the group of buildings placed on Saint Mary’s Hill constituted a counterweight to the great civic complex that was growing up around the Piazza del Campo, where the main organs of communal government had their meeting places. In reality the two poles, one prevalently spiritual and the other civic, represented two tightly connected worlds. Until well into early modern times, not only the Cathedral canons but also the Bishops, later the Archbishops, of Siena came almost exclusively from eminent Sieneese families; they certainly did not abandon their interest in civic politics as they rose in the church hierarchy. And in front of the Cathedral, on the same hill, the most important ‘welfare’ institution of the city, the Hospital, was run by a lay brothers, and men and women oblates and later on by officials elected directly by the Commune itself [Source 4].

THE CHAPTER

Though the Hospital was originally born around the Cathedral, its activities soon came to be conducted by lay people, by a confraternity that was able to free itself very early from outside interference. This was the “chapter”, made up of the lay brothers who ran the Hospital, electing one of the members as Rector. This was the case at the end of the 12th century, in the time of the nearly mythical rector *Incontrato degli Incontrati*, and in the 13th century, when the powerful noble citizens *Cacciagonte di Berengario* and *Ristoro di Giunta Menghi* became rectors. Paradoxically the 12th and the 13th centuries were the period in which the Hospital enjoyed its greatest autonomy – as it struggled with the canons of the Cathedral to have its right to complete self-determination recognised. An oath which preserves the proud flavour of the 13th century – it survives embedded as a rubric in the Hospital statutes in the version dated 1318, when the situation was already changing – declares that never will the “lordship, liberty and honour” of the Hospital submit “to any place or collegiate body, ecclesiastical or civil, nor to any particular person, whether religious, ecclesiastical or secular; but the Hospital and the lordship and liberty and honour, which it has, will be maintained and preserved forever” [Source 5].

For the Hospital, the years around the end of the 13th and the beginning of the 14th centuries were a time of fervour and of innovation. Siena was prosperous and expanding, inhabited by merchants, artisans and nobles, both from the city and from the surrounding territory; riches were being accumulated, property in the countryside was being acquired, and many devout men and women, motivated by Christian zeal, left their patrimony to the Hospital. Even members of the greatest families offered their property and became oblates in order to dedicate their lives and their goods to the Hospital’s activities. This, for example, is what *Giovanni di Tese Tolomei* did when, in 1314, “benignly and humbly” he promised “for the love of Christ and the well being of his soul to take the religion and the rule of the brothers of the said Hospital and leave worldly concerns”. The oblates gave up

their properties and transferred them to the Hospital for their spiritual health, and often they served the Hospital administration using the knowledge and experience gained in their former roles as businessmen and great landowners.

There were however some problems. The Commune (the city government), in order to encourage donations, exempted the goods and wealth which private citizens gave to the Hospital from paying taxes. This measure resulted in massive tax evasion, fraudulent donations and/or false oblations. Some donors simply gave their properties to the Hospital in order to avoid tax payments, while retaining the right to use them during their lifetime. It became advantageous for people without children to become oblates even if they did not feel the need to do so on the basis of moral or ethical considerations. Under these circumstances, naturally enough, some brothers or some oblates did not abide by the traditions of service and of self-denial and even outward appearances suffered. The 1318 statutes stated that the oblates should not behave as if they were lay persons, but “make an effort to be closer to the customs of religious persons”, wearing clothes, for example, of an “honest appearance” and “not too bizarre”. Further echoes of problems deriving from insincere oblations can be heard in the rules forbidding the Hospital brothers to go to the “gathering places of lay persons”, or in the recommendations made to those who lived “with their income” (from the lands donated to the Hospital but on the condition that the owners could use them during their lifetime) to come to the Hospital on Sundays and to obey the Rector.

A MULTIPLICITY OF FUNCTIONS

The Hospital’s original function was to provide shelter for pilgrims and travellers. By the 14th century, when we begin to have more detailed documentation, we can see that its activities were more numerous. It now acted in three main areas. First, it gave shelter to the ‘*infermi*’, the sick or the wounded, and cared for them; second, it distributed food, especially bread, to the needy; finally it took in and raised foundlings, that is, abandoned infants or, perhaps we should say, infants entrusted to it. Sometimes parents hoped to be able to take their children back in better times, and entrusted them to the Hospital as a temporary expedient. The foundlings were nursed, first within the Hospital itself and then in the homes of hired wet-nurses, usually in the countryside. The infants that survived (mortality was high) received an education; the boys learned a trade and the girls were given a dowry so that they could marry or become nuns.

