FEMALE HOSPITALLERS
IN THE TWELFTH AND THIRTEENTH CENTURIES

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ABSTRACT

MYRA STRUCKMEYER: Female Hospitallers in the Twelfth and Thirteenth Centuries

(Under the direction of Michael McVaugh)

“Female Hospitallers in the Twelfth and Thirteenth Centuries” is an analysis of the presence of female members in the Hospital of Saint John of Jerusalem, who were associated with the order as lay sisters involved in hospital care, as women devoted to the liturgy, and as commanders. The study gives special attention to the differences among types of female association, the accommodation of female religious, the cooperation between men and women (or lack thereof), and motivation. It is the first large-scale study of women in the military orders in English and first serious attempt to relate the study of military orders to the framework of the study of female monasticism.

With predominantly archival sources as her evidence, the author argues that, 1. the female members of the Hospital of Saint John were not an anomaly to the order but formed an integral part of the order, as they contributed financially, physically, socially, and above all, spiritually; 2. the Hospital of Saint John was, in comparison to other religious orders, remarkably open to receiving and accommodating women. Some of these women associated as fully-professed
religious, others as lay associates or semi-religious; consorores, donatas, or the like, depending on when or where the association was made. At the end of the twelfth century and in line with a general trend in the history of monasticism, the Order of Saint John began to segregate the women from the men and established religious houses specifically for them. However, this segregation was never complete, and unlike most other religious orders, the Hospitallers continued to welcome female association in male, female, and mixed-sex congregations throughout the thirteenth century. Its positive attitude towards women was only matched by other Augustinian institutions, and points at a difference between Augustinian and Cistercian-Benedictine oriented military religious orders.
To Mary Lou Ruud, Jonathan Riley-Smith, and Michael McVaugh, whose teachings were my inspiration.
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Many of the ideas presented here developed during discussions with colleagues and friends, whose scholarship I admire and friendship I cherish. Thanks to Caroline Smith, Jochen Schenk, Merav Mack, and the other crusaders for more or less serious, but always enjoyable conversations. The same to my friends at UNC: Michael Allsep, Danielle Slootjes, Rosemary Stremlau, Pamella Lach, Elsa Filosa, Simona Muratore, and Adriano Duque for keeping me sane for all these years. I feel also deep gratitude to Carol Lewald, who kept reminding me there is a world beyond history, Anne Menkens, for her company and her corrections of my English, Willemijn Geldorp, who is always on call, and Sophie, for her admirable patience. A special mentioning goes to Erik Jan and Liesbeth Geldorp, whom I thank for their most generous support. And finally, thank you, Carl, for helping me through the final months with stoic calm. My love is to all.

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PREFACE

The deserts of Aragon. Los Monegros, a barren landscape. Empty fields, low bushes and some leafless trees stand along a fast rushing river, all cloaked in a cold mist. Except for a few poor and dilapidated villages the area is desolate. Then and now. I arrived at Sigena at 3 PM on Christmas day, 2003. This is the place where Queen Sancha built her Hospitaller monastery, endowed it well, and directed the community from a distance until she could retire from court. She purportedly noted in a letter to the prioress in the 1190’s how she longed for the tranquillity of religious life, writing: “I would very much like to see you and live with you for the delight, tranquillity and peace which you enjoy because all we have here is the barking of the dogs.”¹ From a distance she took care of the construction of the house by sending a Saracen engineer to oversee the erection of mills and sturdy defence walls, and by ordering English artists to execute an elaborate decorative program for the chapter house.² I touch the walls and feel the crumbly sandstone. The walls are slightly orange, like the soil around them. The curved wall of an apse has a sole arched

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² Documentos de Sigena, no. 10.
window decorated with two simple and worn columns. Just below the roofline a row of rounded corbels embellishes the structure.\(^3\)

A woman opens the small side door. A modern woman in a green coat, not the wide-capped, black-cloaked Hospitaller sister I had imagined. I lower my head and step through the gate. I see a large courtyard with little left of its former glory. It is burnt out, strewn with rubble, and surrounded by a skeleton of arches.

“Dormitorio,” the woman says. I nod and take pictures. She points to her left, “Refectorio.” I nod again and click my camera. We enter a room. “Capitularia.” This room, once decorated by Sancha’s famous frescoes, is now restored and washed pink. Then we enter the church: dark, tall, simple, and currently with a minimum of decorations. We exit through the main portal of the church, which on the outside is elaborately decorated with a fan of fourteen simple stone pillars and arches; a royal execution of Romanesque simplicity. Finally we go into the mortuary where the empty graves of Sancha, her son King Pedro, and two of her daughters are placed along the walls. New are the eight slots for deceased Hospitaller sisters of recent times. The forces of the Civil War had tried to destroy Sigena and burned it to the ground in 1936, almost seven hundred and fifty years after the sisters first came here. They managed to halt religious life only for a short period of time because in  

1986 the sisters of Belén obtained the property and revived it, “helped by the grace of God and several miracles of the Virgin.”

A copy of a thirteenth-century medieval Madonna and child stands in the abbess’s reception room. And just as the Hospitaller sisters told Mildred Staple Byne the story in the 1920’s, the sisters of Belén told me about the miracle of the found image of the Virgin, the reason for the house’s existence. When Byne visited Sigena in search of its art treasures, she saw on the wall of the prioress’s hall (a room now in ruins) “one of the most stupidest and disagreeable pictures” of a “brownish bull snorting about in the center of a still more brownish landscape.” “Of course,” she wrote condescendingly, “we had to hear all about that.” According to Byne, the story went as follows: Sometime in the twelfth century a bull had the habit of wandering off and not returning until nightfall. One day, the cowherd decided to follow him and found the bull kneeling to pray in the middle of a field next to a large boulder. When the cowherd approached he saw that an image of the Virgin was hidden in a niche of the rock, where “as usual” it had been hidden to save it from the invading Moors. The cowherd told the priest, the priest told the bishop, the bishop told the king, and the king told his pious spouse Doña Sancha, “who at once

4. Sister Solgracia of the Order of Bethlehem at Sigena in private conversation.

5. Known as the Madonna del Coro because it used to be kept in the choir. The motif of a statue of the Virgin found in a swamp occurs in several thirteenth- and fourteenth-century legends. Schuler, “Pictorial Program,” p. 16; Juan-Manuel Palacios Sanchez, El Real Monasterio de Sijena. Introducción a la Historia del Monasterio (Zaragoza, 1980), pp. 10-1; Agustín Ubieto Arteta, El Real Monasterio de Sigena, 1188-1300 (Huesca, 1972), p. 16.

saw her duty and erected a monastery on the spot signaled by the knowing bull. To guard the image, the queen called together the first women of the order of Saint John of Jerusalem." Byne continues mockingly, “Thus the legend, cherished as the gospel of truth by the good ladies of the Sigena who pass their lives as sentinels to the apocryphal and undeniable thirteenth-century image (the same image as the modern copy), and hold themselves “always ready to go at a moment’s notice to nurse wounded crusaders in the Holy Land!”” 7

Did they?

Figure 1: The remains of the dormitory of the Hospitaler sisters at Sigena, Spain
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LIST OF ABBREVIATIONS

ACA: Archivo de la Corona de Aragón, Barcelona (Spain)
ADHG: Archives Départementales de la Haute Garonne, Toulouse (France)
ANH: Archivo Nacional de História, Madrid (Spain)
APH: Archivo Provincial de Huesca, Huesca (Spain)
ASG: Archivio di Stato di Genova, Genoa (Italy)
BN: Bibliothèque Nationale, Paris (France)
CA: College of Arms, London (England)
SRO: Somerset Record Office, Taunton (England)
CHAPTER I
INTRODUCTION

“The purpose of this work,” wrote Joseph Delaville Le Roulx in 1894, introducing his article on female Hospitallers, “is to retrieve the female Hospitallers from the oblivion into which they have fallen in comparison to their much more famous brothers and to retrace the essential steps of their history.”8 Their brothers were famous as Knights Hospitallers, members of the military religious order of Saint John of Jerusalem, and forerunners of the current Knights of Malta. Their origins lay in the obscure beginnings of the Amalfitan hospital in Jerusalem at the end of the eleventh century and their fame rose after the first crusade as they cared for the sick and the poor in their hospital of Jerusalem and defended the Holy Land together with other military orders such as the Knights Templar.

These Hospitaller brothers had sisters. The first known sister was Adelaide, who became a female Hospitaller during a chapter meeting of the Hospitallers of Saint-Gilles and Trinquetaille in 1146.9 In the presence of the brothers, the bishop of

Arles, and consuls of the same town, she gave the prior of Saint-Gilles all her belongings for the redemption of her and her children’s sins: houses in Arles, a meadow and the usage of certain ships. In return, the prior made her “sister” (soror). In her new capacity of Hospitaller sister she went to the East and entered the Hospital of Saint John of Jerusalem, which recognized her accordingly. She died in Jerusalem.¹⁰

Delaville Le Roulx’s effort was admirable but, as he himself admits, limited and not definitive.¹¹ He remarks that female Hospitaller houses were established side by side with male commanderies and that from the beginning of the foundation of the Hospital women were included, and illustrates this with the example of a certain Agnes who was involved with the Hospital since its earliest beginnings. The role of Agnes has since been disputed, like many of Delaville Le Roulx’s assertions. Neither was he completely correct in stating that the sisters left the Holy Land at the

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10. “Notum sit omnibus tas presentibus tam futuribus quod domina Adalis, quo fuit dicta uxor Bertrandi Veirune, Iherosolimam venit et in domum Hospita ;is Iherusalem cuius esse sororem recognavit, mortua fuit, que in fine sua concessit Domini et S. Iohani Baptiste et pauperibus ospitalis Iherusalem, omnia illa que, in presentia domini Raimundi archiepiscopi Arelatis et consulum eiusdem civitatis, dederat predicto Hospitali in comuni capitulo fratrum nostrorum S. Egidii et S. Thome Trenquatalle, Arnaudo Emissario, fratre nostro, prriore, qui eam sororem fecit ; et pratum etiam quod ill tenebat et usum de navibus, et domos de burgo Arelatis, ne de his ideo quia tenebat calumpnia fiat, nominatim concessit ut Hospitale, pro redemptione suorum peccaminum tociusque generis sui in perpetuum cum aliis omnibus habeat et teneat.” Cartulaire de Trinquetaille, no. 110.

fall of Jerusalem and settled in a monastery in Sigena, where they devoted themselves to prayer according to a rule that subsequently was used by all other female houses. However, his insight that the Hospitallers did not differ much from other religious orders in accepting women from early on was apt. Furthermore, his assertions have been very influential on later historians. In short, the article was a combination of intelligent insight and grave errors. Limited in scope, it begged for further investigation.

In the same year, 1894, Delaville Le Roulx published the first volume of his monumental *Cartulaire Général de l’Ordre des Hospitaliers de S. Jean de Jérusalem, 1100-1310*, eventually a four-volume work with editions and summaries of over 4900 documents pertaining to the Order of Saint John, from its earliest beginnings to the end of the year 1310. He introduced his cartulary with a narrative and an overview of available sources and archives. The last section of this introduction was devoted to female houses. The overview could have sparked further research but it did not, at least not for another 100 years, perhaps because of Delaville Le Roulx’s existing article or perhaps because of lack of interest by other historians. Whatever the case, the female Hospitallers continued to remain in the shadow of their brothers for many years thereafter.

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During most of the twentieth century, the general history of female Hospitallers was limited to a few secondary remarks in major scholarly works such as E. J. King’s *The Knights of St John in the British Empire* (1934), or Jonathan Riley-Smith’s *The Knights of St John in Jerusalem and Cyprus 1050-1310* (1967), which devoted 2 of 478 pages to the Hospital’s sisters. Dominic Selwood’s *Knights of the Cloister: Templars and Hospitallers in Central-Southern Occitania 1100-1300* (2002) gave the sisters two paragraphs.

Most of the interest in the female Hospitallers has come from historians who were interested in local history and who wrote specialized works of variable quality. Edmond Albe and Jacques Juillet, for example, wrote on the Hospitaller sisters in Quercy, France, while Josep Lladonosa i Pujol and Joachim Miret y Sans were interested in the sisters in Catalonia. Sigena, a royal foundation for female Hospitallers in Aragon, has received much attention from historians such as Agustín Ubieto Arteta. Furthermore, Sigena’s artwork has been subject to significant debate.


in the field of art history.\textsuperscript{15} Other historians have paid attention to saints’ lives of Toscana, Ubaldesca and Fleur, sanctified women who were associated with the Hospitallers but who, because of the problems associated with hagiographies for institutional history, have been mostly left out of this study.\textsuperscript{16}

The first effort to place the female Hospitallers in a wider context occurred in Alan Forey’s article on women and the military orders, in which female Hospitallers played a significant role.\textsuperscript{17} The article surveys the evidence and shows that women associated themselves with all military orders, even those, such as the Templars, that officially objected to having female members. It makes a distinction between the orders that had houses for women and those that did not, and then concentrates on the former, in particular on the Hospital of Saint John, for which most evidence is available. The article is strong in its comparison of female houses and male commanderies and raises important questions regarding women within military orders (questions that will be addressed in this dissertation) such as the discrepancy


between rhetoric and action by military orders with regard to the admittance of women, the variety of female association with military orders, and the reasons for and forms of foundations specifically for women in military orders.

The most important of these questions is Forey’s notion that “women’s houses participated to only a very limited extent in the work and activities of the military orders but there was little challenge to their survival.”18 In this dissertation I will challenge his notion that women participated only to a limited extent, inasmuch as they did not fight and hardly nursed. Rather, I argue that the image we have of military orders devoted to fighting and nursing is only superficially true and has been created by historians who did not take the contemplative women seriously into account. Instead, if we see contemplation as a real contribution and as a characteristic of life in some military religious orders, we can begin to understand better the religious nature of these orders.

While Forey focused on houses for women in military orders, Francesco Tommassi was interested in women who associated themselves with commanderies, that is, houses of military orders that had both male and female associates.19 In his article on the “Problem of double and mixed houses in the Hospitaller, Templar, and Teutonic orders (12th to 14th century),” Tomassi, like Forey, goes to great length to

18. Ibid., p. 91.
show that military orders had female members, but also shows the great variety of approaches to the accommodation of women by military orders. The article appeared in a volume on the issue of mixed-sex religious establishments and is remarkable in the sense that it draws the history of military orders into the realm of the history of monasticism. This dissertation will follow this approach.

Since Alan Forey’s publication, Helen Nicholson has been quite active in publishing on women in military orders, in particular female Hospitallers and Templars. Her article, “Women in Templar and Hospitaller Commanderies,” argues that understanding the role of women within military orders helps us better understand military orders as religious orders, a view with which I agree. Her work, however, does not follow up on the advice, makes little distinction between orders or in time, and reveals few new insights.20 Her conclusion, “In their admittance of women into even their male commanderies, the military orders were simply following the demands of the society in which they lived” desperately needs expansion.21

To conclude, an extensive investigation into the history of female Hospitallers has not yet been published, so that this is the first large-scale study of women in the Hospital of Saint John (female Hospitallers). It focuses on the twelfth and thirteenth


centuries, the period in which the Hospital had a presence in the Latin East, and places the presence of women in the Hospital of Saint John in the context of the history of female monasticism. I do this by first addressing issues in the history of female monasticism, in particular trends in male attitudes towards female religious (chapter II). Then I discuss the origin and the nature of the religious order with which female Hospitallers associated (chapters III and IV). Having given the necessary background, I turn to the association by female religious with the Hospital of Saint John, who associated as lay and as fully professed sisters. Chapter V analyses the different types of lay association and concludes that there is a detachment between the types of association and the names given to these lay associations, because the name of the association depended often on the geographic location of the postulant rather than the type of his or her association. Chapters VI and VII look at the ways in which the Hospital, which faced the same issues as other religious orders, allowed professed sisters to associate with ordinary Hospitaller houses (commanderies) and with houses established specifically for Hospitaller sisters in the twelfth and thirteenth centuries respectively. Chapter VIII goes beyond female association with female houses and with commanderies by discussing why female Hospitallers existed, and what the consequences were of their presence for the Hospital as an institution. Chapter IX gives an overview of

22. María Echániz Sans, Las mujeres de la orden militar de Santiago en la Edad Media (Salamanca, 1992), focuses on the sisters of the Order of Santiago rather than those of the Order of Saint John and expands into the fifteenth century, but her approach of studying these women in the context of women’s history is refreshing and inspiring.
women in military orders and draws some preliminary conclusions in order to make suggestions for further research. Chapter X concludes this study.

Archival resources have been the foundation for this project. The extant documents pertaining to houses specifically for women are relatively accessible: Documents for the sisters at Sigena can be found at the Archivo de la Corona de Aragón in Barcelona (Spain) and the Archivo Provincial de Huesca in Huesca (Spain), and have been collected and published by A. Ubieto Arteta as Documentos de Sigena (Valencia, 1972) for the years 1184 to 1237. An eighteenth-century cartulary has survived based on the now-lost archives of the sisters at Beaulieu in France and has been preserved in manuscript Doat 123 at the Bibliothèque Nationale in Paris (France). Finally, a fourteenth-century cartulary exists for the Hospitaller establishment at Buckland in Somerset (England). Although this cartulary pertained to the brothers who lived next to the sisters at Buckland, many of the copied documents give information on the sisters, in particular on the foundation of Buckland and the relation between the brothers and the sisters. The original has been preserved in the Somerset Record Office in Taunton, England as MS DD/SAS SX133 and was edited and translated by F. W. Weaver in 1909.23

The documents of other female Hospitaller houses are more difficult to come by. The archives of the sisters at Antioch, Acre, Penne, Salinas de Añana, and other places were lost before they were copied and only incidental documents remain. The

documents of the sisters at Alguaire pose a different problem: after the dissolution of that house, the documents were dispersed and are now in several armarios under different names at the Archivo de la Corona de Aragón and in the Biblioteca de Catalunya in Barcelona (Spain).

The biggest challenge is to locate women in, or associated with, male commanderies. Because locating them requires painstakingly reading through all documents, I made the decision to focus on the area where the order was present since the early twelfth century, namely northern Spain and southern France, and have predominantly used the archives of the Crown of Aragon. Furthermore, I have visited the Archives Départementales du Lot in Cahors (France), the Archives Départementales de la Haute Garonne in Toulouse (France), and the Archivo Nacional de História, Madrid (Spain), and have made extensive use of published sources in order to allow the project to have a wider scope. Unfortunately there are few published source collections of the Germanic lands or Italy, where I had little time to conduct research and have necessarily relied on the work of others.

Identifying female Hospitallers is difficult for other reasons than the dispersal of primary sources. For one, sometimes the term fratres (brothers) or confratres includes women. The usage is comparable to the modern French “ils” or the American “guys” which similarly can refer to a group of men and women, and

24. Reportedly, there are also documents in the “Arxiu actual de les antiques religioses santjoanistes d’Alguaire” in Valldoreix, but I have not been able to locate them. Lladonosa i Pujol, Història, p. 17.
we should therefore not be deceived by the fact that the Hospitaller rule only
mentions brothers. The records of the order show several examples in which women
are included among the brothers throughout the middle ages. For instance,
Ermesenda joined with her husband in 1111 as *confrater.* In 1207 Valentina was
promised that she, together with her husband and mother, could take the habit of
the order and that they would be received as brothers. And in the grand enquiry of
1373 three women were mentioned among brothers at Saint-Gilles under the
heading “*fratres.*”

Besides the default to the male as denominator of a mixed group, there are
other difficulties in discerning women among the men. Women were active as
donors and show up in the records in that capacity, either alone or with their
husbands. However, they were not active as receivers and seldom show up in
witness lists as members of the order. As most of the information regarding the
order of Saint John comes to us in the form of donation charters benefiting the order,
female members become nearly invisible.

Yet from the accumulation of snippets a clear picture emerges: The Hospital of
Saint John was a religious military order devoted to charity, which, like most other

25. *Cartulaire général des Hospitaliers,* no. 22.

26. *Cartulaire et chartes de la commanderie de l'Hôpital de Saint-Jean de Jérusalem
d'Avignon au temps de la commune (1170-1250),* ed. Claude-France Rochat-Hollard (Paris,
2001), no. 18.

27. *L'Enquête pontificale de 1373 sur l'ordre des Hospitaliers de Saint-Jean de Jérusalem: L'Enquête
religious orders, accepted female members. These women associated themselves with the order in various ways and from the last quarter of the twelfth century had houses of their own. The establishing of separate houses for women was no sign, however, of a deteriorating opinion of women by the Hospitaller order; in contrast, women were admitted throughout the twelfth and thirteenth centuries and an effort was made to recruit and keep female members. In this respect the Hospital of Saint John was remarkably welcoming to women.

There remains much more research to be done. When I started this project I was asked if the topic was large enough. I found that exhausting the archival sources for female Hospitallers is a lifetime’s work and for now I have shied away from problematic hagiographies. Hence, although my study is much more thorough than Delaville Le Roulx’s, I will follow him in saying “The conclusion to which we have come while tracing the history of the female Hospitallers of the Hospital of Saint John of Jerusalem cannot pretend to be complete; the limits imposed on this work do not allow us to treat this subject in a definitive manner. However, it seems to us that it was not rash to draw attention to a little-known subject...”

28. “Le résumé que nous venons tracer de l’histoire des Hospitalières de Saint-Jean de Jérusalem, ne peut pas prétendre à être complet; les limites assignées à ce travail ne nous ont pas permis de traiter la question d’une façon définitive. Mais il nous semble qu’il n’était pas téméraire d’appeler l’attention sur un sujet peu connu, et de tirer un instant d’oubli, pour le faire revivre, le passé d’un ordre religieux qui, après plus de sept siècles, n’a pas encore disparu, et dont l’histoire n’est ni sans importance, ni sans intérêt,” Delaville Le Roulx, “Hospitalières,” p. 146.
CHAPTER II
FEMALE MONASTICISM

Medieval men had a dilemma. On the one hand they wanted to help religious women because men admired female spirituality. On the other hand, men wanted to distance themselves from women because they were afraid that a close proximity of men and women would tempt them into sexual transgression. This chapter looks at how men -- and women -- in all religious orders, including the Hospital of Saint John of Jerusalem, tried to find a balance between distance and cooperation of the sexes in a variety of ways during the twelfth century. It also shows how usually fear would dominate the male leadership over time, so that instead of living in close proximity, men preferred women to be at a safe distance and in a cloister. Finally, it lays out the debate among historians of medieval religious life, who generally argue that this changing attitude of men towards female religious in religious orders led to a shift in the 1170’s, when the male willingness to accommodate female religious began to decline.29

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29. See below, pp. 33-9. The studies include women in monastic (Cluniac, Cistercian, etc.) and mendicant orders (Franciscan, Dominican), but not in military orders (Templars, Hospitallers, etc.). All three are types of religious orders. This classification reflects the activities of their male members rather than of their female members.
Medieval Attitudes

“Women’s efforts achieve little without the help from men,” wrote the author of the life of Saint Gilbert. He did not stand alone. Medieval men and women were deeply convinced that men and women were essentially different, namely that women were weaker than men. The letters of Heloise, lover and wife of the twelfth-century theologian Abelard and later abbess of Paraclete, give us an exceptional insight on the point of view of a woman. In a letter asking Abelard for guidance for the Paraclete she expressed the concern that “men and women alike [are] received into monasteries to profess the same rule,” while “the same yoke of monastic ordinance is laid on the weaker sex as on the stronger.” Because she believed that men and women were different, she asked for a rule that was tailored to women accordingly. Although she proved to be a very strong woman and successful abbess herself (and much more successful an abbess than Abelard ever was an abbot), Heloise took it for granted that women were the weaker sex and needed the assistance and guidance of men.

Furthermore, Heloise believed that men had the responsibility to take care of women and support them. She considered it right and proper that religious women devoted themselves to the celebration of the divine office and did not perform labor.


31. Ibid., p. 160.
“particularly when on apostolic authority the special concession was granted to devout women of being supported by services provided by others rather than on the result of their own labour.” 32 Moreover, these women, as brides of Christ, were to be “supported from the funds of the Church as if from the personal resources of their husbands.” 33 Such support is known as the cura monialium, the care of nuns.

The conviction that women were weaker than men and therefore needed care made women dependent on men. We can distinguish three types of dependency in particular: spiritual dependence, economic dependence, and as a result of the economic and spiritual care by men, institutional dependence. The women’s spiritual dependency was the consequence of the church prohibiting women to become priests, so that women were dependent on men for services rendered by priests only. Heloise, for example, wrote that she was concerned about having to have men in the convent at night for the reading from the Gospel for the Night Office, a reading apparently only done by male clergy, 34 and a certain Hospitaller rule for women shows that the Hospitaller sisters there needed men as priests for the celebration of mass and for the blessing of the convent’s water and salt. 35 Men remained essential for women’s salvation because only men could perform mass, and in the thirteenth century women’s dependence on priests was increased when

32. Ibid., p. 177.

33. Ibid.


35. La Regla de Monastir de Santa Maria Sixena, ed. A. Duran Gudiol (Saragossa, 1960), p. 175.
penance came to replace monastic confession, which had not required a priest.\textsuperscript{36} By canon law, women could not be saved without men.

Besides spiritual dependence, religious women were economically dependent on men.\textsuperscript{37} The society of Western Europe in the Middle Ages believed that since the beginning of mankind, since Adam and Eve, men and women had had different tasks according to gender, a division of tasks illustrated by a mural of one of the Hospitaller female convents [Fig. 2]. Some jobs were not considered proper for women, especially for religious women, and Heloise, again, brings this up in her letter to Abelard, when she comments that women (in contrast to men) should not go far off into the fields to collect the harvest.\textsuperscript{38} Therefore, monasteries of men often employed women, while nunneries often employed men. The difference between the two is that male houses employed women for menial tasks such as washing clothes while women employed men to represent them in much more powerful


\textsuperscript{38} \textit{Letters of Abelard and Heloise}, pp. 161-2.
functions, for example as stewards on whom the women depended for their revenues.

Figure 2: Adam and Eve. Chapter house mural in the former house of female Hospitallers in Sigena, Spain (c.1187). © Museu Nacional d’Art de Catalunya, Barcelona, Spain.

During the Middle Ages, men provided spiritual and economic services to religious women. These could be *ad hoc* arrangements where a priest or steward was hired, but could also be an arrangement with a nearby monastery or within an institutionalized hierarchy of religious houses (a religious order), which had the advantage of greater security. When the arrangements were institutionalized, however, women of the twelfth and thirteenth centuries – in their economic and
spiritual dependency—were habitually placed under the leadership of men, thereby making the women also institutionally dependent.

Some men (such as Norbert of Xanten and Robert of Sempringham) took the care of religious women upon themselves, because, among other things, they admired the women’s spirituality. The spirituality of women had long been acknowledged, ever since Mary sat idle to listen to the words of Christ [10 Luke 39 ff.]. Saint Jerome had encouraged women in their monastic lives. The sister of Saint Augustine was a religious, and so was the sister of Saint Benedict. Noble Benedictine abbesses like Saint Leoba of Wessex and Huneberc of Heidenheim worked alongside men such as Saint Boniface, Saint Willibrord, and Saint Willehad in the eighth century, and were instrumental in spreading Christianity among the Germanic pagans by establishing monasteries in hostile lands.39 When Europe revived in the eleventh century, so did female monasticism.

In the twelfth century, the merit and validity of women’s spirituality was recognized in various ways. Some exceptional women, like Hildegard of Bingen, were highly respected and derived authority from their spirituality. But ordinary nuns were valued too, because all were brides of Christ. In some respects, these religious women were more admirable than religious men because female virginity was highly praised. Furthermore, successful religious women had overcome their

feminine weakness. However, remarks Heloise, the female body was at an advantage because its humid and porous nature absorbed less food or alcohol, with the result that women were less likely to fall into gluttony or drunkenness. As a result, lay people regularly supported religious women so that they could enjoy the merit of their prayers.

Reformers recognized that the sexes needed distance in order to avoid temptation, but that at the same time close cooperation between the sexes was needed for women to flourish. Therefore, when men and women alike enthusiastically took up new forms of religious life in the beginning of the twelfth century and new mixed communities were established, they experimented in finding a delicate balance by the skilful organization of religious communities lest conflict or scandal should arise: conflict because of frustration between the men burdened with care and the women chained by dependence; scandal because of the proximity of the sexes.

However, to men who were committed to a life without sexual activity, the presence of women seemed a great danger, and increasingly so over the course of the twelfth century, as the reformers of the twelfth century were promoting the monastic ideal of celibacy as desirable even for secular priests. We know little


41. _Letters of Abelard and Heloise_, p. 166.

42. Johnson, _Equal_, pp. 233-4 gives several examples.

about the opinion of women because they wrote less, but Heloise, as we just saw, clearly had concerns about having men in her convent.\footnote{44} Abelard agreed and encouraged enclosure for religious women in order to protect them, as did influential churchmen such as Bernard of Clairvaux and Peter the Venerable, who consoled his nieces at the Cluniac nunnery at Marcigny by explaining to them that “just as the garden shut off from thieves diffuses the scent of vines, burns with the olive and is resplended with the rose, so religion grows in the vine, peace in the olive, and the modesty of consecrated virginity in the rose.”\footnote{45} The concern that the proximity of the sexes might lead to temptation or worse, a consequent loss of chastity, was a general concern.

**Women in Monastic Orders**

A closer look at the religious orders in the twelfth history reveals a pattern of initial accommodation of women in an atmosphere of apostolic reform and religious

\footnote{44. “Above all, we want you to decide what we ought to do about reading the Gospel in the Night Office. It seems to us hazardous if priests and deacons, who should perform the reading, are allowed among us at such hours, when we should be especially segregated from the approach and sight of men in order to devote ourselves more sincerely to God and to be safer from temptation,” *Letters of Abelard and Heloise*, p. 178.}

enthusiasm by innovative, itinerant preachers who remind us more of sixties’ hippies than the papal curia; followed by an attempt by men of the established Church to distance themselves from their spiritual sisters. The first well-known of those itinerant preachers was Robert of Arbrissel. He was an ordained priest who left his bishop’s household about 1095 in order to spread the Gospel throughout northwestern France. His ragged clothes and brilliant preaching made him stand out and he attracted many followers, male and female. According to his biographer Baudri of Dol, “The crowd of those renouncing sins, steeped in Robert’s words, grew such that their numbers could hardly be counted.... Many men of every rank flocked to him, and many women gathered, poor and noble, widows and virgins, old and young, whores and those who spurned men. No longer did the huts already built suffice to shelter an innumerable flock; Christ’s recruits required roomier dwellings.” In 1101 he founded Fontevrault for men and women, made possible by a donation from Adelaide Rivière, and from the beginning the women outnumbered the men. His organization was popular and drew much support from the laity, which led to the establishment of daughter houses, and by 1149 there were nearly


47. Robert of Arbrissel, p. 17.
fifty houses of Fontevrault.\textsuperscript{48} Robert had opened his arms to women who were seeking a religious life.

Robert had separated his female followers from the men in the order early in his career: he took care of his female followers but was careful to avoid any scandal. Baudri, his biographer, explains that Robert “sentenced to the cloister, so to speak, those he set aside for prayer; the men he literally delivered over to labor. He did so with wise discernment: he committed the gentler and the weaker sex to psalm-singing and contemplation and the stronger sex to the duties of the active life...and all were joined together in fraternal love.” Heloise would have agreed with the suitability of this division of tasks according to gender; although men and women were equal in a spiritual sense, they were not the same, and needed to be accommodated according to their sex.\textsuperscript{49}

Baudri might have emphasized Robert’s concern for proper arrangements for the women in order to pre-empt a criticism of the founder’s early practices. Robert had been criticized harshly for his bed-sharing with women as an ascetic practice that was meant to show the strength of willpower over the weakness of the body, and consequently the accommodation of his female followers had come under scrutiny. About 1098 - that is, before the foundation of Fontevrault - Marbode, the newly elected bishop of Rennes, expressed his concerns about the rumors of Robert’s


\textsuperscript{49} This is the premise of Johnson, \textit{Equal}.
indecent behavior and warned him that the practice of keeping women in hospices and lodgings where they might mingle with men was dangerous, as “the wailing of babies...has betrayed.”\(^{50}\) Moreover, Marbode pointed out that “the beginning of sin was caused by a woman and through her we all die, so if we want to avoid sin, we must cut the cause of sin away from us.”\(^{51}\)

Fontevrault was Robert’s answer to the accusations by Marbode and others. In this community, better organized than previous ones, women were enclosed and separated from men but all lived within one convent and under the leadership of a woman. The large number of new recruits and increasing number of dependent houses attested to the popularity of these arrangements.

In northwest France, Norbert of Xanten similarly established a religious house at Prémontré for canons, nuns, lay brothers, and lay sisters in 1120, and many other Premonstratensian communities followed quickly thereafter.\(^{52}\) The early houses of Prémontré were mixed-sexed communities that, in contrast to Arbrissel’s early communities, centered on the religious life of men rather than of women, but shortly after Norbert’s death in 1134, the general chapter of the order decided that it would be better to move the nuns and lay sisters out of the mixed-sex

\(^{50}\) Robert of Arbrissel, p. 93.

\(^{51}\) Ibid.

Premonstratensian communities. However, the implementation came slowly and was often left to the petty aristocracy rather than undertaken by the Premonstratensians themselves. The sisters left the order’s main abbey of Prémontré in 1141 for a site four kilometers away and other houses followed suit, but the segregation was never complete. In 1198, Innocent III noted in a bull that the Premonstratensians had decided not to receive any more women into the order.

At roughly the time when the order of Prémontré made arrangements to segregate its female members, Gilbert of Sempringham designed a new arrangement for the accommodation of religious women and men in the north of England. According to his Vita, Gilbert was a devoted priest at the church of Sempringham, who decided to provide for some girls who wanted to “overcome the temptations of their sex and of the world,” because he could not find any men who wanted to lead such strict lives. In order to house these women, “dwellings suitable for religious


54. Venarde, Women’s Monasticism, p. 70.

55. Ibid., p. 164, n. 114.

56. Ibid., p. 164.

life were duly built, together with an enclosure sealed on every side....Only a window was preserved which could be opened so that necessaries could be passed through it." 58 The author of Gilbert’s vita explains that “tender virginity is frequently and easily tempted by the serpent’s cunning, therefore he shut them away from the world’s clamor and the sight of men, so that having entered the king’s chamber they might be free in solitude for the embrace of the bridegroom alone.” 59 Thus the nuns, brides of Christ, were bound to a chaste marriage, and His claim on their sexuality needed to be protected from the devil by enclosure. Like male religious, female religious were threatened by the sexuality of the other sex because they had denied it to themselves and had sacrificed it to God instead. Because the nuns were not allowed to go out of their house, not even for their basic needs, some poor women were assigned to assist them. 60 However, Gilbert also needed to assign men to his foundation, because, according to his biographer’s common sense, women could not do without help from men. 61

Gilbert’s arrangements were successful and the number of foundations multiplied with astonishing speed. 62 Gilbert then wanted to affiliate with the


59. Ibid.

60. Ibid., pp. 34, 35.

61. Ibid., pp. 36, 37.

62. Ibid., p. xxviii.
Cistercians because he admired their strict life, but the Cistercians declined. The pope recommended that Gilbert take the responsibility for the foundations upon himself, which meant that he had to arrange for priests to serve the nuns. In accordance with the wishes of the Church, Gilbert ordered the houses of canons to be placed far away from those of the sisters, and they were allowed only to hear, not see, each other.

Gilbert’s *Vita* tells the history of an order that was strictly segregated from its inception. However, an earlier account of a scandal at the Gilbertine house at Watton shows that the arrangements were not as strict as the *Vita* would have liked its readers to believe and that at first there was more opportunity for interaction between men and women. According to Saint Aelred, Abbot of Rievaulx, an adolescent Gilbertine nun was attracted to one of the brothers in care of her

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63. According to the *Book of St. Gilbert*, pp. 42, 43, the Cistercians declined because Gilbert’s houses were of nuns (“Dominus autem papa et abbates Cistercie dixerunt sui ordinis monachos aliorum religioni, et presertim monialium, non licere preesse: et sic quod optauit non optinuit...”). See below, pp. 29-30, for a discussion.

64. Ibid., pp. 44, 45.

65. Ibid., pp. 46, 47.

monastery. The two lovers began a series of encounters until some elder sisters confronted the girl, punished her harshly, and locked her up. During the nun’s imprisonment, her pregnant body blatantly showed that she had transgressed. Consequently, the nuns became very worried that the scandal would become public and shame the convent, because the nun’s adultery to Christ would reflect upon the whole monastic family.67 Up to that point they had not yet informed any of the brothers, but now, with the help of Gilbert himself, they tricked the unfortunate lover, castrated him, and put the genitalia into the nun’s mouth, so that she would be befouled with the blood just as they had been, and so that their dishonor would be revenged.68 At last the community could find reconciliation.

The story of the nun at Watton shows the high level of anxiety that accompanied dedication to chastity. The apprehension resurfaced shortly after the Watton episode when Gilbertine lay brothers complained that the professed men and women of the order were conversing too freely. The pope, Alexander III, took the accusations seriously and started an inquest in 1166.69 However, Gilbert found many supporters, including the king, who warned that if the arrangements were to be altered, the laity would withdraw its support and the nunnaries would wither. For a mixture of personal, political, and religious reasons, the archbishop of York


68. “Nun of Watton,” p. 133.

and the bishops of Norwich, Winchester, Lincoln, and Durham confirmed that the
arrangements at the Gilbertine houses were proper and that the necessary
precautions had been taken to maintain chastity. The support for the nuns
continued, but so did the concern for sexual transgression.

The *Vita* was written after the sexual scandal and after the accusations of the
lay brothers; intending to sanctify Gilbert, it clearly needed to counter any suspicion
in order to acquire canonization for the founder of the order. Furthermore, stricter
implementation of the segregation of the sexes was already in place by the time the
*Vita* was written (1202), and it is likely that the new arrangements influenced
the description of the old. In any case, the arrangements before the scandal seem to
have been laxer than those described in the *Vita*, and these stricter arrangements
became the ideal and limited the nuns’ authority.

Similarly, the *Vita*’s claim that the Cistercians did not accept Gilbert’s offer of
affiliation on account of the nuns may be more reflective of the time when the *Vita*
was written, than of the reasons at the time of Gilbert’s request. Gilbert himself does
not say why he was denied affiliation by the Cistercians. He recounts that he asked
the first abbot of Rievaulx (William) for advice, and that the abbot had given him
monastic habits like those of the Cistercians, but when in 1146 he went to the chapter
at Citeaux over which Pope Eugenius III presided, his request for affiliation was


71. According to the archbishop of York and the bishop of Durham, the segregation of
canons and nuns was ordered and implemented at some point before the accusations of the
denied on the ground that the Cistercians did not want to preside over another order of monks and especially not over nuns.\textsuperscript{72}

The \textit{Vita} has been used as proof that Cistercians did not want to take on the care for women. However, current research by Thompson and Berman has shown that there were plenty of Cistercian nuns in France in the first half of the twelfth century and that they were welcome in the order.\textsuperscript{73} The expansion of Cistercian women’s houses is most striking, however, in the Catalan region, where the majority of houses founded in the twelfth century were Cistercian. This becomes clear from Pascal Zaragoza’s catalogue of monastic houses in the dioceses of Barcelona, Elne, Girona, Lérida, Pallars-Jussa, Perpignan, Solsona, Tarragona, Urgel, and Vic. The catalogue shows that by 1100 the region had only seven houses for women: Santa Maria del Camí (founded in 921), Sant Jaume de Rifa (941), and Sant Pere des Puelles (945) in the diocese of Barcelona; Sant Pere de Burgal (949) and Santa Cecilia de Elins (1079) in Urgel; Santa Maria de Valldaura del Bergueda (1006) in Solsona; and Sant Daniel de Girona (1019) in Girona. No new houses were founded between 1079 and 1156, but between 1156 and 1200 nine more houses were established: Santa Maria de Valldemaria (1156) and Santa Maria de Cadins (1169) in Girona; Santa Maria de

\textsuperscript{72} Ibid., pp. 42, 43; Golding, \textit{Gilbert of Sempringham}, p. 84. Whether the assembly was a “general chapter” is a different matter. C. Berman, \textit{The Cistercian Evolution} (Philadelphia, 2000), p. 146.

\textsuperscript{73} S. Thompson, “The Problem of the Cistercian Nuns in the Twelfth and Thirteenth Centuries,” in \textit{Medieval Women}, ed. D. Baker and R. Hill (Oxford, 1978), pp. 227-52; Berman, \textit{Evolution}, pp. 39-45. The assertion that that there were no female Cistercians in 1147 necessarily needs to be revised if we accept that the \textit{Vita} reflected the attitudes of 1202 rather than 1147.
Vallverd (1172), Santa Maria de Pedegral (1176), and Santa Maria de Franceses (1186) in Urgel; Santa Maria de Vallbona de les Monges (1157); and Santa Maria de Bonrepos and Santa Maria de la Bovera (1195) in Tarragona. These new houses for women were Cistercian, except for Bonrepos, which was a hermitage before it became Cistercian in 1215, and Vallverd, which was probably an independent Benedictine monastery before it became Cistercian in 1220.74

Moreover, it was the Cistercian model that was deemed most desirable and appropriate for the accommodation of women in religious life in northern Spain. It was the order of choice for noble women who wanted to found a religious house for women: Estefania, daughter of Count Armengol V of Urgel, founded Valbuena de Duero (Urgel) in 1143/1152 and Benavides in 1176;75 Sancha of Castile founded Espina in 1147;76 Oria, countess of Pallars, founded Casbas (Huesca) in 1174;77 and Eleonor Plantagenet, queen of Castile, founded Las Huelgas (Burgos) together with

74. Ernest Zaragoza Pascual, Catàleg dels monastirs Catalans (Barcelona, 1997), organized by place name.


76. Perez-Embib Wamba, El Cister en Castilla y León, p. 271; Alvarez Pelenzuela, Monasterios Cistercienses en Castilla, p. 92.

her husband in 1187.78 These were viable and powerful institutions of female
Cistercians.

Historians have often taken the view that the Cistercians and other religious
orders were pressurized into accommodating women. Richard Southern wrote that
in practice the Cistercian legislation “had to bow before the force of feminine
liberty” and accepted Herbert Grundmann’s opinion that Cistercians only admitted
women at the end of the twelfth century when they “could no longer dam the
flood.”79 Writing of the “inability of even the Cistercian order to keep women out, ...
[although there was] none that shunned female contact with greater
determination,”80 Southern added that Bernard of Clairvaux himself had advised
avoiding women, because “to be always with a woman and not have intercourse
with her is more difficult than to raise the dead.”81 But while Bernard did not
approve of religious women living together with men, an opinion he shared with

78. Documentación del monasterio de las Huelgas de Burgos edited by J. M. Lizoaín Garrido,
Fuentes Medievales Catellano-Leonesas 30 (Burgos, 1983), no. 11.

Grundmann, Herbert, Religious Movements in the Middle Ages. The Historical Links between
Heresy, the mendicant Orders, and the Women’s Religious Movement in the Twelfth and Thirteenth
Century, with the Historical Foundations of German Mysticism, trans. S. Rowan (Notre Dame,

80. Southern, Western Society, p. 313.

81. “Cum femina semper esse et non cognoscere feminam nonne plus est quam mortuum
P. Migne. Series Latins (London, 1844-64), 183, line 1091; Southern, Western Society, pp. 314-
5.
many, he did show care for the spiritual well-being of women, in particular with the foundation of Jully.  

Constance Berman, who has closely studied male Cistercian attitudes towards female Cistercians, argues instead that after a period of relative indifference, the Cistercians began to include houses in a more systematic way in the middle of the twelfth century, but started to distance themselves from women in its last quarter, a process that culminated in 1213 in a statute that discouraged any further acceptance

![Female Cistercian Foundations in Southern France](image)

Figure 3: Cistercian foundations for women in southern France (provinces of Auch, Toulouse, southern Bourges, Narbonne, southern Vienne, Aix, and Arles, and the diocese of Agde) per decade, based on Berman, *Evolution*, pp. 246-50 (Appendix 3).

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of nunneries. According to Berman, a great expansion of female Cistercian houses occurred after the 1170’s and 1180’s and coincided with the moment when the Cistercians, after a long, gradual development, finally reached maturity as an order. She notices that there was “considerable ambivalence about women’s houses among Cistercians after the 1170’s and 1180’s, yet this was the period of greatest expansion of women’s houses within the order.”

This is, I believe, not a contradiction. As was the case in other orders, the Cistercians seem to have shown heightened anxiety with regard to female members when their numbers increased significantly. The eventual decline in the numbers of the foundations for religious women seems to have been the result of a complex shift in values, that is, the cumulative effect of a shift in a balance between sympathy and fear, both of which existed in the mind of religious men. They wanted to aid women in their quest for a fulfilling spiritual life, but at the same time they saw a danger to their own salvation in being too intimate with women. The reason was that women’s proximity could tempt men to sin. Men’s sympathy for women and fear for sin through women thus co-existed on a mental balance, causing otherwise inexplicable contradictions between words and deeds, even within the corpus of one author, with regard to attitudes towards women. Sympathy or even admiration for women brought men closer to women, but closer proximity increased the perceived danger,

83. Berman, *Evolution*, p. 233. In the Cistercian order the increase of women and anxiety happened at the same time that the order became more organized and the general chapter became powerful enough to restrict female participation.
causing the balance to sway and giving the upper hand to fear. Although sympathy was still present, fear became the dominant force. This sway from sympathy to fear was a process that occurred over the course of the twelfth century through which different religious orders and their leaders passed in more or less the same manner. The cumulative effect of the shifts from admiration to fear in individual orders was a general shift towards fear and thereby of values – which are the moral justifications of the limitation of danger – in the 1170’s.

A Negative Trend

Scholars seem to agree that the apprehension regarding women’s participation in male religious orders intensified in the third quarter of the twelfth century, when, as Sharon Elkins has put it, women’s religious “enthusiasm was curtailed” by regulation, and, in Bruce Venarde’s words, “an era of creativity and experiment came to an end.”84 Penny Shine Gold was the first to explain in 1985 that women were included and accepted in the early stages of twelfth century monastic innovation, but were rejected once a monastic order was established as a social pattern.85 According to Gold, the same processes were at work in twelfth-century monasticism as those as described by Max Weber for Pauline Christianity: women were included in the “early, prophetic stage” of a religion, but excluded and


dominated by men in the subsequent stage of “routinization and regimentation.”[^86]

She explains Weber’s pattern of progressive exclusion as follows: from the beginning of Christianity and throughout the history of Europe, the ideology of society “was characterized by a component of strong hostility to women, expressed through legal, social, and intellectual restrictions.”[^87]

In its early stages, a religious movement may have been willing to include women because of its critique of society, its enthusiasm, and its need for support, but once it established itself, once it becomes “part of the establishment, the participation of women is no longer appropriate.”[^88]

In 1988 Elkins published *Holy Women of Twelfth-Century England*, in which she addressed two related issues that have dominated the debate on female monasticism ever since: the increase and decrease of newly founded religious communities for women and the declining willingness of men to accommodate women within male religious orders. The innovation in female monasticism as seen in the early twelfth century, she argues, was followed by regulation, and “in the last third of the twelfth century, a distrust of monasteries for both sexes prevented their further multiplication.”[^89]

In contrast to Gold’s understanding of the exclusion of women in twelfth-century monasticism as a return to the established ideology of hostility to


[^88]: Idem.

women, Elkins attributes the decline of female monasticism to a “shift in values,” in which female religious lost their status, but does not really explain the reason for this shift.90

_Holy Women in Twelfth-century England_ influenced a number of scholars (Penelope Johnson, Sally Thompson, Bruce Venarde) in their search for a history of the foundations of religious houses for women and the co-operation between men and women in this enterprise. Penelope Johnson argued in her study of religious women in medieval France, _Equal in Monastic Profession_ (1991), for a very positive contemporary view of religious women in the eleventh and twelfth century. However, starting in the twelfth century, men tried to “divest” themselves from the care of nuns in a slow, evolutionary manner.91 The reason was a decline in the status of nuns, which in itself was the result of a complex process in which social, economic, and mental changes, most importantly the relative increase of the status of monks and mendicants.92

Bruce Venarde published a study of women’s monasticism in England and France in 1997, _Women’s Monasticism and Medieval Society. Nunneries in France and England, 890-1215_, in which he showed that the foundational pattern of female religious houses in France was very similar to that of England; based on an extensive database of over 1850 foundations of female monastic houses, however, he argued

90. Ibid., p. 164.


92. Ibid., pp. 248-66.
for a periodization slightly different from Elkins’ English periodization, namely a
period of expansion from 1080 to c.1170 followed by a period of decline [fig. 4]. He
attributed this decline to economic troubles, authoritarian tendencies of kings and
popes that curtailed experimentation and initiative, and male discomfort with
female religious on account of their sexuality.

![Number of Nunneries Founded or Refounded in England and France, 1001-1350](image)

Figure 4: Number of nunneries founded or refounded in England and France, 1001-1350, based on Venarde, Women’s Monasticism, p. 10, table 1.

Scholarship describes the position of women in monasticism in the thirteenth
century as further deteriorating. The problem was quality rather than quantity:
While there was a period of renewed interest in the foundation of religious houses
from 1215-1260, in particular of Cistercian houses (albeit never to the extent of about 1150), these foundations lacked the dynamic enthusiasm of male supporters.

Penelope Johnson, who in her *Equal in the Monastic Profession* had judged the position of religious women so favorably vis-à-vis their male colleagues in the eleventh and early twelfth century, argues that the movement that had started in the twelfth century by male orders to divest themselves from the care of nuns, became general in the thirteenth century and that “the negative view of women more closely approximated their diminished status in regular life. Changes in demography, family, social and economic patterns, the church, and group consciousness all intertwined to squeeze the vitality out of all women’s experience and particularly out of women’s experience.” Variety disappeared. Johnson uses the Poor Clares and the female Dominicans as examples; for her, they became “simply two more types” of cloistered monastic women, so that “the church’s expectation that religious women would be cloistered smothered the initial excitement women had felt for the apostolic life of Dominic and Francis.” She blames the church for “growing resistance and antipathy.”

95. Ibid., p. 252.
Johnson and Venarde accept Jo Ann McNamara’s influential view of negative male attitudes towards female religious in the thirteenth century. \(^\text{96}\) McNamara finds a common theme in the history of the relationship of religious orders with their sisters, namely that the papacy forced the men to take up the *cura monialium* despite their resistance. \(^\text{97}\) In the end, the character of the *cura* was the same, no matter what the ideology of the order, because “insofar as [nuns] might shape a special sense of their Fontevrist or Dominican identity, they had to do so within the conditions of claustration and the contemplative life.” \(^\text{98}\) All this led up to Boniface VIII’s bull of 1298, *Periculoso*, which attempted to end the experimentation with female religious life by subjecting all religious women to cloistering. \(^\text{99}\)

“How can we make sense out of this growing resistance and antipathy? What was going on? Would that there were one answer! What I find is a complicated, multifaceted process,” wrote Penelope Johnson. \(^\text{100}\) In fact, the process was even more complicated and multifaceted than Johnson realized. As we will see, the Hospitallers did not resist care for their sisters and indeed created a variety of

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\(^{96}\) Ibid., p. 252; Venarde, *Women’s Monasticism*, p. 170.

\(^{97}\) This echoes Grundmann’s and Southern’s remarks on pressures on men to provide *cura monialium* in the twelfth century. See above, n. 51.


\(^{100}\) Johnson, *Equal*, p. 252.
opportunities for women to share in their religious life. Their attitude complicates the picture of male attitudes towards female religious.

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Giles Constable made the interesting observation that the “reformed orders of monks and the strictly enclosed orders tended to be less receptive to women.”\textsuperscript{101} This is not surprising, as the objective of enclosure was the preservation of purity, exactly that which women could disturb, and consequently these men were more careful in their contact with women. It is true that the first Cluniac house was mainly for \textit{conversae}, the Grandmontines never accepted women, and the Carthusians only had one house for women in the twelfth century.\textsuperscript{102} In contrast, the order of Fontevrault, the Premonstratensians, and the Gilbertines were receptive to the needs of women in their early history. As we have seen, each of these started as eremitical movements under a charismatic leader, who had followers among lay men and women. Later the followers were organized into a monastery from which sister houses were founded and an order developed. While the numbers of women were still small, the men in these new and enthusiastic religious movements were in general willing to accommodate women, whom they admired for their religious fervor. However, each religious order seems to have changed its attitude over the

\textsuperscript{101} Constable, \textit{Reformation}, p. 71.

\textsuperscript{102} Ibid.
course of the twelfth century: while its male members were happy to have women associated with them in the beginning of the century, by the 1170’s they all preferred to distance themselves from their spiritual sisters.

It will be shown that for the Hospital of Saint John, whose origin and nature will be discussed in the next chapters, the shift in values meant segregated foundations for women just as happened in other orders. However, we will see that the Hospitallers show some deviation from the norm: when the number of female members increased and the general attitude towards religious women among men changed, the Hospitallers followed the fashion and appreciated separate foundations for women, but they never fully committed to segregation and continued to accommodate their sisters in various ways.
CHAPTER III

BECOMING THE ORDER OF SAINT JOHN OF JERUSALEM

The Hospital of Saint John of Jerusalem evolved from a hospital into a complex international religious order over the course of the twelfth century. Neither the Hospitallers' sophisticated organization nor its militarization by the end of the twelfth century had been foreseen at the Hospital’s inception. Instead, the development took place in several stages that were the result of solutions to acute problems or desires that lacked a preconceived design. Thus, as we trace the development of the Hospital, we must remember that the Order of Saint John, as it became known, was not founded as a religious order but as a hospital.

“Ordo”

The Order of Saint John is often said to have been founded by papal decree in 1113. However, the order was not called “ordo” but “hospitalis” in the twelfth century, and it is therefore more accurate to refer to it as the “Hospital of Saint John.” The word “ordo” did not refer to a religious order in the sense of an

administrative organization of religious communities under common leadership in the beginning of the twelfth century. In 1113 religious orders as such did not yet exist. Instead, “ordo” was a category, a unified part of a whole, and it was often used to delimit a social category, a group of people unified by their way of living. The best known example is the division made by Philip of Harvengt of the three categories, or orders, of societies: those who prayed, those who fought, and those who worked.\textsuperscript{104} However, as Giles Constable has shown, the tripartite division of society was only one of many. Twelfth-century authors who categorized society according to social function described several orders that could be exclusive but also overlapping: orders of women and of men, of regular clergy, of secular clergy, etc. - each social category with its own way of living.\textsuperscript{105}

One of these orders was the \textit{ordo monasticus}, which was made up of monks who lived their lives according to the Rule of Saint Benedict. By the first half of the twelfth century, a traditional Benedictine monasticism was no longer the only option for a religious life, and authors made distinctions among monastic orders, that is, among ways of monastic life. We can read this in the \textit{Libellus de Diversis Ordinibus er Professionibus Qui Sunt in Aecclesia}, which has been dated to about the middle of the twelfth century and describes the ways of life in different monasteries, not different


monastic institutions. An “ordo” in the first half of the twelfth century was therefore a uniform way of life, often, but not necessarily, prescribed by a rule, and not the institution that supported that way of life.

Over the course of the twelfth century groups of monks and nuns developed administrative and hierarchical structures in order to support their way of life, now commonly defined by rules. They created institutions, and ordo subsequently became a reference to the institution itself. The rule would become the defining element of a religious order in the thirteenth century, when adherence to a recognized rule became the criterion for belonging to an order.107

Constance Berman has studied the changing concept of “ordo” closely by tracing its usage in Cistercian documents in southern France, Burgundy, Britain, and elsewhere, and notes that references to an ordo cisterciensis (or ordo praemonstratensis or ordo cartusiensis) only begin to appear from circa 1150.108 She concludes that “in the earliest years, Cistercian ordo had more to do with how people lived within communities and with regulating social conditions within monasteries than with conformity to the administrative decrees of a larger group.”109 By the end of the


109. Ibid. p. 79.
twelfth century the Cistercian order had become a religious order in the modern sense of an organized institution.

The first reference to the Hospital of Saint John as “ordo” does not occur in Delaville le Roulx’s Cartulaire Général until 1154.110 By this time the Hospital of Saint John had acquired the characteristics of a religious military order: it had adopted a rule, it had developed an administrative hierarchy for its dependent houses in the East and the West, it had become independent from the Holy Sepulcher, it had male and female professed religious, and it had taken on some military duties. However, the term ordo was rarely used to describe it, because the Hospitallers and their donors preferred the term “domus” (house), or more correctly the “house of the Hospital of [Saint John of] Jerusalem,” when referring to their institution.

**Early Development**

It is common for historians of the military orders to begin their story with the Templars, who were the first military religious, and then continue their narrative with the Hospitallers, who took up arms in imitation of the Templars.111 While this

110. “Prior ordinis” in Cartulaire Général de l’Ordre des Hospitaliers de S. Jean de Jérusalem, 1100-1310, ed. J. Delaville Le Roux (4 vols. Paris, 1894-1906), no. 242. Although the Hospital is implied, “hospitalis” or the like was not added to indicate which order.

chronology is not incorrect, this history does little for the understanding of the early development of the Hospital. Historians have also placed the foundation of the Order or Hospital of Saint John, in the context of the crusades. The success of the first crusade, so the story goes, increased the number of pilgrims who went to Jerusalem. The increased traffic brought more business to the main hospital in Jerusalem, associated with the Holy Sepulcher, which started receiving gifts in the form of real estate in the East and the West in support of its charitable activities. The new property needed management and accordingly the Hospitallers developed an administration. Then, gaining self-confidence, they secured independence from the canons of the Holy Sepulcher by appealing to the papacy. This independence was first recognized in the papal bull, *Pie postulatio* (1113), the bull that historians generally consider “the foundation charter for the new order.”

Although the crusader context of the emergence of the Hospital of Saint John is true enough, I prefer to follow James Brodman’s suggestion that the coming into being of the Hospital of Saint John should be understood in the context of twelfth-

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Since the eleventh century the church had tried to improve its clergy by holding it up to monastic standards. The requirement of celibacy for secular priests is an obvious example of this effect; while previously only monks or nuns were required to remain celibate, now priests too were asked to live without wives. As a result of the efforts by reforming clerics, monastic ideals spilled over into secular society, and this is what Giles Constable called “the monasticization” of society.\(^{114}\)

The monasticization of society was particularly evident in the changes made to previously semi-religious institutions such as chapters of canons and hospitals. During the eleventh century, canons, who served the bishops and their cathedrals, were hardly distinguishable from secular society. From the beginning of the twelfth century, however, more and more cathedral canons behaved like monks: they started wearing distinguishable clothing, took vows, and lived according to a rule.\(^{115}\) Hospital communities similarly “monasticized.” During the twelfth century small independent hospitals were erected along roads and in towns, in which brothers and sisters worked to assist the needy and often lived in common under a rule in a semi-monastic setting.


\(^{114}\) Constable, *Reformation*, p. 7.

\(^{115}\) Ibid., pp. 54-5.
However, the rule of Saint Benedict, by which the traditional monks or nuns lived, was not very well suited for canons or hospitallers, because while the monks or nuns focused primarily on service to God through contemplation, canons and hospitallers focused on service to the outside world through action.\textsuperscript{116} The canons and hospitallers therefore looked for an alternative rule that gave them the opportunity to live up to monastic values, such as living in community and being personally poor, and yet also allowed them to serve outsiders with pastoral care, poor relief, or hospitality. They found this quality in the Rule of Saint Augustine, which was more suitable for an active religious life.\textsuperscript{117} The result was a new canonical tradition that grew out of, but became distinct from, the monastic tradition.\textsuperscript{118}

The Hospital of Saint John was one of the new religious orders that sprang from the root of Gregorian reform. It originated in the wake of the first crusade and the Christian conquest of Jerusalem in 1099 as a refounded Benedictine hospital located across from the Holy Sepulcher. In c.1100, this hospital consisted of a brotherhood under the leadership of a certain Gerard. Gerard is known in the history of the Hospital as its first master, but at the time he was called its


"procurator" (caretaker).\textsuperscript{119} The Hospital seems to have been partly dependent upon the Holy Sepulcher, does not seem to have had a written rule, did not yet have extensive lands and outside support, and hence did not have an extensive administrative hierarchy. It acquired the church of Saint John the Baptist for its services, however, and became known as the hospital of Saint John of Jerusalem.\textsuperscript{120}

Like the original hospital before the Latin conquest, the new hospital relied on the secular world for support. While originally the hospital had been supported by a Benedictine monastery dedicated to Saint Mary of the Latins, the new hospital drew its support from the newly established nobility in the East and from the homelands of pilgrims and crusaders, in particular Languedoc and Provence. The support came in several forms:

- 1. Real estate. When the Hospitallers received real estate, they made an effort to record the proof of their legal ownership and consequently donations of real estate make up the majority of the extant donation charters. Real estate included, but was not limited to, churches, manors, mills, and land;

\textsuperscript{119} Cartulaire général des Hospitaliers, nos. 30, 31, 50.

- 2. Privileges, such as rights to wood, income from tolls, or exemption of tithes. These legal documents were also carefully preserved;

- 3. Cash or kind. There is very little evidence of one-time donations in cash or kind unless they were accompanied by donations of real estate or privileges. Yearly payments, however, were recorded, as were certain donations of serfs or slaves (in Spain). Nevertheless, small donations, such as a chicken or a bracelet, may have been much more common than their scanty records suggest;

- 4. Donations of service. Some men or women chose to give not only their property, but also themselves, and entered the fraternity of the Hospital as lay brothers or sisters or as fully professed brothers or sisters. All associates, whether they were secular brothers or priests, male or female, married or celibate, were part of the spiritual family, the (con)fraternity, of the Hospital.

An illustrative example of an early donation is the one made by Berenger Bernard of Sant Domi and his wife Ermesenda on the 26th of January 1111, who gave the church of Santa Maria of Llorac in Catalonia to “the holy hospitals of Jerusalem and Cervera,” with the permission of the bishop of Vic, and asked that the confrares should serve the church and its parishioners. They also gave the Hospital several plots of land. Finally, Berenger Bernard and Ermesenda pledged their bodies and
souls during life and death to the same brotherhood “for the health of their souls and those of their forefathers.” In return for the donation, the brothers promised the couple spiritual benefits and accepted them into the brotherhood.121

Berengar Bernard and Ermesenda’s pious reason for their donation was typical and remained typical for the centuries to come. Notwithstanding any other personal motivations donors might have, all expected spiritual benefits from giving property to the hospital, just like those they would have received if they had given their property to a monastery or a church. The objective of their charity was the same as the objective of the hospital itself, namely salvation through the care of the poor. Genuine poor relief or social justice were not aims in themselves; the poor were important primarily as incorporations of Christ. To show love of the poor was to show love of Christ and was considered beneficial for the donor’s soul.122 The donors expected further spiritual benefits through Hospitaller prayers and a share in the Hospital’s merit.

The couple’s donation of ecclesiastical property was also typical for the early twelfth century, especially in the West. By this time, and under the influence of the reform movement, it had become quite unfashionable -- and according to the reform-minded, religiously incorrect -- for laypersons to own churches, especially in

121. Cartulaire général des Hospitaliers, no. 22.

France. By giving personal churches to religious institutions, laypersons were receiving spiritual benefit while simultaneously getting rid of inappropriate property. The Hospital benefited: of the fourteen donations in the *Cartulaire Général* that can be dated with certainty to the period before 1113, the majority (eight) concerned the donation of one or more churches (nine in total), one a plot of land for the building of a church, and one the return of a church to its rightful owner.\textsuperscript{123} Examples include the donation by Guillaume Pons of Champagnolles, his wife Ermeiruz, and Adelaisce of Pignan, who gave not one but two churches to the “master of the house of the Hospital in Béziers,”\textsuperscript{124} and that of Aimery of Muret, who gave his church and “all its belongings that belonged to it or should belong to it” to the Jerusalem Hospital.\textsuperscript{125} Prelates, too, supported the Hospital, like the bishop of Gap who gave the church of Saint Martin in 1105 or 1106, or Odo, the abbot of Lézat, who donated the church of Saint Pierre of Bélac, its belongings, and its village “to God, the Holy Sepulcher, the Hospital of Jerusalem, Gerard, and his brothers.”\textsuperscript{126}

\textsuperscript{123} Other donations included an estate, four manors, two plots of land for general purpose, and a vineyard. *Cartulaire général des Hospitaliers*, nos. 4:18, 12, 13, 14, 17, 18, 21, 22, 23, 26.

\textsuperscript{124} To provide for the “Hospitalariis habitantibus in domibus Hospitalis de Campanolis et in totis terminis de Campanolis.” It seems that they did not live together in community. Ibid., no. 17.

\textsuperscript{125} Ibid., no. 26.

\textsuperscript{126} Luttrell, “Earliest Hospitallers,” p. 46, n. 64; *Cartulaire général des Hospitaliers*, nos. 4:18, 11. The intention was to create a “salvitas,” an area where a person had the same protection from law as if he or she were in a church or monastery.
The donations in the Levant were of a different nature, reflecting a different economic reality. Because it had only recently fallen into Latin Christian lands, lay possession of churches was much rarer in the Latin East. The new Christian elite, however, was numerically relatively small and owned villages or large tracts of lands that needed management and subjugation, so while in southern France and northern Spain the Hospitallers were often presented with churches, in the East the donations consisted of secular property, including manors, villages, and serfs. According to a confirmation made on 28 September 1110 by King Baldwin I of Jerusalem, the property of the “Hospital of Jerusalem and the poor of Christ” consisted of ten villages, at least sixteen serfs, at least ten tracts of land and/or houses, three ovens, a garden, and a mill, all scattered across the kingdom.\footnote{127} Furthermore, the Hospitallers owned three serfs in Nazareth and had a hospice in Antioch, in front of which the bishop allowed them to build a stable for their mounts between 1100 and 1134.\footnote{128} Still, this all was a modest estate compared to, for example, the monastery of Mount Thabor, which in 1107 owned more than thirty villages.\footnote{129}

The material support by outsiders seems to have boosted the confidence of the fraternity of the Hospital and could therefore be considered as the first step

\footnote{127. See for distribution of Frankish settlement R. Ellenblum, \textit{Frankish Rural Settlement in the Latin Kingdom of Jerusalem} (Cambridge, 1998), \textit{passim}.}
\footnote{128. \textit{Cartulaire général des Hospitaliers}, no. 5.}
towards and independent Hospital of Saint John. In the beginning of its history, the hospital was subjected to the patriarch of Jerusalem. However, in the second decade of the twelfth century the Hospitaller master Gerard began to appeal directly to the pope in an effort to become more independent. The pope, Pascal II, responded favorably to the petition of Gerard with a bull known as the *Pie postulatio*, in which he expressed a willingness to support the Hospital in its care for pilgrims and the poor by exempting Gerard and his brothers from the payment of certain tithes. He also offered protection to Hospitaller possessions that had or would come to them by either donation or acquisition.  

The pope called Gerard “institutor ac prepositus Hierosolimitani Xenodochii,” founder and prior of the Hospital of Jerusalem.

The pope’s bull stressed that the people to whom the Hospitallers provided a service as well as their possessions were from “Asia as well as Europe.” The pope apparently envisioned a supranational system of hospitals for the support of the pilgrims and the poor directly under the Holy See, a vision in line with the aspirations of the reformed papacy. He mentioned seven specific hospitals subjected to the Jerusalem Hospital, whose names have baffled historians because only one (Saint-Gilles) can be verified as existing at this early date, while others

130. *Papsturkunden*, no. 1; *Cartulaire général des Hospitaliers*, no. 30.

131. Ibid.

known to be subjected, such as the one at Cervera, were left out.\textsuperscript{133} It is possible that hospitals in these towns (Bari, Otranto, Taranto, Messina, Pisa, Asti, and Saint-Gilles) had associated themselves loosely with the hospital of Jerusalem at that time, but remained independent and never evolved into the order Pope Pascal had wished. Although the evidence for a conclusive explanation is lacking, it is clear that the pope envisioned an organization of hospitals perhaps like the organization of the Benedictine monastic houses, but on a larger geographic scale.

The Hospitallers gained full independence from episcopal control, however, only in 1154, when Pope Anastasius IV renewed and expanded the bull Christiane Fidei Religio. The original bull had allowed them, among other things, to build churches on wastelands and continue church services and the burial of Hospitallers even under an interdict; and permitted the Hospitallers to have their own priests who did not have to obey the local bishop. Furthermore, lay servants could serve the Hospital, and brothers could not leave the Hospital without consent from the master and their brethren. The amended bull established the Hospital of Saint John as an exempt order directly under the Holy See, like the Templars and the Cistercians, and later the friars.\textsuperscript{134}

\textsuperscript{133} Riley-Smith, “Origins,” p. 10, n. 6 gives an overview of the historiographical debate. I disagree that the first Hospitaller convents must have been at Saint-Gilles and Messina because there is no convincing evidence for a Hospitaller convent at Messina at this early date.

\textsuperscript{134} Papsturkunden, pp. 130-5; Cartulaire général des Hospitaliers, nos. 130, 226; Riley-Smith, Knights, pp. 376-8.
The result of papal protection was that by the middle of the twelfth century the Hospitallers were members of an organization of increased wealth and prestige. The Hospitallers could invest in property the money they were no longer spending on tithes. At Trinquetaille in Provence, for example, the Hospitallers strategically bought land around the church of Saint Thomas, which they served for the canons until the archbishop of Arles donated the church to them. Furthermore, papal protection and its associated status caused the Hospitallers to gain an increased visibility with the more powerful and affluent benefactors in the West. The pope encouraged donations with letters of solicitation and the response was favorable: between 1113 and 1120 Queen Urraca of Castile and León; Theresa, widow of Henry of Bourgogne, Count of Portugal, and daughter of King Alfonso IV of Castile and León; Count Armengol VI of Urgel; Count Adalbert of Périgord; Count Raymond Berenger III of Barcelona and his wife Douce; and Emma, daughter of Count Roger of Sicily and Lady of Montescaglioso, all supported the Hospital, increasing its


136. Pope Pascal II sent a letter addressed to the faithful of Spain on same day of his bull recognizing the Hospitallers. Later (1120x1124) Pope Calixtus II wrote a general letter of appeal. Cartulaire général des Hospitaliers, nos. 31, 47. It seems logic that Cartulaire Général des Hospitaliers, no. 8, which is a letter by Richard, bishop of Albano and papal legate to Spain, pressing for support of the order in that region, was dated after Pope Pascal’s letter, namely [1113x1114].
income and expanding its geographic reach.\textsuperscript{137} This in turn made it easier to attract recruits, and resulted in the expansion of (what became) the international Hospitaller order during the twelfth century.

**Organization**

The amassing of donations by the Hospitallers necessitated a more complex organization. Donors gave estates with the purpose of supporting the poor in Jerusalem and hence dependent Hospitaller houses were established in the East and the West in order to manage these estates. The dependent houses were called commanderies or preceptories (or simply “houses”), and were usually headed by a commander or preceptor, although there were some exceptional cases where a woman was in charge as a commendatrix or preceptrix. Commanderies were typically small and consisted of no more than six members, more often than not brothers, and an array of servants. Their main purpose was to manage their estates and send a portion of their income to the Hospitaller headquarters, which were first in Jerusalem, but subsequently in Acre, Limassol, Rhodes, and Valetta. This contribution was called a “responsion,” and was usually set at one-third of a commandery’s profit.\textsuperscript{138}

\textsuperscript{137} Libro de privilegios de la orden de San Juan de Jerusalén en Castilla y Léon (siglos XII-XV). Ms H211 del Museum and Library of the Order of St. John, de Londres, ed. Carlos de Ayala Martínez (Madrid, 1995), nos. 1, 2, 3, 5, 6, 7, 11; Cartulaire général des Hospitaliers, nos. 37, 38, 34, 36, 40, 33, 49.

\textsuperscript{138} Riley-Smith, Knights, pp. 344-7.
In order to deal with the administrative problem of communication between the headquarters in Jerusalem and the many commanderies in the West, the Hospitallers soon developed an innovative second hierarchical tier: the priory.\textsuperscript{139} The Hospitallers had a priory in Saint-Gilles, a port in Provence, where a provincial chapter meeting of commanders was held as early as 1123.\textsuperscript{140} Commanderies as far away as England and Spain were dependent on the prior of Saint-Gilles, who in turn answered to the master in Jerusalem. As more and more commanderies were established and the workload became too heavy or the communication lines too long, new priories were founded. In the Iberian Peninsula, the first priory was that of Castile and Léon (1140’s), followed by the priory of Portugal (1157) and possibly the castellany of Ampostá (Ampuries, northeastern Spain), as the priory there was known.\textsuperscript{141} A priory consisting of Apulia and Messina existed in the south of Italy in 1169,\textsuperscript{142} but the priory of England was probably not established until 1185.\textsuperscript{143}

The scheme of commandery – priory – headquarters was in reality more complex than here portrayed. Sometimes commanderies were combined under one commander, perhaps due to a lack of manpower. Sometimes houses were no more


\textsuperscript{140}. \textit{Cartulaire général des Hospitaliers}, no. 69.

\textsuperscript{141}. \textit{Libro de Privilegios}, no. 65 (1155); \textit{Cartulaire général des Hospitaliers}, nos. 251, 255, 257.


than cells where one or two brothers were in charge of the estates. And the presence of a prior did not always imply the existence of a priory. Over the centuries of its existence, the hierarchy of the Hospital was in continuous development; boundaries of power changed and new officers were put into place as the practical reality required.

The foundation of houses for women in the last quarter of the twelfth century further complicated the hierarchical scheme. Houses for women were known as priories and their head was a prioress. In rank, the prioress came somewhere between a prior and a commander, as she could in some instances only operate with the consent of the regional prior. Yet prioresses often had more independence than commanders in the internal affairs of their houses. Furthermore, these female houses too could have dependent houses or cells.144

**Rule**

The Hospitallers’ character as an ordo became more explicit after Gerard died and the leadership was assumed by Raymond of Le Puy (1120-1158), who acted as the overseer of what had become a supranational brotherhood rather than as the administrator of a hospital.145 At an uncertain date between 1137 and 1153 Raymond promulgated a rule that confirmed the present state of being of the Hospital yet changed its future nature. While the rule probably confirmed many existing

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144. For example, Boxerols was dependent upon Sigena. *Cartulaire général des Hospitalliers*, no. 1857 and below, p. 197.

145. *Cartulaire général des Hospitalliers*, no. 46.
practices of the brotherhood, its promulgation was an important step in the institutional development of the Hospital of Saint John because the rule gave the Hospitallers a constitutional basis for the abstract framework – obedience was now to a rule that enforced obedience to the master, rather than to a particular master himself, which meant that personal loyalty was replaced by loyalty to an institution. The rule also put to parchment who was a Hospitaller and who was not; namely, Hospitallers were those men (and women) who were uniform in their way of life by upholding the written rule.\textsuperscript{146} Perhaps even more than the papal bull of 1113 that recognized the Hospitallers as an independent entity, the promulgation of the Hospitaller rule was a defining moment in the development from the hospital to the Hospital of Saint John: The fact that a rule was promulgated that expressed the ideal of uniformity, that an institutional framework to accept it was in place, and that the brothers made vows of chastity, poverty, and obedience indicated that the brotherhood of the Hospital of Jerusalem had become a religious order.

The reader of the rule is at once struck by its adherence to monastic values: the Hospitallers took vows of chastity, personal poverty, and obedience to the master. They were to be content with bread, water, and humble clothing, stay away from women, live in community, and follow the monastic hours. Discipline was enforced by a variety of punishments. The rule therefore was in line with the aims of

\textsuperscript{146} As discussed above (pp. 43-4), in the thirteenth century rules like this become the defining characteristic of a religious order.
twelfth-century religious reform of imposing monastic ideals and seeking uniformity, and it affirmed the religious nature of the Hospital of Saint John.

Some important details of the rule show that the Hospitallers drew from the canonical rather than the monastic tradition. To allow for service, the Hospitaller rule limited the liturgical obligations and permitted, even encouraged, the Hospitaller brothers to travel into the world and seek alms and the absence of a vow of stability set them apart from monks. In contrast to the Templars, who grafted a military vocation onto the Cistercian rule and saw themselves—as monks did—as the poor who served Christ, the Hospitallers saw themselves as serving Christ by serving the poor; the Templars were the poor knights of Christ, the Hospitallers were the servants of “Our Lord’s poor.”

Militarization

Even though none of the original Hospitaller rule’s regulations referred to military activity, Hospitaller involvement in warfare became the defining aspect of the Hospital and have caused historians to classify this order as a military order. As a result, it has been argued that its women’s houses participated to only a very limited extent to its work and activities. The Hospital of Saint John, however, did


148. “Women’s houses participated to only a very limited extent in the work and activities of the military orders, but there was little challenge to their survival.” Alan Forey, “Women
not start out as a military order and had female members before it seriously committed itself to warfare.

It is not clear when exactly the Hospital of Saint John became involved in warfare. It added “the defence of the catholic faith” to its stated mission after the fall of Jerusalem in 1187, but scholars agree that the Hospitallers participated in military activity before that time.\footnote{Riley-Smith, \textit{Knights}, pp. 60-84; Alan Forey, "The Militarisation of the Hospital of St. John," \textit{Studia Monastica} 26 (1984), pp. 75-89; and Luis García-Guijarro Ramos, “La militarización de la orden del Hospital: Líneas para un debate,” in \textit{Ordens Militares: Guerra, religião, poder e cultura} (Lisbon, 1992), pp. 293-302.} Some of the Hospitaller property, especially on the frontier with Islam in Spain and in the East, consisted of castles, and the Hospitallers became involved with warfare. In 1178, for example, the inhabitants of Grisén, Aragon, put themselves in the hands of the Hospitallers in 1178 and gave them control over the castle of Grisén, expecting the Hospitallers to provide for their defence and safety.\footnote{La Encomienda de Zaragoza de la Orden de San Juan de Jerusalén en los Siglos XII y XIII, ed. M. L. Ledesma Rubio (Saragossa, 1967), no. 34.}

The first explicit reference to a class of military brothers came in an 1181 statute, which ruled that the Hospital was to maintain “brothers-at-arms,” whose maintenance was considered charitable.\footnote{“Hec eleminosa in sacra domo hospitalis fuit proprie statuta, exceptis fratribus armorum, quos sacra domus honoranter tenebat, pluresque alias elemosinas ipsa domus...”} The amendment to the rule shows the
increased concern with the military function of the order that had developed in the last quarter of the twelfth century. By this time the brothers-at-arms had a visible presence within the Hospital and required military equipment and horses. They were knights who possessed a special status, and Hospitaller statutes specified that no brother who was not a knight when becoming a Hospitaller could be made a knight without special permission, unless he had entered the Hospital before knighthood and could have been a knight in secular life.¹⁵²

When exactly or why the Hospitallers militarized, however, has not been determined. The first indication of militarization can be perceived at the accession of the second master, Raymond of Le Puy. Raymond began his office by thanking the generous donors in an open letter of recruitment, in which he compared those who gave to the Hospital to crusaders and expressed his conviction that they would receive the same benefits hereafter.¹⁵³ The prospect of reaping the rewards of crusading must have been very attractive to people in the 1120’s, in whose mind the first crusade’s successes were still fresh and who could not foresee another crusade. Here, the first link is made between crusading and the Hospital, and opened the door for later militarization.