Alms of bread were distributed in different ways. The Hospital offered ‘whole loaves’, specially made, to poor families or to the ‘shameful poor’, that is, those who did not want others to know that they were receiving alms. The ‘broken bread’ (the pieces which remained on the table of the brothers and the servants) or even what was left after the sick had eaten (the “leavings”) was given to ‘poor beggars’ once or twice a week. Furthermore, in famine time, when the Commune ordered it to do so, the Hospital sold grain from its reserves to the citizenry at a low fixed price.

The Hospital’s patients, who were supposed to be put into “well-appointed beds”, were to receive all the foods that the doctors thought would help them to recover. In the documents we find frequent references to refined and expensive foods. According to the 14th century

statutes, patients were to receive not only bread and wine, but also “syrup, hard wheat porridge, chickens and everything which is necessary, according to the illness, so that they do not perish”. A report on the Hospital made for Francesco Sforza in the 15th century emphasized the measures taken to make sure that patients could be given “chickens and very fresh eggs”. Nourishing, easily digested food, a bed, and somebody to help the patients to feed themselves was thought to be – and no doubt really was – vital in effecting a cure.

Providing food was always at the very centre of the Hospital’s activities. This is clear from its statutes, from its accounts and from the paintings that represent it. The 14th century rules required both men and women oblates to be present when meals were served and to help distribute the food to the patients. Even the Rector was supposed to help. “To the poor and the ill and to the foundlings, both male and female” the Rector himself was to “serve and place before them food and drink” – but only 6 times a year, on the most important festivities. In this case serving food to the needy had become a rite or a symbol, a significant fact in itself (Fig. 2).



Fig. 2
Carlo di Giovanni, *Hospital Scene*, Pinacoteca Nazionale, Siena.

LAND AND ADMINISTRATION

In time of famine, dearth or plague, the Hospital distributed very large quantities of food. But how could it do so? At first it used income from the Cathedral chapter, earmarked for this purpose, to buy foodstuffs; but soon it obtained the means to “govern itself” using its own extensive landholdings. Its lands derived in the first place from the legacies left to it by citizens in the form of property in the countryside, houses in the city and sums of money. A part of the lands was leased or rented to peasants, usually to sharecroppers, although some were managed directly. Some lands were sold to obtain necessary funds; some were exchanged for other properties in order to rationalise the landholdings.

There was a tendency to concentrate the possessions in certain areas, in general the most fertile and most easily accessible because of being located near the main roads. In this way the future lines of administrative and patrimonial development were determined. Around 1300, under the rector Ristoro di Giunta Menghi, we find evidence that the lands were already concentrated mainly in the areas of the Val d’Orcia, of San Quirico and of Corsignano (the future Pienza). In fact a proposal was made to send two brothers to take care of the Hospital’s interests: one was to be sent to San Quirico and the other to the Val d’Orcia and Corsignano. The same document mentions lands belonging to the Hospital at Chiusure, Melianda and Cuna. Cuna later became one of the richest possessions of the Hospital. Today it can still be visited and provides striking testimony of the scale of activities (Fig. 3). At the beginning of the 14th century however the nucleus of the future complex was composed of lands acquired very recently. The hill of Cuna, with a palace and a certain number of farms, had been donated by the rector Ristoro Menghi: he had purchased them in 1295. His predecessor Cacciacoste di Berengario had also acquired lands and rights over rural hospitals in the same area.

By the third decade of the 14th century, when Siena was at the apex of its prosperity and demographic expansion, the Hospital’s patrimony had grown substantially. Growth was not haphazard but the fruit of attempts at long-term planning. In 1322, the chapter fixed by statute the places that were never to be alienated, where at the most “drizzi et baracti” (“straightenings and trades”) could be accepted – that is, straightening property lines and exchanging property rights with neighbouring land-owners if “useful and good for the Hospital and the poor”. The places designated were Val d’Orcia, San Quirico, Montisi, Serre a Rapolano, Cuna, Piana, Sant’Angelo in Colle, Sasso di Maremma, Pieve a Bozzone and, closer to the city, Ravacciano, Riluogo, San Dalmazio, Ampugnano, and last of all, “all the vineyards of Badalucco near Siena”. The density of the Hospital’s property was greatest near the city walls, while, respect to the beginning of the century, we find that interest was now strong not only in the fertile Val d’Arbia, but also in the more remote Val d’Orcia and Val d’Ombrone, corresponding to a general trend of the great landed property in that period, whilst the Commune was busy fighting the Aldobrandeschi nobles, still masters of the southern part of what later would become the Siennese state.