Furthermore, the Hospitaller order slowly took on military duties during Raymond of Le Puy’s term, even though the evidence is scanty. In 1136 the newly


¹⁵³ *Cartulaire général des Hospitaliers*, no. 46.
constructed castle of Beit-Jibrin was apparently the first to be put under Hospitaller control. Although the Hospitallers could have hired others to fight, it seems that by this time some Hospitallers had taken up arms. A charter of the same year states that giving arms to the military confraternity of Belchite was the spiritual equivalent of giving arms to the Templars or Hospitallers. During the 1140’s there are more indications of Hospitaller militarization, even though again the references are not explicit. In 1144 Raymond of Tripoli gave the order control over Crac, a castle on a strategic site, as well as other castles. He also shared booty with them and agreed that he would not make peace with the Muslims without their consent. In 1148, during the second crusade, Hospitallers were present when the decision was made to attack Damascus. In the same year Ramon-Berenger IV, Count of Barcelona, gave the Hospitallers the stronghold of Amposta, and they were present at the siege


156. Cartulaire général des Hospitaliers, no. 144; Riley-Smith, Knights, pp. 55-6.

of Muslim Tortosa.\textsuperscript{158} Similarly, they took part in the siege of Ascalon in the Latin Kingdom five years later, but their role remains unclear.\textsuperscript{159}

There is no doubt, however, that the Hospitallers had become a military order by the time of Gilbert of Assailly’s mastership (1163-1168). During this time the order purchased castles for the first time and had military officials. Gilbert’s interest in warfare was particularly clear when he pressed for an invasion of Egypt and promised 500 knights. The invasion was disastrous, the order fell heavily in debt, and Gilbert resigned in 1168.\textsuperscript{160} After Gilbert, members of the order expressed concern over its military activities, but wondered how much rather than whether to participate; by that time the Hospitallers could certainly be considered a military order.

\textbf{Membership}

The institutional transformation of the Hospital of Saint John of Jerusalem over the course of the twelfth century was reflected in its membership, which grew increasingly hierarchical and complex, so that by the thirteenth century the hospital congregation in Jerusalem had become an extensive religious order with a membership consisting of members male and female, priests and secular, knightly

\begin{footnotesize}
\begin{enumerate}
\item \textsuperscript{158} Marquis d’Albon, \textit{Cartulaire Général de l’Ordre du Temple, 1119-1150} (Paris, 1913), no. 553; Forey, “Militarisation,” p. 77.
\item \textsuperscript{159} William of Tyre, \textit{Cronicon}, line 17.28.
\item \textsuperscript{160} Riley-Smith, \textit{Knights}, pp. 60-2, 71-3.
\end{enumerate}
\end{footnotesize}
and common, professed and lay, all of whom had a place in the order’s hierarchical scheme. It is not clear whether the earliest Hospitallers were professed brothers or not, but Pope Pascal II’s bull Pie postulatio of 1113 suggests that they were. The pope calls the brothers “professi,” a term usually used for professed monks.\textsuperscript{161}

Contemporary charters were much less clear on the status of brothers or sisters: the terms “brother” (\textit{frater}) and “lay-brother” (\textit{confrater}) were used interchangeably and more than once donations were made to Gerard and his \textit{confreres}.\textsuperscript{162}

\begin{figure}[h]
\centering
\includegraphics[width=\textwidth]{divisionsofhospitallers.png}
\caption{Divisions of Hospitallers in the twelfth and thirteenth centuries.}
\end{figure}

\textsuperscript{161} Cartulaire général des Hospitaliers, no. 30.

\textsuperscript{162} Ibid., nos. 21, 22, 26, 62.
In the beginning of the twelfth century, therefore, new recruits joined the Hospital in Jerusalem or elsewhere as *confraters or fraters.* 163 These recruits were mostly male, but could be female. We have already seen how Berengard Bernard and Ermesenda joined the Hospitallers as a couple in 1111. They made their donation to the *confreres* of the Hospital and were received into their *fraternitas,* even though they were married and expected to have more children. 164 Clearly, they could not have been professed religious, and must have joined as lay associates.

Professed members of the Order of Saint John, on the other hand, were men and women who took religious vows of poverty, chastity, and obedience, and they lived by the Hospitaller rule once it was established. In the beginning, the only distinction between professed Hospitallers was one of clerical status: They were divided between brother chaplains, who were priests, and brothers who were not ordained. 165 The existence of brother priests was sanctioned in 1154 and the difference in role defined: brother priests were to provide religious service while professed lay brothers were to take care of the poor. 166 From 1206, however, further distinction was officially made among secular brothers, between brother knights and brother sergeants. The brother knights were members of the knightly class, while the sergeants could be of any class. This new distinction reflected trends in secular

163. Ibid., no. 21.

164. Above, p. 11; *Cartulaire général des Hospitaliers,* no. 22.

165. *Cartulaire général des Hospitaliers,* no. 70.

166. Ibid., no. 226.
society, in which a knightly class was becoming more and more a class of its own [fig. 5].

As the Hospitallers became increasingly involved in warfare, the brother knights increasingly important. By the thirteenth century their importance had surpassed the brother chaplains, a precedence they had not enjoyed in the twelfth century. The sergeants, too were influenced by the increasing importance of warfare, especially in the Latin East. They were known as either brothers-at-arms, who fought in battle, or brothers-at-service, who participated in the administration and carried out menial tasks.

As we have seen, women had associated with the order from 1111, but the first “soror” appeared in the records only in 1146. Her name was Adelaide, and she professed as a soror during a chapter meeting of the Hospitallers of Saint-Gilles and Trinquetaille before she went to the Jerusalem. It seems therefore that at least by then a distinction was made between sisters who were fully professed and those who were not, exactly like the distinction between brothers. The absence of a separate ceremony for women suggests that professing sisters initially followed the profession ceremony of men when they committed to the order and vowed poverty,


168. Riley-Smith, Knights, pp. 239-40; Nicholson, Knights Hospitaller, p. 83.

169. See above, pp. 1-2.

170. Cartulaire de Trinquetaille, no. 110; Cartulaire général des Hospitaliers, no. 141; J. Raybaud, Histoire des grands prieures et du grand prieuré de Saint-Gilles (Nîmes, 1904), 1, p. 54; and above, p. 1.
chastity, and obedience to an assembled chapter and its presiding official.\textsuperscript{171} After c.1180, women in some regions had the possibility of joining female Hospitaller houses and of making their profession to an assembly of sisters and their presiding prioress. However, as is the case with brothers, it is often hard to distinguish between lay sisters and professed sisters in the records (both are often called “soror”), and both could have a presence in Hospitaller houses with brothers. Lay sisters were women who had a formal association with the Order of Saint John as “consoror” or as “donat,” but who did not make vows.\textsuperscript{172}

\begin{quotation}
In the beginning of its history, the Hospital of Saint John of Jerusalem was no more than a congregation of brothers (and perhaps sisters) serving the hospital in Jerusalem supported by benefactors in southern France, northern Spain, and the Levant. Enthusiastic support, however, caused a fast increase of geographically dispersed property and necessitated an increasingly complex organization.\textsuperscript{173} During the mastership of Raymond of Le Puy the quickly growing brotherhood sought to further organize and define itself, produced a rule, and in the process it became a religious order. Membership became better defined and in c. 1146 the first reference to a Hospitaller soror appears. From 1154 on the Hospitallers were no
\end{quotation}

\textsuperscript{171} For a detailed description see Riley-Smith, \textit{Knights}, pp. 232-3.

\textsuperscript{172} See Chapter V for a detailed study of the difference between these two types of lay association.

longer a local hospital under the episcopal see; they answered directly to the pope and received his support and that of other powerful leaders across Europe. In the meantime it increasingly assumed a military function, so that by the third quarter of the twelfth century the Hospital of Saint John was one of the better known military orders. By the end of that century the Hospitallers were the male and female members of a religious order devoted to hospitaller care and military endeavor, who were involved in economic activities in order to support their active religious lives and the beginning of the thirteenth century the Hospitallers life was more specialized, more structured, and less apostolic than a century before. As the brotherhood of the Hospital of Saint John had developed into a religious order, Hospitaller life had changed accordingly.
CHAPTER IV
A RELIGIOUS ORDER DEVOTED TO CHARITY

The Hospital of Saint John of Jerusalem was famous for its charitable works and in particular for its hospital in Jerusalem (before 1187). The innumerable donations in the West to the poor or the Hospital of Jerusalem illustrate the Hospitallers’ reputation for charity. Later patrons made references to the defence of the Holy Land or the fight against the infidel, but most donations were made for the service of the poor of Jerusalem, a city that spoke to the patrons’ imagination because of its religious connotation.\textsuperscript{174} Pope Alexander III himself noted that the Hospitallers were to devote themselves to the poor, in whose service they were established.\textsuperscript{175}

Visitors to the Holy Land equally showed an admiration for the charity of the hospital in Jerusalem. Already in c.1140, Nikulas of Pverda, an abbot visiting Jerusalem on a pilgrimage from Iceland, wrote, “The centre of the earth is there [just

\textsuperscript{174} Somerset Record Office, Taunton, England (Hereafter cited as SRO), Ms. DD/SAS SX133, fols. 11b, 35, 64b.

\textsuperscript{175} “...pro quibus subsidium necessarium esset armorum, quia congruum est et consonum rationi ut, sicut domus Hospitalis ad susceptionem et refectionem pauperum est instituta, ita quoque per tuam instantem sollicitudinem in hoc debeat conservari, presertim cum magis per caritatem et misericordiam erga pauperes exhibitam quam per fortitudinem armorum credatur posse defendi.” Cartulaire général de l’ordre des Hospitaliers de S. Jean de Jérusalem, 1100-1310, ed. J. Delaville Le Roulx (4 vols. Paris, 1894-1906), no. 527.
outside the Holy Sepulchre, where the sun shines directly down from the sky on the
feast of Saint John. On that spot is the hospital of John the Baptist, which is the most
significant in the whole world.”176 In c.1160 John of Würzburg, praising the same
hospital and the works of mercy it performed, exclaimed, “What more can I say!
This house feeds so many human beings, and gives so huge an amount to poor
people, either to those who come to the door or remain outside, that certainly the
total expenses can in no way be counted, even by the stewards and dispensers of
this house.”177 He mentioned both the Templars and the Hospitallers as performing
works of mercy, with the Hospitallers, however, outdoing the Templars tenfold.178 A
monk from Germany named Theodoric visited Jerusalem in 1169179 and likewise
described the hospital in admiration: “I would not trust anyone to believe it if I had
not seen with my own eyes how splendidly it is adorned with many rooms and
bunks, which the poor and the weak and the sick can use. What a rich place this is,
and how excellently it spends the money for the relief of the poor, and how diligent
in its care for beggars.”180

Notwithstanding the enormous influence the Hospitallers had on politics and
warfare in the Levant in the twelfth and particularly in the thirteenth century, they


177. Jerusalem Pilgrimage, pp. 266-7. For an edition in Latin see Peregrinationes Tres. Seawulf,

178. Jerusalem Pilgrimage, p. 266; Peregrinationes Tres, p. 135.

179. Peregrinationes Tres, p. 28.

remained true to their hospitaller vocation. In order to better understand the nature of this order and by extension the role of women in this order, this chapter first analyses one man’s spiritual understanding of caritas and his exposition of the Hospitallers’ dedication to it. It then moves from the ideology of charity to the practice of charity by describing the Hospitallers’ hospital work. Finally, it explains that the Hospitallers saw no contradiction in combining care to the sick and poor with warfare against the Muslims: both were acts of charity.

The Ideology of Charity

The richest description and fullest praise for the charitable works of the Jerusalem hospital comes from an anonymous author who stayed there some time during the 1180’s. His description, unique in its detail, is preserved in manuscript Clm. 4620 of the Bavarian State Library in Munich. The otherwise elegant Latin contains many errors, presumably the mistakes of a negligent scribe. The manuscript is a fourteenth-century copy containing the miracles of Saint Mary, a letter from Jerome, and several miscellaneous works pertaining to the order of Saint John, including the treatise on the hospital in Jerusalem. The last is an incomplete

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text consisting of three parts: first, a theological understanding of caritas\textsuperscript{182} and its relation to the hospital in Jerusalem; second, a description of the charitable works bestowed upon the sick in this hospital; and third, the beginning of a detailed account of its care for poor (but healthy) children and adults. Then the text breaks off prematurely and in mid-sentence.

The date of the description must be derived from internal evidence. The loss of Jerusalem to the Muslims is the terminus ante quem. The author mentions that the patients ate “pork, mutton, and the like on the first, third and fifth day... on account of the leniency of our rule.”\textsuperscript{183} The rule to which he is referring was probably the confirmation of costumes of the Hospitaller statutes of 1181, which states that it was customary for the sick to “have fresh meat, either pork or mutton, and those who are unable to eat it have chicken” three times a week.\textsuperscript{184} If so, the original text can be

\textsuperscript{182} Caritas can only be roughly translated by “charity” because the term originally meant an exalted love, a high esteem, and charity is merely the expression of that love although. It is confusing to translate caritas with “love,” because the English “love” includes caritas as well as amor. In general, amor is love of a lower kind, a love between lovers, brothers, mothers and daughters. Amor Dei, the love of God, and caritas were interchangeable, however. Oxford Latin Dictionary (Oxford, 1968); Chambers Murray Latin-English Dictionary (Edinburgh, 1933, 1991); Niermeyer Mediae Latinitatis Lexicon Minus (Leiden, 2002).


\textsuperscript{184} Noverint universi et singuli fratres sacre domus Hospitalis S. Johannis jerosolimitani, presentes pariter et futuri, quod ejusdem domus Hospitalis consueverunt bone consuetudines esse tales : ... Juxta consuetudines etiam bonas sacre domus, tribus diebus in septima carnes recentes porci aut motonis ministrabuntur infirmis ; illis autem, qui his carnibus vesci non poterant, tribuebantur galine.” Cartulaire général des Hospitaliers, no. 627.
dated between the promulgation of the statutes by Roger des Moulins on 22 March 1181 and the fall of Jerusalem to the Muslims on 4 October 1187.

The anonymous author came to the Hospital to see with his own eyes whether it truly lived up to its reputation. For this purpose he disguised himself in the clothes of a commoner, and for a while he stayed in the hospital in Jerusalem without many possessions pretending to be a client [i.e. a poor person] ... “so that small offenses could not be hidden.”185 Having convinced his audience that his writings are a faithful reflection of the truth, he begins to describe the Hospital’s workings.

The author wrote for a non-Hospitaller audience in an effort, according to himself, to praise God’s work as performed in the hospital. The work is literary and intellectual, and shows a knowledge of grammar, theology, classical literature, and Scripture. Like the authors of saints’ lives, this author stresses the necessity to

185. “Sed licet huius reverende excellencia laude, ymo magis laude digna per orbem terrarum longe lateque famosa promulgacione sit diffusa, tamen dignum duxi pro mee modulo parvitatis absque ornatu rethorico sive leporis elegancia in medium proferre, quanta in ea saectitas exhibicionesque misericordie opera usque peregre divina prestante gratia perfectus oculis subjecta fidelibus adnotatarum [?]. Et quoniam antiquitata veterum inolevit consuetudo, quod non solum mundi sectatores, sed et religiosi proch dolor viri, homines pompose preciosarum vestium fastu splendidos corvi [?] vultu, sermone blando, adulatoris gule irritamentis perveniunt, pauperes eontrario fronte lurida, li<n>gue asperitate, federe obliquo exasperant, ideo paupertate, vere religionis vere exploratrice, mihi conscia cunctis ignotus plebeo amictu velatus clientem componens, predictam domum aliquamdiu cohabitavi, ut sic sublimium oculorum me non laterent offendicula et modicos secretos facilius penetrarem recessus et ita vigilanti cura quanto diligentius potui latitante cum cautela fraternitatis domus illius unanimitatem indigui. Ne veridice narracionis explanacionem falsitatis deturpate admixtio et ne probosi mendacii tremebundi me demnparet auditorum castigatio, ab illis ergo huismodi propositi nostri summanus inicium, quos in ea domo caritate suadente, beato Iohanne volente, primiciavit[?] fidelium.” “Sicut Absurdum Nimis Est,” pp. 17-18.
overcome shyness in order to publicize the miracles of God: “We think that it is very harmful to be quiet about the things that indicate the greatness of our Savior, just as it is most absurd –or rather does it savor of the unspeakable insanity of repugnance - to defame the miracles of God because of an erroneous person’s denial, because the more gloriously the pious exultation of a voice promulgates his praises, the more dangerously are his praises kept silent out of fearful reticence.”

This account of the twelfth-century hospital of the order of Saint John in Jerusalem is important for the connection it makes between the intellectual understanding of caritas and its expression in practice. It illustrates the importance of the hospital in Jerusalem and its works of charity there for the order of Saint John – this is the essence of its being, the reason for its existence, the foundation for its support. For this reason the author begins his description of the hospital with the history of salvation in which caritas takes the central role.

Caritas, according to our author, is that part of God which moves Him. It is His love, His pity, His emotion. Caritas is central to the story of redemption and in this world best served by the Hospitallers in Jerusalem. “God,” he wrote, “nowhere showed His mercy more clearly than in those parts of Syria in which ... He accomplished mercifully the salvation of the whole human race, with caritas alone instigating Him.” And a little later, “As I spoke boldly, it is therefore clear that

186. Ibid., p. 13.
187. Ibid.
only caritas forced God to descend from the throne of heaven so that man might enjoy the companionship of angels, nay it dragged the Most High to the lowest place in order to allow mankind to return to the highest...so that He might free imprisoned mankind from its hellish state.”188 The text owes the concept of caritas as a motive force to the Neo-platonic Augustinianism of the twelfth century, and it might not have been coincidental that someone associated with the Hospitallers, followers of the Augustinian rule, chose Augustinian themes.

Augustine of Hippo had used his knowledge of Neo-platonic philosophy to come to a deeper understanding of Scripture after his conversion in 386. For him, happiness was the possession of amor Dei, the love of God, in which God was the object of that love; a gift “to his children offered in the divine humility of Christ’s Incarnation and Death.”189 Augustine redirected towards God the energy of Plotinus’ eros, a universal force because, according to Plotinus, “all that exists aspires towards the Supreme by a compulsion of nature.”190 As Augustine’s love draws the soul to God, love becomes a force of its own, a directive energy that cannot but lead the lover in some direction.191 The longing for God becomes a loving of God. But

188. Ibid., p. 15.


190. Burnaby, Amor Dei, p. 89.

191. Ibid., p. 94.
God and love cannot be separated: “God is love,” said the apostle John, and Augustine cried out in his longing: “Caritas, Deus meus, accende me!”

Hugh of Saint Victor had elaborated on the idea of love as a driving force. He was an Augustinian canon, philosopher and mystic of the first half of the twelfth century, whose writings were greatly influenced by the ideas of Augustine. His work *De laude charitatis* takes the central role of love in Augustine’s theology to its next logical step: If God acts out of love, and if love cannot but lead the lover in some direction, then it is love (caritas) that is the force and reason behind God’s actions. Charity, the practicing of love, must bring the practitioner closer to God. In his praise of caritas Hugh writes:

O how great is your might [vinculum], by which God could be bound, and by which the bound man could break the shackle of injustice! I do not know if I can say anything better in your praise than that you dragged God down from heaven and elevated man from earth up to heaven. ...I think of God, born of a woman, a wordless baby, swaddled, crying in a cradle, sucking at a breast. I see Him later, seized and bound, wounded by scourges, crowned with thorns, spattered with spit, pierced, nailed, and given gall and vinegar to drink. First He bore indignities, and later outrages; and yet, if we look for the reason why He condescended to the one and bore the other, we find not any, except caritas alone...You brought Him, bound Him with your chains and wounded Him by your arrows that man might be more ashamed to offer you resistance, seeing how you had triumphed even against God. You wounded the Impassible, you bound the Invincible, you drew the Unchangeable, you made the Eternal mortal.


The anonymous author likewise gives *caritas* a central and active role in the story of Redemption. He explains that as God was grieving for the crime of disobedience by man, He bound Himself with the fetter of *caritas*, and *caritas* now moving Him, He “wanted to be conceived in the womb of a pure virgin by the Holy Spirit.”194 It was through *caritas* that the “chaste breast gave milk to the King of the Angels” and out of infinite love for human kind that “God reclined Himself in a manger.”195 He was able to be recognized as “truly God and truly human” through His miracles, but the Jews denied Him, and again it was *caritas* that “incited God to sustain so many tortures for mankind.”196 The reader is reminded, however, that God acted “as a favor out of His ineffable goodness,” and not out of necessity.197 As Augustine had written, the love of God is for the perfecting of His creation; God is love and therefore has no need of it.198

Having given *caritas* a central role in the divine plan, the author personifies it as a woman and sings her praise. She takes Saint John the Baptist as her spouse, evoking the amorous encounters in the Song of Songs.199 Borrowing from Horace,


195. Ibid., p. 15.

196. Ibid., p. 11.

197. Ibid.

our author explains that the marriage between caritas and Saint John was good because it was one of equals: she was the forerunner of all virtues while he was the forerunner of the Lord.\textsuperscript{200} Her bedroom was the Hospital of Saint John, the privileged place near the Holy Sepulcher where love was shown to people of all nations and “His or her good works made evident to His or her lovers.”\textsuperscript{201} Being the spouse of caritas, John the Baptist became the pater familias of this house.\textsuperscript{202}

Moreover, the author portrays caritas as a testimony to faith, as a metaphorical road to happiness very much as Augustine had understood happiness. He does this by contrasting the sadness of the loveless act of the ignorant Jews with the happiness of the Hospitaller brothers.\textsuperscript{203} First, he recounts the sadness of Christ, who said when betrayed by the Jews, “My soul will be sad upon my death,” and asks “What sadness is greater, what grief is more anguishing than when the created condemns the creator to a filthy death, the work condemns the maker, the son condemns the father, the sheep the pastor, the criminal the innocent, the servant the lord?”\textsuperscript{204} Christ asks the father to forgive the Jews on account of their ignorance.

\footnotesize{199. See J. Leclercq, Monks and Love in Twelfth-Century France (Oxford, 1979), passim. on the use of secular love and erotic themes for explicating the love of God by authors such as Bernard of Clairvaux and Hildegard of Bingen.


201. Ibid.

202. Ibid.

203. Interestingly, the text is very anti-Semitic, not anti-Muslim.

204. “Sicut Absurdum Nimis Est,” pp. 14, 15.}
Then the author addresses in contrast the “happy congregation of the holy brothers of the hospital,” which, “lying on a dung heap, mercifully exposes the hidden gold by the display of its works [of mercy] and reaps the grain of spiritual understanding.” The Hospitallers found happiness because through their charitable work they knew God.

According to the anonymous author, the “happy convent” had been founded in imitation of the blessed Samaritan who had shown mercy for a stranger. The Samaritan, a foreigner (and heretic), came upon a man who had been robbed and took care of his wounds, in contrast to the priest who showed no pity. The next day, he brought the unfortunate man to an innkeeper, whom he gave two *denarii* for the injured man’s lodgings and care. Christ used this parable to illustrate that being a neighbor does not depend on physical distance but on showing love. Like the Samaritan who won “like a martyr in the contest over caring for one’s neighbor,” the Hospitallers took care of their neighbors who were “the catholic pilgrims of all nations, who daily fall on account of the robbers in these parts” and who were victims of “grave ailments of various illnesses and the attacks of the pagans.” The patients trusted to be cured in the good hospital as if it were the house of the good

205. Ibid., p. 22.

206. Luke 10:30-37. The author of the treatise mentions the washing of the feet in the hospital but he does not make a reference to John. 13 in which the washing of feet becomes an expression of love.
innkeeper and the hospital had consequently doctors who “fittingly agree on two pennies, which pays the maintenance and the cost for the cure applied to them.” 207

The Practice of Charity

When Raymond of Le Puy (1120-60) and his brothers agreed upon a Rule, they envisioned a truly religious life devoted to charity.208 The brothers about to engage in “the service of the poor” had to promise chastity, obedience, and to live without property in the tradition of monks. Also, they should display behavior befitting a man in religious orders, which included wearing modest dress without fur or bright colors and wearing pajamas in bed; abstinence from meat on Wednesdays, Sundays, and during the period from Septuagesima until Easter; and the avoidance of women (in particular they were warned against letting women wash their heads, their feet, or make their beds). If one of the brothers was to be found guilty of fornication, penance would be done in secret as long as the sin was kept private, but if the scandal was public, the offender was to be severely punished in public and thereafter treated as a stranger for a whole year. The Rule also prescribed silence at the table and in bed as was the custom in monasteries, implying that the brothers would eat and sleep in common.209


208. The Rule also applied to sisters (who promised to obey it), although this is not apparent from the document itself.
From the provisions of the Rule it is clear that these men, like Augustinian canons, were active in the world outside their convents and were expected to travel in small groups, actively seeking alms for “the holy poor.” Preaching and collecting were limited to a few sent to do so, but other brothers could beg for alms or lodging. Any surplus of what they acquired was to go to the poor of Jerusalem and to be handed over with an account in writing to the Hospital’s headquarters there. In turn, the Hospitallers bound themselves to offer hospitality to any sick man coming to their house by giving him spiritual support, a bed, and nourishment. The original rule does not mention medical care and does not require a house to be a hospital in the modern sense of caring for the sick. Following their rule, the brothers led a religious life not unlike that of monks, with the difference that the brothers were devoted to charity rather than liturgy.210

The Hospitallers wrote down detailed regulations for the hospital in Jerusalem –the heart of the Hospital -- in the last quarter of the twelfth century. In 1176 the chapter general first expanded the existing provisions by granting the privilege of white bread for the sick, emphasizing again the idea of the poor as lords, and then in 1181 master Roger des Moulins and the brothers issued a new series of customs “for the support and benefit of the sick poor.”211 These rules included decrees such as the appointment of “four wise doctors,” the distribution of boots for

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37. Cartulaire général des Hospitaliers, no. 70.

211. Ibid., no. 627.
going to and from the latrines, the provision for little cradles for newborn babies, and the order that the commanders should “serve the sick cheerfully.” The priories each had to make its own specific contribution in kind as part of its “responsion,” which was the obligated contribution to support the central convent, so that for example the prior of Italy was to send two thousand ells of fustian to Jerusalem and the prior of Mont Pelerin (Tripolis) sugar for medicine. The care of the poor of Jerusalem was extensive; the brothers received sick men and women, raised orphans, gave alms to newly released prisoners and other poor, and much more.

While not as large as the hospital of Constantinople or providing medical care as advanced as that in Baghdad, the twelfth-century Hospitaller hospital was quite impressive. The hospital had probably 900 to 1000 beds but could house up to 2000 patients in an emergency. The anonymous author of the 1180’s reports that the patients were divided over eleven wards, with a separation of men and women. Each ward had its own brother in charge and twelve lay brothers in attendance who would have room and board in the convent and who would receive money at their retirement. These attendants were responsible for most of the care of the patients: making the beds, carrying or supporting patients when walking or eating, bringing


them water, making sure that they would not wander off without permission, washing them, and so forth.²¹⁴

The brothers and sisters of the hospital were in charge of the patients’ diets. A good diet was considered essential for the strengthening of the patients, and their appetites were closely watched. The brother of the ward was responsible for the acquisition of foodstuffs.²¹⁵ For the treatment of the more seriously ill, the hospital employed four theoretici, doctors with medical training who were not allowed to take money from the patients.²¹⁶ The hospital also employed bloodletters and surgeons.²¹⁷ The person who had the title of hospitaller was in charge of all the hospital staff, its brothers on the wards, its sisters, lay brothers, servants, and specialized employees.²¹⁸

The sisters of the house were in charge of care for children, because they knew “the care of little ones better than males.”²¹⁹ The hospital had a separate division for the care of women and children. Pregnant women could come to the hospital to give birth in a specialized ward with a private kitchen. Furthermore, the women had access to warm baths. If the mother was unable or unwilling to nurture

²¹⁴ Ibid., pp. 19, 22-3.
²¹⁵ Ibid., p. 20.
²¹⁶ Ibid., p. 20; Rule, Statutes, and Customs, p. 35.
²¹⁸ Ibid., p. 23.
²¹⁹ Ibid., p. 25.
her newborn, the hospital provided a wet-nurse. Women who had given birth at home but were too poor to clothe their babies received cloth for swaddling. Other women who had given birth to twins or who were desperate on account of their poverty would come to the hospital in secrecy and leave their child to be found. These infants were put in the care of wet-nurses, who were inspected and paid by the sisters of the house, who were assigned “to visit the little ones and to wage humble watchfulness over them.” Foundlings and orphans were adopted by the order of Saint John, and once they reached adulthood they were allowed to choose whether they would assume the habit of the house or “embrace the seducing enticements of the jeering world.”

Charity was not limited to the hospital in Jerusalem. Dependent priories and commanderies sometimes had hospitals and provided care, too, albeit on a smaller scale. Medieval hospitals in the twelfth century were not characterized by a medical facility but, like hospices, by their care for outsiders, which contrasted with the private care provided by physicians at home or in monastic infirmaries meant for members only. Hospital clients -- pilgrims, beggars, orphans, or anyone who needed care -- received a mixture of spiritual, physical, and medical attention. “House of charity” describes a medieval hospitale more accurately than the word “hospital” in its modern sense.

220. Ibid.

221. Ibid.
The lack of a single clear description of the nature of medieval hospitals combined with the confusion that “hospitaller” or “hospital” can refer to a hospital, the Hospital, or both, makes a systematic overview of which commanderies were also hospitals difficult. However, while the evidence for each individual commandery is, with some exceptions, scanty, cumulative evidence suggests that the Hospitallers were more devoted to hospital care in the twelfth and thirteenth centuries than has hitherto been put forward: The Hospital ran hospitals not only in Jerusalem but also in Nablus and Acre, and had hospitals or hostels in Monte Peregrino (Tripoli), and Turbessel (Edessa) in the twelfth century.\(^{222}\) In the West, there is evidence that suggests that the commanderies of Clanfield, Cervera, Carbrooke, Champignolles and Bargota had hospitals.\(^{223}\) Furthermore, when a house of sisters at Aconbury in England was freed from Hospitaller control, the pope ordered that some elderly women should stay to take care of the poor and the sick.\(^{224}\) The order managed hospitals in Genoa, Verona, and Pisa.\(^{225}\) Boxerols in


\(^{223}\) See below, pp. 193-8.


Spain and Beaulieu in France came to the Hospital as existing hospitals.²²⁶ Finally, there was a Hospitaller hospital in Toulouse, France, where a mixed-sex community of Hospitaller brothers and sisters took care of the poor.²²⁷

**A Religious Order Devoted to Warfare?**

The increasing militarization of the Hospital did not take away from the Hospital’s identity as a religious order devoted to charity, because its military activities were seen as an extension rather than an aberration of its charitable activities. Some important studies have shown how the Christian message and military action were reconciled in the High Middle Ages and from them we can conclude that caring for the poor and fighting against the infidel were both viewed as services done out of love of God and therefore charitable activities. Both were manifestations of the new piety of the twelfth century.

Christianity has a long and uneasy history of accommodating the violence innate in human nature to its message of love and peace. In a brilliant but somewhat simplified study, Carl Erdmann (1935) showed how in the eleventh century the

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²²⁷. J. Mundy, "Charity and Social Work in Toulouse, 1100-1250," Traditio 22 (1966) pp. 203-88. These examples, together with the fact that the Hospitallers, like hospital congregations, followed the Augustinian rule, were active in the world, and received “donats,” suggests a close connection with the tradition and history of the medieval hospital in the West, but this topic awaits a systematic study.
leading churchmen, who were zealous reformers of the church and Christianity at large, were also the architects of the crusading idea. In the eleventh century the reform of Christianity at large meant extending Christian morals to the laity and hence influencing the ethics of knighthood. As the church reached out to the knighthood it could not simply reject war, but had to accommodate it, and therefore was forced to relax its attitudes towards war. The result was “a growing rapprochement and a concomitant weakening of its aversion.” Pope Gregory VII, a proponent of aggressive expansion of papal power, “harmonized warlike practices with the ethical ideal of the church,” and found justice and spirituality in war that served his ecclesiastical aims. Pope Urban II continued Gregory VII’s policies, but grafted pilgrimage onto the idea of a crusade. It must be noted that, in contrast to most scholars, Erdmann did not believe that pilgrimage was the main component of the original idea of crusade. Instead, he believed that Urban II’s “original and primary basis was the idea of an ecclesiastical-knightly war upon heathens, and only in the course of bringing it about did he introduce pilgrimage as an subordinate

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229. Erdmann, Origin, p. 76. However, Erdmann was mistaken in his conviction that the Church was pacifist at first.

230. Ibid., p. 94.

231. Ibid., p. 181.

232. Ibid., p. 308.
The original idea of crusade was Gregory’s concept of a holy war in aid of the church and by extension Christianity, and Urban’s idea of an armed pilgrimage gave Gregory’s concept appeal to a large audience of knights. Thus the reformers brought Christian spirituality to terms with violent warfare.

Jonathan Riley-Smith (1977) explains further how reform and the subsequent spiritual awakening of the laity related to crusading in the twelfth and thirteenth centuries. The reformers had made current the foundation of Christian ethics, that is, love -- love of God and love of one’s neighbor. The concept of Christian love was communicated to the knights and understood by them in their own terms. Consequently, knights expressed their love of God in the same way that they manifested love of their feudal lord and family: through military action and protection. Christian knights showed their dedication and love of God through crusading. “In fact,” Riley-Smith concludes, “as manifestations of Christian love, the crusades were as much the products of the renewed spirituality of the central Middle Ages in its concern for living the *vita apostolica* (the life in imitation of that of the apostles) and expressing Christian ideals in active works of charity, as were the new hospitals, the pastoral work of the Augustinians and the Premonstratensians,

233. Ibid., p. 333.
and the service of the friars.” Hospital care, pastoral care, and crusades were three ways to show Christian love through service that sprang from the same root.235

The tension between Christian ethics and warfare was particularly acute with the establishing of the Templars, who combined soldiering with religious life and who were consequently at once knights and monks. Their vocation drew criticism, but it was solidly defended by no one less than Bernard of Clairvaux, arguably the most influential churchman of the twelfth century, who made the convincing case that the Templars acted out of love.236 Much of his rhetoric echoed the arguments for crusading and was ultimately based on the thoughts of Augustine, who had argued for the possibility of a just war.237 By the 1130’s the Templars were well known for their military actions against the infidel and were supported by pious donations. Their self-sacrifice and dedication through battle as expressed in their rule was approved by the Council of Troyes in 1129 and lauded by Bernard of Clairvaux in his De Laude Novae Militiae.238 In 1139, Pope Innocent II praised the Templars and their works as an ideal of Christian love, claiming that they were burning with the flame of true love of God, “verae charitatis flamma succensi,” and were true

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236. Ibid., p. 56.


Israelites and warriors equipped for divine battle.\textsuperscript{239} He further supported their cause as an act of love by quoting the Gospel of John, “No one has greater love than this, to lay down one’s life for one’s friends,” a verse immediately following Christ’s command to love one another “as I loved you.”\textsuperscript{240} Fighting for the faith by a religious brotherhood thus become an apostolic enactment of love and an expression of \textit{caritas} compatible with a religious life.

Did the Hospitallers face similar criticism for combining a religious life with warfare? The short answer is no – and not just because the Templars as “defenders of the catholic faith and the attackers of the enemies of Christ” had prepared the way for the Hospitallers. James Brodman (1999) made the case that Templars and Hospitallers were different in essence inasmuch as they drew from two distinct traditions. Templars, who came from the monastic (Cistercian) tradition, had to make the case for combining the sword and contemplation. Much of the uneasiness twelfth-century society at first felt about the Templars was due to the fact that they combined two orders in society, two ways of life, that before had been diametrically opposed. The Hospitallers, on the other hand, came from the canonical tradition and married care for the poor with military activity.\textsuperscript{241} Because through crusading it had

\begin{footnotesize}
\begin{enumerate}
\item \textit{Papsturkunden}, no. 3.
\item John 15:12-13.
\item James W. Brodman, "Rule and Identity. The Case of the Military Orders," \textit{The Catholic Historical Review}, 88, no. 3 (2001), pp. 383-400 argues furthermore that both the hospital in Jerusalem and fighting the infidel were aimed at protecting pilgrims, but this is only partly
\end{enumerate}
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become generally accepted that fighting the infidel was an act of love, the Hospitallers could become involved with the defence of the Holy Land without compromising their image and ideal of a charitable order. The Hospitallers’ military activities were another act of charity.

Indeed, the criticism the Hospitallers faced at first arose not because they were involved in fighting the infidel, but because their military activities were either too much or too little. Pope Alexander III and others accused the Hospitallers of taking away resources for the care of the poor.\textsuperscript{242} At the same time, and in particular when the military situation in the Holy Land grew dire (and especially after its loss in 1291), the Hospitallers were criticized for not doing enough for its defence.\textsuperscript{243} They were accused of pride, greed, and intemperance, but not blamed for their involvement in warfare.\textsuperscript{244}

Brodman’s analysis may seem too schematic; however, his study is right to point out that there were essential differences between the Templars and the Hospitallers. Both were religious orders engaged in warfare, but each was grafted onto a different root and had a different self-image. The Templars were warrior-religious in the Benedictine tradition and officially did not allow women to be full true, and I do not believe this is the real reason that the Hospitallers were able to reconcile their two main charitable activities.

\textsuperscript{242} Cartulaire general des Hospitaliers, no. 527. See above, n. 2.

\textsuperscript{243} Riley-Smith, Knights, pp. 201-2. Like the Templars, the Hospitallers were used as scapegoats for the 1187 loss of Jerusalem and the 1291 loss of Acre.

\textsuperscript{244} Ibid., p. 201.
members. The Hospitallers were hospitallers in the Augustinian tradition in essence, proud of their care of the poor, and earning its respect and donations for that purpose. They were careful with women (as any right-minded religious man would have been), but they did not dismiss their profession. As we will see, the differences between the two orders were less pronounced in practice, but there were differences nonetheless.

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The Hospital of Saint John of Jerusalem was foremost a religious order devoted to charity. While the Hospital of Saint John increasingly militarized over the course of the twelfth century, its militarization did not contradict its charitable role. Furthermore, long after the Hospitallers first took up arms, the Hospital’s hospitaller image continued to overshadow its military image. Visitors admired the Hospital for its hospital in Jerusalem, which one author considered the “bedroom of charity.” Indeed, the runnings of the Hospitaller hospital in Jerusalem were impressive by medieval standards, both in size and in the quality of services provided. Furthermore, the Hospital operated a number of smaller hospitals in the West. In practice and in image the Hospitallers of the twelfth century were men and women served the poor in Jerusalem and devoted themselves to charity.
CHAPTER V
LAY ASSOCIATES

Women who wanted to establish ties with the Hospital of Saint John could profess or could associate as lay sisters. Here we will consider the lay associates. Like male lay associates, female lay associates were not fully professed, and therefore they had a lesser status in the Hospital and usually did not live in a Hospitaller house. However, we should not dismiss their influence offhand. Depending on their social status, they could have considerable influence on the Hospital, be it in an unofficial way, and they could be important politically because of their wealth and connections. We should also remember that although they were not fully Hospitallers, they were part of the spiritual family of the Hospital of Saint John and shared in its merit.

The Debate on Lay Association

Historians have had difficulties drawing a distinction between the different types of lay associates of the Hospital of Saint John, partly due to the amorphous nature of lay association, and partly due to the lack of a thorough study. Delaville Le Roulx divided the lay associates into two separate categories, the “confrères” and the “donats,” in his Les Hospitaliers en Terre Sainte et à Chypre, 1100-1310 (1904). He claimed that the association as donat was very much the same as association as confrère, except that donats had to be of noble birth and their admission depended
upon the approval of the master of the Hospital. Confrères shared in almost all the spiritual benefits of the Hospital and were buried in Hospitaller cemeteries. In exchange, they gave an annual donation in recognition of their confraternity and promised to defend the Hospital. Furthermore they promised that if they were to enter into religion, they would become Hospitallers, and their association was marked by a public ceremony. The main difference between confrères and donats was that the latter had the serious intent of joining the order as fully professed brothers or sisters at a later date. Their later conversion was marked by processions through town with trumpets and drums, a practice denounced by the general chapter at the end of the thirteenth century. However, having divided the lay associates into these two groups Delaville le Roulx concluded that “The confusion between the terms ‘confrater’ and ‘donat’ did not take long to establish itself and, after the time that concerns us [1310], only the latter term existed.”

Apparently the division between the two terms was not as clear as his description implied. The problem with his analysis is that it is based solely on regulatory statutes of the thirteenth century and does not give attention to documents of practice, which results in a definition that is unified in time and place but does not reflect historical development or regional divergences.

245. Tacchella criticizes Delaville Le Roulx citing a ruling (from the fifteenth century!) that shows that not all donati were of noble decent. L. Tacchella, I donati nella storia del soverano militare ordine di Malta (Verona, 1986), p. 24.

Riley-Smith further elaborates on the distinction between the two types of lay associates in *The Knights of St John in Jerusalem and Cyprus, c.1050-1310* (1967). He calls Delaville Le Roulx’s *confrères, confratres* and his *donats, donats*. However, he improves upon Delaville Le Roulx methodologically by using evidence from charters, not just statutes, and by introducing a nuanced chronology. Basing himself on individual cases from the *Cartulaire général* and *Colección diplomática* of Navarre, Riley-Smith argues that donats were *confratres* who were distinguished in three ways: “they were of noble birth, had the definite intention of entering the Hospital and were received in a slightly different ceremony.” Therefore, while Delaville Le Roulx discussed the two forms as separate types of association, Riley-Smith views the donat as a special type of *confrater*, but concurs that the distinction between the two categories is at times difficult to draw. Combining charter evidence and regulations, Riley-Smith notes that the first confraternity can be found in 1111, that the first donats “can perhaps be found in the twelfth century” (an uncertainty that comes from a lack of direct evidence), and that the regulations for confraternity changed over time. For example, although before 1292 a donat could become a brother without consent of the chapter, thereafter no more donats were to be received without a special license from the master, except on the frontier with the Muslims. Finally, Riley-Smith makes his readers aware that both men and women joined in bonds of confraternity, and that there were other types of associates.

among them those who choose their burial with the Hospital without being confratres in a strict sense, married couples who kept the usufruct of their property after donating it to the Hospital; and women who received corrodies in return for their confraternity.²⁴⁸

More recently, Alain Demurger agrees with Riley-Smith in Chevalier du Christ. Les ordres religieux-militaires au Moyen Âge (2002) that a Hospitaller donat is a more serious confrater, but contends that the donat, he or she who gives him/herself to the Hospital and enters a state of semi-religious, supplanted the confrater during the thirteenth century.²⁴⁹ Demurger’s insights are partly informed by Miramon’s Les donnés au Moyen Âge (1999), a thorough work on the lay religious life of donats from c.1180 to c.1500. However, Miramon argues that donats (whom he calls donnés) were substantially different from confratres and that they developed not out of confraternity but as a new institution, an argument that Demurger ignores.

Miramon contends that the increasing popularity of association as donat resulted from the Church’s criticism of confraternity beginning around 1180. The Church did not like the lack of vertical hierarchy that resulted from confraternity, for it meant that laypersons received spiritual benefits as if they were clergy.²⁵⁰ Donat association still fulfilled the desire to institutionalize lay piety, but it circumvented

²⁴⁸. Riley-Smith, Knights, pp. 242-4.


the blurring of hierarchy by making lay associates a “religious-to-be;” they remained
lay until they would take the habit of the religious order with which they associated,
but because this could happen at death, they were secure of the legitimate spiritual
benefits of a religious thereafter.

The exact origin of donat association is obscure. Miramon notes that the first
donats were among the Cistercians of Nonenque and Poblet. The Order of the
Temple, which had begun as a confraternity and for which lay association had
remained important, was also one of the first to experiment with donats: Domingo
of Batizo and his wife Maria became “fratres et donatos” of the Templar order in 1176
at Huesca in northern Spain. We might add that the Hospitallers had similar lay
associates as early as 1177 at Saint-Gilles in southern France. Donats, however,
could be found most frequently in medieval hospitals, institutions that were in the
first place religious houses, and where the institutionalization of lay piety was most
striking.

The following study of female association with the Hospital of Saint John in
the twelfth and thirteenth centuries agrees with Miramon’s belief that confraternity,
or association as confratres, and association as donats were in essence separate


252. Miramon, Donnés, pp. 104-5; Cartulario del Temple de Huesca, ed. A. Gargallo, M. T.
Iranzo, and M. J. Sánchez-Usón (Saragossa, 1985), no. 62.

253. Cartulaire du prieuré de Saint-Gilles de l'Hôpital de Saint-Jean de Jérusalem, 1129-

institutions. Both were forms of lay association: a *confrater* or *consoror* was a lay person who shared in spiritual benefits through yearly contribution, while a donat was a religious-to-be who had given a large donation similar to an entry gift. Neither of the two categories had a formal definition, and association depended on the specific agreement between the associate and the Hospital, but based on a large number of cases these general characteristics can be discerned. However, it must be stressed that a donat was not merely a more serious *confrater*, because the association of the *confrater* and the association of the *frater*-to-be were fundamentally different.

To complicate matters, the usage of words describing associates does not always correspond with the analytical category. We can, for example, categorize the association of a certain person as a donat-type association, while in the text he or she is referred to as *confrater* or *consoror*. This happened because the regional usage was more important than the actual type of association when it came to choosing words to describe lay association.

*Donate and Consorores*

In a minority of the documents that speak of lay association of women with the Hospital of Saint John in the West, women or couples identified themselves as *consorores* or *confratres*. The two earliest *consorores* known are Ermesenda, who joined the brotherhood of the Hospital of Jerusalem in Cervera with her husband in 1111,
and Beatrix of Roset, who became a con soror at Gap probably in 1121.255 We must remember, however, that in the first quarter of the twelfth century members were interchangeably called consoror/soror or confrater/frater. Consorority at this time did not have the same meaning as later in the same century when a sharper distinction was made and a consoror was of a lesser status than a soror who had made a profession.

Later examples of consorores in the West are rare: Pereta and her husband Petrus of Ulzina of Calid explicitly became confratres at Barcelona in 1198, promising a yearly contribution and expecting a burial with the order, and like Pereta and her husband, Sibila and her husband Peter became confratres of the Hospitallers in Barcelona two months later.256 Lady Bonasciutta, daughter of Bonincontra of Campo, became consoror in the church of the Holy Sepulcher of the Hospital of Saint John in Verona in 1286. In her charter she states that she had put her hand on the book in the lap of the prior of Venice and Rome (most likely kneeling before him) and promised the Hospital counsel and protection, not unlike a feudal arrangement. In return she was made “consororem et confratrem,” was


256. Sybilla’s full name is unclear because of water damage on the document. ACA, Ordines Militares, San Juan de Jerusalén, arm. 2, carp. 3, no. 116; ACA, Ordines Militares, San Juan de Jerusalén, arm. 2, carp. 3, no. 167.
allowed to share in the spiritual benefits of the Hospital, and was promised assistance in the event of poverty.\textsuperscript{257}

Bonasciutta’s charter reflects the ceremony that had become conventional for the acceptance of \textit{confratres}.\textsuperscript{258} The customs of the Hospital (c.1239) give a description of this ceremony: If one wanted to become a “\textit{confrere},” he (or, less often, she) needed to approach the master or commander of the house, who in turn collected all the brothers. The candidate then came forward during the assembly and put his hands on the missal as he promised to defend and protect the order, and not to do it any harm. If he were to enter religion, he was bound to enter the Hospital of Saint John and in any case would be buried in the Hospitaller cemetery of the house he joined. In recognition of his fraternity he would make a yearly contribution. After the postulant’s oath the person receiving the \textit{confrater} would say, “For the promise which you have made to God, Our Lady, Our Lord Saint John the Baptist, and Our Lords the Poor, we will commemorate you, and the souls of your father, mother, and ancestors during the masses, matins, vespers, and all other hours every day and in every house of the Hospital until the Day of Judgment, of which, we all hope, the Lord will make you part.” At the end, the presider would

\textsuperscript{257} Tacchella, \textit{Donati}, p.15, n. 9; However, the document is not in the Biblioteca Capitolare di Verona, Ms. Acta ecclesiastica Veronensis Spectantia 13, f. 700 as noted by Tacchella.

\textsuperscript{258} See Riley-Smith, \textit{Knights}, p. 242-6.
give the kiss of peace, and so would the other brothers present, and the name of the new confrater was put in the book with the names of the other confratres.²⁵⁹

Miramon rightly notes that these customs and other regulations on confraternity came about after this institution had lost its eminence in the West. However, while confraternity became increasingly unpopular for women in the West, it probably remained the sole form of lay association for women in the East: of the six women who are known to have associated themselves, all joined in bonds of confraternity. They are described below. Although their number is small, the fact that all female lay associates in the East called themselves consoror (or confrater) is significant because it explains the general chapter’s regulation of this institution and explains why, as Delaville Le Roulx noted, confraternity ceased to exist after 1310: after 1291 the Latin East was lost to the Muslims.

The first consoror in the East was a woman from Jerusalem named Gila who seems to have been rich, but not noble. In a complicated transaction, which was part sale, part charitable contribution, she sold the Hospital of Saint John a house in Jerusalem in 1175 with the consent of her son Peter. In return she expected that she and her son would share the Hospitaller benefits as members of the Hospital’s confraternity, for which they had placed their hands on the altar. Association brought Gila and her son security but was a gamble for the Hospital: The Hospitallers would receive the inheritance of Gila and her son after they had given

²⁵⁹. Cartulaire général des Hospitaliers, no. 2213 (Usance) §122; Riley-Smith, Knights, pp. 243-4.
them a Hospitaller burial. However, if Gila and her son were to fall into poverty, the Hospitallers were still bound to care for them.\textsuperscript{260}

Other women who became consorores were highly aristocratic. Constance, coubecame a consoror of the Hospital in 1178 or 1179 and requested burial as such: “me in consororem ... ad sepelliiendum dono.” She was the daughter of the late King Louis VI of France, sister to King Louis VII of France, and countess of Saint-Gilles. She had first married Count Eustace VI of Boulogne but was widowed in 1154, and in 1156 she had married Count Raymond VI of Toulouse. They had five children, including a son Raymond who became count after his father died and who married Joan Plantagenet, the daughter of King Henry II of England and Eleanor of Aquitaine. Constance’s second marriage ended in divorce in 1165 or 1166. Thereafter she went to Jerusalem and between 1177 and 1179 bought the casal (village) of Bethduras in the plain of Ascalon from John Arrabi, who held it from Balian II of Ramla. She donated Bethduras to the Hospital with Balian’s consent shortly before he became confrater himself (see below).\textsuperscript{261} She made her donation for the health of her soul, that of her parents, her brother Louis, his son Philip, her own children, and all of her kind (but not her former husband’s!) and she expected a Hospitaller burial

\textsuperscript{260} Cartulaire général des Hospitaliers, no. 469; Demurger, Chevalier, pp. 107-8.

as *consoror*, a yearly service for the benefit of her soul, *and* a yearly pension from the property as long as she lived and was staying in the East.\textsuperscript{262}

Maria Comnena entered into confraternity with the Hospital together with her husband Balian II of Ramla in 1179 or 1180, when they gave land to the Hospital of Saint John at Jerusalem and identified themselves as *confratres.*\textsuperscript{263} Like Constance, Maria was wealthy and highly noble: she was a distant relative of the emperor of Constantinople and queen of Jerusalem on account of her previous marriage to Amalric.\textsuperscript{264} It is likely, however, that her association was due more to Balian’s political ambitions than to the princess’s religious sensibilities, although confraternity by a Greek Christian was not unprecedented.\textsuperscript{265}

The fall of Jerusalem and the loss of the Hospitaller headquarters only temporarily disrupted confraternal relations. After the Hospitallers had reestablished themselves in Acre, Lady Cristiana, daughter of Roger of Caiphas (Haifa) and apparently single, gave them the casal that she held from Rohard, the


\textsuperscript{263} Cartulaire général des Hospitaliers, no. 576. See also Ibid., nos. 531, 550.

\textsuperscript{264} Maria was the daughter of Emperor Manuel’s nephew. J. Phillips, *Defenders of the Holy land: Relations between the Latin East and the West, 1119-1187* (Oxford, 1996), pp. 155, 159, 206, 226, 235, 244.

\textsuperscript{265} Cartulaire général des Hospitaliers, no. 443 and in particular vol. 1, p. 307, n. 5.
present lord of Caiphas. She became a *consoror* in 1201. 266 Sometime before June 1255 Margaret and her husband Johan Aleman, lord of Caesarea, became *confreres* of the Hospitallers, too. They reassured the Hospital (in the vernacular) that they would defend, aid, protect, and secure brother Guillaume of Chateauneuf, “honorable master of the said house,” his “religious,” his successors, and their possessions against everyone except their own lords, their children, or their vassals, as they had promised when they made their oath on the Gospels. In particular, the couple pledged five knights for service to the Hospital. 267

The small size of the circle from which these *consorores* were drawn becomes clear from the connection between these women and the relationship between Constance and Balian [Fig. 6]. Margaret was the great-granddaughter of Queen Maria of Jerusalem. Margaret’s father was John of Caesarea, who was born from Margaret of Ramla, Maria’s daughter. Margaret’s other great-grandmother Juliana had also been a *consoror*. 268 She had been married twice, once with Aimeric of Layron, and once with Guy of Beirut. From her second marriage she had a son, William of Caesarea, who married Margaret of Ramla, was father to John of Caesarea, and grandfather to Margaret.


268. Riley-Smith, *Feudal Nobility*, p. 316; *Cartulaire général des Hospitaliers*, nos. 621, 1002, 1400, 1250, 1251, 1414.
Another consoror, Juliana, had donated a house to the Hospital with the consent of Aimeric of Layron, lord of Caesarea and her rich and influential first husband in February 1207 or 1208. The lordship of Caesarea had come to the couple through her, as her father was the former lord of Caesarea. At the same occasion, but in a separate charter, she gave the casal of Pharaon and Seingib to the Hospital of Jerusalem. Furthermore, she chose to be buried in the Hospitaller cemetery as consoror and friend (amica) “cui dicte domus pietas multum boni semper contulit et

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269. *Cartulaire général des Hospitaliers*, no. 1250.
honoris." Even though she was married, she associated with the Hospital independently. She promised not to join any other religious order, while the brothers were held to give her the habit well-willing and with love, in death or during her lifetime, at her request; “and, as long as I shall live, the house cannot and must not fail me as sister.”

The promise of the Hospitaller habit to Juliana made her association as consoror like a donat-type association elsewhere. Here the habit of language is stronger than the type of association. In fact, only in Northern Spain can one find “donatas” of the Hospital. All the examples of this word are indeed, as Miramon claimed, from after 1180: Maria Rosella was the first who associated herself and her son as donati in 1193. She donated her honors in the castle of Cervera and other possessions, with the permission of Alexis of Cervera and her son William, to the brothers of the Hospital in Cervera, who received the two as “donatos.”

Similarly, Maria of Mataxolas gave herself as “donata” and her grandson Dominico Romeo as “frater” to the house of the Hospital of Saint John in Saragossa in 1196. Dominico Romeo’s age is unknown, but the fact that his grandmother spoke for him indicates that he was young. Maria promised all her possessions to the

270. Ibid., no. 1251.

271. “…et, dum vixerø, tamquam sorori domus mihi deesse nec poterit, nec deberit.” Ibid.

272. ACA, Ordines Militares, San Juan de Jerusalén, arm. 3, carp. 13, no. 114.

273. He could also be not of a sane mind, but more likely he was young as she was his grandmother. Children were sometimes given to the Hospital but, unlike Benedictine oblates, would get the choice to profess or to leave the Hospital when they came of age.
Hospitallers but made the following arrangement: she would continue to manage half of the estate, from which she would pay the expenses for the business as well as her living, and she promised to give the Hospital any surplus. However, if the proceeds were not enough to cover the costs, she was guaranteed a living by the Hospital at the standard of living of a brother. After her death the whole estate would come to the Hospital. Don Assalit of Gudal, of unknown relation, supported her arrangement by adding some of his possessions to the donation. There is, however, no promise to Maria of the Hospitaller habit in the future, and her association seems to have been a consoror-type association. Again, the local usage of language was more important than the nature of the association; Maria associated as “donata” because she lived in Spain.274

Donats quite often associated themselves as couples. Of course, being able to receive spiritual benefits as if one were religious was an important draw for married couples, as they could not become religious as long as they were married, and it was not uncommon to stipulate that one or the other of the spouses would join the Hospital as soon as the other spouse died. Domingo Lozano and his wife España, for example, gave the Hospital at Grisén, among other things, seventy sheep, a mare and its colt, an ass with its young, and two pigs in 1204. In return, each was given the option to enter the Hospital and receive the habit as soon as the other spouse died.

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274. La encomienda de Zaragoza de la orden de San Juan de Jerusalén en los Siglos XII y XIII, ed. M. L. Ledesma Rubio (Saragossa, 1967), no. 73.
died. In another association, Raymond of Benasch associated himself not only with his wife Romana, but with his brother Pons as well. William of Concha Bella, commander of Siscar, received them as “donatos” of that house in 1213, and promised them that they could enter that house whenever they wished.

Miret y Sans claims two other cases of female donats. First is the case of Beatrix. Beatrix was a donata of S. María del Camí, “deo data et domui sancte Marie de Camino,” who acted on behalf of herself and the sisters, confratres, and [con]sorores of the house. According to Miret y Sans, Santa María del Camí was a Hospitaller house dependent upon the Hospital of Barcelona. However, the document that serves as his evidence does not mention a connection with the Hospital of Saint John. Furthermore, the action of a donata on behalf of her sisters and brothers without the consent of a Hospitaller superior seems irregular for the Hospital. Except for the fact that this charter ended up in the Hospitaller archives, there is no evidence that there was a Hospitaller house at Santa María del Camí. Secondly, Miret y Sans mentions that Guerau of Montagut and his wife Ponceta became donats of Sant Valentin of les Cabañas in 1197, choosing their burial there and promising their furniture (mobles) and armor. However, he does not give any transcript of the original text. If indeed the word “donatos” is used, it seems that, as in the case of Juliana’s association as

275. Archivo Nacional de História, Madrid, Spain (Hereafter cited as ANH), Cartulario Magno de Amposta, III, p. 318, no. 272; Encomienda, reg. no. 100 (summary).
276. ACA, Ordines Militares, San Juan de Jerusalén, arm. 2, carp 8, no. 287.
277. Ibid., arm. 1, no. 69; Miret y Sans, Cases, p. 213.
consoror, the habit of language is again stronger than the type of association, because the type of association does not seem to be more than a request for burial, or a consoror-type association at most.278

Sometimes, as was the case with España in 1204, the habit was offered in the future without actually calling the recipient a “donata.”279 Another example is that of Bona. Don Chico and Doña Bona gave themselves and some belongings to the Hospital in 1183. They went beyond promising that they would associate with no other religious order than the Hospital, and, like España and her husband, they explicitly stated that in case one of the spouses died, the other had no right to remain lay and was to take on the Hospitaller habit immediately. In return, Garcia of Lisa, the castellan of Amposta, gave them the use of an estate, which was to return to the Hospital at death.280 Chico and Bona made their promise with an oath sworn on the Gospels in presence of several Hospitaller brothers, Bona’s brother, and Galindo of Deuslibol. In a second charter, with identical date, they gave to the Hospitallers their possessions in Deuslibol (Juslibol).281

Most associations in Southern France were of this donat type, in which a habit was promised in the future, even though the word “donata” was not used. The first

278. Miret y Sans, Cases, p. 124.
279. Encomienda, reg. 100.
280. The use of an estate for maintenance is not typical. Encomienda, reg. 48.
281. Ibid., no. 49 and reg. 50. See also ANH, Cartulario Magno de Amposta. IV, p. 280, no. 226; p. 281, no. 277; p. 539, no. 554.
instance dates from 1177: Raimonda, daughter of William of Mornas, was a wealthy individual who donated to the Hospital at Saint-Gilles her rights in the castles and territories of Mornas, Gigondas, Cairanne, Caderousse, and Pont-de-Sorge. She kept her control (potestas) over the castles of Mornas and Gigondas for the time being, and the usufruct of her possessions, and was promised the Hospitaller habit whenever she decided to take it. In contrast to the first Templar donati, Raimonda seems to have been single: the charter shows no indication of marriage, widowhood, or motherhood.  

In 1191 Rostagnus Gregorius and his wife Guillelma were promised the habit whenever it would please them when sold some feudal property for 3000 sol. It was apparently underpriced, as they swore with their hand on the Gospels that they were satisfied with that amount. Rostagius was allowed to eat in the refectory of the Hospital as one of the brothers for the time being, a privilege not offered to Guillelma.

There were others in southern France who made a donat-type association. Not far from Saint-Gilles, at Trinquetaille, Pierre Redon and his wife Respendina gave themselves to the Hospitallers in 1200. Again, the provision was made that as soon as one of the two would die, the other would receive the Hospitaller habit. In 1203 Guillelma arranged that she would live in one of the houses connected with the Hospitaller hospital in Toulouse and be cared for like one of the sisters. The prior


283. Cartulaire du Prieuré, no. 88.
offered her water and bread for life, and the use of a piece of land for her to exploit for income. She could, if she so wished, become a professed sister at a later date.  

In 1214 Bruna, widowed at the time, was given the opportunity to be received as sister and participant whenever she should decide to come to the “holy religion and order of the said hospital, out of free will and according to the rule and regulations of the said Hospitaller order.” In 1187 the prior of Toulouse promised Bernard of Saint-Rémy and his wife the Hospitaller habit and care like “the other brothers and sisters of the hospital” whenever they wanted.” Finally, Aldebert, his wife Valentina, and her mother Poncia gave themselves and all their belongings to the Hospital in 1207. They kept the usufruct of their property as long as they lived and


285. “ut quando domum predicti hospitalis ingredi volueritis ac habitum accipere quod ego recipiam vos et faciam vobis necessaria sicut alii fratres et sorores hospitalis.” Mundy, “Charity,” p. 260, n. 191, in which he refers to a document which has been lost since, namely ADHG, H, Dames Maltaises, 5.

286. “Insuper dominus prefatus prior bernardus de capoleg consilio et voluntate fratrum ipsius domus accepit et recepit eamdem Brunam per sororem ipsius domus et recepit eam per participem omnium beneficorum domus predicti hospitalis que facta sunt crita mare vel ultra mare in domibus predicti hospitalis spiritualium et temporaliuam ut in omnibus hic haberas tam bonam partem sicut habet et debet habere unus bonus frater vel soror predicti hospitalis et quando ipsa Bruna voluit venire ad sanctam religionem et ordinem predicti hospitalis ut faciat ad suum libitum et ad sua voluntate secundum ordinem et secundum formam ipsius ordinis predicti hospitalis quia ita hoc omnia fuerit mandata et concessa…” ADH, H, Malte, Toulouse, 1, no. 113. Bruna gave all her goods to the Hospital and came under the care (and command) of the prior of Toulouse. “Prefatis prior comendavit predicte Brune in omnibus diebus vite sue… Scilicet priusquam ipsa Bruna habuit factam donum de seipsam et de omnibus aliis sui bonis domino deo et predicto priori et fratribus hospitalis sicut in cartam illius domus continetur quam ego Guillelmus scrispi.” ADHG, H, Malte, Toulouse, 7, no. 75.
remained lay. However, they would receive the Hospitaller habit whenever they wished to become “brothers” at Avignon.\textsuperscript{287}

In Italy, several different terms were used to indicate lay association. According to Tacchella’s study of donats in Italy, \textit{dedicate} was the Milanese equivalent for the Genoese \textit{reddite} and the more universal \textit{converse}. For example, Simona, widow of Borgognone Embracio, expressed the wish to enter the Hospital and gave her belongings to the Hospital. She was accepted by Manfred, the commander of Genoa, as “reddita et conversa” on 21 January 1276.\textsuperscript{288} In 1293, Giovanni Manerio decided to leave four lire annually to his daughter Giacomina, “reddita” of the Hospital of Saint John in Genoa.\textsuperscript{289} In Milan, sister Fomia, sister Agata, and sister Benvenuta were witness to a transaction on 28 January 1259. The document explains that they were “omnes converse, dedicate, et sorores dicti hospitalis.”\textsuperscript{290}

There are no examples of female lay associates with commanderies in England, where lay association was less common than on the continent, but

\begin{itemize}
\item \textsuperscript{288} Archivio di Stato di Genova (Hereafter cited as ASG), Genoa, Italy, Notarile, Atti notari Giovanni Amandolesio, cart. 156, fols. 221 v, 222r, reproduced and partly transcribed in Tacchella, \textit{Donati}, pp. 63-4; C. Marchesani, \textit{Ospedali Genovesi nel Medioevo} (Genoa, 1981), p. 133, 318 n. 569.
\item \textsuperscript{289} ASG, Notarile, Atti notari Jacopo de Vegio, notai ignoti, B7, fasc. 87, fol. 30v, partly transcribed in Tacchella, \textit{Donati}, p. 63; Marchesani, \textit{Ospedali}, pp. 133, 319 n. 586.
\item \textsuperscript{290} Tacchella, \textit{Donati}, p. 62.
\end{itemize}
Miramon was mistaken to claim that donat association was altogether absent: At Buckland, Roger and Adeliz, husband and wife, donated land to the Hospital so that if “voluerimus nos ad sanctam domum convertere” they would be accepted.291 Buckland was a house for female Hospitallers, and accordingly the pattern was reversed; here, a man becomes a lay associate of a house of women. The same happened in Sigena, a house for Hospitaller sisters in Spain, where Bernard Scolaris Sator became a brother and donat in 1235.292

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Except for the occasional use of consoror in the West, each region is consistent in its terminology: donata in Catalonia, reddita in Genoa, dedicata in Milan, consoror in the Latin East, and no term for she-who-can-receive-the-habit-in-the-future in southern France. We should, therefore, make a distinction between the term used and the type of affiliation. Confraternity was an assurance of mutual friendship between the religious institution and a lay individual. It was a type of lay association that was in essence temporal and therefore often required an annual donation to reinforce the bond (the consoror-type or confrater-type association). The Hospital

291. William Hostarius, who became a lay associate at Clerkenwell, may have been a donat too. He granted the village of Paeton with a charter confirmed to God, Saint Mary and Saint John the Baptist and the blessed poor of the holy house of the Hospital of Jerusalem and the brothers serving God in that house” in 1185. “I also give my body to the same venerable house”, he wrote, “so that, if, being of sane mind, I should wish to enter into religion, I will be bound to enter into the religion of that house, or at least, at my death, I will give my body to the said brethren.” SRO, MS DD/SAS SX133, fols. 66r, 76r.

would receive donations and the loyalty of these lay associates, which, depending on the riches and power of these associates, could be substantial. In return, after making a solemn vow, the confrater-type or consoror-type lay associates could expect spiritual benefits without renouncing their marriage (if they were married). Furthermore, they had the assurance of a burial in the Hospitaller cemetery, and, depending on the arrangements made, support in times of poverty or old age.

Donat-type association, on the other hand, was a type of lay association where the lay individual came one step closer to becoming religious. He or she became a Hospitaller-to-be by securing for him- or herself the Hospitaller habit in the future, even if that meant only at burial, and by securing the spiritual benefits that came with being a Hospitaller. The theological and ideological complication of receiving the spiritual benefits reserved for religious while being a lay person of the confrater-type or consoror-type association were thus avoided when making a donat-type association The latter became particularly popular after 1179, when Pope Lucius III limited the spiritual benefits of confraternity with the Hospitallers or Templars.293 For some, association as donat would be the first step to becoming a fully professed Hospitaller.294


294. For the connection between association as donat and full membership with the Temple see Jochen Schenk, “Family Involvement in the Order of the Temple in Burgundy, Champagne and Languedoc, c.1120 - c.1307,” PhD Dissertation (Cambridge University, 2005), pp. 60-2.
CHAPTER VI

HOSPITALLER SISTERS IN THE TWELFTH CENTURY

Women, as we said before, could associate themselves with the Hospital as lay sisters or as fully professed sisters. This chapter discusses the Hospitaller “sorores,” of the twelfth century, those sisters who were not explicitly lay and who were probably, but because of a confusing terminology not necessarily, professed.295 These sisters associated themselves with Hospitaller commanderies that housed also brothers and consequently some Hospitaller commanderies had mixed-sex communities. The first recorded effort to establish houses specifically for sisters took place in 1177, an effort that was in line with the contemporary general uneasiness with the close proximity of opposite sexes within religious communities. Three more such houses were established before 1189. Their foundation charters give the impression that the initiative was the donors’, but the arrangements also suited the Hospital, which received the houses willingly, may have even have bargained for their foundations, and tried to retain them when they threatened to break away.

295. Fully professed sisters were called “sorores” or “domine,” but sorores could also be short for “consorores.” Unless the context indicates otherwise, sorores are taken to be “sisters,” just as “fratres” are considered to be “brothers.”
Moreover, the Hospital praised the liturgical dedication of its sisters as newly established by the Hospitaller sisters of Sigena.

**Sisters in Commanderies**

Women had a presence in Hospitaller commanderies and priories in the Kingdom of Jerusalem, Spain, Italy, France, and England during the twelfth century and in particular after c. 1170, by which time their number was significant enough to draw attention from the Hospital and certain royal benefactors. Here, we consider any Hospitaller community that was headed by a commander (*commendator* or *preceptor*), male or female, to be a commandery and houses headed by priors or castellans to be priories. These houses were not established specifically for the accommodation of women, in contrast to the houses headed by prioresses, which we will consider in the second half of this chapter. Women in commanderies or priories were most often under the direct leadership of a man and were a minority within their house. The occasional presence of women in commanderies seems odd but records show that this was the historical reality.

It is possible that some of these women became involved with commanderies following on their association as a donat. A donat, as we recall, was someone who gave substantial possessions to the Hospital and in return was promised the Hospitaller habit in the future. Because the purpose of the archival records is to write down the transaction of property, extant documents tend to show the moment of donat association, not the subsequent moment of entry as Hospitaller. Yet we can
imagine that, for example, when Bernard of Saint-Rémy died, his wife took the
Hospitallers up on their promise of 1187 to give her the habit of the Hospital so that
she could live like “the other brothers and sisters of the hospital.” The Hospitaller
house in this case was its hospital in Toulouse (France), which had members of
either sex.

Raimonda of Mornas, a single woman, wealthy and with considerable power,
similarly made a donat-type arrangement with a Hospitaller house that had female
associates. And when she was offered the option to accept the habit of the Hospital
of Saint John in Saint-Gilles (France) in 1177, three other Hospitaller sisters
witnessed: Ermegard of Nier, Maria, and Stephania of Sancta Cecilia. In 1186,
another woman, named Vierna, confirmed that her daughter Galburga had given
her money and property when Galburga had given herself as sister to “God, and the

296. The prior promised “ut quando domum predicti hospitalis ingredi volueritis ac
habitum accipere quod ego recipiam vos et faciam vobis necessaria sicut aliis fratribus et
sororibus eiusdem hospitalis.” J. Mundy, “Charity and Social Work in Toulouse, 1100-1250,”
Traditio 22 (1966), p. 260, n. 191; The document Mundy refers to, Toulouse, Archives du Lot,
Dames Maltaises, 5, is now considered lost.

297. Two twelfth-century examples of women associating with Toulouse seem to
arrangements for corrodies: The prior promised Bernard and his mother Prima in 1195 that
“in eadem domo hospitalis predicti, scilicet in Tolosa, semper permaneant et ibi habeant
semper eorum panem et aquam...” and to Rixenda and his sister Willema in 1199 “pro
multa bona que...olim fecerant dedit et concesserit predicte R and W sue sorori panem et
aquam et mansionem in omnibus diebus vite eorum in domus hospitalis Tolose...Item R et
W soror eius pro ista predicta comendatione fecerunt de caritate d.ccc.lxx et v sol. Tol. qui
fuerunt paccati in istos predictos honores.” ADHG, H, Malte, Toulouse, 58, 4; 1, 12. See
below, pp. 153-4, for female Hospitaller associates in Toulouse in the thirteenth century.

298. Cartulaire du prieuré de Saint-Gilles de l'Hôpital de Saint-Jean de Jérusalem, 1129-
house at Saint-Gilles of the hospital of Jerusalem.” The priory of Saint-Gilles was the headquarters for the Hospital in the West and is otherwise considered to have been a male community. It seems, however, that Saint-Gilles, like Toulouse, had sisters among its brothers.

Bona made a more binding promise to the Hospital than Raimonda. She and her husband made a donat-type association at Amposta in 1183, in which they explicitly pledged that if one of the spouses died, the other had no right to remain lay, and would have to take the Hospitaller habit immediately. The death of the husband before the wife would therefore have resulted in the profession of a Hospitaller sister; the Hospital did not yet have foundations for women, but this did not seem to cause any concern for the parties involved.

Cervera, in Catalonia, was another male Hospitaller house that accepted women. There is no doubt that Arsend, “woman and lady of Tous,” became a sister at Cervera in 1168, when she gave herself to the Hospital in Jerusalem in order to serve God “obediently and without property,” and “according to the rule of the Hospital.” She made her donation (and profession?) to Godfrey of Bresil, prior of


Saint-Gilles and the most important Hospitaller official in the West at that time. In 1199, her eldest son, Raimond of Tous, chose to be buried with the Hospital. In his testament, he made provision for his daughter and his wife: namely, he planned to give the Hospital 300 morabitins so that they would be received as sisters. Seven years earlier Ermesenda of Biosca had become a sister at the same house. Cervera had a long history of female involvement since Ermesenda’s confraternal association in 1111, and this tradition, as we will see, would continue into the thirteenth century.

In Jerusalem sisters along with brothers cared for the sick and the poor around 1180, or at least were supervising nurses and other staff. There seem to have been sisters at the Jerusalem hospital before that time: We know that Adeliz went to Jerusalem after she had been made sister at Trinquetaille sometime before

301. ACA, arm. 2, carp. 132, no. 455.

302. ACA, arm. 3, carp. 12, no. 53; carp. 150, no. 297; J. Miret y Sans, Les cases de Templiers y Hospitalers en Catalunya (Barcelona, 1910), p. 209.

303. ACA, arm. 3, carp. 11, no. 34; Ibid., arm. 28, carp. 11, no. 297; Ibid., arm. 3, carp. 16, no. 258; Miret y Sans, Cases, p. 209.

304. For Ermesenda see above, pp. 11, 66, 101; Cartulaire général des Hospitaliers, no. 22. For the thirteenth century see chapter VII below.

c.1146. In addition, when Gila became consoror at Jerusalem in 1175, she requested a funeral procession by the brother and sisters of that house at her burial.\textsuperscript{306}

Verona was a Hospitaller hospital that had at least three brothers and three sisters in 1178. Although it is likely that sisters at Toulouse, Jerusalem or Verona lived in their respective hospitals, it is not always clear from the documents whether Hospitaller sisters lived within the confines of an ordinary commandery.\textsuperscript{307} Because the extant documents of the Hospitaller commanderies in the twelfth century were not written to record who lived in a commandery but to record property rights, the information we have about women’s presence in commanderies is virtually always accidental. It would be almost equally hard to find positive evidence for the presence of Hospitaller brothers in commanderies, except for the fact that there were more brothers in the Hospital than sisters, and that men featured more regularly in juridical documents than women did.\textsuperscript{308}

Proving full profession or physical location remains difficult, but the following example strongly suggest that professed sisters were indeed living in commanderies before houses especially for them were established. In 1186

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\textsuperscript{307} L. Tacchella, I donati nella storia del soverano militare ordine di Malta (Verona, 1986), p. 59, transcribes Archivo di Stato di Verona, Verona (Italy), SS. Nazzaro e Celso, B. 25, no. 1530.
\end{flushright}

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\textsuperscript{308} Archaeological research could perhaps provide more clues to possible female presence in Hospitaller commanderies. Unfortunately, Roberta Gilchrist approaches the archaeology of female religious houses and of the military orders as two separate issues. Roberta Gilchrist, Contemplation and Action: The Other Monasticism (London, 1995).
\end{flushright}
Hospitaller sisters were collected from six different English commanderies and placed in a newly established house for Hospitaller women in Buckland, Somerset, where from then on all Hospitaller sisters were supposed to reside. Because at this time the total number of Hospitaller houses in England was twenty-two, it seems that a surprisingly large percentage (27.3%) of male houses in England actually had associated women in that year.

**Hospitaller Foundations for Women**

The Hospital of Saint John experienced something new in its development as an institution between 1177 and 1188, when the first four houses for Hospitaller sisters were established. At the first glance the initiators were the founders: King Alfonso II of Aragon who founded Grisén, Queen Sancha of Aragon who founded Sigena, King Henry II of England who founded Buckland, and the (significantly less


310. Based on David Knowles and R. Neville Hadcock Medieval Religious Houses: England and Wales (London, 1966), pp. 300-1, with the exception of Moorhall, which I have not included because I am not convinced that it was a commandery.
Figure 7: Hospitaller foundations for sisters in the twelfth and thirteenth centuries
glamorous) knight P. who founded a house near Prague. However, after a careful investigation it seems that the Hospital had more influence on this development and more enthusiasm for the foundations than is immediately apparent from the foundation charters, which tend to give credit to the person who brings in the property or money that makes the foundation possible.

In 1185, King Henry II of England (1154—1187) founded a house for Hospitaller sisters at Buckland in Somerset so that they would all live under one roof. When he confirmed his donation of the property of Buckland, he specified that Buckland was given “to the Hospital of Jerusalem “and the brothers of the same house” in order to bring together and support the sisters of their order.” He reiterated that the prior of England had agreed with him personally that he would not retain sisters in any other Hospitaller house in England except in the above-mentioned house at Buckland. Consequently, the prior of the Hospital in England brought sisters together from at least six different commanderies that same year, and

311. “Ita quod prior hospitalis conventionavit michi quod in nulla alia domo sua in Anglia retinebit sorores ordinis sui nisi in predicto domo de Bochland Quare volo et firmiter precipio quod domus hospitalis Jerusalem et fratres in ea deo servientes omnia predicta habeant et teneant in libera et perpetua eleemosina ad collocandas et sustenandas memoratas sorores.” Somerset Record Office, Taunton, England (hereafter cited as SRO), Ms. DD/SAS SX133, fols. 2-2b; Cartulary of Buckland, no. 7; See Cartulaire général des Hospitaliers, no. 1093 for a confirmation of the same by King John in 1199.
Fina became its first prioress. Furthermore, a separate community of brothers was established at Buckland that was supposed to take care of the sisters.