In this period we find references to what was becoming the characteristic way of managing the Hospital’s property: the *grancia* or “grange”. The grange consisted of a certain number of farms organised around a palace-granary, a structure which also provided shelter and



Fig. 3
The "grancia" of Cuna.

help for the needy. The head of the complex was a "grange-brother" (*frate-grancere*) who had the task of managing and controlling production. The first granges of the beginning of the 14th century were rather different from those of a few centuries later. Above all, in time the structure of the sharecropping farm units which surrounded them changed. Before the Black Death, the pieces of land pertaining to a particular farm were usually scattered among lands belonging to other farms, even farms belonging to other owners. Farms whose lands were all contiguous are typical of a later age. The early 14th-century countryside, intensely populated and cultivated, with peasant landowners still quite common, was very different from the 17th- and 18th-century landscapes, based on very large farms, often

including vast areas of uncultivated land. The former was full of people, living in numerous villages and hamlets, interspersed with the 'palaces' of the well to do, small hospitals and fortifications – the latter were inhabited mainly by sharecroppers living in large isolated farmhouses with an occasional noble villa. These major changes, which had deep economic and social causes, affected Sienese society overall, of course, but also made necessary the reorganisation of the granges and the welfare activities of the Hospital.

By the middle of the 15th century, in any case, both the grange system and the administrative structure of the Hospital appear more robust and stable than in the previous century, notwithstanding, or perhaps because of, the demographic crisis. In a way more or less analogous to what was happening in the administration of the Commune (where one of the fundamental activities of the city Councils was the regular election of citizens to the central and outlying offices), the brothers of the chapter met every year to elect the numerous official necessary for running the Hospital. Officials had to be designated for the central administration in Siena, as grange-brothers and their assistants, as hospitalers and priors for the subject hospitals, already quite numerous in the 14th century even outside the Sienese territory and which increased in number in the following century. All in all, around 1450, there were more than 15 elected officials for the "great house" (the mother Hospital) of Siena, including 'camerlenghi' responsible for payments and financial management, 'scrittori' charged with administration, persons responsible for the granaries, for the pilgrims, and so on. There were 11 granges to which a 'grancere' and often an assistant ('compagno') were sent (17 people in all): Cuna, Serre, Montisi, Piana, San Quirico, Spedaletto, Stigliano, Corsignano, Grosseto, Monteliscai and Mensano, where the 'risuotitori del contado' – the 'receivers of the countryside' – resided. There were 11 annual offices which had to do with the direction of the main subject hospitals: Florence, San Gimignano, Poggibonsi, Colle, San Miniato, Barberino, Monte San Savino, Rieti, Todi and Proceno. In all about 30 officials were elected to run the outlying structures and about 15 in Siena itself, witnessing the size and the range of the Hospital's organisation, almost a state within a state – with important extensions beyond the Sienese territories themselves, since the Hospital administered subject hospitals in the neighbouring Florentine state and in the lands of the Pope.

One of the darkest times for the Hospital (and for the countryside communities of the Sienese state as well) was around the year 1500, during the *de facto* lordship of Pandolfo Petrucci. In those years a rather small group of powerful citizens and of Pandolfo's supporters succeeded in making themselves masters of the communal state, using it to enrich themselves personally. The Hospital, immensely wealthy, of course did not go unscathed. It was forced to make large purchases of land for Pandolfo and his friends and to sell or lease great landholdings to them at low prices. Lands at Sant'Apollinare and Iesa went to Antonio Bichi, some estates at Munistero to Pandolfo himself; Pandolfo forced the Hospital to purchase the immense estates of Stachilagi and Marsiliana only to take them over personally two years later; he took over the granges of Prata and San Giusto. Later the grange of Serre and Rapolano was leased to Girolamo Borghesi, Castelluccio to Giovanni Trecerchi, Grosseto and Prata to Mino della Gaziaia. All were supporters of Petrucci. These examples show how the Hospital's patrimony (one of the central issues of political struggle in the Sienese state) could be used unscrupulously by individuals and families intent on augmenting their own wealth.