Henry II’s wish to end a situation in which a minority of religious women lived in communities with men corresponded with the Church’s growing unease about religious women among men in religious orders. Historians Hallam, Elkins, and Vernarde view his decision as part of his penance for his part in the murder of Thomas Becket. As part of that penance, Henry had promised to support papal reform policies, and they understand his decision to create a separate house for female Hospitallers as a way to honor his promises while at the same time asserting his royal power. At the same time, his changed attitude can be understood in the light of his attempt to regain the Church’s favor. Although not necessarily without spiritual concern, Henry’s action may have been practical and opportunistic rather than born out of personal opinion on mixed-sex religious houses as his political attitude (as evidenced by his attitude towards mixed-sex communities) changed from rebellious to appeasing: In 1166 Henry opposed the pope and supported


313. Henry II had made the donation to the Hospital and the brothers, not the sisters, but some elements of the relationship between them and the brothers were redefined in the thirteenth century. See below, pp. 214-17.

Gilbertine order against the accusations of the exiled lay brothers; in 1180, Henry lost his strong position vis-à-vis the pope for the moment and wanted to regain papal collaboration. The donation of a house for women that would limit cohabitation of male and female Hospitallers was in line with papal policy.

Originally, between 1170 and 1180, William of Erlegh, lord of the manor of Durston, had founded a house for Augustinian canons at Buckland. For this purpose, he had given them his lands and rights of Buckland (adjacent to his manor), the churches of Petherton, Bekynton, and Kilmersdon with all their privileges and lands, the chapel of Durston, a fishery, some meadows and some other lands for their own use without secular intervention. In return, they were to give themselves to God, to Mary and to Saint Nicholas. William’s uncle Thomas, archdeacon of Taunton, was to organize the canons and witnessed the transaction together with Stephen, the prior of Taunton, and many others.\(^{315}\) The donation was a pious act for the spiritual health of William himself and his family and for the benefit of the souls of King Henry, Queen Eleanor, their son King Henry, and their other sons and daughters.\(^{316}\)

William’s mention of the king and his family is not customary and points to a close relationship between them. Indeed, in 1166 an entry under “Sumersete” in the

\(^{315}\) A canon named Martin, Gilbert of Claville, Robert of Erleigh, Robert Fabro, Roger Maunsell, Alexander of Durston, a clerk named Miles and his son Robert, Robert son of Humphrey.

\(^{316}\) SRO, Ms. DD/SAS SX133, fol. 1; Cartulary of Buckland, no. 1. The Young Henry was crowned 14 June 1170 and died 11 June 1183 – hence the dates for this foundation.
Red Book of the Exchequer shows that William acted as the king’s chamberlain. In comparison to the other entries it is a rather personal note: “William of Erlegh in faithful servitude to his lord king of the English. Know, lord, that I must be your camerarius for my fief and have one enfeoffed knight, namely Thomas of Bercham, an old enfeoffment and no new enfeoffment. Be well.” 317 William was not from a great noble family but his service to the crown brought him closer to the king.

A house of canons was in fact set up, but its history was short. John Stillingflete, a fifteenth-century chronicler, explained that Henry II caused the canons to be removed after several years on account of their guilt and public behavior; they had killed his seneschal, a relative of William of Erlegh. The king subsequently had the canons removed and gave the property in c.1180 to the Hospital of Saint John in order to establish Hospitaller sisters there. 318

Buckland’s cartulary supports much of Stillingflete’s story but does not mention the murder and leaves the reason for the dissolution unclear. 319 It contains


319. SRO, Ms. DD/SAS SX133. This cartulary seems to have belonged to the brothers of Buckland Priory, not the sisters.
fifteenth-century copies of thirteen twelfth-century documents relating to the foundation of Buckland: two entries regarding the establishment of the canons, one explaining the situation in which the house had been given to the Hospitallers but without providing satisfactory arrangements for the remaining canons, three entries testifying that the prior of the Hospital in England, Garnier of Nablus, had made suitable arrangements for the canons, and seven entries (letters by the king, the archbishop of Canterbury, the pope, and the bishop of Bath) confirming its transfer to the Hospitallers for the establishing of Hospitaller sisters. A letter ordering the canons to leave, however, is lacking.

The case of Buckland was surrounded in ambiguity and cover-up. Reginald, bishop of Bath, complaining that no satisfactory arrangements had been made for the canons, wrote in a letter of confirmation that, “the truth now revealed,” he believed that the “venerable lord” William of Erlegh had agreed that the Hospitallers would get the property formerly belonging to the canons for the maintenance of their sisters. However, the Hospitallers had been forced to delay the entrance of the sisters as they were waiting for royal favor to force the canons to move out, and to speed up the process William had appealed to Ranulf of Glanville, the king’s Chief Justiciar. Then, before the move took place, William had died, without fully having confirmed his donation to the Hospitallers. Now the bishop of

320. SRO, Ms. DD/SAS SX133, fol. 5b; Cartulary of Buckland, no. 19.
Bath endorsed the transfer that had been approved by “the king, the lord of Canterbury, himself, and even William of Erleigh.”

Afterwards Reginald, Garnier of Nablus, and Walter, the former prior of the canons, each attested to the fact that Garnier had made suitable alternative arrangements for the canons according to legitimate profession. He gave three canons and a lay brother (conversus) the Hospitaller habit. He also arranged for two others to be received as canons among the canons of Taunton, one canon into the monastery of Berlich, and one into the priory of Saint Bartholomew of Smithfield in London. Prior Stephen of the church in Taunton wrote to the bishop that three of the canons had made a regular profession into the Augustinian order. The bishop of Bath ended his second confirmation letter with the prayer that “that which they professed they may actually perform.”

While the first letter by Reginald shows William as the initiator, his second letter notifies its readers that it was King Henry II who caused the canons to be removed in order to establish sisters at Buckland. Furthermore, Henry II’s charter

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321. SRO, Ms. DD/SAS SX133, fols. 1-1b; Cartulary of Buckland, no. 3. Weaver does not indicate that William had died.

322. “Berlitz” according to Stillingflete. Monasticon Anglicanum, 6, 2, p. 837; CA, Ms. L 17, fol. 153v. This could be the same as Barlinch Priory in Somerset which was founded during Reginald’s episcopate. David Knowles and R. Neville Hadcock, Medieval Religious Houses. England and Wales (London, 1974), p. 146.

323. SRO, Ms. DD/SAS SX133, fol. 1b; Cartulary of Buckland, no. 4.

324. SRO, Ms. DD/SAS SX133, fol. 2; Cartulary of Buckland, no. 6.

325. SRO, Ms. DD/SAS SX133, fol. 1b; Cartulary of Buckland, no. 4
is in style and content that of a donor, and Reginald, bishop of Bath, confirmed it as such in 1186. The king’s royal presence therefore overshadowed William, especially after the latter’s death, but it is possible that Henry was involved from the beginning. After all, we can hardly expect William to have had insight into the needs of a house for female Hospitallers, while Henry, who had taken control of William’s foundation after the canons’ crimes, would have had a chance to have been informed because he had met with the master of the Hospitallers in 1185, shortly before the decision of turning Buckland into a house of sisters.

Roger des Moulins, the master of the Hospital, had come to England together with Heraclius, the patriarch of Jerusalem, and others as a delegation from the Latin East, which had come to Henry II in an attempt to gain his support for the defence of the Latin Kingdom against increasing Muslim threat in 1185. Heraclius had started the visit with a sermon in Canterbury in which he praised Becket’s miracle in the Holy Land, allegedly meant to raise Henry’s feelings of guilt. The visit was only partly a success: Henry pledged support, but he did not commit to a crusade.

326. SRO, Ms. DD/SAS SX133, fols. 3-3b; Cartulary of Buckland, no. 11.

327. The Templar master had intended to be part of the delegation but had died during his travels.


329. Roger of Howden, Gesta Regis Henrici Secundi, ed. W. Stubbs (London, 1867), 1, pp. 335-6; Gervase of Canterbury, Works, 1, p. 325; Ralph of Diceto, Ymagines Historiarum. Opera
When the delegation departed, it left behind Garnier of Nablus, the new prior of the Hospital in England. His new position resulted from a reorganization of the Hospital in England, which beforehand had been part of the priory of Saint-Gilles but had now become independent.\(^{330}\) It is at exactly this time that a priory for women was established where all Hospitaller sisters were meant to congregate, which again entailed some reorganization of the Hospital in England, and it was Garnier of Nablus who finally established the sisters at Buckland.

At roughly the same time of Buckland’s foundation, another house for Hospitaller sisters was founded in Spain. Sancha, queen of Aragon and countess of Barcelona, began her negotiation with the Templars on behalf of Armengaud and his Hospitallers for the acquisition of property that became a foundation for Hospitaller sisters in Sigena, Aragon, in 1184. The purpose of the foundation of Sigena, expressed in 1187, was like that of Buckland: it was meant to set up a house in which all the Hospitaller sisters in the Castellany of Amposta would come together.\(^{331}\)

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\(^{331}\) Documentos de Sigena, ed. A. Ubieto Arteta (Valencia, 1972), no. 5. “...quod vos construatis et faciatis in loco illo de Sexena domum Deo et Hospitali in quâ omnes sorores quod infra baiulia Emposte se Hospitali obtulerint recipientur et statuantur et possint ibi habitare in unum.”
Contrary to traditional beliefs, there is no evidence that Sigena was established in order to house women who fled from the Latin East after the battle of Hattin on July 4, 1187 and the subsequent loss of Jerusalem.\footnote{J. Delaville Le Roulx, "Les Hospitalières de Saint-Jean de Jérusalem," in Académie des inscriptions et belles-lettres : Comptes rendus des séances de l’année 1894 (Paris, 1894), p. 139.} It is plausible, however, that the master and treasurer of the Hospital responded favorably to Sancha’s desire to found a house for Hospitaller sisters because they were eager to receive a large donation and royal support in this time of crisis. The convent had been planned before Hattin, but now the Hospital felt a new urgency for its implementation and authorized its foundation in October 1187, just months after the great losses of the Holy Land, which had come at a high cost for the order.

Sancha had her personal reasons for setting up a female Hospitaller convent. It might have been expected that a woman of her station in the second half of the twelfth century would found a house for Cistercian women, just as the queen of Castile had done, or the well-regarded countess of Urgel.\footnote{See above, pp. 30-1, for Cistercian foundations in Spain.} Or she could have become involved with Vallbona, a Cistercian foundation made possible by her husband, with her approval, in 1178.\footnote{Alfonso II, rey de Aragón, conde de Barcelona y marqués de Provenza: Documentos, 1162-1196, ed. A.-I. Sánchez Casabón (Saragossa, 1995), no. 252.} However, if she became a Hospitaller sister (in contrast to a Cistercian nun) she could still travel and be present at court, because the Hospital offered her an opportunity to be a regular religious without taking the vow of stability and without being enclosed. In one of her directive letters to the
official prioress she was almost apologetic about the absence of enclosure when she wrote, “I also sent you a Saracen to build towers and a wall. These are not meant to enclose because the sisters are walls and towers of virtue in themselves.”335 The absence of strict enclosure was in stark contrast to the ideology of female Cistercian monasteries at this time.

The surviving medieval documents display Sancha’s careful planning of a religious community. In October 1187, (a representative of) Armengaud of Asp, prior of Saint-Gilles and castellan of Amposta, gave Sancha the towns of Sigena, Sena, and Urgelleto.336 He also gave her the castle of Lecina with a charter that included a provision that Sancha could exchange this castle with the Templars for the churches of Sena and Sigena if she could not obtain the churches in any other way.337

The final transactions took place six months later, in April 1188. Sancha had been involved in the negotiations with the Templars to exchange the Hospitaller castle and town of Santa Lecina for the churches of Sena and Sigena since at least 1184, but the exchange had apparently not taken place yet. At this time, Sancha gave the manor of Codong to the castellan of Amposta and received the town and monastery of Sigena with all rights and income that belonged to them, as well as the

335. Documentos de Sigena, no. 10.


337. Documentos de Sigena, no. 12.
towns of Sena, Urgelleto, and Santa Lecina. Then she gave the castle and town of Santa Lecina in exchange for the churches of Sena and Sigena to Raymond of Caneto, master of the Templars and other Templars, with the permission of Armengaud of Asp and other Hospitallers. Furthermore, she gave the Templars the Hospitaller possessions in Puy de Monzón. Sancha acted in this agreement as queen in cooperation with the Hospitallers, not as Hospitaller sister, and her husband signed as one of the witnesses.\footnote{Documentos de Sigena, no. 5.}

In the same document, Sancha accepted the “monasterium” of Sigena to set up and build a house where ladies (domine) lived and prayed, so that they could “always live there in honor of God and Saint John the Baptist.”\footnote{Ibid., no. 5.} These ladies, as the sisters at Sigena were called, were to live under the rule of the Hospital and an additional rule which she, Sancha, had made according to the principles of Saint Augustine and with the advice and approval of Garcia of Lisa, now “master of the Hospitallers of Amposta,” and the other brothers.\footnote{“Et ego Sancha, regina Aragonum, hacipio de domo Hospitalis in cambio pro supradicto manso nomine Codogn villam et monasteriam de Sixena, cum supra villis dictis et suis terminis atque pertinencis, ad construendum et hedificandum monasterium et habitaculum dominarum, ut semper ibi vivant ad honorem Dei Omnipotentis et Beati iohanis Baptiste, et sub regula sacratissimi Hospitalis, simul cum additamentium quas ego illi addidi scilicet sancti Augustini hoc additamentum feci, cum consilio et voluntate magistri Iherosolimitani et consilio et voluntate supradicti fratres.” Documentos de Sigena, no. 6.} Garcia in turn confirmed

\begin{itemize}
\item \footnote{A “monasterium” was a religious community of either sex. Penny Shine Gold, The Lady and The Virgin: Image, Attitude, and Experience in Twelfth-Century France (Chicago, 1985), p. 76, n. 1.}
\item \footnote{“Et ego Sancha, regina Aragonum, hacipio de domo Hospitalis in cambio pro supradicto manso nomine Codogn villam et monasteriam de Sixena, cum supra villis dictis et suis terminis atque pertinencis, ad construendum et hedificandum monasterium et habitaculum dominarum, ut semper ibi vivant ad honorem Dei Omnipotentis et Beati iohanis Baptiste, et sub regula sacratissimi Hospitalis, simul cum additamentium quas ego illi addidi scilicet sancti Augustini hoc additamentum feci, cum consilio et voluntate magistri Iherosolimitani et consilio et voluntate supradicti fratres.” Documentos de Sigena, no. 6.}
\end{itemize}
Sancha’s contributions with gratitude and promised her a chapel anywhere in the kingdom where masses would be celebrated for the soul of her husband, herself, and all her ancestors.\textsuperscript{341}

The date of the donation of the manor of Codong on 23 April 1188 coincides with the traditional date of the foundation of Sigena, and might have very well been occasioned by the event.\textsuperscript{342} No contemporary records survive from the foundation ceremony, but Francisco Moreno described it in detail in his \textit{Hierusalem Religiosa}, an eighteenth-century manuscript that more or less faithfully uses documents that have since been lost.\textsuperscript{343} According to Moreno, the festivities began on 21 April when the bishop of Huesca consecrated the church of Sigena in the presence of the royal family and its entourage. Two days later, on the feast day of Saint George, Garcia of Lisa, castellan of Amposta, administered the conventual vows to the sisters, and the community was officially established. Sancha’s daughter Dulce was among the thirteen new sisters, but because she was only seven years old, her reception had required the special permission of Pope Clement III.\textsuperscript{344}

\textsuperscript{341} Ibid. Curiously enough, this document was prepared and signed by the minor witnesses, and the document was carefully copied, but the signatures of the king, the queen, the master, and of the scribe are missing. The original document does not exist any longer.

\textsuperscript{342} Schuler, "Pictorial Program," p. 22.

\textsuperscript{343} J. Moreno, “Hierusalem Religioso,” Archivo Provicial de Huesca, Huesca (Spain) (Hereafter cited as APH), Ms. S-58/1.

\textsuperscript{344} Moreno, “Hierusalem Religioso,” Ms. S-58/1, ch. 24-8; Schuler, “Pictorial Program,” p. 22.
Later in the same year, King Alfonso further endowed Sigena with a large tract of land in Los Monegros that was called Candasnos, for the purpose of populating it. Although the grant was made to God, the holy Hospital of Jerusalem, and its house of Sigena, the king gave it directly to Sancha herself, his wife and the “dominatrix” of the house of Sigena, not to the castellan of Amposta as one might expect. In fact, no Hospitallers witnessed the act. The term dominatrix was apt for the queen, as she completely dominated the house without being the prioress. It was really her foundation. The lands came from her dowry, the building was under her oversight, and after its establishment, she would rule the house from a distance until she could retire from her royal duties.

Sancha created a foundation that suited her needs in one other very important way: she gave Sigena a rule that created a liturgical role for its sisters, who were to live like Augustinian canonesses. This meant a life of contemplation less onerous than that of Cistercian nuns, but nonetheless religious and centered around the celebration of the Divine office. In it she found approval and appreciation of the Hospital. Armengaud of Asp, now master of the Hospital, wrote to Sancha on the 6 October 1188, that he and all the brothers approved of the new way of life that she had proposed for the female Hospitallers at Sigena since they believed that the new rule would increase its honor as it came forth “from a fountain


346. Ibid.
overflowing with religious fervor.” This rule was important for the history of the female Hospitallers since it introduced a new way of life, a life of contemplation rather than action in the world, which, as we will see, would become the norm for female Hospitallers in Hospitaller houses.

Was it coincidence that Queen Sancha began her negotiation with the Templars on behalf of Armengaud and his Hospitallers for the acquisition of property that became a foundation for Hospitaller sisters in the same year that the reorganization of the Hospital in England was conceived? Or were the establishing of a priory for women in England and the establishing of a priory for women in Aragon part of the same reorganization? Circumstantial evidence suggests the latter. The establishing of an independent priory of England must have been conceived in the Latin East in 1184, before the delegation (including the new prior) went westward, and the prior of Saint-Gilles must have been aware of the reorganization plans as they directly affected his priory. The prior of Saint-Gilles in 1184 was Armengaud of Asp, former “master” of Amposta and well known to the King Alfonso II of Aragon and his queen Sancha. If anyone, it is he who could have been aware and involved in the reorganization of territories and who was well aware of the desire for the foundation of houses for female Hospitallers.

347. “de habundanti religionis fonte procedit.” Ibid. no. 8.
A few years earlier, between 1177 and 1184, Armengaud had made an agreement with Alfonso II in which he returned the king’s previous donation of Grisén in exchange for other property. The king had given possessions in Grisén to the Hospital for the foundation of a house for female Hospitallers in 1177. This happened during a meeting at Catalayud, where Alfonso made a donation to God, the Hospital of Jerusalem, Pedro Lubis (who was castellan of Amposta at that time), Major of Aix, and the brothers of the Hospital, when he gave them, and in particular Major, the castle of Grisén -- including a manor, lands and all pertaining rights -- in order to set up a “dwelling for ladies.” Queen Sancha was present, endorsed the concession wholeheartedly, and personally signed the charter. The king explicitly protected the sisters from being moved by the master or brothers of the order, and the foundation of Grisén seems to have been a royal initiative benefiting Major and her associates, rather than an initiative from the Hospitallers themselves.


349. “Sancie, eadem gratia regine Aragonensis, comitisse Barchinonensis, et marchionisse Province que hoc laudo et concedo, sicut superius scriptum est, et manibus propriis firme.” Ibid.

350. “in qua semper permaneant omnibus diebus vite sue domina major cum suis sociabus, quas ego recipio in mea protectione et defensione, ut nullus eis contradictic nec malum faciat. Et mito illas propriis meis manibus in illo castello de Crisen, tali conventu ut euisdem domus magister vel fratres non commutent illas dominas de illa mansione, set semper ibi permaneant.” Ibid.

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Only two months later, the Christians in and around Grisén sought protection from the Hospitallers from the wars “of kings and princes” and for that purpose gave up their rights in the castle of Grisén. Perhaps this unstable political situation prevented Grisén from becoming a house for female Hospitallers as Alfonso had intended. For whatever reason, it seems that no house for Hospitaller sisters at Grisén was indeed created in 1177, at least not in the sense of a religious house for women like Buckland or Sigena a few years later. Instead, it seems that Grisén became a mixed-sex community under the leadership of a woman.  

Major had and would have several leadership positions and at the time of Alfonso’s donation she was prioress in Río de Jalón. Her position as prioress could mean one of two things: either Río de Jalón was a female priory (like Buckland or Sigena) where Major and her associate sisters lived before wanting to move to Grisén; or Major was a female prior in a leadership position commanding commanders (like a male prior). Later evidence suggests the latter. At the time when the Christians of Alpartir sought protection (February 1178), Major was prioress in the region of Ricla to the river Iber and was mentioned after the prior and before the commanders in the witness list. In March of the same year, she was in control over Grisén, Ricla, and the area below the river Jalón, while Dominicus acted as

351. Three sisters were mentioned among brothers in March, 1178: Donna Elvira, donna Maria, and donna Oria. Encomienda, no. 36; ANH, ordines militares, 625, no. 2.

352. “Ut diximus superius don Petro Lopez de Luna, magister de Amposta et prior de Aragón, et donna Maior, prioressa de Ricla usque ad fluuium Iberis, et don Lop de Filera comendador in Çaragoça et don Galin Tort in Placençia.” Encomienda, no. 34.
commander of Ricla under her command. Rather than a prioress over a female house of sisters, Major was a female prior in a leadership position over several commanders within a region.

The plan for a house of Hospitaller women at Grisén was clearly abandoned by 1181 or 1182, when Armengaud of Asp returned the king’s gift in exchange for another donation. But although Grisén did not evolve into a blossoming religious community of women, it was important because its foundation charter gave birth to the idea of a community of religious women. Armengaud of Asp and Queen Sancha would take the idea and cooperate in the foundation of a house for Hospitaller sisters at Sigena. Sancha, however, would take this foundation of a house for Hospitaller sisters into a direction that suited her personal needs. Sancha had turned the idea of the Hospitaller “commandery” of women, as had been conceived at Grisén in 1177, into a religious house for Augustinian canonesses, a house that

353. “Facta autem hec carta in mense março era M CC XVI regnante rex Ildefonso in Aragona et in Barchinona, urgellensis et Pallariensis, nobissima dona maior in Grisenich et in Ricla et in subitus descendencium riui totum Exalonis. Nos qui presentem cartam istam imperauimus scribere fratri nostro Ferrario coram fratribus nostris Galindus Tortus et frater Dominicus comendator in illa Alminnia de Ricla sub manu noblissima donna Maior.”

Ecomienda, no. 36; ANH 625.2 In 1189 a donna Maior was present at a chapter brought together by the prior of Navarre and witnessed the end of a dispute in Cizur as “commendatrix in Liach,” but judged by the limited respect given to this sister, she was probably not the same woman as the commander of Grisén. El gran Priorado de Navarra de la orden de San Juan de Jerusalén: siglos XII-XII. vol 2. Colección diplomatica, ed. S. A.García Larraqueta (Pamplona, 1957) nos. 60, 62.

354. “Et reddimus vobis domino regi et vestris quicquid nos habemus in teviza et in Griseneg ex donatione vestra, sicut nos melius per vos habeamus.” Cartulaire Géneral, no. 598. The Hospitallers retained other possesions in Grisén. Cartulaire général des Hospitaliers., no. 1023.
suited her spiritual aspirations but at the same time allowed her to leave its enclosure while she was queen. The house for Hospitaller sisters at Grisén might have inspired her, but Sancha had a different vision for Sigena, which she expressed in its new religious rule.

In short, it seems that the idea for the foundations of Buckland and Sigena each arose in 1184, at a time when the Hospital was seriously contemplating its organization and when the general opinion towards female religious favored their segregation from men. The original idea for a house of female Hospitallers, however, had already been conceived in 1177 with the foundation of Grisén, and possibly, but less likely, with the existing foundation for sisters at Manetin in the current Czech Republic.

Very little is known about the circumstance of the foundation of the house of Hospitaller sisters situated approximately sixty miles west of Prague. Pope Lucius III confirmed to Bernard, “preceptor in Bohemia,” the possession of the church of Manetin, “in which sisters remain, who have been brought together there by you and the Hospital with the permission of the bishop,” in 1182. It may very well have been the same house, which a certain knight P. had tried to establish for his female relatives in cooperation with the same Bernard and at around the same

355. “ fratri Bernardo preceptori et aliis fratribus Hospitalis Jerosolimitani in Boehemia, Polonia et Pomerania constitutis...ecclesiam Manetin, in qua sorores vestre morantur, vobis et domui hospitalis cum assiensi diocesani episcopi et capituli sui pia devotione collatas, vobis et per vos dicte domui...confirmamus.” Cartulaire général du Hospitaliers, nos. 643.
time. Unfortunately, the date of his foundation is not known nor its location. It is, however, of interest for a different reason: a subsequent recorded dispute makes clear that the Hospital was more than just sympathetic with regard to female Hospitaller houses. Once a Hospitaller house for women was established, the Hospital fought to keep it and once a woman accepted the Hospitaller garb, she was to be a Hospitaller sister for life.

Pope Clement III (1188-1191) related the problems that followed the foundation in a letter to the abbots of Plas and Stragovia dated 12 October 1188. According to the pope, who had received a letter with complaints from the Hospitallers, P. had accepted the Hospitaller habit together with his mother, his wife, his maternal aunt, and a niece when he made his profession in a church in Prague to Bernard, a prior of the Hospital. At this occasion he conceded to the order all his belongings and at his request the local prior set up a monastery for women.

Afterwards, P. was sent to Jerusalem where he “–like so many others–” was “overcome by the enemies of the Christian faith” and died. In the meantime, his mother took charge of the house. Without any counsel or permission, she accepted

356. Ibid., nos. 643, 861.


358. Cartulaire général du Hospitaliers, no. 861.

359. “Quo facto idem P. Jerosolymam est transmissus, ibique cum illa multitudo que, peccatis exigentibus hominum, ab inimicis fuit christianae fidei superata, mortem, ut dicitur, subiit temporalem.” Ibid. no. 861.
about ten additional sisters and took command over the laypeople who were serving the monastery and its villages. The wife, a professed sister, was taken away by her father and remarried against all regulations. Having seen “tanta mala,” so many bad things, the Hospitaller brothers set up a cloister in the priory’s church in Prague and sent the sisters there to lead a communal life. The mother, however, said that she wanted to go to Jerusalem where she could serve God in closer proximity and took thirty silver marks from the brothers, but once she reached Hungary, she changed her mind and returned. With the aid of another son, she took back the donated possessions by violence, which, according to the Hospitallers, cost them two hundred and fifty marks.

To complicate the matter, the mother decided to change the allegiances of the house and transfer to the observances of the brothers of the Holy Sepulcher, for which she asked for license from their monastery at Doxa. Upon swearing that she had never done harm to the possessions of the Hospital, she was absolved from the cross and she conferred upon the brothers of the Sepulcher the fifteen villages, which, according to the Hospitallers, she had retaken from the Hopitallers with violence. However, at the same time that Henry, the bishop of Prague, was overseeing the transactions, the Hospitallers appealed to the Holy See.

360. This church may have been the church of Saint Mary in Prague built in c. 1159 with the support of King Wadislav II. Ibid., no. 278.

361. Ibid., no. 861.
In his response, Pope Clement asked the abbots of Stragova and Platz to sort out the confusion, and recommended that if they found what the Hospitallers claimed to be true, they should restore the possessions to the Hospitallers and send "the woman" back to her monastery if the brothers at Doxa had received a license, or to force her to return to her first profession. Moreover, the pope ordered the abbots “to tie her down with the chain of excommunication” until full satisfaction had been made to the Hospitallers in case she continued her disturbances. Clearly, the Hospitallers were concerned by any material losses that resulted from the mother’s action. But there was more at stake; female membership was taken seriously.

A Life of Contemplation

When Sancha founded Sigena, she created a Hospitaller house that was quite different from commanderies such as Cervera or Grisén. Before this, Hospitaller houses had one or more of the following functions: manage estates, protect a castle and its surroundings, run a hospital, or govern other commanderies. Sigena’s main function, however, was contemplation, for which it received a special rule that regulated its liturgical practices at its foundation. Henceforth, sisters of other

362. “Quod si vestris monitis et mandato no acquieverit, nec voluerit a predictorum fratrum vexatione cessare, vos ipsam et filium, appellacione remota, excommunicationis vinculo innodetis, et tamdiu pro excommunicatis faciatis haberi, et cautius ab omnibus evitari, donec ex integro eisdem fratribus fuerit satisfactum.” Ibid.
363. A 13th century copy has been preserved in the Archivo Provincial de Huesca, Huesca, Spain (Hereafter cited as APH), Armario de Sigena, legajo no. 1. The original seems to have been lost. An edition has been published in the CG, no. 859; and in Documentos de Sigena, no.
houses for Hospitaller women seem to have been dedicated to the celebration of the liturgy. The existing evidence for contemplative Hospitallers in houses apart from Sigena is from after the twelfth century and there is absolutely no evidence that they directly adopted Sigena’s rule in the twelfth century. Yet, Sigena’s rule is important because it is the first evidence for a new life of contemplation for Hospitaller sisters.

Like the rule of the Hospitallers, the rule of Sigena was Augustinian in inspiration. It was meant as an addition to the Hospitaller rule, not a replacement, as the sisters were bound to obey both. Both regulated life, but they were very different in subject matter. While the Hospitaller rule, as we have seen, regulated matters of the Hospital and the functioning of the hospital in Jerusalem, the rule of Sigena focused solely on the hierarchical organization and daily life of the convent, which was much more focused on monastic discipline than the life of the brothers.

Sigena’s rule organized the life of the sisters in the rhythm of the liturgical year. It intertwined spiritual and practical, liturgical and secular aspects of life, as it directed the sisters on matters such as going to the latrines before entering the choir for a service. The rule also tried to avoid possible problems created by discontent within the house, and to take into account disruptions of the daily routine such as a nosebleed during dinner. Although not all problems were anticipated (Sanche

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8. *La Regla del Monastir de Santa María Sixena*, ed. A. Duran Gudiol (Saragossa, 1960) is the most reliable edition. The text and translation from M. Horvat, “Queen Sancha of Aragon and the Royal Monastery of Sigena” (Dissertation, University of Kansas, 1994) can be found on the website of the Medieval Sourcebook.
herself would make amendments to the rule afterwards), the rule was well thought out.

The rule begins the description of the (ideal) day on the first Sunday of Advent, at the time of rising before matins, right after the sacristan has prepared the lighting in the church: a torch, two wax candles before the altar, and a candle next to the book on the table from which the reading was to be read. After she was ready, she rang a bell and continued to do so until everyone had entered the church. As soon as the sisters (*domine*) and the girls (*puelle*) heard the bell, they got up and went to the latrines if they had the need. The girls, the rule implicitly shows, were young females who had not professed and who were under the tutelage of the sisters. The first sister awake carried a candle into the latrines and put it in a specific place, because no one was ever to go into the latrines without light, and the sister with the lowest seniority, that is the woman who had made the most recent profession, removed the candle after everyone had finished and put it back in its place in the church. Furthermore, the sisters and the girls (chaperoned by their “mistresses,” sisters who were in charge of educating and caring for them) carried lanterns every time they were going to the lavatory. If a sister noticed that the sister next to her was still sleeping, she would wake her up – or she would receive the same whipping in chapter as the sister who overslept! Everyone had to get up and no one was
supposed to remain in the dormitory, even in case of illness (as long as the illness
was not too severe, adds the rule).\textsuperscript{364}

Everyone went to the church for matins and entered the choir in proper
order, that is, first the sisters (\textit{domine}) and then the girls (\textit{puelle}) with their mistresses.
The service of matins was preceded by prayers known as the \textit{Trinia Oratio}, which
were recited by the sisters until the girls had entered and had taken their places
between two mistresses each, and the sacristan had rung a very small bell.\textsuperscript{365} Then
everyone sat down and the recitation of the Gradual psalms began, which consisted
of three sets of five psalms The first set of psalms was followed by the \textit{Requiem
eternam}. Then the sacristan rang a bell again and the sisters said the \textit{Pater noster} and
prayed for the deceased. Five psalms and the \textit{Gloria} followed. At the end, the
sacristan together with some lay sisters rang all the bells while the sisters prayed for
themselves. Then a second set of five psalms and the \textit{Gloria} followed, after which the
sacristan and some lay sisters sounded the bells and the sisters prayed, this time for
the household.

The recitation of the Gradual psalms was immediately followed by matins,
which began with \textit{Domine, labia mea} sung while the sisters faced eastwards.
Afterwards, two persons sang the Invitatory. Once they had finished this, they were
to supplicate before the altar and return to their places. Then the precentrix started a

\textsuperscript{364} APH, Armario de Sigena, legajo no. 1.

\textsuperscript{365} Ibid.
hymn, followed by the singing of psalms with a singing of anthems by the girls. At the end of the last psalm, the precentrix was to sing the anthem. Next there were readings, responses, and (except for the Sundays of Advent or the Sundays from Septuagesima to Easter) the singing of the Te Deum laudamus. A ringing of bells concluded the hour and the sisters and girls were allowed to go back to bed.366 The rule continues to describe the days in minute detail according to the liturgical hours, interrupting the liturgical order with comments on practical problems -- such as tardy sisters at office -- as it saw fit. It concludes with several unrelated issues such as the election of the prioress, tonsure, and dress code.367

The rule gives particular attention to gentle care for the girls. They were, for example, to carry the books for the readings, except when the books were too big or too heavy for them to carry. A girl too delicate to stand during dinner was allowed to sit on a stool. The girls were protected from cruel punishment or abuse such as the pulling of hair, beating with fists, kicking, or flogging above shoulder height. They were to be flogged in the chapter or the choir, and were not to be flogged in the time between supper and matins. It is not unlikely that this caring attitude towards the youngest members of the community reflected the attitude of Queen Sancha, who after all placed her own daughters in the convent.

366. APH, Armario de Sigena, legajo no. 1. The matins service at Sigena was less elaborate than one celebrated at a "typical" English medieval Benedictine monastery. Thomas J. Hefferman, "Liturgy and Literature of Saints' Lives," In The Liturgy of the Medieval Church, ed. Thomas J. Hefferman and E. Ann Matter (2nd ed. Kalamazoo, 2005), pp. 79-82.

367. There is no evidence that exactly this rule was used in other houses of female Hospitallers in the twelfth or thirteenth centuries.
A striking element of the rule is the emphasis given to reading and literacy. During chapter the prioress, if she was literate, gave a sermon or had someone else do it for her. The girls normally read the readings for matins except when the reading was from the Gospel. They or one of the sisters would also read aloud during the meals. The sisters were expected to spend their time after rising reading quietly in the cloister, each having received a book, which implied that Sigena had a library of some sorts. Books and reading were an integral part of the community’s life.368

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Women became Hospitaller sisters and associated themselves with commanderies from about 1111. Some of these commanderies such as Cervera, Toulouse, Jerusalem, or Verona were therefore mixed-sex communities that housed both brothers and sisters. These sisters became more numerous in the 1170’s and in 1177 King Alfonso II and his wife Sancha founded the first house specifically for sisters at Grisén. It was never established, but was nevertheless important because it seems to have been the inspiration for later foundations for sisters such as Buckland and Sigena.

It seems that the idea for Buckland and Sigena came about in 1184, at a time when the Hospital was seriously contemplating its organization and the general opinion towards female religious favored their segregation from men. In 1185, the

Hospitaller master came to England, met with the king, and left Garnier of Nablus to take control over the Hospitallers in England as prior. A few months later, and with the help of Henry II, the Hospitallers also had a prioress in England who was to take control over all Hospitaller sisters in England who from then on were to live at Buckland.

The other house was Sigena. As at Grisén, Sigena’s core possessions at its foundation came from Alfonso II of Aragon and his wife Sancha, but this time Sancha had a much more active role. She worked together with Armengaud of Aps, who was the prior of Saint-Gilles and therefore must have been well-informed on the general policies of the Hospital, and was therefore a possible link between the foundations of Grisén, Sigena, and Buckland.

At Sigena, Hospitaller sisters explicitly led for the first time a religious life devoted to the celebration of the divine office, a life that the Hospital believed would increase its honor. Other houses for female Hospitallers followed in which sisters were devoting themselves to the liturgy and they were leading a more contemplative life than their male brethren. In this respect, the Hospitallers had evolved very much as other religious orders had in the twelfth century and seem to foreshadow the happenings of the thirteenth century, when the female associates of the mendicants became cloistered and withdrawn from this world. However, the opportunity for individual women to associate themselves with Hospitaller commanderies remained: The Hospital of Saint John still accepted women in their commanderies on occasion, women who led an active religious life in a charitable
religious order. Complete segregation such as suggested at the foundation of Buckland did not occur, nor did the Hospitallers show misogyny or a desire to marginalize women. Instead, they appreciated the sisters life at Sigena and fought to keep their sisters in Prague. The foundation of Hospitaller expanded rather than limited the opportunities of female religious as a result.
CHAPTER VII

HOSPITALLER SISTERS IN THE THIRTEENTH CENTURY

The establishing of Hospitaller houses for women from the 1170's onwards did not lead to a decline in the number or status of female Hospitallers. Quite the contrary: After the first attempt to congregate all Hospitaller sisters within certain kingdoms (i.e., Aragon and England), the attitude towards having women among men seem to have relaxed and, judged by the surviving records, more women were admitted to the Hospital during the thirteenth century than before. These female Hospitallers could be consorores or donate, as we have seen, but also fully professed sisters who joined the Hospital in existing or newly founded houses specifically for sisters or in commanderies, - sometimes even as commanders.

Women in Commanderies

Notwithstanding the foundations for women in the twelfth and thirteenth centuries, women continued to be present in Hospitaller commanderies. Sometimes their presence was the consequence of the donation of an existing mixed-sex community. This happened in Spain when in 1227 King James I of Aragon ordered the house and hospital of Boxerols with its brothers, converse, conversi, donate, and donati, to be subjected to the house of Hospitaller sisters at Sigena. The members of
Boxerols would from then on put on the Hospitaller garb, obey Sigena’s prioress, and live like brothers and sisters according to the rule of the Hospital. Boxerols would from then on put on the Hospitaller garb, obey Sigena’s prioress, and live like brothers and sisters according to the rule of the Hospital. 369 Beaulieu in Quercy, France, was given to the Hospitallers in 1259 as a hospital with a mixed-sex community, 370 and Santa Maria di Sovereto in Terlizzi, Italy, may also have been an existing mixed-sex religious community when it was given to the Hospital in 1203. 371

The Hospitaller hospital in Toulouse exemplifies a house that continued to accept sisters among its brothers during the thirteenth century. Prima was a sister here in 1202. 372 Rixenda and Remengarda were “sorores hospitalis” in 1234. 373 That sisters were actually living at the Hospitaller hospital becomes clear from an


373. ADHG, H, Malte, Toulouse, 9, 99.
arrangement in 1204, in which the prior of Toulouse offered Guillelma water and bread for life, “…just like one of the sisters.” He promised that Guillelma would remain with the sisters “or with other women she must have here” (servants?). The charter added that when Guillelma wanted to accept the habit of a religious (make a profession), the prior and the brothers of Toulouse were to receive her in good faith and to maintain her as one of the sisters of that house.\textsuperscript{374} The fact that the prior only refers to sisters in this context suggests, however, that there may have been some kind of internal segregation of the sexes within the Hospitaller house at Toulouse.