THE HOSPITAL AND THE CITY-STATE

This series of events brings us to consider briefly the relations between the Hospital and the Commune of Siena on a formal plane. Santa Maria della Scala originated, as we have seen, under the aegis of the Cathedral canons; in its first phase it was managed by a lay order which succeeded in conquering its autonomy. This corresponds to the period in which the Commune itself was created and was also engaged in freeing itself from the Bishop. For a time the Cathedral canons insisted on confirming the election of the Hospital's rector, but in practice they never refused to approve the person chosen. Around 1270, as we have seen, the brothers swore never to submit the Hospital to anyone; but the first rubric of the 1318 statutes obliged them "to love the Commune of Siena and not to defraud it". In this period (the most prosperous period of medieval Siena, that of the government of the Nine), the city had no legal basis for exercising direct control over the Hospital, although in reality there was already a complicated form of symbiosis, of reciprocal protection and exploitation, between the two bodies. The city received loans of great sums of money, it forced the Hospital to calm riots by distributing bread, it ceded rights (jurisdiction and property rights) over towns and villages in the countryside as collateral. This was the case, for example, of Campagnatico, which the Hospital administered from 1317 to 1339. On one hand the Hospital participated with food and money in the initiatives taken by the communal government, for example in building the great church of San Domenico; on the other, the *podestà*, the symbolic head of the Commune, had the duty of defending and maintaining the Hospital and its rights as well as defending the Cathedral, and in general all the places of veneration in the city and countryside of Siena. The Rector of the Hospital, from 1262 on, was an *ex officio* member of the General Council of the city.

The second half of the 14th century – marked by the dramatic consequences of the demographic crisis which accompanied the Black Death, a change in the political regime, and the invasion by so-called 'free' military companies (actually self-governing groups of many thousands of disbanded soldiers and camp-followers, by necessity intent on mayhem) – was a period of transformation for the Hospital too. It was required to give food and care to a much smaller population than before, but the population was also much more needy, stricken by epidemics, famine and war. The Hospital received an abundance of rich legacies because of the high death rate. In the new situation, both the agricultural structures which produced the necessary supplies and the administrative structures, they too affected by the demographic crisis, had to be reorganised. The Hospital brothers themselves were stricken by the plague, and the statutes of the second half of the 14th century progressively reduce the number of brothers who had to be present at meetings in order for them to be valid. At the end of 1374 the quorum necessary to take legally binding action reached its historical minimum: 6 brothers plus the Rector.

These difficult times destabilized the Commune as well, and were marked by political and social tensions, culminating in an attempt to take over the government by the "Compagnia del Bruco" (an organisation of the poorest of the city's workers, similar to the better-known Florentine "Ciompi") and then by popular governments which gave rise to the typical Sieneese political formation, the 'monti', 'mountains' of families that had acquired political

rights in particular periods: the Dodici, the Riformatori and the Popolo. Those were also the years of the war against the Salimbeni family – which had created a state in the Val d’Orcia from which they could raid the Hospital’s lands –, of the creation of the great public pastures (the basis of the Monte dei Paschi of Siena, now a very large bank), and of the re-conquest of the depopulated countryside and the reorganisation of the state using elected citizens as officials.

As to the Hospital, we can see the effects of these general policies in two sectors: in the symbolic-ideological sphere with the creation or elaboration of the probably mythical figure of the Blessed Sorore, a shoemaker, presented as the founder of Santa Maria della Scala; and in the open takeover by the communal government [Plate 3]. The story of Sorore aimed at showing that the Hospital had a lay origin in order to justify the fact that it was not subject to ecclesiastical control. The lower artisan class extraction of the shoemaker also must have had a very strong resonance, both on the social and the political plane, in a period in which the communal government was being taken over by the ‘monti’ of popular origin. It is probably not a coincidence that both Vecchietta’s frescoes illustrating Sorore’s story and the magnificently clear detailed [Plates 4-5] – were both executed under the rector Giovanni Buzzichelli, a member of popular ‘monte’ of the ‘Riformatori’ and himself a ‘ligrittiere’, a shopkeeper.