Many of the references to sisters in commanderies are no more than an occasional mention. Besides in Toulouse, the Hospital had sisters at Trinquetaille, France, where Rixenda Autard became “nun and sister” in the presence of brothers and sisters in 1198.\textsuperscript{375} In 1210, Agnes, widow of Hugh Pellisier, also gave herself and

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\textsuperscript{374} “Notum sit quod Guillelma de [---] bona propria voluntate amore dei et redemptione anime sue dedit et concessit se ipsum cum c. l. sol. Tolose et cum omnibus aliis suis rebus deo et domui hospitalis iherusalem sancti remignini tolose et Guilelmo raimundo priori eiusdem domus vel fratres eiusdem domus medius cognoverint bona vide, habeat panem et aquam predicta Guillelma sicut una de sororibus predicte domus semper dum vixerit permaneat ibi predicta cum sorore vel cum alia femina que ibi debet habere et quando prefata Guilelma voluerit accipere habitum religionis; predictus prior et fratres eiusdem domus debent illam recipere per sororem et tenere sicut unam ex aliis sororibus eiusdem domus bona fide.” ADHG, H, Malte, Toulouse, 58, 58; J. Mundy, “Charity and Social Work in Toulouse, 1100-1250,” \textit{Traditio}, 22 (1966) p. 264, n. 199.

\textsuperscript{375} “Praeterea sciendum est quod facto hoc testamento prout superius dictum est viro meo Guillelmo Raimundo de Romanino consentiente et expressim concedente et etiam Domino Deo et mihi castitatem promittente, ego predicta Rixendis trado me ancillam et sororem in perpetuum Hospitali Iherosolimitano et per ipsum fratribus et sororibur presentibus et futuris in manu scilicet Guillelmi Raimundi, tunc temporis eiusdem domus magister, et fratris Pellegrini.” \textit{Cartulaire de Trinquetaille}, ed. P.-A. Amargier (Gap, 1972), no. 71.
everything she owned to the Hospitallers there. The commander of Trinquetaille later confirmed that she was a sister of the Hospital of Jerusalem and in particular of the Hospital of Saint Thomas [of Trinquetaille]. In Italy, women became sisters in Genoa, where Alassina, for example, decided to join the Hospitallers at Genoa at seventeen and donated her inheritance as her entry gift in 1251. Giovanna Pevere had become a sister at Genoa sometime before 1226. The Hospitallers in England asked for permission to keep dogs at their commandery in Hampton in 1227 in order to protect their sisters there. The Hospitaller community at Siscar, Spain, consisted in 1213 of a commander, three sisters and three brothers. Reportedly, Sant Jaum

376. “offeró omnipotenti Deo et hospitali Iherosolimitano S. Thome et tibi Arnaudo de Campagnolisi...me ipsam et generaliter omnia bona mea mobilia et immobilia et specialiter stare in quo prenominata Agnes habitó... Ibid., no. 210.

377. “...asserbat Arnaudus, preceptor, matrem Ugue esse sororem Hospitalis Ierosolimitani et specialiter Hospitalis S. Thome... Ibid., no. 211. See also no. 212.


379. “Liber Magistri Salmonis Sacri Palatii Notarii, 1222-1226,” ed. Arturo Ferretto, Atti della Società Ligure di Storia Patria 36 (1906) pp. 553-554, no. 1486, Tachella, Donati, p. 62; Marchesani, Ospedali, pp. 132. Tubergina was maintained by the Hospital in Genoa in 1254 and Orta became a member there in 1233, but their associative status is not clear. Marchesani, Ospedali, p.133.


381. J. Miret y Sans, Les Cases de Templers y Hospitalers en Catalunya (Barcelona, 1910), 213. For other 13th century sisters see ACA, arm. 2, carp. 9, nos. 337, 355.
de Illa, also in Catalonia, was as a community with three sisters, namely Maria of Illa (the founder), Beatrice, vice-countess of Fenollet, and Ava, vice-countess of Castellnou in 1236. There were sisters at the Hospitaller commandery at Cervera: Sibilia identified herself as “domna Sibilia de Lorag soror hospitalis Iherosolimitani Cervarie” in a 1248 charter and Elisenda signed a charter in 1252 as “domna Eliscenda de Jorba” among other brothers and sisters of the Hospital at Cervera. From a 1272 document it becomes clear that she was a sister of the Hospital of Jerusalem at Cervera and the mother of Guillem of Jorba, its commander. Furthermore, Oria of Guerra and Maria of Taissonas were sisters at Bargota (Navarre) in 1202.

We know more about the sisters at San Salvador de Isot, which was a commandery for brothers and sisters in Catalonia shortly after 1200. It seems that in the beginning of the thirteenth century a certain sister Agnes was acting as its commander, as she received some holdings in a castle for the house at Isot in 1202 from a certain Ermesenda. Ermesenda also gave herself and was received by “priest Johannes and sister Agnes” in the presence of two brothers and other witness. In 1208, Agnes accepted the church of Santa Maria of Tolust and 100 sol. However, Agnes was never called anything but “sister” and Isot had a commander in 1200 and


again in 1236. The acting commander in 1236 was Ramon of Liri, who acted at least twice in that year with the approval of the brothers and sisters of the house, among them Agnes and Brunisenda. This Agnes may have been the same sister, but not necessarily so. In any case, the Hospitaller house at San Salvador de Isot was explicitly a mixed-sex community in 1236.

San Salvador de Isot was under the leadership of a female commander in 1259, when Geralda of Paracolls, commendatrix, received the property that R. of Castalione sold and donated to the house of the Hospital of San Salvador de Isot “and the brothers and sisters who live there.” In 1261 she was also commendatrix of Graillo, but her main function was commendatrix of Isot. In 1263 the commander of Isot operated with her “consilio et voluntate” as sister (commendatrix is not mentioned) and the approval of sister Brunisenda and of Berenguera of Calders.385

When Agnes accepted the church of Santa Maria of Tolust in 1208, Marquesa of Cervera was one of the witnesses. She may have been the future Marquesa of Guardia, who would later become a sister of the Hospital herself at Cervera and was the founder of Alguaire. Marquesa of Guardia entered the Hospital at Cervera in 1245 and was given the house of Cervera and all that pertained to it by its commander Guillem of Jorba, in order to turn it into a mixed-sex community with

385. ACA, Ordines Militares, San Juan de Jerusalén, arm. 12, no. 44; arm. 11, no. 2150; arm. 2, no. 238; Miret y Sans, Cases, p. 211.
brothers, donats, and six sisters. In 1250, Marquesa was commendatrix of Cervera herself and Raimund Romsta was her *locum tenens* preceptor; in 1251 she was also commendatrix of Alguaire.

Several other women acted as commanders in the North of Spain during the thirteenth century, and, in one instance, in the south of France. Guillelma of Faro was the “preceptrix” of Orgeuil near Toulouse in 1248, and Constance, commendatrix of Añon near Saragossa in 1253. In 1240, Eximén of Urrea and his wife Maria Rodríguez gave land to brother Riambaldo, the commander of Spain; Hugh Fullalquer, the castellan of Amposta; (lady) Godo of Foces, sister of the Hospital of Jerusalem and commendatrix of the town of Grisén; and Pere of Alcalá, commander of Catalayud. It is remarkable that Godo is mentioned before Pere, because it seems to indicate that she was of higher social standing. In 1242 Godo, as commendatrix of “Grissenech,” exchanged some property with the consent of the

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386. ACA, Ordines Militares, San Juan de Jerusalén, arm. 1, no. 69. In 1252 Guillem de Jorba’s mother, Elisenda de Jorba would be a sister of Cervera, too. See above, p. 156.

387. "Notum sit cunctis quod nos frater Raimund’ Romsta tenens locum preceptoris in domo hospitales iherolimitani cervarie pro domina Marchesa of Guardia commendatrice eiusdem..." ACA, Ordines Militares, San Juan de Jerusalén, Carp. 15, no. 247 (12 February 1250).


389. “Conoguda causa sia Qe la dona na Guillelma del faro comandairids dorgeuil alauzad e donad afou ab cosel e ab voluntad dels fraires de la maiso i casal qe es ela saluetad dorgueil ete de la carrera comunal qe un vas norg entro ela terra de hospital ede lautra parte tere ab la carrera communal qe va vas ......anno m cc xl viii.” ADHG, H, Malte, (Toulouse), 241 , 17.

castelan of Amposta and the commander of Saragossa. In 1251 she was commendatrix of Grisén, Almunia, Cabañes, and Apertir, when she received Oria of Cabañes, apparently having taken over the position from Urraca Jordán, who was mentioned to be commendatrix of Almunia, Cabañes, and Alpartir in 1246 and in 1251. In 1260 Godo was mentioned for the last time as commendatrix of Grisén, Almunia, and Cabañes. By that time she had served the Hospital as commendatrix for at least twenty years.

In short, between 1177 and 1189, and again between 1240 and 1261, seven women were in commander position over eleven houses or cells in a relatively limited area in Northern Spain. Except for Constance, these women commanded more than one commandery -- some small; others, like Cervera, quite substantial. The reason for the combined commanderies was probably the same as the reason why women commanded them; the Hospital had trouble with recruitment in Spain in the thirteenth century, as is evidenced by the 1292 regulation that no one was to receive a brother knight or a noble donat without a special license of the master anywhere except for Spain or the Levant, namely where the conflict with the

391. Ibid., p. 220-1; ANH, Ordines Militares, San Juan de Jerusalén, Almunia, carp. 625, no. 15; Cartulaire général des Hospitaliers, no. 2145 (summary, no text).

Saracens is ongoing (*assiduatur*); and there they could have as many brothers as are deemed necessary.\(^{393}\)

**From Mixed-sex Community to Houses for Sisters**

The new foundations for Hospitaller sisters in the thirteenth century came about in a variety of ways: A new female house was founded in Aconbury, England, and an existing female house was donated to the hospitalers in Penne, Italy. But the two most successful houses for female Hospitallers from the thirteenth century found their origin in mixed-sex communities. These were Alguaire, just north of Lérida in Catalonia (not too far from Sigena) and Beaulieu, roughly east of Rocamadour in Quercy, France. Alguaire established its character when a female Hospitaller commander turned it into a house for women; Beaulieu was a mixed-sex hospital that became a house for female religious.

Unlike Sigena or Buckland, Alguaire was not a royal foundation. Instead, the house was established by the Hospital itself, showing the interest of the Hospital in accommodating women.\(^{394}\) The basis of its foundations were the town and castle of Alguaire, which had been in possession of the Hospital since 1186 when King Alfonso II of Aragon exchanged them for some other possessions.\(^{395}\) The castle was strategically placed on the isolated top of a small plateau and protected by steep

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slopes on three sides, with wide views over its surroundings. The site was isolated and remote [Fig. 8].

Figure 8: Remains of the Hospitaller monastery at Alguaire, Spain.

394. On Alguaire in the thirteenth century see: Primary sources: ACA, Ordines Militares, Arm. 29; ACA, Ordines Militares, carp. 152 (very little evidence on the sisters); and a miscellaneous charter in the Biblioteca de Catalunya, Arch. 1715, caja 2 (1286). Printed sources (important because many of the original documents seem to have been lost): Diplomatari d’Alguaire i del seu Monestir Santjoanista, de 1076 a 1244, ed. Jesús Alto i Perucho (Barcelona, 1999); Cartulaire général des Hospitaliers, nos. 2528, 3015, 3199, 3243, 4785. For analysis see Miret y Sans, Cases, pp. 9-10, 218-219; Zaragoza Pascual, Catàleg, p. 19; Jesús Alto i Perucho, “Marquesa de la Guàrdia, fundadora, comandadora i benefactora del monastir femení de la Mare de Déu d’Alguaire de L’ordre de Sant Joan de Jerusalem,” Llerda “Humanitat,” 50 (1992-1993), pp. 51-4; J. Miret y Sans, Notícia historica del monastir d’Alguayre (Barcelona, 1899); Joseph Lladonosa i Pujol, Història de la vila d’Alguaire i el seu monastir Santjoanista (Alguaire, 1981).

395. Cartulaire Général des Hospitaliers, no. 820.
The foundation of the community, however, began in Cervera at the initiative of Marquesa of Guardia. Marquesa was the daughter of Ramon of Cervera and Countess Miracle of Urgel and married to Guillem of Guardia, son of Pere of Alenton and Estefania in 1223. They had two daughters, Mateva and Gueralda, for whom Guillem made arrangements in his testament in 1234. Because there was no male heir, Mateva would be her father’s legal heir unless a son was born. Marquesa would keep her dowry, which consisted of the towns and castles of Guardialata and Pasenant.

Guillem died sometime before 17 August, 1245, the day when Marquesa associated herself with the Hospitallers. Although her husband and her brother chose to be buried with the Cistercian monks at Poblet, the Cervera and Guardia families both had a history of supporting the Hospitallers in Cervera. Marquesa received the commandery of Cervera at this occasion in order to set up a house for brothers, donats, and sisters, thereby turning the male commandery into a mixed-

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397. Ibid.


399. Ibid., no. 306.

400. Ibid., nos. 244, 260, 261, 273; Arnau of Guardia was a Hospitaller brother at Cervaria. Diplomatari d’Alguaire, nos. 233, 246, 256, 258, 322. Doña Amasalt became sister at Cervera in 1172. Her sons were Guillem of Guardia’s nephews. Miret i Sans, Cases, p. 213. Diplomatari d’Alguaire, no. 306. For burial at Poblet Ibid., no. 306 and 271.
sex community with six sisters and a female commander. Alternatively, she could request to move the community elsewhere. The envisioned house differed from priories for sisters such as Sigena or Buckland in the sense that the sisters did not elect a prioress; the Hospital appointed a commendatrix and replaced deceased sisters. The commanders of Cervera and Alguaire were both among the witnesses.

The house at Cervera counted seven sisters in 1248: Marquesa, her youngest daughter Gueralda, Ermesenda of Castellnou, Marquesa of Rajadell, Ermesenda of Odena, Ermesenda of Ofegat, and Elisenda of Alentorn, and allowed the general chapter in Spain to admit one more. They were, however, not content to stay at Cervera and in 1250 petitioned the general chapter in Huesca for the foundation of a new religious house for women there. Fernandez Rodríguez, commander in Spain, and Pere of Alcalá, castellan of Amposta, and the whole general chapter granted Marquesa la Guardia their commandery at Alguaire in order to establish a new

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402. Ibid.

403. Elisenda was related to Marquesa’s father-in-law, Pere of Alenton.

404. Diplomentari d’Alguaire, p. 305. Llobet and Portella suggests that the extra sister was Elisenda of Jorba, who attended the general chapter meeting in Huesca in 1250. Miret y Sans, however, mentions that Sibilia of Llorac was already sister at Cervera by October 1248. Miret y Sans, Cases, p. 215. ACA, Ordines Militares, carp. 13, no. 138.
The donation was incredibly generous and included the house and commandery of Cervera, with its castles of Zamenla and Llorac, as well as the town, castle, and commandery of Alguaire, with its towns and castles of Gaportella and Ratera. These came with knights, castellans, and men, cultivated lands and wilderness, houses, vineyards, gardens, mills, aqueducts or whatever else pertained to them.

Fernandez Rodríguez and Pere of Alcalá declared that they acted out of pious devotion. They had contemplated “with devout heart to build and establish a holy house as a work of mercy, a house in which those who are coming would be strong enough to weaken the contagious deceits of the world, to obtain forgiveness of their sins, and to possess the crown of the heavenly kingdom.” This was done for the honor of God Almighty, the Blessed Virgin Mary, and Saint John, and all the saints “wanting...to be patrons and participants, so that the brothers and sisters of our Hospital may be stronger and can serve God more devoutly.” The foundation was portrayed as a charitable act bringing spiritual benefits.


407. "...notum sit...quod nos frater Ferrandus Roderico, domorum Hospitalis Jeroslinitani in quinque regnis Hispanie commendator, et frater Petus de Alcala[no], humilis Emposte castellanus, atendentes et considerantes devoto corde unum ex operibus misericordie domum sanctam edificare et constituere, in quam venientes hujus mundi falacis contagia valeant diluere, et suorum peccaminum veniam obtinere, et celestis regni coronam possidere, ad honorem Dei omnipotentis et beatissime virginis Marie ac beati Johannis et
In regard to more practical matters, the foundation charter aimed at a balance of power between the prioress and the castellan, a balance that granted the prioress far more independence than that of an ordinary commander. It is notable, however, and indicative of the change in the character of the foundation, that the head of this house was a prioress, not a commandatrix, and that the house was regarded to be a monasterium, not a preceptorium: both imply that instead of a commandery, this was to be a house in which professed women lived the religious life of Augustinian canonesses.408

The conditions were as follows: Marquesa and Gueralda were to construct a monastery for the “ladies” (“domine” is the term commonly used in Spain when referring to Hospitaller sisters) of the Hospital near the castle of Alguaire, which would be under the authority of the castellan of Amposta, and the prioress and her convent were to observe the rule and regulations of the Hospital. If the prioress transgressed, the castellan could correct her. As at Sigena, the prioress was chosen by the convent and presented to the castellan, who needed to affirm the election, and he was to interfere only in case of a serious electoral dispute. Other officials

408. “In primis siquidem statuentes ut ordo canonicus, qui, secundum Deum et beati Augustini regulam, in eodem monasterio institutus esse dignoscitur, perpetuis ibidem temporibus inviolabiliter observetur.” *Cartulaire général des Hospitaliers*, no. 3015. The rule of Alguaire, preserved in a fifteenth-century copy in the Biblioteca de Catalunya (Ms. 94), does not contain the detailed regulations of Sigena nor does it give any indication that the sisters at Alguaire used Sigena’s customs.
such as the sacristan or cellaress could be appointed or dismissed without the castellan’s interference. New brothers or sisters needed the approval of the castellan before they could be received, but the castellan did not have the right (in contrast to commanderies) to place a brother or sister in the monastery without the consent of the prioress. The castellan was required to place a commander in the said monastery, if the prioress were to ask for him, or brothers or sisters, but the number of sisters could not exceed twenty without the castellan’s approval. If the castellan so desired, the prioress was to come to the general chapter. The sisters of Alguaire were relieved of any payments to the castellan for the first eight years of their existence. They could not, however, sell or otherwise alienate any of their grant without the castellan’s approval. Finally, the castellan was to defend the brothers and sisters and to take care of them in times of need.409

The new monastery had been built by c. 1260 and Pope Urban IV approved of the new foundation in 1262.410 Gueralda was prioress by 1266, and two years later her retired mother died leaving a well-endowed convent.411 But not all was well. The Hospitallers and the sisters at Alguaire entered into a heated dispute about money in 1267. At the foundation of Alguaire in 1250, the commander of Spain and the other brothers had promised the sisters maintenance in times of need and had acquitted the sisters at Alguaire from all payments to the Hospital (via the castellan

409. Cartulaire général des Hospitaliers, no. 2528.

410. Ibid., no. 3015.

of Amposta) for a period of eight years. Thereafter, however, it expected one tenth of all proceeds, except for the fruits from the garden, gains from the forest, or food coming from animals. Seventeen years later the brothers complained that they could not remove the prioress or other elected officials from Alguaire and that they had the obligation to provide for Alguaire in times of need, but they were not receiving the income from Alguaire that they had been used to, and that Alguaire had become an enormous financial burden. The pope charged the bishop of Saragossa, the prior of Teruel, and the archdeacon of Teruel to intervene.\footnote{Quo circa discrecioni vestre per apostolica scripta mandamus quatinus, vocatis qui fuerint evocandi, et auditis hinc inde Hospitale predictum ex collacione ipsa enormiter esse lesum, eo ac predictis magistro et ffratribus (sic) adversus collacionem eandem, sicut justum fuerit, integrum restitutis audiatibus causam, et, appelatione remota, fine debito decidatis, ffacientes decreveritis per censuram ecclesiasticam firmiter observari." Cartulaire général des Hospitaliers, no. 3243.} The details of the solution have been lost in time, but the outcome is clear: Although the Hospitallers had lost their initial enthusiasm, the sisters remained.

**Beaulieu**

In the case of the foundation of Beaulieu in Quercy a married couple donated an independent hospital to the Hospital of Saint John; this was later converted into a house of female Hospitallers and became the largest female Hospitaller house in France, later moving to Toulouse to survive there until the French Revolution.\footnote{A seventeenth-century cartulary is preserved in Paris: (BN), fonds Doat Ms. 123. Most important documents are printed in Delaville Le Roux’s Cartulaire Général des Hospitaliers. The best article on the foundation of Beaulieu is Albe, "Religieuses Hospitalieres," pp. 180-220.}
The long foundational history began in 1236 when Guibert, who was nobleman, knight, and lord of Thémines, and his wife Aigline, who came from the more prestigious family of Castelnau, decided to found a hospital. It was to be a house of charity, a hospital for the poor, the pilgrims and other destitute on the side of the road from Figeac to Rocamadour between the castles of Thémines and Gramat in a region now known as the Midi-Pyrénées. Rolling hills as well as steep gorges with small rivers below characterize the landscape and the cliffs and ridges still limit the number of roads that connect the individual villages. The road from Figeac to Rocamadour, however, is relatively straight and level and was already in the thirteenth century a public road for the pilgrims visiting the shrine of Saint Amadour. The bishop of Cahors, Pons of Antejac, welcomed the foundation and authorized its construction in his diocese. The hospital was meant to take care of the physical and spiritual needs of its visitors, and for that reason a chapel was built, for which his authorization was necessary.


415. BN, fonds Doat Ms. 123, fol. 193v.

416. BN, Doat Ms. 123, fols. 193v, 200.

417. Ibid., fol. 193v.

Figure 9: Templars and Hospitallers in Quercy
The foundation appears to have been a success because within a few years the original foundation was no longer sufficient to support its charitable works. In 1245 the new bishop of Cahors, Géraud V of Barasc, became involved. In a charter the bishop first recalled how Guibert of Thémines had constructed an hospital with a chapel for the honor of God, his soul, and the soul of his forefathers by license of bishop Pons and had “endowed it competently enough with his goods according to his ability” out of great devotion and for the love of God. Because, the bishop went on, he valued the hospital’s care for the poor and the pilgrims and other charitable works, and because he wanted to avoid a disturbance of this work by a lack of income (again) in the future, he had decided to grant the hospital the church of Issendolus, in which parish the hospital was located. The bishop carefully stipulated the relationship between the church, the hospital, and the episcopacy. The income of the church was to go to the hospital and had to be spent according to the disposition of Guibert -- or his wife if she survived him -- and finally the commander of the hospital. An unspecified part of the income, however, was to be reserved for a chaplain. In case of a vacancy, Guibert, or his wife in case she survived him, and finally again the commander of the hospital with the consent of the brothers and sisters of the said hospital would present a candidate to the bishop. If he were honorable, the bishop would establish him in office. The church was set

419. BN, Doat Ms. 123, fol. 193v.
free from most burdens including episcopal visitation, but not from two yearly
taxations: the *cathedraticum* and the *sinodaticum*.\(^4^2^0\)

The endowment of the hospital remained a concern for Guibert and in order
to avoid any disagreement or uncertainty regarding the hospital’s property he
issued another charter in 1253, this time with very specific information regarding its
holdings. The signing of the charter took place in the hospital itself. Guibert and
Aigline took an oath with their hands on the gospels and swore that they and their
successors would praise and approve the donation in perpetuity, that they ratified it,
supported it, would protect it, and would never act against its interests. Guests of
honour were Géraud Malamort, seneschal of “the most illustrious lord the king of
France,”\(^4^2^1\) and Bartholomew, bishop of Cahors. The latter two attached their seals to
the charter (now missing) and from the bishop’s approval we may infer that he
considered the donation sufficient to support the hospital.\(^4^2^2\)

Guibert’s donation gives the impression of a very compact, easy to manage
collection of property. According to the charter of 1253 the foundation was
dispersed over six neighboring parishes, namely those of Albiac, Aynac, Bio,
Issendolus, Rueyres, and Thémines, and consisted of property as well as rights of
several manors, three farms, two dove-cots, meadows, forest, a mill, and a plot of

\(^{4^2^0}\) Ibid., fols. 193-195.

\(^{4^2^1}\) Ibid., fol. 198v.

\(^{4^2^2}\) Ibid., fols. 196-199.
land in the village of Thémines for the construction of a house or storage room.\textsuperscript{423}
The reason for its compactness was that the original holdings of Guibert (given to him by the barons of Castelnau) had not been widely dispersed. Furthermore, in at least one case Guibert seem to have obtained property for this purpose. He acquired the lands and rights of a farm located in the parish of Issendolus from the inheritors of a certain Vesiani Boufat, thereby trying to ensure his religious foundation of a unified estate.\textsuperscript{424} Douce, the daughter of Guibert and Aigline, had made a similar purchase for the hospital three years earlier.\textsuperscript{425}

Guibert’s twenty years of involvement with his hospital did not end here. In 1259 he and Aigline, his wife, made the important decision to grant their foundation to the Hospital of Saint John of Jerusalem. They made an irrevocable donation to “God, the Blessed Mary, the Hospital of the Hospital of Saint John of Jerusalem, and the poor and the brothers of the said Hospital, and to brother Petro Beraldi, commander of Cahors,” in their name.\textsuperscript{426} The two parties had reached a mutually satisfactory agreement and the commander accepted the donation in the name of the Hospital of Saint John with a special mandate from Géraud of Barras, the grand-prior of Saint-Gilles under whose authority the hospital would be. The act was drawn up by a notary of Figeac and signed by the abbot of Figeac, several knights,

\textsuperscript{423} Ibid., fol. 197v.
\textsuperscript{424} Ibid., fol. 197.
\textsuperscript{425} Ibid., fol. 190-191v.
\textsuperscript{426} Ibid., fol. 200v.
some burghers, some brothers, and Guillaume and Barascon of Thémines, sons of
Guibert and Aigline. The latter assured the Hospital that subsequent generations
would not claim the possessions of the Thémines. The hospital, still known by its
name Peché Villauges, was subjected to the same visitation, correction, and
obedience as the other houses of the Hospital. Furthermore, being a house of the
Hospital of Saint John, it was to pay responsions, that is a yearly contribution to the
Hospital for “the subsidy of the Holy Land” of one mark sterling a year. Finally,
the Hospital was very careful to avoid the appropriation of any former debt,
assuming no responsibility whatsoever. Guibert and Aigline, on their part, seem to
have been especially concerned that the hospitality offered by the house would
continue.

Thus from 1259 on, the hospital at Peché Villauges functioned as a house of
the Hospital of Saint John. Two significant changes took place. First, the name Peché
Villauges was replaced by a proper French name “Beaulieu” and is henceforth
named Bellus Locus in the records. The second change concerns the brothers and
sisters of the house. In 1253 the head of the hospital was a commander and he ruled
over brothers and sisters. In 1259 the charter still mentions brothers and sisters. By
the end of the century, however, the person in charge was a prioress, and the
brothers have disappeared.

427. Ibid., fol. 201v.
428. Ibid., fols. 200-203.
There seem to have been several advantages to the hospital in being donated to the Hospital of Saint John. First, as a house of the Hospital of Saint John the hospital would benefit from the exempt status of the order in the sense that it would not have to pay any tithes or other dues to the bishop and therefore would have more resources for charitable works. Even though the house had to pay some money to the Hospital instead, the financial advantages seem to have been attractive for the Thémines. We have seen earlier how the hospital struggled, given its slim resources. The importance of this exemption is attested by the presence of a copy of Pope Lucius III’s generic confirmation of the exempt status of the Hospital of Saint John in the hospital’s cartulary, a copy was inspected and judged valid by Gualhard, the abbot of the monastery in Figeac in 1265, six years after Beaulieu became a Hospitaller house and likely in response to a questioning of this privilege.429

Another advantage of being part of an order rather than being an independent house was an increased chance of longevity. Many individual houses, hospitals as well as small monastic houses, ceased to exist within a few generations, thereby jeopardizing the spiritual advantages to its founder, namely through the discontinuation of the prayers benefiting the founder’s soul. The individual house had a much better chance of survival with the resources of a large religious order behind it. Furthermore, a religious order, like the Hospital of Saint John, also gave it

increased prestige, encouraging recruitment and thereby again increasing the chance of survival. Again economic viability was essential for the religious foundation.

The Hospital of Saint John, too, was concerned with the economic viability of the hospital. It is clear from the charter that it tried to make sure that the donation would be an asset rather than a financial trap. The house had to be financially self-sufficient and to be able to provide for the inmates, to support its charitable works, and to contribute to the central government of the Hospital. The donors were responsible for any hidden debts. They received some income from the house, but after their death no heirs could make any claims on the property. These demands are not extreme in themselves, but the long clauses in this donation charter indicate the Hospital’s special concern.

Only in 1298 did Beaulieu get a rule. William of Villaret, master of the Hospital, recalled how Guibert and Aigline had founded the house, became Hospitallers, and given it to the order, and that the prioress and sisters were to be received by the prior of Saint-Gilles, who also had the right and obligation of visitation and reformation of the house. The regulations were as follows: When the prioress died, the sisters had forty days to elect a new prioress and present her to the prior of Saint-Gilles, who was to confirm the new prioress. The number of sisters was set at a maximum of thirty-nine, and not even the prioress was allowed to exceed that number without the special license of the prior of Saint-Gilles, in order

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to avoid “overpopulation.” New sisters were admitted with general consent of the other professed sisters, but brothers were received by the commander of Cahors. He confirmed the houses of Martel, Barbaras, Fontaynis, and Saint Lebola to Beaulieu, and reminded them of their obligation to pay twenty-one pounds annually at the general chapter in Saint-Gilles. Aigline the prioress, Fina Bonafossa the sacristan, Gialiana Veteris Campis the cellaress, and the other sisters, accepted the obedience, devotion, subjection, correction, reformation, and visitation of Saint-Gilles. The act was made up in the Hospitaller house of Tronquière, in the diocese of Cahors, and afterwards ratified by the sisters in their new chapter house.

After Beaulieu, the Thémines family remained involved with the Hospital of Saint John and founded a second female Hospitaller house in its proximity. In 1287 William of Villaret, prior of Saint-Gilles and later master of the Hospital, received Guibert of Thémines, squire and most likely the grandson of the founder Guibert, as a confrater for his pledged loyalty. In exchange the prior promised him burial in the cemetery of the Hospital and all the spiritual benefits of “the masses, hours and prayers of the whole Hospital East and West.”

Guibert of Thémines of the Hospital and Guibert of Thémines, squire, donated the castle of Thémines and other possessions to the Hospitallers on 14 August 1300. Guibert’s uncle, Barascon of Thémines, also became involved with the Hospitallers. He decided to establish a...

431. BN, Doat Ms. 123, fols. 211-21.

432. BN, Doat Ms. 123, fol. 241; Cartulaire général des Hospitaliers, no. 4511 (summary).
separate foundation with his own lands at Celle and received permission from the king to do this in 1295. It does not seem, however, that this foundation ever materialized and in 1297 Barrascon made an arrangement with the order in which he exchanged property and received Les Fieux in order to establish there or at Celle a house for twelve Hospitaller sisters that would also have a resident priest (Hospitaller) for the celebration of Mass. The sisters could elect their prioress, were subjected to visitation by the prior of Saint-Gilles, and responsible for half a silver mark to be paid by the prioress at the yearly chapter meeting in Toulouse “for the poor overseas.” Jourdaine of Villaret, William of Villaret’s sister, became Les Fieux’s first prioress.

The arrangements made between Barrascon and the Hospitallers stipulated that Barrascon was responsible for the maintenance of his religious foundations but that he would arrange for it to be annexed to Beaulieu in his last will and testament. In consequence, Les Fieux became part of a hierarchy that characterized the female Hospitaller houses in France in the fourteenth century. In 1308 Fulk of Villaret,


434. “...et sororibus ibidem instituendis et collocandis viderit expedire, vel in loco dels Fius, si sibi magis placuerit antedicto. In quo quidem loco ponantur et instituantur per nos magistrum et nobilem supra dictos duoadecim sorores residentes, et non plures, deferentes nostri ordinis habitum regularem...” Cartulaire général des Hospitaliers, no. 4375.

435. BN, Doat Ms. 123, fols. 216-223v, and in particular fol. 247. See Mark Dupuy, “Ships, Souls, and the Administration of the Knights of St. John in the Fourteenth Century” PhD Dissertation (Louisiana State University, 2000), on other occasions in which he used his position to promote his family.

436. Cartulaire général des Hospitaliers, no. 4375.
master of the Hospital after his brother William, subjected a house of male and female Hospitallers in Curemont to Jourdaine and her sisters at Les Fieux. The community at Curemont was described as consisting of brothers, sisters, *donati*, and others who made up the monastic “familia.” It was subjected to visitation by the prior of Auvergne, and in return he was responsible for the maintenance of its buildings.\(^{437}\) A fourth house of female Hospitallers in the nearby Martel was the property of Beaulieu in 1298, and became a separate house dependent upon Beaulieu some time thereafter.\(^ {438}\)

### Other Female Hospitaller Houses

Penne was an existing community when it was given to the Hospitallers, but unlike Beaulieu, it consisted of women only.\(^ {439}\) On 10 May 1291 Isabella of Aversa gave the church of Santa Maria Burgonovo in Penne in southern Italy to the Hospitallers, under the condition that she and her sisters, who lived in the church,

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437. “Quod sustentationem in Christo nobis delicte sororis Jordane de Villareto, priorisse ne dominarum eius monasterii, constructionemque operum in eo faciendorum necessario sufficere commode nequent, volentesque quod priorissa predicti monasterii suis et dominarum aliarum necessitatibus opportunis valent providere, domum nostrum de Curamontano subjectam prioratui nostro Arvernie...” *Cartulaire général des Hospitaliers*, no. 4801.

438. Its early development remains obscure. St John’s Gate, London, (England), Ms. k/20/1; *Cartulaire général des Hospitaliers*, no. 4413.

439. According to the staff of the Archivio di Stato di Napoli, the archives of Penne were lost during the Second World War. Only three documents were printed: *Cartulaire général des Hospitaliers* (nos. 3555, 4154, 4508).
would receive the Hospitaller habit and accept the Hospitaller Rule forever “like the other brothers and sisters of the Hospital.” 440 Isabella had the right to choose a prioress among the sisters (to be confirmed by the prior of Capua), and Isabella would be the *adjudatrix* during her life. After her death the sisters could choose a prioress themselves, again a choice to be confirmed by the prior. Penne was responsible for six golden *denarii* yearly (“and no more”) to be paid on the feast day of Saint John the Baptist, a common day for the payment of responsions. 441 New in the regulations of Penne is the detailed arrangement for visitation. The sisters accepted a yearly visitation by the prior of Capua and promised to give hospitality to him and his two or three adjutants for the duration of their visit, which was to take no more than two or three days.

Most of the documents of Penne have disappeared, but one remaining charter shows that a house for female Hospitallers was indeed set up. The original document was lost during World War II, but it was summarized before that time by Delaville Le Roulx: Dominique Marquesi of Penne and Flora his wife gave themselves and their goods to the order represented by Jacoba of Monte, prioress of Penne, and brother Simon of Aquila, chaplain, who received them in the name of Jacobo of Pocapaglia, prior of Capua. The act was drawn up in the church of the

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441. *Cartulaire général des Hospitaliers*, no. 4154.
monastery of Santa Maria de Borgonovo (the church of the sisters) in Penne, next to
the parlatorium, on 15 June 1300.442

There were several other female Hospitaller houses in the thirteenth century
for which no foundational charters remain. A convent of women in Pisa became
Hospitaller sometime before the death of its saint Ubaldesca in 1209.443 The early
documents of Salinas de Añana in Castile, too, have been lost, but a document from
1302 refers to the house as ‘old.’444 For the sisters of Antioch no more than a legend
remained in which they heroically cut off their noses for the protection of their
chastity when the Mamluks came to take that place in 1268.445 And the house of
Hospitaller sisters in Acre is mentioned only once and en passant in 1219 in the
delineation of property that abutted “the Hospitaller house in which Hospitaller
sisters live.”446

442. Ibid., no. 4508.

443. For the latest and best work on Saint Ubaldesca and the monastery in which she lived:
G. Zaccagnini, Ubaldesca: Una santa laica nella Pisa dei secoli XII-XIII (Pisa, 1995). See also
Maria Luisa Ceccarelli Lemut and Gabriella Garzella, “I Gerosolimitani a Pisa e nel territorio
531-53.

444. Saturnino Ruiz de Loizaga, "Documentos para la historia del monasterio de las
religiosas comendoras de San Juan de Acre de Salinas de Añana," Scriptorium Victoriense, 42,

de Boisgelin, L., Ancient and Modern Malta (London, 1805) 2, p. 218. The story cannot be
verified with contemporary sources. See for a similar story: Richard Pococke, A Description
of the East, and Some Other Countries, (London, 1743-45), p. 52; Cf. Jane Tibbetts Schulenburg,

446. Cartulaire général des Hospitaliers, no. 1656.
Also in Acre, the Hospitallers tried to get their hands on the convent of the Saint Lazarus of Bethany in order to turn it into a house of female Hospitallers in 1256, but their attempt was impeded by the patriarch of Jerusalem.\textsuperscript{447} At first, the papacy was in favor of the transfer of the Benedictine nunnery to the Hospital, in order to help nuns cope with the threat of the pagans who already had destroyed much of their property and to help the Hospitallers who desperately needed the income.\textsuperscript{448} The arrangement was such that Benedictine nuns could remain in their convent but were to be replaced by Hospitaller sisters once they had died.\textsuperscript{449}

James Pantaleon, the patriarch of Jerusalem, opposed the arrangement. He was a political enemy of the Hospitallers during the War of Saint Sabas, a war that divided the Christian community in the Latin East from 1256 to 1261; he was eager to maintain his ecclesiastical authority, which was threatened by the transfer of the nunnery to an exempt order, and he knew that the Hospitallers had exaggerated the


\textsuperscript{448}. “Ea propter, vestris devotis postulationibus benivolum pertientes assensum, quia pro ejusdem terre munimine duro anxiosque labores et sumptus subire innumerous vos oportet, ad quos proprie ipsius domus non sufficiunt facultates, nos monasterium S. Lazari de Bethania, ordinis sancti Benedicti, Jerosolimitane diocesis, quod paganica persequutione jam quasi destructum ab inimicis Christiani nominis detineri dicitur occupatum, cum omnibus possessionibus, juribus, libertatibus, immunitatibus et pertinentiis suis, ut ex hoc ad predicte terre presidium suffragium aliquod habeatis, vobis et per vos Hospitali sancti Johannis Jerosolimitani, tenore presentium, ex gratia speciali conferimus...” Cartulaire général des Hospitaliers, no. 2781.