At the end of the 14th century and the beginning of the following century it is clear that the city government was taking over the central administration of the Hospital as part of a more general policy of strengthening the state structures in other sectors as well. In 1374 the rector Bartolomeo Tucci was elected in the Palazzo Pubblico by the Priors of the Riformatori regime and imposed on the Hospital “by force”. And Tucci’s successor, Giovanni Ghianderoni (1383-1404) also was forced on the chapter, whereas the Commune, showing that it considered the Hospital its property, forced it every year to sell property for 3000 florins in order to be able to contribute to communal income. From 1404 on the election of the rector became an unquestioned prerogative of the *Consiglio del Popolo* (“Council of the People”), the large communal council formed of several hundred citizens – although it made its choice from a group of candidates presented by the Hospital brothers. Later this restriction was eliminated, and it was established that the rector must be elected by the communal councils, choosing by vote from all childless Sienese citizens over 40 years of age plus three Hospital brothers. Furthermore the communal government began to name each year a group of six counsellors, who took the title of “Savi dello Spedale” (“wise-men of the Hospital”), they had to participate with the rector and the chapter in all decisions. The six Savi, later, on the model of the Merchants’ court, were given jurisdiction over all legal suits which involved the Hospital. Appeal could be made to the “Regolatori”, another communal magistrature which was supposed to oversee the administrative and constitutional correctness of all actions of communal officials. On the other hand, the presence of the brothers was dramatically reduced: the chapter, authorized to take decisions, was now made up of the rector, the six Savi, and six brothers, hence a majority of the members were officials nominated by the Commune. The Rector, as in former times, received the status and insignia of knight when he started his term of office; but he no longer always gave himself and his property to the Hospital. He was now a worthy citizen of the Commune, with great experience in the

most important offices and commissions of the city government, assisted by the council of the Savi, that is, his colleagues in the city magistratures up until then – whereas the structure which had governed until that time, the chapter of the oblates, no longer had independent existence.

This strengthening of city-state control in the 15th century, when the non-noble ‘monti’ were dominant, might appear similar to what happened during the *de facto* Petrucci lordship at the turn of the 16th century (1487-1524). However there is a significant difference. Although the power of the state government continued to dominate the Hospital, under Petrucci it was an extra-legal power, used for the benefit of well-defined and very limited sectors of the citizenry. The state degenerated into a clientele system which functioned without respecting the centuries-long traditions of republican government. If already in the late 15th century the rectorship had become the object of factional rivalry, under Pandolfo Petrucci it became directly dependent on the will of the Lord of Siena. For several years the Rector was not even elected. The Hospital was controlled by a special commission which included both Pandolfo himself and his advisor Antonio de’ Giordani da Venafro. The earlier system returned when Pandolfo died, under his successor Cardinal Raffaele Petrucci, and under the various regimes of popular government which followed one another until the end of the republic (1555), the city councils continued to elect the Savi and the Rector.

UNDER THE GRAND DUKES OF TUSCANY

In 1555, Siena lost her independence, notwithstanding her heroic resistance, defeated by the combined forces of Cosimo de’ Medici and the Spanish army. Philip II gave Siena and its state to Cosimo by feudal investiture. During the war, the Hospital had to deal with a long and tragic siege, to care for the wounded and to try to find food for the citizens that were dying of hunger. The fortified granges and the landed estates of the Hospital were used by both sides during the military operations. Like all the rest of the Sienese countryside they were laid waste. After the conclusion of this dramatic period, the entry of the Sienese state into the Medici dominions had important consequences for the Hospital as well. Superficially it continued to function more or less as before: it distributed alms, cared for the ill and the foundlings. In reality however, as in the city itself, the time of great struggles and great aspirations had come to an end. The Hospital was under Medici control. The Grand Duke designated the Rector, who, although necessarily a Sienese gentleman, was a tool of the Florentine government. The Balia, the central governing body, made up of Sienese citizens, elected the Savi, now 8 instead of 6 in order that each ‘monte’ (now four in the government) could have two members. For a time the Rector was assisted by a ‘consulta’ named directly by the Grand Duke.

In the new situation, the Hospital’s priorities changed. Not only political life, but also Sienese society as a whole had undergone profound modifications after the loss of its republican liberty. The social fluidity – and the open and violent political struggles – which had characterised the life of the city in the preceding centuries disappeared or was attenuated, and the upper classes congealed into a more or less closed nobility, which depended on the Grand Duke for the conservation of its supremacy. In parallel, the assistance provided by the Hospital subtly changed its orientation. A new figure made its appearance: the impoverished gentleman, needing care and subsistence. Thus, at the beginning of the 17th century the Hospital built an infirmary for “gentiluomini” (“gentlemen”) furnished with iron

bedsteads and “coltinaggi” (“curtains”) in to protect the reserve of these down-and-out exponents of the urban nobility. In this period, as well, the Grand Duke ordered the Hospital to give a regular subsidy to the “Vergini del Refugio”: an institution recently set up for young women from decayed noble families. This imposition gave rise to a conflict between the Hospital and the Refugio lasting for decades. Emblematically, in the second half of the 17th century things came to such a point that alms to poor families had to be cut back because of the Hospital’s financial difficulties – nevertheless, until the end of the century, the Hospital continued to give subsidies to the Refugio. Protecting the impoverished urban nobility had become a more important priority than the traditional object of the hospital’s efforts, the urban and rural poor of popular extraction.