\textsuperscript{449}. Cartulaire général des Hospitaliers, no. 2781. The nuns acknowledged the authority of the Hospital briefly. Ibid., nos. 2925, 2927, 2929.
nuns’ plight. In 1259 James went to Rome with two complaints, one of them being the gift of Saint Lazarus to the Hospitallers, but the pope died before a decision was made. However, James himself was raised to the Holy See and as Urban IV could make his own decision. The gift was revoked.450

Furthermore, the Hospitallers had had a house of female Hospitallers in Aconbury, England, since before 1233, when a conflict arose because the Hospital would not allow the foundation to become independent from the order.451 The founder, Margaret of Lacy, daughter of William of Braose, had received lands at Aconbury (Herefordshire) from King John, possibly as repentance for his ill treatment of the Braose family.452 She decided to build a house for religious women on the site and put it into the hands of the order of Saint John. The Hospitallers bestowed the habit upon several women and a community was formed, despite Henry II's stipulation that only Buckland was to contain the sisters of the order in England. Margaret, however, had not been fully aware of the nature of the order. When she realized that the sisters were not independent but subject to the prior of England, she asked the pope if the sisters could be detached from the Hospitallers.


Her main concern was that her purpose of establishing a religious house would be frustrated since the sisters were “bound to go to other places, and to cross the seas” as part of their hospitaller duties.\textsuperscript{453} The duty overseas is never mentioned anywhere else and seems curious and unlikely, but the Hospitallers did not contest the claim in their reply. Margaret suggested that the community become the independent house of canonesses regular that she had intended to found and begged the pope to forgive her initial ignorance.\textsuperscript{454}

Pope Gregory IX gave the sisters permission to become independent from the order in 1237. Concerned with the proximity of the two sexes, the pope had suggested that if brothers were to live close to the sisters, only the elderly women should remain to take care of the poor and the sick in its hospital, and that the others should be placed in other nunneries. The Hospital, however, refused to let them go and four years of litigation followed. The order argued that the sisters had professed and taken up the cross of the Hospitallers, promising never to leave; underlying this was its fear that if the sisters at Aconbury were allowed to leave the order, this


\textsuperscript{454} Calendar of Entries, vol. 1, pp. 134-6, 152-3, 163; Cartulaire général des Hospitaliers, nos. 2047, 2059, 2086, 2138, 2140, 2167; Thompson, Women Religious, p. 50-2; W. Rees, A History of the Order of St John of Jerusalem in Wales and on the Welsh Border, Including an Account of the Templars (Cardiff, 1947), pp. 60-1.
would open the doors for other houses to follow, with the danger of the alienation of property.\footnote{455. *The Hospitallers’ Riwle (Miracula et Regula Hospitalis Sancti Johannis Jerosolimitani)*, ed. K.V. Sinclair (London, 1984), p. 45; *Cartulaire général des Hospitaliers*, nos. 70 (16), 1193 (12), 2213 (9); Riley-Smith, *Knights*, p. 346.}

In the meantime, discord existed within the house. The Hospitaller priest who was appointed to hear confessions and minister the sacraments to the sisters was accused of ill conduct. Furthermore, Aconbury had been without a prioress for six years and a sister called Dionisia of Leche and others who favored the Hospitallers disobeyed the sub-prioress. Clearly, not all sisters shared the wishes of their founder. Finally, in 1237, a papal legate was ordered to free the sisters at Aconbury and the case was resolved.\footnote{456. Calendar of Entries, I, p. 163; *Cartulaire général des Hospitaliers*, no. 2167.}

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Evidence from the thirteenth century shows how the Hospitallers continued to receive women, willingly accepted them in male commanderies or in houses for sisters, and litigated when women wanted to leave the order. While the twelfth century witnessed three or four houses specifically for women (Manetin/Prague, Buckland, and Sigena), at least nine more were established in the thirteenth century: Pisa in Italy (before 1209), Acre in the Latin East (before 1219), Aconbury in England (before 1233), Alguaire in Spain (1250), Beaulieu in France (1259), Antioch in the Latin East (before 1268), Penne in Italy (1291), Les Fieux in France (1297), and Salinas...
de Añana in Spain (before 1302). Furthermore, attempts were made to incorporate Saint Lazarus of Bethany in Acre and a chapter of sisters serving the church of Svetec near Prague. The Hospital of Saint John did more than just accept women: Aconbury was founded at the request of the Hospitallers, and when the foundress wanted to withdraw her donation, the Hospitallers litigated. They misrepresented the threat of the Muslims in order to get a nunnery in Acre. And the master’s sister became the first prioress of a female Hospitaller house in France.

The reasons for the Hospital’s support for female members ranged from piety to greed and from care to family politics, but nothing in its attitude towards their sisters betrayed a latent misogyny. The Hospital was disappointed by the financial burden caused by Alquaire, but on the grand scale, the benefit of accepting women into their Hospital outweighed its burden.
CHAPTER VIII
THE HOSPITAL AND ITS FEMALE MEMBERS

According to the Hospitaller rule, brothers were forbidden to have their feet or heads washed by a woman, or to have a woman make their beds. Transgression was punished by *quarantaine*, which included a beating, fasting, and eating on the floor for forty days.\(^{457}\) The *Hospitaller Riwle*, a popular version of the rule, described the presence of woman as a danger to chastity:

\[
\text{Si vus venez [tut] entresheit} \\
\text{Par aventure u femmes eit,} \\
\text{Gardez [bien] vos Chasteté} \\
\text{Ke vus de Deu eez le gré.}
\]

\[
\text{Ne femme aprece vos grabaz,} \\
\text{Tost i mettereit Sathan un laz.}^{458}\]

Yet while this rule discourages close contact with women, women, as we have seen, wanted to become Hospitallers, and the Hospitallers wanted to accept women into their order. The question that remains is “why?” This simple question is difficult to answer, especially with regard to the motivation of the women, because taking the vow was ultimately a personal choice and the available sources hardly


ever give straightforward information on their motivation. What we are left with are likely reasons for women to be attracted to the Hospital. Likewise, we can propose some general motives for the Hospital to accept women into sisterhood, but the exact “benefits and honors” of the reception depended on the individual case.459

While the reception of one or more sisters may have brought advantages to the Hospital, the received women also required special attention (on account of their gender), which, as we saw in the case of Alguaire, could become a burden for the Hospitallers. The second part of this chapter addresses the consequences of receiving women for the Hospital. How did the Hospital accommodate its sisters within its hierarchy? And how did the Hospitallers care for their sisters’ economic and spiritual well-being? We will see that the Hospital did not have one answer to these questions and that consequently the houses varied in their arrangements.

**Why the Hospital Had Female Members**

The first reason for the existence of female Hospitallers is that women wanted to become members of the Hospital. The Hospitallers, like other reformed religious orders, criticized child oblation and emphasized voluntary profession. When children were admitted, they could choose whether to make a profession when they came of age. The orphans in Jerusalem, for instance, who were in the care of the Hospital, had the option of becoming a brother or sister of the Hospital or getting

married,\textsuperscript{460} and sons of noble men in Spain who were left to the Hospital to be educated could make a profession at a later date or not, as they chose. Loppe de San Pedro, for example, arranged for his son to be accepted by the Hospitallers “who will teach him literacy (\textit{literas}) and keep him there until he is twenty years old” -- at which point the son would have the choice of remaining with the order or going out into the secular world.\textsuperscript{461} Juan de Lignag is another example of someone who was brought up by the Hospitallers. He had been accepted into the Hospital in his \textit{infancia} in the Hospital at Zaragoza, decided to stay when he reached the age of consent, and confirmed his profession in 1165. Only at his confirmation did the Hospital receive his property.\textsuperscript{462} Because of the obvious benefits of having willing participants and in accordance with canon law, the Hospital wanted to assure that someone who entered their religion wanted to be a Hospitaller.\textsuperscript{463}

Ironically, the importance of voluntary profession becomes most clear in the exceptional cases in which the principle of voluntary profession was violated. An


\textsuperscript{461} \textit{Encomienda de Zaragoza de la Orden de San Juan de Jerusalén en los Siglos XII y XIII}, ed. M. L. Ledesma Rubio (Zaragoza, 1967), no. 17. The son seems to have been born out of wedlock.


illustrative though late case is that of Clarice, who was a professed sister at Buckland in 1389. In this instance David, a relative of Clarice, accused her former legal guardian Walter of taking Clarice to the sisters of Saint John at Buckland while she was only seven years old, so that he could take her lands. According to David, the sisters supported Walter's cause by threatening Clarice that if she left through the priory's door the devil would take her away. The matter was brought to an ecclesiastical court and the bishop of Bath and Wells replied to the accusation, stating that Clarice had been taken to the prioress at Buckland in 1385 of her own free will, to see if life in the convent would please her, and that she was at that time more than eight years old. He continued that when she was more than twelve years old she had assumed the religious habit according to the manners and customs of the house. He concluded that she was now more than fourteen years old and well contented with the religious life.464

Clarice’s age was important in this case because she needed to be old enough to make an informed decision. For the same reason it was important that the postulant was of a sane mind. Johanna, for example, contested her profession with the argument that she had not been in a state of mind in which she could have been responsible for her choices, and this was a powerful argument because mental

competence was required for a legal religious profession.465 “I say and protest”

Johanna said according to a statement drawn up in the Saint Leonard chapel of the hospital in Genoa in 1233, “that if I have ever said anywhere anything that indicated that it seemed good to me to give myself to the hospital of Saint John or the religion of that hospital, I was out of my mind and very disturbed because my husband was just recently killed. I was deceived, and maliciously and violently made to say those words if I have said that in any way...I do not want to be in the hospital of Saint John or to be held to their religious observance.”466

Johanna explained that she had had the understanding that she had had a chance to first see whether the Hospitaller observance would please her before making her profession, and, since it did not please her, that she was free to go.467

Her first argument, that she was made a sister against her will, would allow her to

465. Logan, Runaway religious, pp. 10, 12.

466. „...Ego Ihoanna filia quondam lafranci piperis dico et protestor quod si aliquando vel alicubi aliqua verba dixi per que pure videre me reddere ad hospitale sancti iohannis vel ad religionem dicti hospitalis extra mentem meam eram posita et ultra modum turbata de eo quod maritus meus noviter et recenter erat interfectus illa dixi vel protuli et decepta et maliciose et quasi violenter actracta fui...nolo esse in hospitale sancti Iohannis vel teneri astricta religione ipsius.” “Liber Magistri Salmonis Sacri Palatii Notarii, 1222-1226,” ed. Arturo Ferretto, Atti della Società Ligure di Storia Patria, 36 (1906), no. 1486; L. Tacchella, I donati nella storia del soverano militare ordine di Malta (Verona, 1986), p. 62; Carlo Marchesani, Ospedali Genovesai nel Medioevo (Genoa, 1981), p. 132.

467. “immo si aliqua verba dixi que ad reddicionem pertinenter semper in mente habui et expressi et protestata fui quod si non placeret mihi dictum hospitale vel religio hospitalis non starem in illo hospitali vel in religione ipsius hospitalis sancti Iohannis. Cum ergo non placeat mihi status talis vel religio talis hospitalis sancti Iohannis nolo illam tenere vel in huius modi esse...” “Liber Magistri,” no. 1486.
leave religion; the second would at least give her the option to be transferred to a
different, probably stricter, observance.468

The Hospitallers, however, were firm when it came to wearing the
Hospitaller habit: once a candidate had put it on, it stayed on, and they were
supported in their stance by the papacy.469 We recall several instances where the
Hospitallers brought suit in order to keep one or more women in the Hospitaller
habit: an elderly woman from Prague in the twelfth century, several sisters from
Aconbury, England, in the thirteenth, and the above-mentioned Clarice in the
fourteenth.470 In the case of Aconbury, the sisters were allowed to go and change
religion. What happened to Johanna, we do not know.

Alan Forey pointed out that the presence of women’s houses in the Hospital
was remarkable because the sisters did not contribute to the order’s defining roles as

468. See Logan, Runaway Religious, pp. 42-65 on legal options for professed men and women
who were discontented with their religious life.

469. J. Riley-Smith, The Knights of St John in Jerusalem and Cyprus, c.1050-1310 (London, 1967),
p. 233; Cartulaire général des Hospitaliers, no. 514 (vol. 4). See also nos. 271, 1318, 1329, 1504,
1538, 1539, 2337, 2665.

470. Prague: Cartulaire général des Hospitaliers, no. 861; Aconbury: Calendar of Entries in the
Papal Registers Relating to Great Britain and Ireland, ed. W. H. Bliss and J. A. Twemlow (14
2047, 2059, 2086, 2138, 2140, 2167. S. Thompson, Women Religious. The Founding of English
of Saint John of Jerusalem in Wales and on the Welsh Border, Including an Account of the Templars
(Cardiff, 1947) pp. 60-1; H. Nicholson, "Margaret de Lacy and the Hospital of St John at
Clarice: Yearbooks of Richard II, ed. G. F. Deiser (London,1914) XII, pp. 71-7, 150-3; E. Power,
Medieval English Nunneries, c.1275 to 1535 (Cambridge, 1922), pp. 36-8.
military and hospitaller order. Indeed, there is little evidence that women contributed to the order’s military activities even though some women in the West acted as commendatrices. Nor do the women seem to have been involved in the crusading effort, although a tenuous link was made in a letter sent by Pope Gregory X in 1274 to the master, the brothers, the prioresses and the sisters of the Hospital of Jerusalem. The Pope granted the Hospitallers the exemption they had asked for, so that the Hospital thereby would have more support to recover the Holy Land from the enemies of the Christian faith. The letter implies a perceived contribution by the sisters, who were included in the address, in the fight against the Muslims, although the nature of this contribution was not specified and any physical contribution was unlikely. The implication is amplified by the fact that while there were also copies addressed only to the master and the brothers, copies of this


472. “Gregorius, etc., dilectis filiis .. magistro et fratribus ac dilectis in Christofiliabu et priorissis et sororibus Hospitalis Jeresolimitani, salutem, etc. Ipsa nos cogis pietas honestis petitionibus vestris exauditionis gratiam non negare, quibus, efficax ex eo patrocinium suffragatur, quod, pro Christiane fidei tutela, cui perpetuum religionis nostre obsequium dedicastis, in favo caritatis intrepide ac prudenter exponitis contra infidelium impetus res et vitam. Sane petitio vestra exhibita continebat quod nos nuper, in generali consilio Lugdunensis, volentes Terre Sancte, que ab inimicis Christiiani nominis detinetur miserabiliter occupata, remedia procurare, per que posset de ipsorum inimicorum manibus liberari, decimam omnium oproventuum ecclesiasticorumproventibus quorundam religiosorum dumtaxat exceptis, duximus deputandum. Quare nobis humiliter supplicastis ut, cum vos ad hoc prinipaliter laboretis, et vos pariter et omnia, que habetis, pro ipsius Terre Sancte defensione ac Christine fidei exponatis, vos eximere a prestatione hujusmodi decimi de benignitate apostolica curaremur. Nos igitur, attendentes discrimina, que pro defensione dicte Terre Sancte continue sustinetis...” Cartulaire général des Hospitaliers, no. 3555.
document have been preserved in many archival collections of female Hospitaller houses.\textsuperscript{473}

It seems, however, that the sisters were more involved with hospitaller care than heretofore has been argued.\textsuperscript{474} The houses for sisters indeed did not manage public hospitals (except, perhaps, for Aconbury).\textsuperscript{475} However, table 1 shows that of the thirty-five commanderies with women, ten had public hospitals and two others may have provided hospital care, too, and we should therefore not dismiss the possibility that sisters or lay associates of hospitaller commanderies were involved in hospital or hospice care.\textsuperscript{476} The table also shows that of the thirty-five commanderies with women, six had female commanders at some time, and none of these houses give an indication of a hospitaller function, except perhaps Cervera. It must be noted, however, that the evidence for a female commander at Cervera came 150 years after the evidence for a possible hospital there, which therefore may have no longer existed by the time of the female commander. To sum up, it seems

\textsuperscript{473} Penne, Prague, Sigena, and Toulouse (formally Beaulieu). The other archives in which copies have been preserved might be worth investigating for further evidence of female Hospitallers: Carlsruhe, Lyons, Malta, Marseille, Munich, and Würzburg. Ibid.

\textsuperscript{474} “…in fact, after 1187 there was never again any clear sign, either in east or west, that fully-professed Hospitaller sisters were active in hospices or hospitals…” A. Luttrell, “A Hospitaller Soror at Rhodes, 1347,” in \textit{Dei gesta per Francos: Etudes sur les croisades dédiées à Jean Richard - Crusade Studies in Honour of Jean Richard}, ed. Benjamin Z. Kedar, Jonathan Riley-Smith and Michel Balard (Aldershot, 2001), p. 135; Forey, "Women in Military Orders,” p. 68.

\textsuperscript{475} Calendar of Entries, 1, p. 163; \textit{Cartulaire général des Hospitaliers}, no. 2167.

\textsuperscript{476} Unfortunately, there is no count of the total of Hospitaller hospitals that would allow us to judge what percentage of these hospitals had female associates.
<table>
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Table 1: The presence of lay associates, sisters, or hospitals in Hospitaller commanderies in the twelfth and thirteenth centuries. This table does not include houses specifically for women. X = evidence for presence, C = commendatrix
that female Hospitallers in houses for women or in houses commanded by women
may not have had a hospital function, but that commanderies with women
sometimes did and it is therefore possible that women in these commanderies were
involved in hospital care in the twelfth and thirteenth centuries.

As has been said, women were involved with care in the Hospital in
Jerusalem. The Hospitaller hospital in Jerusalem was a mixed-sex community with
sisters and brothers, who cared for the sick and the poor. The sisters did not nurse,
but neither did the brothers. While the sisters acted as managers in care of
overseeing the care of the children, the brothers supervised the nurses and doctors
who were paid for their services. 477

In the West, the hospital and church of Saint-Rémézy in Toulouse were given
to the Hospitallers as early as 1114 and continued to function throughout the Middle
Ages.478 The first reference indicating that it housed both brothers and sisters dates
from 1187: Bernard of Saint-Rémy and his wife had given a large farm in Saint-

477. After the loss of Jerusalem a new large Hospitaller hospital was founded in Acre. In
1207 Juliana associated with the Hospital by giving herself to the commander of Acre, but
by 1219 the sisters had their own house, which was not adjacent to the hospital. However,
except for lay women like Infanta Sancha, the daughter of King James I of Aragon (1213-
1276), who went to Acre in order to serve the poor and the sick, there is no evidence that the
sisters were still involved in hospitaler care in Acre. Cartulaire général des Hospitaliers, no.
1251; no. 1656. Don Juan Manuel, Obras Completas, ed. José Manuel Blecua (Madrid, 1982),
pp. 127-128; Nikolas Jaspert, "Heresy and Holiness in a Mediterranean Dynasty. The House
of Barcelona in the Thirteenth and Fourteenth Centuries," in Across the Mediterranean
Frontiers. Trade, Politics and Religion, 650-1450, ed. Dionisius Agius and Ian Netton

478. Cartulaire général des Hospitaliers, no. 35; J. Mundy, "Charity and social work in
Cyprien to the Hospital in 1187 and the prior promised them the habit whenever they wanted and care like “the other brothers and sisters of the hospital.” 479

Furthermore, in 1203 Guillelma was promised the habit and provision as one of the sisters in the future, 480 and in 1214 Bruna was promised to be made sister at her discretion. 481

The Hospitallers were established in Genoa and had built a large new hospital by 1180. 482 The sisters here seem to have had their own community and hospital by 1285, when Giacomina della Volta left 10s. to the sisters of the Hospital of Saint Pré for the distribution among their patients, but it is not clear when the sisters became independent. Unfortunately neither the case of Johanna Pevere, who wanted to leave the Hospital there in 1226, 483 or the case of Orta, who associated with the Hospitallers in Genoa in 1233, 484 provides conclusive evidence. It seems,


480. ADHG, H, Malte, Toulouse, 58, without number; Mundy, “Charity,” p. 264, n. 199.


482. Marchesani, Ospedali, p. 119.


484. Marchesani, Ospedali, pp. 132-33; Tacchella, Donati, pp. 59-60.
however, that sisters were also part of a Hospitaller hospital community in Verona in 1178.485

There is some indication that the Hospitaller hospice or hospital in Sant Valentí in Catalonia had female associates, among them the earlier mentioned Ponceta.486 The house received at least two donations in the last quarter of the twelfth century in gratitude for the service it had provided as hospice, including the donation made by Arsend, who, in her own words, “would surely have died from hunger if it were not for the food and counsel given by the hospital” and some friends and family.487

We have seen that sometimes hospitals with their communities of brothers and sisters came to the Hospital as such—in the Crown of Aragon, for example, where King James I ordered the house and hospital of Boxerols with its brothers, _converse, conversi, donate_, and _donati_ to be subjected to the house of Hospitaller sisters at Sigena in 1227.488 In France, Guibert, lord of Thémines, and his wife Aigline donated their hospital with its brothers and sisters to the Hospitallers in 1259.489

485. Tacchella, _Donati_, p. 59, transcribes Archivo di Stato di Verona, Verona (Italy), SS. Nazzaro e Celso, B. 25, no. 1530.


487. "Per magnum servicium quod recepi hospitalis quod moriebat fame nisi esset hospitale quod meis neptus et proximo mei et amici noluerunt michi dare cibum neque aliquid consilium." Ibid., pp. 121, 123.

488. _Cartulaire général des Hospitalliers_, no. 1857.

489. BN, Doat Ms. 123, fols. 200-203.
The evidence for other hospitals is less conclusive. Archaeological evidence of a Saint Leonard’s chapel in Clanfield suggests that there was a possible hospital there and according to Dugdale’s Monasticon there was a hospital at Carbrooke.\textsuperscript{490} Cervera possibly started as a hospital, because 1111 Berenger Bernard of Sant Domi and his wife Ermesenda made a donation “to the hospitals of Jerusalem and Cervera,” but there is no correlating archaeological evidence.\textsuperscript{491} Finally, there may have been a hospital at Bargota, since Fortun of Subsidia gave his property specifically to the poor sick in that house.\textsuperscript{492}

Above and beyond being a military and a hospitaller order, the Hospital of Saint John was a religious order, for which the presence of religious sisters was a spiritual asset. Historian Fiona Griffiths has shown that in the case of Abelard’s care for the spiritual life of Heloise and her nuns, caring for religious women who were


\textsuperscript{491} ACA, carp. 18, no. 399; Cartulaire général des Hospitaliers, no. 22, Miret y Sans, Cases, p. 13.

\textsuperscript{492} El gran priorato de Navarra de la orden de San Juan de Jerusalén, Siglos XII-XIII: Colección diplomatica, ed. S. A. García Larraqueta (Pamplona, 1957), no. 126.
in need of male support could be thought of as a charitable deed.\textsuperscript{493} Foundation charters of female Hospitaller houses likewise show that the Hospitallers considered their new foundation for women a charitable act. That was stated most plainly in the foundation charter of Alguaire, where Fernandez Rodríguez, commander in Spain, and Pere of Alcalá, castellan of Amposta, called the foundation a work of mercy.\textsuperscript{494}

Moreover, most sisters in female houses followed a life similar to Augustinian canonesses and led a life devoted to the divine service and were therefore a spiritual asset in and of themselves. The rule of Sigena, the only known rule specifically for Hospitaller sisters, prescribed in detail a life devoted to religious contemplation. Silence was obeyed, the day was planned according to the liturgical hours, and all of them were sung. The sacrista prepared the church, the precentrix led the singing, and the prioress led the praying. In addition, certain times of the day were devoted to private reading.\textsuperscript{495} At Buckland, the sisters had their own church, whereas in other houses, a brother-priest would say mass and administer the sacraments. Furthermore, in the fifteenth century the sisters owned a Psalter in Latin which included a calendar, canticles (\textit{Confitebor, Ego dixi, Exultavit, Cantemus domino, Domine audivi, Audite celi, Te Deum, Benedictice omnia, Benedictus, Magnificat, Nunc


\textsuperscript{494} \textit{Cartulaire général des Hospitaliers}, no. 2528.

\textsuperscript{495} \textit{La Regla del Monastir de Santa María Sixena}, ed. A. Duran Gudiol (Saragossa, 1960)
dimittis) and fragments of the office for the dead.\textsuperscript{496} And in Frisia Hospitaller sisters sang and read the liturgical hours.\textsuperscript{497}

The sisters’ prayer added a contemplative dimension to the order and they were valued for this contribution. A life of contemplation had been considered of greater value than an active life ever since Jesus praised Mary over Martha (Lk 10.41-42). The Hospitallers expected that the liturgical labour performed by their sisters would benefit the order as a whole. The Hospital approved of the new religious life proposed for their sisters at Sigena in 1187 because it believed that it was conceived in a ‘fountain overflowing with religious fervour,” which would rub off to the Order and improve its honor.\textsuperscript{498} In 1297 the Master of the Hospital approved a new rule for its sisters at Beaulieu, explaining that “Having taken into consideration the statutes of Beaulieu, where our religion (order) flourishes under the zeal of fatherly care, we extend our good-will to the statutes of the such venerable house of our order, so that the uprightness of devotion will thrive with even more fervour among the prioress and the sisters in Christ of Beaulieu who

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wear the habit and observe the rule of our religion. The perfection of their reverence shall reflect and the promptness of reverence shall serve God and our order.”

In fact, the military orders felt some inferiority because of their involvement in the worldly activity of warfare, and the Hospitallers sought to combat their image of offering an undemanding life by emphasizing their religious demands in, for example, their ceremony for profession and other religious activities. The brothers were supposed to follow a routine according to the liturgical hours, filling at least part of the day with prayer and religious exercises. Among other religious duties, the *usances* or customs of the Hospitallers required that each brother who was not a priest say one hundred and fifty *pater noster* a day. They also fasted or abstained from eating meat on certain days. The brothers, like other religious, had initially a strict dress code that involved wearing a *cappa clausa*, but because this limited the

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499. “dum de statu cuius loci, ubi nostra viget religio, paterne sollicitudinis studio cogitamus, ad statum tamen venerabilis loci nosri ordinis (Beaulieu), tanto libentius considerationem nostram expandimus, quanto ferventius inter dilectas nobis in Christo prior essem et sorores eiusdem loci sub habitu et observantia regule nostrre religionis erga Deum et ordinem nostrum semper viguit devotionis integritas, resplenduit plenitudo reverentie, ac servivit referentie promtitudo.” *Cartulaire général des Hospitaliers*, no. 4413.


502. *Cartulaire général des Hospitaliers*, no. 70.

brothers’ movement, in 1248 Pope Innocent IV allowed it to be replaced with a surcoat when wearing armour.  

The Hospitallers were partially successful in raising their image as a religious order as contemporaries often placed the brothers of the order on a par with Augustinian canons regular. For example, the founder of Buckland seemed to be indifferent as to whether the house was Augustinian or Hospitaller, and four of the Augustinian canons previously residing at Buckland became Hospitallers without any complications, which suggests that there was similarity in their way of life.  

Similarly, Margaret of Lacy claimed that she had mistakenly taken the Hospitaller sisters for Augustinian canonesses when she founded her house at Aconbury. In 1237 Pope Gregory IX allowed these sisters at Aconbury to become Augustinian canonesses. Nevertheless, some differences between the Hospital and Augustinian canons remained: after a certain Augustinian canon, brother B., became a Hospitaller, he asked the pope for permission to return to his former order because, as he claimed, he was disappointed by the Hospitallers’ lack of spiritual rigor. This lack of spiritual rigor of the Hospitaller brothers contrasts with the religious dedication of the majority of sisters.

504. *Cartulaire général des Hospitaliers*, no. 2479.

505. SRO, MS DD/SAS SX133. fols. 1b-2.


Furthermore, some of the Hospitallers’ better known saints were women, and the veneration of these female saints possibly added to the Hospital’s admiration for its sisters’ spiritual contributions. Saint Ubaldesca (1136-1206), whose coming to the Hospital in Pisa, according to her hagiographer, was announced by the angels, was known for her humble charity and for turning water into wine.\footnote{508} Saint Toscana (1280-1343), according to tradition, was a lay and married woman who cared for the sick in the Hospitaller hospital of the Holy Sepulcher in Verona, which was later dedicated to her.\footnote{509} Also Saint Fleur (1300-1347) is still remembered for her tending to the poor and sick, even though her hagiography does not give any indication of her charity. Instead, she was an eccentric mystic whose experiences of hovering during Mass and pregnancy with the Cross upset the day-to-day communal life at Beaulieu.\footnote{510} No matter what their actual past relationship with the order, these women were venerated as sainted Hospitaller sisters and brought the Hospital spiritual merit.

\footnote{508} Gabriele Zaccagnini, \textit{Ubaldesca. Una Santa Laica nella Pisa dei Secoli XII-XIII} (Pisa, 1995) includes three editions of Ubaldesca’s life (pp. 196-245) and a discussion of the manuscripts (pp. 7-17).

\footnote{509} V. Cavalleri, “Considerazioni e Congetture sui Tempi di Santa Toscana,” \textit{Studi Storici Luigi Simeoni}, 24-25 (1974-1975), pp. 5-45

\footnote{510} For an impression of the modern legacy of saint Fleur see http://www.smom-za.org/smom/saints/flora.htm. Pauline l’Hermite-Leclercq, “Fleur de Beaulieu (d.1347), Saint of the Hospital of St John of Jerusalem,” (Aldershot: Forthcoming), discusses the dissemination of the hagiographical accounts. The edition used here is the fifteenth century translation of the Latin original (now lost) preserved in a 1667 copy as BN, Doat, Ms. 123, fols. 295-343.
Military activities, hospital care, and religious contemplation all required financial support and sisters brought income with them. At times donations were modest, but some women were independently wealthy and brought substantial estates with them when entering the Hospital. For example, and as we have seen, when Adelaide became a sister at Trinquetaille, she made a substantial donation of a meadow, the use of ships, and several houses in Arles.\(^{511}\) Countess Constance of Saint-Gilles donated a casal when she committed herself as consoror, and so did Cristiana, the daughter of Roger of Haifa.\(^{512}\) A good indication of what was deemed a necessary donation for entry is the testament of Raymond of Tous, who designated 300 morabatins of his inheritance to be sent to the Hospital with his wife Ermesenda and his daughter Berengaria so that they would be received as sisters.\(^{513}\) The Hospitaller hope for income had also been the main motivation for the Hospitallers’ request for the transfer of Saint Lazarus of Bethany to their order.\(^{514}\) But perhaps little is as telling as the miracle of Ubaldesca, who, at her entry, was not asked to pay an admission fee.\(^{515}\)

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513. ACA, arm. 3, carp. 12, no. 53; carp. 150, no. 297; Miret y Sans, Cases, p. 209.

514. Cartulaire général des Hospitaliers, no. 2781.

The advantages of female association were recognized during a meeting of the general chapter in Acre in 1262. At this meeting, at which the assembly was concerned with the financial situation of the order, the order relaxed its policy regarding the admission of sisters; it allowed the priors to accept new female recruits without special permission of the master of the order, because a local prior was thought “to have a better insight into the advantages of accepting a particular sister or the damage of refusing her.”\textsuperscript{516}

Besides wealth, women could bring influential connections with them through their family relations. Maria Comnena and Countess Constance of Saint-Gilles were female lay associates who were women with power in the East; Marquesa of Guardia, Queen Sancha and Major were sisters in Spain to whom it was equally difficult to say “no.” The local prior also had, of course, a much better insight into the status of the woman involved and therefore any local political gain or loss to be had with her reception or refusal.

The importance of existing family ties with the Hospital as a decisive factor in choice of affiliation was not limited to the Hospital, but was nevertheless crucial. In some cases, such as we have seen at Prague, the family relations could be quite extensive, because the Hospital accepted men and women and allowed them to live together.\textsuperscript{517} Hence mothers could enter with their sons and couples could enter

\textsuperscript{516} Cartulaire général des Hospitaliers, no. 3039.

\textsuperscript{517} Cartulaire général du Hospitaliers, no. 861.
together, although they had to renounce their marriage before they could profess, or else become donats first and wait to profess until widowhood. Family relations may also have been an important factor in the Hospitaller willingness to accept women; for example, family ties probably played a role in commander Guillem of Jorba’s decision to accept his mother into his commandery.518 Furthermore, it cannot have been coincidence that master William of Villaret’s sister became the prioress of the newly established house for female Hospitallers at Les Fieux.519

Status and family connection could have been a motivator for the women, too. In other cases women chose to join female members of their family who were already associated with the Hospitallers. Alfonso II’s provision for his daughter Major comes to mind, one that allowed her to become a sister at her mother’s Sigena.520 Lists of sisters of Beaulieu in 1298 and 1347 show several sisters sharing the same surname -- Helis Aimerigua (1298, 1347), Flor Aimerigua (1347), and Aiglina Aimerigua (1347); Helis of Castelnau (1298), Guillerma of Castelnau (1298), and Dossa of Castelnau (1347), -- which suggests that they were members of the same families.521


519. BN, Doat Ms. 123, fols. 216-223v, and in particular fol. 247.

520. Documentos de Sigena, no. 22.

521. BN, Doat Ms. 123, fols. 231v, 344v-345.
Some of the sisters’ houses, in particular Sigena, became aristocratic establishments.\textsuperscript{522} Because it had noble members and was well known, the Hospital of Saint John was able to give its sisters a certain status, which most merely local establishments could not. The increasing social hierarchy within the Hospital made the Hospital attractive to knights, who retained their status after admission. Although there were still no sisters-at-arms (the female equivalent for brothers-at-arms) in the period we are concerned with, judged by the names of Hospitaller sisters, the aristocratic air of the Hospital seems to have attracted ladies of high rank.\textsuperscript{523} Furthermore, the Hospital had a good reputation, as its hospitals in Jerusalem and Acre ranked as the finest of its kind in the West, which attracted men and women.

\textbf{Arrangements for Women}

The willingness to accept women led to existence of Hospitaller sisters, which, like the presence of women in any religious order, required the Hospital to make arrangements to accommodate their gender. Hospitaller sisters were accommodated in commanderies or in houses specifically established for them. Unfortunately we know very little about the accommodation of women within

\textsuperscript{522} In the early modern period sixteen quarterings of nobility were required for admission at Beaulieu. This was not the case in the period we are concerned with. E.-F. de Grasset, “Preuves de noblesse des dames religieuses de Beaulieu en Quercy.” \textit{Revue nobiliaire}, nouvelle série 4 (1868), pp. 240-59, 302-32.

\textsuperscript{523} While Sigena attracted royal and highly noble women, Beaulieu’s sisters came from the local nobility. \textit{Documentos de Sigena}, no. 22; \textit{Cartulaire général des Hospitaliers}, no. 4413.
commanderies. Presumably there was some kind of physical separation, especially in the sleeping arrangements, but the written sources are silent on this subject. In the case of Grisén it seems that the aim was to construct a separate building for women to live in, but the outcome of that project is uncertain.\textsuperscript{524}

Women who lived in female houses lived within the confines of their houses, but were not as strictly enclosed as, for example, the Poor Clares, who had embraced a new Benedictine rule that imposed the ancient ideal of enclosure.\textsuperscript{525} The rule, which Pope Innocent IV wholeheartedly approved in 1253, includes the following provision of a grille:

\begin{quote}
At the grille a curtain is to be hung inside which is not to be removed except when the Word of God is being preached, or when a sister is speaking to someone. The grille should also have a wooden door which is well provided with two distinct iron locks, bolts, and bars, so that, especially at night, it can be locked by two keys, one of which the Abbess is to keep and the other the sacristan; it is to be locked always except when the Divine office is being celebrated and for reasons given above.\textsuperscript{526}
\end{quote}

\textsuperscript{524} Cartulaire général des Hospitaliers, no. 523.


How different was the life prescribed to the Hospitaller sisters of Sigena! The rule of Sigena did not espouse the ideal of enclosure nor did it suggest locks or bolts. Sancha herself stressed that the walls she had built around the convent were not meant to enclose the sisters.\textsuperscript{527} When we turn to the situation at Beaulieu or Alguaire, we see that there, too, enclosure was not enforced.\textsuperscript{528} Enclosure, of course, is a matter of degree, and the sisters needed to be in the convent to take care of the liturgy and other matters, and those who did not exercise particular functions needed permission from the prioress before they could go out of the gate. On the whole, however, the sisters lived like Augustinian canonesses and a grille was absent.

Male Hospitallers, like men in other military religious orders, did not take a vow of stability and were therefore free to move around and to be sent to commanderies (or battlegrounds) where they were needed most. Men in mendicant orders did not take this vow either, and this is an important aspect of religious life that set the mendicant and military religious orders apart from monastic orders. The mendicant sisters, however, were subjected to enclosure and not allowed to move. The case of the Hospitaller sisters was more ambiguous and caused some concern among contemporaries. Hospitaller sisters did not take vows of stability, but were

\textsuperscript{527} Documentos de Sigena, no. 10; Moreno, “Hierusalem Religioso,” Archivo Ecclesiastico de Huesca, Huesca (Spain), Sección 7-2, Leg. 148, Lib. 2, Cap. 45.

\textsuperscript{528} The rule of Alguaire did not specify enclosure. From the life of Saint Fleur we learn that she, a professed sister, could leave the convent and receive visitors of either sex. BN, Doat, Ms. 123.
often protected from being moved from their house by their founders. Margaret of Lacy, who had not made this specification, was very concerned that the sisters of her foundation might be moved overseas since this would diminish the spiritual benefits of their prayers for herself, the benefactor. Alfonso II explicitly stated that the sisters of Grisén could not be moved and so did King Henry II of England for the sisters of Buckland. The pope confirmed that the sisters of Alguaire could not be moved. Individual sisters went East at times, but their examples are few, and their travel seems to have been voluntary.

Just because enclosure was not enforced at Sigena, Beaulieu, or Alguaire, we should not assume that none of the houses for Hospitaller women enforced enclosure. The Hospitallers were not set on one particular way of accommodating women. They lacked a standard policy on the accommodation of women (in fact, the only general legislation on women was the decision made in 1262 not to centrally regulate the admission of sisters). Because in most cases the Hospitallers were encouraged by their patrons rather than acting out of ideological drive, the arrangements for women were established on a case-by-case basis depending on the negotiations between the Hospital, the particular donor and the sisters. Consequently, the houses for Hospitaller sisters varied in their organization.

Yet some commonalities among foundations for Hospitaller sisters can be identified, and a comparison among the main foundations is illuminating on this point. The commonalities centre on the three main ties of dependency that were
overlapping and interrelated, namely institutional, economic, and spiritual. First, institutional ties existed because a place was created to fit the houses for Hospitaller sisters into the institutional hierarchy of the Hospitaller order. The communities of sisters were not quite like commanderies; they were under the leadership of a prioress who was chosen by her convent and confirmed by the local prior or the castellan. These prioresses had much greater autonomy than Hospitaller commanders, who were appointed by the prior or castellan.

![Figure 10: The relationship of Sigena and Buckland with the Hospital.]

Details vary. Sigena was ruled by a prioress, who had control (*potestas*) over everything that belonged to the house and who had command (*imperium*) over all brothers, sisters, *confratres*, and everyone else who remained in the house, laypeople as well as clergy. The brothers formed a community within the community as their
commander answered directly to the prioress [Fig. 10]. They had to be received and appointed by the castellan, but he could not move or install anyone without the approval of the prioress and the sisters. In case the house did not function properly, the castellan could intervene in order to correct the incompetence of the sisters at Sigena as long as he did this with compassion. However, if the prioress herself turned out to be incapable of performing her functions well, the master was not allowed to remove her without the consent of the sisters. If the sisters of the house misbehaved, they were subject to correction according to the judgment of the prioress, who was to comply with the general rule of the Hospital. In case the prioress was not sure how to handle the misbehavior, she could call upon the knowledge and advice of the castellan.\textsuperscript{529}

A similar arrangement was made at Alguaire, where new brothers or sisters needed the approval of the castellan, but where the castellan had no right to force a candidate upon the convent. If the prioress or the brothers and sisters requested a commander, the castellan was held to provide one.\textsuperscript{530} In contrast, the prioress of Beaulieu had no say over the brothers, who were received by the commander of Cahors, a town nearby but too far away to serve the brothers of Beaulieu as a

\textsuperscript{529} APH, Armario de Sigena, legajo no. 1.