Thus we register a phase of involution, in which the economic and social policies of the Grand Duchy continued to guarantee the survival, in precarious conditions, of that once powerful institution – which the Rector Niccolò de’ Rocchi still in 1664 could describe, rather unattractively for today’s taste, as “born under the auspices of the great Mother of Christ, watered and tilled with the holy perspiration of the most blessed Sorore, Servant of God”. The enormous landed patrimony, particularly the ‘grance’ of the Maremma, of the Val d’Orcia, of the Serre and Cuna, still produced great quantities of grain, even in bad years, constituting the “sinews of the Hospital’s income”, but prices were low and sometimes the grain was brought to Siena at a loss. There was not enough money for the ordinary expenses and it became impossible to make the necessary investments, to renovate the vineyards, for example, or to purchase livestock, such as the oxen needed for ploughing. A vicious circle was established: lack of investments led to diminishing production; almsgiving had to be cut back even in the rural granges; this in turn led swiftly to an increase in the numbers people who needed food, were stricken by illness and abandoned their children. At this time the activity of the Hospital that absorbed the greatest amount of resources was the care of abandoned infants. The only way the Hospital could have paid its debts would have been to sell part of its lands. This was not done, and perhaps in the depressed economic and demographic conditions of the Sienese countryside of the time, selling would not have solved the problems in the long run.

Enlightenment Tuscany developed several general strategies to deal with the crisis of the welfare structures in its states; these affected the Hospital directly. First, in 1754 Grand Duke Francis Stephen of Lorraine suppressed all the remaining hospitals of the old Sienese state, incorporating their patrimonies into that of the “Spedale grande”, Santa Maria della Scala. All the hospital activities of the entire state were to be centralised in the main buildings in Siena. The task of controlling what was happening in the outlying towns and countryside and bringing deserving cases to the attention of the authorities fell to the local officials and to the parish priests. Everyone who needed the hospital’s services, the ill and the abandoned infants, were to be taken to Siena, notwithstanding the difficulties of the journey. Even more drastic were the changes under the Grand Duke Pietro Leopoldo (the future Emperor Leopold II): from 1775 on, the entire landed patrimony of the Hospital, probably the largest in Tuscany at the time, was alienated, or, as we would say today, privatised. The Hospital was allowed to keep only the granges of Cuna and the Serre. Regulations enacted in 1784 gave the Grand Duke and the Consulta complete control over the Hospital’s administration.

FROM HOSPITAL TO POLYCLINIC

In the final years of the 18th century and during the Napoleonic period, the Hospital took care of its traditional welfare tasks as best it could with the interest from the capital received in exchange for its landed property. Soon however its activities took a new direction. Existing links with the medical doctors who taught in the Sienese *Studium* (“university”) were consolidated. During the 18th century lectures on Anatomy and Surgery had already been held in the Hospital buildings; and a ‘convitto’ (residence) for students of medicine had been set up. In the 19th century, this link with the practice and study of medicine became the dominant note. In 1846 the Gabinetto of Pathological Anatomy was established in the Hospital, and in 1889 the Faculty of Medicine reorganised the Hospital according to the ideas of the times, equipping it for the care and treatment of medical patients of all kinds. Thus Santa Maria della Scala became something different: a “Polyclinic”, that is, a structure having the sole purpose of curing the infirm, organised in separate sectors corresponding to the various ‘branches’ of clinical medicine: in substance according the image of a “hospital” which still prevails today, in line with the continuing process of ‘medicalisation of health’ – whereas the other ancient tasks of guaranteeing food and care for the poor and needy were entrusted to other kinds of institutions or taken over by the state.

CONCLUSION

In the Middle Ages and during the Renaissance, at the apex of communal civilization, the Hospital of Siena had great and deserved prestige. It furnished the Sforza with a model for the famous Ca’ Granda, the Hospital of Milan; numerous hospitals in central Italy asked to be governed by it because of its reputation for just and effective administration. For many centuries it was able to convey large quantities of services and food to the inhabitants of the city and to the countryside, compensating to an extent the imbalances in the social organisation and in the economy and dealing with emergencies. It constituted an important element of civic cohesion and represented a concrete way of taking responsibility for the well-being of the citizenry and the rural population. It provided economic reserves for the communal government. In some periods it constituted a hunting ground for riches and power for ambitious and self-seeking governing groups.

Today the tasks that the Hospital of Santa Maria della Scala and other similar bodies carried out with greater or lesser success in European cities for hundreds of years are entrusted to the care of state and public authorities, cooperatives, local and national administrative bodies, National Health services, pension funds, public housing offices, agricultural subsidies and all the rest. It is worth remembering that the ‘modern welfare state’ represents not one but several different ways of organising consent, giving a sense of purpose and conveying resources to the needy, and that effective solutions for similar problems were found,

at least for a time – through complex processes of experimentation, proposal, debate and reform – in earlier periods as well.



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SOURCE

1. ... est situm et positum ante gradum ecclesie cathedralis ipsius civitatis senarum et est ibi in medio una pulcra et lata platea a tribus partibus circumdata dominiis et casamentis ipsius hospitalis, et in eius frontispitio et faciata sunt depicte certe historie beatissime Verginis Maria et sunt actabiliores quam habet mundus ...

From: F. Leverotti, *L'ospedale di S. Maria della Scala in una relazione del 1456*, in "Buletino senese di storia patria", 1984, XCI, pp. 276-291.

2. Bernardino da Siena, *Prediche volgari sul Campo di Siena, 1427*, Carlo Delcorno ed., 2 vols, Milan 1989.
Predica XL, 102-107 (vol. 2, pp. 1191-2).

Doh, quando tu vai ne lo Spedale, che tu vi vedi il povaretto infermo, e nol puoi aitare di levargli la pena sua, dagli almeno la limosina del cuore: siene piatoso. E con tutto che tu gli abbi dato questa limosna, anco ne gli puoi dare un'altra, che forse l'arà più cara: dagli quella de le parole. Confortalo di due parole, che farai a lui stesso alleggerare la pena sua. Non potendo dare coll'operazione, a questa non arai tu mai scusa. In ogni modo, in ogni stato che tu vedi il povaro, tu il puoi consolare. Oh, ella piace tanto al povaro la limosina de le parole, che tutto si conforta, tutto si ramorbida! Ode ne lo Ecclesiatico a XVIII capitoli: "Nonne ardorem refrigerabit ros?". Avete voi mai posto mente di state, quando egli è una grande calura, che poi la mattina trovate la rugiada grandissima? Così talvolta intervieni, quando tu parlarai a uno infermo bisognoso, non potendolo sovvenire de la robba del mondo, che tu il conforti di cotali parole, tutto pare che si

rinfreschi, tutto pare riconsolato, con tutto che tu non gli abbi dato il suo bisogno. - O se e' fusse uno mutolo, che non potesse dargli questa limosna? - Dico che anco non se' scusato: tu il puoi almeno ricucirlo, aitarlo a vestire, a calzarlo; e delle altre cose che gli fanno bisogno, qualche cosa pur puoi tu. Chi è colui che si scusa, che elli non possa aiutare il bisognoso in niuno modo? Non c'è niuno.

From: Sermon XL, preached by San Bernardino to the people in the Piazza del Campo, Siena, in 1427:

So, when you go into the Hospital, and you see a poor sick person, and you cannot help him by taking away his suffering, give him at least the alms of your heart: be merciful. And even if you have given this alms, still you can give him another, alms of words. Comfort him with a few words, which will alleviate his distress, his suffering. Even if there is nothing you can do physically to ease him, you have no excuse. In any situation, in any state in which we find the poor person, you can comfort him. Oh, the poor person likes very much the alms of words, which give comfort, and soften the suffering. Hear what Ecclesiastes says in Chapter XVIII: "Nonne ardorem refrigerabit ros?" Have you ever noticed how in summer, when it is very hot, then in the morning you find much dew? Thus it happens that when you speak with a needy sick person, even if you cannot help him with things of the world, if you comfort him with words, it seems that he is refreshed, even if you have not given him what he needs. - Oh, and if there was a mute person, who could not give this alms of [comforting] words? I say that even then you would not be excused: you could at least fix the poor person's clothes, help him to dress, to put on shoes; and the other things he needs, something you too can do. Who can be excused, because he cannot do anything to help the needy in any way? No one.

3. ... verrebbe a mancare le cose ordinate et consuete in riverentia della gloriosa Vergine Maria, advocata singolarissima di questa ciptà, la quale n'à soccorsi infinite volte et scampati da innumerevoli pericoli.

Deliberation of the Consiglio della Campana, 29 September 1433, published by L. Banchi (ed.), Statuto dello Spedale di Siena, pp. 233-236.

4. Bernardino da Siena, Prediche volgari sul Campo di Siena, 1427, Predica XLI 17-24 (pp. 1205-6).

Io dico e credo e tocco con mano in molti modi e per molte modi e per molte cagioni, che voi dovete pregare Idio e raccomandarvegli; e fra molte cagioni voi dovete pregare Idio per questo. Come voi sapete, voi avete nuovamente per vostro vescovo misser Carlo, el quale è ora signore de lo Spedale; e poichè voi avete provveduto al Vescovado, vi conviene provvedere per lo Spedale uno in suo luogo. Là dovete procurare di mettarvi uno, el quale renda odore a Dio de le operazioni sue, e sapore de le limosine che ine si debino fare, e così di mantenere quella Casa in tutte quelle cose che sieno onore e gloria di Dio. E perché io vo molto attorno, io odo pure di quello che si dice. E volesse Idio che questo vostro Spedale avesse la fama che elli ha già auta! Ma sapete che vi ricordo? Ricordovi che se elli non vi si fa quello che si soleva, egli va a la vostra barba. Se voi non vi volete procura, el danno sarà pur vostro. Io vi ricordo che quello è uno degli occhi de la vostra città, e l'altro occhio è el Vescovado: stanno molto bene a lato l'uno all'altro. L'occhio diritto è el Vescovado, e' l sinistro è lo Spedale: el naso è la piazza che è in mezzo. Vedi che è longhetta come è il naso. Doh, cittadini, procurate a quello Spedale! Fate che si mantenghino le limosine continuamente: fate

che elle non venghino meno; che se elle vi mancano, guai a tutti voi! E credete-mi, la Casa sta molto bene, e anco starebbe bene e meglio, se quello che è suo non gli fusse tolto. E come dico bene de lo Spedale, cosi dico anco del Vescovado di dentro e di fuore, e parmi una devota cosa. E s'io procuro bene, tutt'è ddue queste Case so' de la Vergine Maria, e la città si chiama de la Vergine Maria, e però a sua gloria ponete lo' mente. De la Casa de lo Spedale è utilissima cosa la limosina che n'esce; però vi prego, vi prego, che non lassiate mai mancare; ché io mi credo che quella sia una de le cagione che Idio placa l'ira sua verso di voi.

From Sermon XLI, preached by San Bernardino to the people in Piazza del Campo, Siena, in 1427

I say, I believe and I touch with my hand in many ways and for many reasons, that you must pray to God and ask for his mercy; and among the many reasons, you have to pray to God for this. As you know, you now have your new Bishop misser Carlo, who is presently the lord [rector] of the Hospital; and because you have provided for the Bishopric, it would be advisable for you to provide a person for the Hospital in his place. There you must arrange to put a person who renders to God the odour of what he does, and the flavour to the alms that are to be given, and thus maintains that House in all those things which are to the honour and glory of God. And because I go around a lot, I hear what people say. Would God that your Hospital had the fame that it used to have! Do you know what I am going to remind you of? Remember that if the Hospital does not do as it once did, it is your responsibility. If you do not take the necessary measures, you will be damaged. I remind you that the Hospital is one of the eyes of the city, and the other eye is the Bishopric. They look very well, one alongside the other. The right eye is the Bishopric and the left is the Hospital: the nose is the piazza in between them. You can see that the piazza is a little elongated, like the nose. Oh, citizens, provide for [a new rector] for that Hospital! Provide that alms are always given, continuously, that they are not lacking; because if they are lacking, disaster will be upon you. And believe me, the House is in very good state, and its situation would be good and better if what belongs to it were not taken from it. And as I speak well of the Hospital, so I speak well of the Bishopric, inside and outside, and it seems a fit thing. And if I remember correctly, both these Houses belong to the Virgin Mary, and the city is called of the Virgin Mary,

and therefore think of her glory. The alms that come from the House of the Hospital are a very useful thing; therefore I plead with you not to let them be lacking; because



SEE PLATES 3-5

I believe that that is one of the reasons that God's wrath towards you is placated.

[Illustrations: look on web and in books]

5. [mai] la signoria, libertà et onore [sarebbero sottoposti] ad alcuno loco o vero collegio ecclesiastico o vero civile, o vero ad alcuna persona speciale, religiosa, ecclesiastica o vero secolare; ma esso Ospedale e la signoria e libertà e onore, nelli quali è, perpetoamente mantenere e conservare”.

Cap. xxxiii of the 1318 statute, originally written at the time of the rector Giacomo di Bencivenne di Niccolò (1266-86), published in L. Banchi (ed.), Statuto dello Spedale di Siena, Bologna 1877.

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