\textsuperscript{530} Cartulaire général des Hospitaliers, no. 2528.
residence. The sisters of Beaulieu were to be received with the general consent of all sisters, a specification not found for other houses.\footnote{531}{Ibid. no. 4413.}

The arrangements at Buckland were quite different. Here, there were really two houses placed right next to each other: one a house of sisters also known as Minchin Buckland, and the other a commandery of brothers. The commandery functioned more or less like other commanderies in England, except that it had to provide for the steward and priests of the sisters nearby.\footnote{532}{SRO, Ms. DD/SAS SX133, fol. 5v; Forey, "Women in Military Orders," p. 80; The Knights Hospitallers in England, Being the Report of Prior Philip de Thame to the Grandmaster Elyan de Villanova for AD 1338, ed. L. Larking, Câmden Society, 45 (London, 1857), p. 19.} Both houses were answerable to the prior of England at Clerkenwell. Unlike Sigena’s prioress, Buckland’s prioress had no authority over the brothers, and the prior of the order in England appointed a commander with the approval of the master to govern the brothers. The difference between the arrangements at Buckland, where the prioress had no control over the brothers, and those at Sigena, where the prioress was in control, may have been due to the founders themselves: Queen Sancha possibly envisioned herself as a future prioress, while Henry II naturally had no such ambitions himself for Buckland and therefore must have been less inclined than the queen to establish control by women over men.

Second, when founded or donated, women’s houses entered an economic relationship that required the collaboration between the sisters and their brothers.
While the economic ties ideally ensured the women’s material well-being and brought the Hospital economic profit, it could turn into a financial strain on the Hospital or an oppressive dependency for the women. The documentation on the economic relationship between brothers and sisters is exceptionally rich in the case of Buckland, partly because Roger of Vere, prior of England (1265-1272), had to settle several disagreements between the brothers and sisters in the third quarter of the thirteenth century. While the details of this arrangement are perhaps not replicated in any other house, the case of Buckland allows us to get insight in the extent of the economic dependency of the sisters.

The outcome of the disagreements was an arrangement in which the prior allowed the prioress of Buckland to have a steward, a servant to the steward, a secular priest and the use of thirty-six oxen, twelve cows, and one bull independently from the brothers. The steward was a brother who dwelt in the commandery of Buckland, but the commander had little say over the appointment. The steward’s attendant stayed in the commandery, too, and ate with the commander’s servants. Furthermore, the commander also had to provide for the meals of the secular priest employed to say mass for the souls of Fina, the first prioress, and the founders and benefactors of their sisters.533

Minchin Buckland and the commandery at Buckland each had its own economic basis: the brothers received the manor of Halse, which Robert of Arundel

533. SRO, Ms. DD/SAS SX133, fol. 5v.
had donated to the Hospitallers in 1152, while the sisters received at the foundation all those possessions formerly owned by the Augustinian canons who had lived in the house before them. The sisters were responsible for the management of their own estates. The prioress controlled her own bookkeeping and decided on matters such as the sale of flax or wool. The *cosyner* and the cellaress, or two other appointed sisters, were in charge of the distribution of the sisters’ grain. They oversaw the deliveries to the granary and kept the books. The sisters decided on the grain’s use: how much was to be sold or purchased, and how much was to be used for baking, brewing, provender, seed, livery and gruel. The sisters were also responsible for the maintenance and repair of their buildings. The prioress could appoint and, if necessary, dismiss a brother as steward in agreement with the prior. The steward had an attendant and a riding horse and collected rents, aids, and amercements on the sisters’ behalf.

Many of the rents to be collected came from ecclesiastical sources. The original grant for Buckland included three churches with land and appurtenances, and a chapel. The sisters could not manage the churches themselves but farmed them out to vicars in return for a fixed pension. Petherton was the principal church in the original grant. It had two subordinate churches, Chedzoy and Pawlett, and the chapels of Huntworth, Earl’s Newton, King’s Newton, Thurloxton, and Shurton.

534. SRO, Ms. DD/SAS SX133, fols. 70v–70r.

535. SRO, Ms. DD/SAS SX133, fol. 6.

536. SRO, Ms. DD/SAS SX133, fol. 1.
The prior of England was the official patron of these churches and appointed its vicars.  

In 1229 Pope Gregory IX responded to a complaint by the sisters of Buckland that the vicar of Petherton was taking too much of the church’s earnings and thereby not leaving enough for the sisters’ support. Accordingly, an inventory of the income of this vicarage was made, which indicated the large variety of sources of income. It consisted of various small sums, none amounting to more than four marks. The benefits consisted of oblations on Easter Day, the Assumption and Christmas, the burials of the dead, purification, requisitions and confessions, which, together with offerings at Lent, totalled 14m. 60s. The income also included tithes of calves, lambs, wool, young pigs, geese, cheese, garlic and leeks, cider, herbage, foals, milk, pears, flax, wax and honey, meat, and the income from the mills and vicar’s garden which, together with the tithes from Earl’s Newton, came to 15m. 3s. Furthermore, miscellaneous income came from the rental of the chapels, visitation of the sick, masses for the dead and hay, and on the death of a tenant the sisters received the second best animal of the deceased. The total income from churches amounted to £39 2s., of which the sisters were paid a fixed pension of 66s. 8d. or five marks. The sisters’ complaint about this low sum seems to have been in vain: at

537. SRO, Ms. DD/SAS SX133, fol. 4.

538. SRO, Ms. DD/SAS SX133, fols. 4-4b.

539. SRO, Ms. DD/SAS SX133, fol. 4b. One mark is two thirds of a pound or thirteen shillings and four pence.
the end of the century the vicarage was noted as owing them a smaller pension of only four marks.\(^{540}\)

When the sisters’ economic well-being declined, the tensions between the sisters and the brothers in their charge would resurface. In 1338, the brothers complained openly, but there was no effort to suppress the convent of sisters.\(^{541}\) The same happened in Alguaire; the brothers welcomed a foundation of sisters but complained when this foundation became a financial burden. While great care was not always taken to make sure that foundations were sufficiently endowed, as had been the case for Beaulieu, it was common for the Hospital to specify a maximum number of sisters in order to avoid an overburdening of the available resources: Cervera was set at six (plus one),\(^{542}\) Alguaire at twenty,\(^{543}\) Beaulieu at thirty-nine (plus one),\(^{544}\) Les Fieux at twelve,\(^{545}\) Sigena had no limits to the number of sisters it could receive, and there is no reliable count in the thirteenth century, but allegedly

\(^{540}\) SRO, Ms. DD/SAS SX133, fol. 5.


\(^{542}\) ACA, Ordines Militares, San Juan de Jerusalén, arm. 1, no. 69. Transcribed in Miret y Sans, *Cases*, p. 214.

\(^{543}\) *Cartulaires général des Hospitaliers*, 2528.

\(^{544}\) Ibid.

\(^{545}\) Ibid.
in 1351 the convent counted more than thirty sisters.\textsuperscript{546} The priory at Buckland had a reported fifty sisters in 1338.\textsuperscript{547} Therefore, some of these houses were exceptionally large compared to the average commandery. To put these numbers in perspective, the commandery at Buckland had six brothers at that time and was thereby the third largest commandery in England in 1338, after a house for sick and elderly brothers at Chippenham and the headquarters at Clerkenwell.

The Hospital guaranteed its sisters support in case of need. This was envisioned only in case of emergency, and in general the Hospital expected the houses with sisters to pay responsions just as houses with brothers did. The burden of these responsions seems not to have been excessive: Beaulieu was required to contribute twenty-one pounds of Tours,\textsuperscript{548} Les Fieux half a mark,\textsuperscript{549} and Penne six golden \textit{denarii}.\textsuperscript{550} Sigena was free to pay whatever the prioress considered appropriate.\textsuperscript{551} The sisters at Alguaire, however, with some exceptions, were asked

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\textsuperscript{548}. BN, Doat Ms. 123, fol. 201v.

\textsuperscript{549}. \textit{Cartulaires général des Hospitaliers}, no. 4375.

\textsuperscript{550}. Ibid., no. 4154.

\textsuperscript{551}. Ibid., nos. 835, 1272, 1833.
\end{flushleft}
to give up one tenth of their proceeds.\textsuperscript{552} These responsions were often augmented by local collections and the cartulary of Buckland mentions several collections being made at surrounding parishes on different days, with the main collection, not surprisingly, on the feast of Saint John the Baptist.\textsuperscript{553}

Third, the brothers were to some extent responsible for the sisters’ spiritual well-being. The essential role the priest played becomes clear from Sigena’s liturgy: he celebrated mass, he blessed the water and the salt, and he (or a deacon) read from the Gospel.\textsuperscript{554} The commandery at Buckland, as has been mentioned, provided a priest for the sisters.\textsuperscript{555} The foundation charter of Fieux stipulated that the priest serving the sister should be a Hospitaller brother,\textsuperscript{556} and this seems to have been the norm, as Alguaire and Aconbury also had at least one resident Hospitaller priest.\textsuperscript{557} The sisters at Beaulieu, however, seem also to have made use of travelling Franciscan priests for making confessions.\textsuperscript{558}

\begin{itemize}
\item 552.  Ibid., no. 3243.
\item 553.  \textit{Knights Hospitallers in England}, p. 19.
\item 554.  APH, Armario de Sigena, legajo no. 1.
\item 555.  SRO, Ms. DD/SAS SX133, fol. 5v; Forey, "Women in Military Orders," p. 80; \textit{Knights Hospitallers in England}, p. 19.
\item 556.  \textit{Cartulaire général des Hospitaliers}, no. 4375.
\item 557.  \textit{Calendar of Entries}, vol. 1, p. 163; \textit{Cartulaire général des Hospitaliers}, no. 2167.
\item 558.  BN, Doat, Ms. 123, fols. 295-343.
\end{itemize}
While men were necessary as priests and the provision of priests by the Hospital was required or convenient, that link was not the sisters’ main spiritual tie to the Hospital. Their main spiritual tie was reception, performed by a prior, who made a woman a sister for life and thereafter by giving her the Hospitaller garb. Once received, she became part of the Hospitaller familia and shared in its spiritual merits.

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To sum up, we know little about arrangements made for women in commanderies. The evidence for the arrangements of female houses, however, is quite extensive. Because the accommodation of each house was based on its own negotiations, the specifications differ in detail and were described in their foundation charters. From it we learn that the houses commonly were ruled by a prioress who was chosen by her convent, who was dependent on a local prior, but less so than a commander was. Arrangements were made for the economic and spiritual care of the sisters, for it was held that women needed men for their spiritual and economic well-being. The Hospital provided priests, stewards, and other brothers to look out for the sisters, and promised its female houses support in times of need. In return, the female houses promised obedience and a financial contribution. With exceptions, the cooperation worked well, and the presence of female houses within the Hospital was never seriously challenged.
CHAPTER IX
WOMEN IN OTHER MILITARY ORDERS

The Hospital of Saint John is well known as one of the medieval military religious orders. These orders had in common that their members combined a professed religious life with a dedication to warfare. Furthermore, all major military religious orders of the twelfth and thirteenth centuries had female associates. A study of women in these orders, however, brings to light essential differences among them. In general, military orders that followed a Benedictine rule (the Order of the Temple, the Order of Calatrava) seem to have had a different attitude towards women than did orders that followed an Augustinian rule (the Hospital of Saint John, the Order of Santiago). The Teutonic knights, who followed the Templars in their military activities and the Hospitallers in their care for the poor, officially accepted women only “halfway” as consorores or “halb-schwestern,” female associates who did not take full religious vows.\footnote{559 While the sisters of Saint Lazarus are mentioned as early as 1287, their history has not been included here because any further evidence of them until the fourteenth century, when houses for Lazarite sisters were established at Seedorf, Uri, and in Gfenn, Zurich (Switzerland). I suspect, however, that further research would bring to light female association in the thirteenth century. D. Marcombe, \textit{Leper Knights. The Order of St Lazarus of Jerusalem in England, c.1150-1544} (Woodbridge, 2003) pp. 19-20; K. P. Jankrift, \textit{Leprose als Streiter Gottes: Institutionalisierung und Organisation des Ordens vom Heiligen Lazarus zu Jerusalem von seinen Anfängen bis zum Jahre 1350} (Münster, 1996) p. 107; Gautier de Sibert,
will show a discrepancy between the official rhetoric of the orders and their involvement with women.

The Order of the Temple

In 1129, the Templars accepted their rule, in which they declared that they would no longer accept women as sisters. It stated: “The company of women is a dangerous thing, for by it the old devil has derailed many from the straight path to Paradise. From now on, let not ladies be admitted as sisters into the house of the Temple; that is why, very dear brothers, henceforth it is not fitting to follow this custom, so that the flower of chastity will always be maintained among you.”

“defenders of the catholic Church and chastisers of the enemies of Christ,” as the Templars were once called, were cautious with women in general and avoided even a kiss from their mothers, because they believed that it was “a dangerous thing for

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any religious to look too much upon the face of women.” “For this reason,”
continued the rule, “none of you may presume to kiss a woman, be it a widow,
young girl, mother, sister, aunt or any other; and henceforth the Knighthood of Jesus
Christ should avoid at all cost the embraces of women by which men have perished
many times, so that they may remain eternally before the face of God with a pure
conscience and a sure life.”

The attitude of the Templars towards women was no doubt influenced by the
cautious attitude of the Cistercians, whose support they had enjoyed in their first
and difficult formative years. They owed much to Saint Bernard (1090-1153), the
Cistercian abbot of Clairvaux, who had made an eloquent argument for the
acceptance of men who made religious vows of chastity, poverty and obedience, but
who at the same time devoted themselves to physical warfare. Bernard influenced
the new rule of the Templars, and he and Stephen Harding, abbot of Citeaux,

562. “Nos creaons estre perillouse chose a toute religion trop esgarder face de feme. Et por
cel nul de vos presume basier de feme, ne veve, ni pucele, ne mere, ni seror, ne ante, ne nule
autre feme; etadonques la chevalerie de Jhesu Crist doit fuir en totes manieres baisier de
femes, par quoi le homes soloien maintes fois perillier, que il puissent converser et maindre
perpetuelment o pure conscience et o seure vie devant la face de Dieu.” And, “Ut omnium
mulierum fugant oscula. – periculosum esse credimus omni religioni vultum mulierum
nimis attendere, et ideo nec viduam, nec virginem, nec matrem, nec sororem, nec amitam,
nec ullam aliam feminam alquis frater osculari presumat. figiat ergo feminae oscula Christi
milicia, per que solent homines sepius periclitari, ut pura conscientia et secura vita in
conspectu Domini perhenniter valeat conversari.” La Règle du Temple, pp. 69-70, cap. 71. The
English translation can be found in Rule of the Templars, p. 36, cap. 71.


15.
were both present at the ecclesiastical council at which it was presented and approved. 565 Bernard, however, was outspoken against religious women living with men, and the statutes of his order forbade cohabitation with women. 566 There is no direct evidence as to Bernard’s opinion on the possibility of female Templars, but given the Cistercians’ negative attitude toward women at that time, he likely encouraged the Templars to stay clear of them.

Yet, notwithstanding the rhetoric and regulation, the Templars accepted women as “sorores.” 567 As was also the case with the Hospitallers, female association with the Templars was often the result of the association by a married couple. The first of these that I am aware of is that of Peter Bernard and his wife, who gave themselves to the Templars on 18 November 1128, only a few weeks before the new rule was pronounced. 568 Other twelfth-century examples of female Templars are Poncia Raina, who gave herself, her daughter, and everything she owned in


567. Like Hospitaller sorores, a Templar soror was not necessarily a fully professed sister. Interim, Chapter V.

568. They probably associated with the Templars in Douzens, Languedoc, but this is not certain. Cartulaire Général de l’Ordre du Temple, 1119-1150, ed. Marquis d’Albon (Paris, 1913), n. 18, 12. I thank Jochen Schenk for this and several other references to female associates of the Order of the Temple.
Douzens (France) to the Temple in 1160, and the mother of a certain Eudes of Pichanges, who seems to have become a Templar “soror” sometime before 1178. Ramon of Seró, William of Lavansa, and Wilhelma gave an entry gift to the Templars for their mother in 1175. Furthermore, when Peter of Cintruíngo gave his castle to the Templars in 1173, he stipulated that his wife was to retain it after his death unless she remarried or entered the Order of the Temple. Finally, in 1198 or 1199 Rixenda gave her body and soul to the Temple commandery at Pézenas, where she expected to be buried. Her association seems to have been confraternal.

Two local confraternity lists of the Templars in Aragon and Navarre reveal that the number of lay brothers and sisters apparent from the donation charters may...
only be a fraction of the actual number of lay associates. The two lists together show that the Templars recognized at least 520 persons in their confraternity in the period between 1135 and c. 1182 (64 women [12.3%] and 456 men [87.7%]), and 6 more between 1205 and 1219 (1 woman and 5 men). The lists also suggest that many of the ordinary donations in charters may actually have involved a confraternal association, but that the charters are not always explicit about this. Many entries of confraters or consorores in the lists only mention a donation at the end of life, such as a horse or a mantle, and would not have been recognizable as confraternal association had the donation been recorded in individual charters. Some of these female associates actually seem to have made regular vows of chastity, poverty, and obedience, which suggests that they were full sisters. Adelice, for example, promised obedience and poverty when she gave herself to the Temple in 1133 “in the service of God, under the obedience of the master, and without any personal property.” She emphasized her vow of poverty further, saying: “propter quod Dominus meus fuit dignatus esse pauper per me: sicuti ille fuit pauper per me, sic volo esse paupercula per illum.” The wife of Robert Hardels, together with her


576. The Templar confraternity lists are edited by Ubieto Arteta, “Confrades,” pp. 53-84.

577. “ad servicium Deum faciendum subitus obedienciam de ipso magistro qui ibidem est et in antea venturus est, sine ulla proprietate.” Cartulaire général du Temple, no. 68.

husband, also vowed to relinquish their property when they became members of the religious brotherhood in 1172.\textsuperscript{579} In Catalonia, Adaladis of Subirats offered her body and soul in order to live under the obedience and rule of God and the Order of the Temple in 1185.\textsuperscript{580} Finally, the bishop of Salisbury issued a document at the end of the twelfth century, in which he testified that Joanna, wife of the knight Richard of Chaldefelde, had vowed to remain chaste and to subject herself to the rule of the Templars.\textsuperscript{581}

There is also one known case of a female commander of the Templar order, Ermengarda of Oluja. In 1196, Ermengarda and her husband Gombau of Oluja had given themselves and their property to the Templars of Barberá near Tarragona. Two years later she reappeared in the records as “lady Ermengarda of Oluja, sister of the Order of the Temple and at the current time commander of the house of Rourell,”\textsuperscript{582} which was a commandery near Barberá. She was not the only sister at

\begin{itemize}
  \item \textsuperscript{580} “corpus meum deo militaturum et animam meam per oblationem ut hostiam vivam deo placentem sub obediencia et regula domini dei omnipotentis patris et filii et spiritus sancti et domus milicie Templi salomonis suorumque fratruum .” Forey, “Women,” p. 66; ACA, cancillería real, pergaminos de Alfonso I [II], no. 383.
  \item \textsuperscript{582} “domine Ermengardi de Uluya, sorori Milicie Templi et in illo tempore preceptrix domus Rourel.” Tommasi, “Uomini,” Appendix, p. 201.
\end{itemize}
Rourel, because in 1197 the Templars of Rourel (without specification), had accepted a certain Titborda “in sororem religioni.” When Ermengarda received a new brother into her house in 1198, Titborda was mentioned to be one of “the brothers and sisters of the Templar house at Rourel.” Gombau of Oluja, Ermengarda’s earlier mentioned husband, was not named. While this case is exceptional, there is no question that Templar sisters were present in a Templar commandery at this time.

583. “In Chrispti [sic] nomine sit notum cunctis quod ego Titborigis qui fui filia Berengarii de Sancta Columba reddo me ipsam in sororem religioni ad ordinem domus milicie templi et dono et trado in remissiem pecatorum meorum et parentum domino Deo et domui milicie templi et fratri Pons Menescalo Migstro in Provincia et in partibus Ispanie et fratri B. de Clareto et fratri Petro de Acuta et aliis fratribus...dominicaturam et honorem de Casela que patris meis tenuit, sicut affrontat de una parte in termino de Ulivela, de alia in termonio de Regale et de alia part in termino de Olers et de alia in termino de Apiera...in perpetuum per alodium franchum et liberum ad omnes vestras vestrorumque voluntates...Et adhuc ego Titborigis dono in remissionem pecatorum meorum...omnia mea directa ubicumque fuerint tocius honoris mei patris que michi modo pertinent et adhuc debere petinere. Actum est hoc kalendas januarii anno ab incarnacione Domini MCXCVI.”

584. The same document speaks of Ermengarda and the other brothers of the house, obscuring again the presence of a sister by using “brothers” as a term encompassing both sexes.

Although Ermengarda’s status as commander may suggest that she was a fully professed sister, there is no conclusive evidence for the suggestion that fully professed Templar sisters existed in the twelfth century. Full profession would entail making all appropriate vows, and the Templar rule did not permit women to do so, so even though the lives of women such as Ermengarda may have been very similar to that of a full member of the Templar order, they may not have been Templars in a spiritual sense.

While in the twelfth century women could take vows and are sometimes called soror, in the thirteenth century the female associates of the Temple seem to have been lay sisters. After the regulations of the Third and Fourth Lateran Councils (1179 and 1215), confraternity was more regulated than before, but the records still show a disregard for rigid distinctions among the nomenclature of lay association. Provença, for example, gave herself in “conversam et donatam” in 1226, and she promised a yearly contribution. She also expected burial with the Templars, promised not to affiliate with any other order, and to be good and obedient “as a donata and conversa was supposed to be.” Grimald of Sales and his wife Aiglina gave notice in a charter that “both of us, at the same time, have been received... as confratres and donats of the house of the knighthood of the Temple [of La Clau]” in

586. “...quod ego Proenza...dono corpus meum et animam domino deo et venerabili domui Milicie Templi in manu fratri G. de sancto Pastore preceptoris Dertuse (Tortosa) et aliorum fratrum in conversam et donatam in vita et in morte; ita scilicet quod sim bona fidelis atque legalis in omnibus predicte domus ut donata et conversa debet esse. Et bona et firma stipulacionem convenio singulis annis dum vixero dare domino Deo et vobis predicto fratri G...annuatim in festo Pentacostes unam libram cere sine enganno in recognicione mee donationis...” Miret y Sans, Cases, p. 222; ACA, arm. 4, no. 26.
In 1267 the Templar commander of Bras in Provence considered receiving Agnes Chatella “as donat and consoror of the house of the Temple,” and she could expect to share in the “spiritual and temporal possessions” of the Temple as was customary and according to rule for Templar donats and confratres. Other examples of female confraternity include Helvis of Saint-Jean-de-Bonneval, who seems to have wanted to become a Templar sister in Champagne in 1209; Marguerita Castellione, who was a consoror in Burgundy in 1249; Beatrice of Fos, who was received in a house in Provence in 1262; and Sycillia of Soigneio, who was received in Champagne in 1284, together with her two daughters Isabel and Margareta.


591. Durbec, Templiers et Hospitaliers, p. 194.
Notwithstanding the type of their profession, some of these thirteenth-century female Templars had considerable influence in the commandery they had joined. For example, a Templar “donata” named Berengaria of Llorac was mentioned among Templar brothers in a witness list and reportedly gave counsel to the commander of Barberá in Catalonia. In 1221 Maria Boveria, “sorori et donate” of the Templar house at Montpellier, was mentioned before the commander in a sales agreement when Willelma sold some possession to her, the commander Caprispinus, “and all the brothers of the same house,” which suggests that Maria had a prominent position among them. In 1288, a certain Adelise was consoror of the Temple and important as patron when she founded a chapel for the Templars in Ghent, where she lived.

The Templars were accused of treating their sisters poorly during one of the enquiries that led to their dissolution early in the fourteenth century. Violation of chastity was the issue, not the reception of women. One accusation stated that, “the masters who received the brothers and sisters of the Temple made the said sisters promise obedience, chastity, and abnegation of personal property, and the said


masters promised them faith and loyalty, like to their sisters.” The accusation continues, “when the said sisters had entered the order, the said masters deflowered them; and the said masters used force to bend the other sisters, who were adult, and who thought they were entering the order to save their souls, to their wishes, and the said sisters had children; and the said masters made their children brothers of the order.” In the end, the Templars were accused of not only the sexual impropriety that they had feared, but even of rape.

The early fourteenth-century inquest suggests again that the Templars received women who took full religious vows, and although the evidence for fully-professed Templar sisters is not completely conclusive, -- perhaps because the Templars themselves were aware that the reception of women was irregular and did not wish to call attention to their existence -- their past presence is a likely possibility. It is clear, however, that despite the official prohibition against the reception of women, the Templars allowed association by at least eighty-nine


597 Curzon gives another example of female Templars in the fourteenth century. Based on a study by Van Wal (Recherches sur l’Ordre Teutonique (Brussels, 1807), 1, p. 262), he reports that the abbess of Camadules vowed herself to the Templar order in the hands of the prior of Venice when Templars took over her monastery. Règle du Temple, p. 69, n. 70 – 1.
women during the twelfth and thirteenth centuries, some of whom became closely involved with the order.

**The Order of Calatrava**

The Order of Calatrava, like the Order of the Temple, was influenced by the Order of Cîteaux. It began as a militia based in Calatrava and in the service of the Cistercian abbot Raymond of Santa Maria de Fitero in Navarre. In 1147, King Alfonso VII had captured the strategically situated town of Calatrava from the Almohads, who had crossed into Spain from North Africa ten years earlier, but in 1157 they threatened to take it back. The situation was perilous and the Templars, who had held Calatrava since 1147, asked the king to be relieved. As the situation became dire and the king grew more nervous because he could not find noblemen who would take up the task, Diego Vélazquez sought to come to his aid. He had grown up with the king and was trained as a soldier, but had become a monk at Santa Maria de Fitero. Unable as monk to act on his own, Vélazquez urged his abbot Raymond to petition the king, and in January 1158, Alfonso granted Calatrava and all its appurtenances to Raymond and the Cistercian order. Raymond had the full support of the bishop of Toledo in deeds and words, and partly due to the bishop’s
supportive preaching, Raymond was able to gather a large troop, which he moved to Calatrava to set up its defence. As a result, the Muslims did not attack.\textsuperscript{598}

The first men (and women?) at Calatrava were Cistercian monks, \textit{conversi}, and lay associates who had come to its defence.\textsuperscript{599} Little is known about its first years, but it seems that Raymond was abbot of both Fitero and Calatrava until his death in 1161.\textsuperscript{600} The monks and the knights had separated by 1164; by that time Calatrava was ruled by a “master,” a title common for military orders, while an abbot ruled Fitero. The knights, however, wished to continue as part of the Cistercian order and in 1164 sought recognition from the Cistercian general chapter. Abbot Gilbert of Cîteaux, echoing Bernard’s praise of the Templars, congratulated the knights’ conversion from “militia mundi” to “militia Dei,” and received them fully into the Cistercian order. He wrote to Calatrava’s master, Don Garcia: “As for what you have humbly asked, namely, to have a share in the communion of goods of our order, we willingly consent, not as associates, but as real brothers.”\textsuperscript{601}

\textsuperscript{598} The story of the foundation of the Order of Calatrava has been told in detail by J. F. O’Callaghan, “The Affiliation of the Order of Calatrava with the Order of Citeaux,” \textit{Analecta Sacri Ordinis Cisterciensis}, 1, 15, (1959), pp. 177-91.

\textsuperscript{599} O’Callaghan, “Affiliation, 1,” p. 183

\textsuperscript{600} Ibid., 1,” p. 186.

\textsuperscript{601} “Quod autem humiliter postulastis suscipi vos videlicet in comunionem beneficiorum Ordinis nostri, non ut familiares sed ut vere fratres, gratanter annuimus. Quod consequenter vivendi formam prae scribi vosis auctoritate nostra exigitis, nos communi capituli consilio id venerabili fratri abbatii Scalae Dei cum filiis suis vicinis vestris imponendum duximus, qui patriae morem plenius norunt et sudores ac discrimina vestra quo proprius sic liquidius intueri possunt,” \textit{Bullarium Ordinis Militiae de Calatrava}, ed. A. Marin (Madrid, 1759), pp. 3-4; O’Callaghan, “Affiliation, 1,” p. 188.
same chapter meeting, the abbot of Scala Dei was charged with designing a new rule of life for the brothers of Calatrava. In 1187, the brothers of Calatrava sought an even closer affiliation with Cîteaux and in response they were incorporated with the Cistercian daughter-house of Morimond. Thus by the end of the twelfth century, the order of Calatrava was a military order within the Cistercian order that had secular professed brothers who were devoted to physical warfare and clerical professed brothers who were devoted to spiritual warfare. The latter followed the Cistercian rule, the former an adaptation of that rule.

Because of the close connection between the Order of Calatrava and the Cistercian order, we should not be surprised that the first (and only) house for sisters of Calatrava resembled a Cistercian nunnery, observing the Rule of Saint Benedict and the usages of Cîteaux. It started at the request of two wealthy donors, Don García Gutiérrez and his wife, María Suarez. They associated themselves with the Order of Calatrava by promising that if they entered religion, they would enter the Order of Calatrava, and that if one of them should die, the other would become a member. They explicitly wanted to establish a house in which

602. Ibid., 1,” p. 190.


the sisters of Calatrava could live “conventualiter” and serve their order. The master in turn provided the house of San Felices los Barrios in the diocese of Burgos, while the couple provided lands and money for this foundation. Both requested burial in the newly established convent. The master and the chapter gave them their consent and guaranteed that they would protect San Felices los Barrios. Furthermore, the abbot of Morimond would further guarantee the agreement.⁶⁰⁶

The records of the Cistercian general chapter of 1220 show that the house of San Felices was to collect the sisters of Calatrava, hitherto dispersed over several commanderies, into one house, just what the first female Hospitaller houses had been meant to do for Hospitaller sisters.⁶⁰⁷ Furthermore, the general chapter gave Calatrava blanket permission to establish nunneries in general, so that while San Felices turned out to be the only convent of Calatravan sisters, this was not because of regulation. But the chapter also specified that the houses of sisters of Calatrava

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⁶⁰⁷. “Conceditur fratribus de calatrava quod quandocumque gratiam at libertatem in curia romana potuerint impetrare, impetrent et habeant, dummodo non sit contra Ordinis nostri libertatem. Iterum conceditur eis moniales dispersas in unum congregare, et includere in loco competenti et distantii a calatrava per duas aur tres dietas. Quomodo autem idem frateres se debeant habere in abbatiiis Ordinis nostri, sicut ab olim statutum est, ita per omnes abbatias scribatur et teneatur,” *Statuta Capitulorum*, 2, no. 21. According to the *Annales Cistercienses* (4, p. 171), the convent began with a community of an abbess and five nuns.
were to be at a safe distance from Calatravan commanderies, a provision that reflected the attitude of the Cistercians towards their own sisters.\footnote{Ibid.; O’Callaghan, “Affiliation, 2,” p. 43. Cistercians often expressed dislike of their female members but if need be, they preferred them in convents of their own, enclosed and at a safe distance from Cistercian male houses.}

In contrast to Hospitaller sisters, the sisters of Calatrava followed a Cistercian, not Augustinian, rule and their head was an abbess, not a prioress. Like Cistercian nuns, they lived in enclosed convents and devoted themselves to the divine offices. They were to dress like Cistercian nuns but with a scapular of the Order of Calatrava.\footnote{O’Callaghan, “Affiliation, 2,” p. 43, n. 5.} The Calatravan abbess was given the same status as Cistercian abbesses within the Cistercian order in 1245, but she was ordered to adjust to Cistercian customs when she was in the presence of Cistercian abbesses (apparently the customs of the sisters of Calatrava were slightly different from those of female Cistercians).\footnote{“Conceditur abbati Morimundi ut possit facere visitare filias calatraviae per priorem de Calatravia, quoties et quamdiu viderit expedire, abbate etiam aliquo non vocatio; et quando visitat teneat primum locum. Abbatissa Sancti felicis, filia calatraviae, inter abbatissas ordinis honeste tanquam abbatissa recipiatur, et quamdiu inter eas fuerit in victu et alliis se conformet eisdem,” Statuta Capitulorum, 2, p. 317.} She was under the jurisdiction of the master of Calatrava, who was to supply the convent with nuns, receive the abbess, provide \textit{conversi} for the convent’s maintenance, provide priests for the celebration of the divine office, and arrange for a yearly visitation. The abbess could not alienate any property without his consent. Again, the abbot of Morimond was to enforce these arrangements.\footnote{O’Callaghan, “Affiliation, 2,” p. 43.} The sisters of
Calatrava, therefore, were nuns who lived like the monks of Calatrava according to the Cistercian rule of the order and served the order through spiritual warfare in an enclosed, contemplative setting.

The Order of Santiago

Like Calatrava, the Order of Santiago began as a lay confraternity aimed at defending Christian lands against the Muslims; in this case, the confraternity was charged with protecting the castle of Cáceres for King Fernando II of León in 1169. In 1171, the brothers came to an agreement with the archbishop of Compostela, in which they promised to act for him in the defence of his lands under the banner of Saint James (similar to the pope appealing to men fighting for the Holy See under the banner of Saint Peter). Thereafter the brothers were known as the brothers of Santiago, after Santiago or Saint James of Compostela. The archbishop of Compostela became an honorary member of the order of Santiago, while the master of Santiago became a canon of Compostela. In 1173 Pope Alexander III recognized the brotherhood and took it under his protection. Two years later he approved their rule. Considering the order’s connection with the archbishop and the canons, it is not surprising that this rule was Augustinian in essence, a fact that sets Santiago apart from the other, Benedictine-oriented, military religious orders of the Iberian peninsula who were influenced by the Cistercians. The military fraternity of

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Santiago thus became a military religious order with brother knights, brother priests (Augustinian canons), and sisters as members.613

The Order of Santiago was remarkable for another aspect of its rule: members of Santiago were allowed to be married, and the chastity they vowed was conjugal rather than absolute.614 Furthermore, from its beginnings the Order of Santiago expected to have male and female members, and it responded to the organizational challenge of this varied membership by allowing the members of the order the choice of living in community within a convent or of living with their own families in their own homes. Moreover, members who lived in a convent still had the option to leave their convent if they wished to be married.615

Maria Echániz Sans has studied the women in the order of Santiago in detail. Based on a careful analysis of the four editions of the Santiago rule over the period 1175-1260, she argues that the attitude (“la articulación normativa”) of the order towards its female membership changed. At first women were more autonomous in


615. “ab illis mulieribus que viros non habuerint, querantur si maritos velint accipere. Volentibus liceat nubere. Nolentes locabuntur locis aptis et monasteriis que sunt de domo, ubi necessaria eis administrabuntur.” Brother knights had the same option. Echániz Sans, Mujeres, p. 43.
their decision making, while by the middle of the thirteenth century the order emphasized control and protection. In addition, references to celibate sisters who lived outside the order’s convents without being family members of the brothers disappear by the middle of the thirteenth century. In other words, by the middle of the thirteenth century, a female member of Santiago had to be a spouse or closely related blood relative of a brother of the order in order to live outside a Santiago monastery. Echániz Sans conjectures that the reasons for this change in attitude can be found outside the order – a general change in attitude towards female religious – as well as inside it, as it changed from a lay fraternity into a religious order that became richer and more concerned with the control of its property, including that of its female members, but she admits that the evidence is not conclusive.

The period in which Echániz Sans found significantly less information on secular sisters, -- that is, sisters who lived at home rather than in a convent -- coincides, according to her, with a period of increased interest in foundations for women in the first half of the thirteenth century. Indeed, seven houses that housed women were founded in the period from c.1195 to 1268. They were relatively widely spread throughout the peninsula and always removed from the frontier. Some

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616. Ibid., p. 49.

617. Ibid., p. 50.

618. Ibid., p. 56.
were founded specifically for women, but some were mixed-sex communities designed for men and women to live together. To put this in a comparative context: the same period also saw seven houses founded specifically for men, three of which already existed by 1186.620

The houses with women were:

1. Santa Eufemia in Castile (after 1195). King Alfonso VIII of Castile gave Santa Eufemia to the Order of Santiago in 1186 as a house for men. By 1195 the community included both men and women and had a female commander who was subjected to a male prior. It became a house for women, perhaps at the end of the same century.621

2. Santos-o-Velho near Lisbon, Portugal (after 1194). Santos-o-Velho was given to the order by King Sancho I of Portugal, likewise in order to establish a house of brothers, but it became a house of sisters under the guidance of a female commander. In 1271, Pelay Pérez Correa, the master of Santiago who seems to have been instrumental in the foundation of female houses, gave the sisters all the order’s possessions in Lisbon.622

619. Ibid., p. 59.

620. In the same period there were seven houses for men, three of which already existed by 1186. Ibid., p. 56.

621. Ibid., p. 57; Lomax, Orden de Santiago, p. 80.

622. Echániz Sans, Mujeres, p. 57; Lomax, Orden de Santiago, pp. 78, 83.
3. Sant Vincens de Jonqueres near Barcelona, Catalonia (1269?). Sant Vincens de Jonqueres was an existing community of women when it became part of the Order of Santiago. It had been founded as an independent religious house in 1212, but in 1234 Garsenda, countess of Béarn, brought it into the Order of Faith and Peace, a new and minor military order that became affiliated with Santiago. The sisters were most likely directly affiliated with Santiago in 1269.623

4. San Mateo de Ávila in Castile (in 1256). Sant Mateo de Ávila was a hospital with brothers and sisters under a female commander named Dominga Xemeno in 1256. It was still a mixed-sex community thirty years later, but afterwards it became a house for men only.624

5. Sant Pere de la Pedra in Lérida, Catalonia (from 1260). San Pere de la Pedra, like San Mateo de Ávila, had had difficulties as a female convent: Pelay Pérez Correa had given Constanza of Anglesola properties of the order in Lérida in order to establish a house there, and she herself added land and property to put this into effect, but the economic situation apparently remained difficult, and in 1342 Sant Vincens de Jonqueres absorbed the house.625

6. Destriana in León (from at least 1260 to at least 1290). Not much is known about Destriana, except that the maximum number of sisters in that house was set at

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624. Echániz Sans, Mujeres, p. 58.

625. Ibid., p. 58; Lomax, Orden de Santiago, p. 82.
13 in 1260. Like Sant Pere de la Pedra, it was still an existing house thirty years later, but it disappeared from the records thereafter.626

7. Sancti Spiritus in Salamanca, León (in 1268). This house was founded by an agreement between Pelay Pérez Correa, Martin Alonso (the son of King Alfonso IX of León), and Martin’s wife, Maria Mendez. Pelay Pérez Correa gave the couple property “for the foundation of Sancti Spiritus de Salamanca, in which house, you, Don Martin Alfonso and Donna Maria Melendez, will establish a monastery for sisters (donnas) of our order.”627

Pelay Pérez Correa thus founded Sant Pere de la Pedra, expanded Santa Eufemia de Cozuelos, probably integrated Sant Vicens de Jonqueres into the order, and helped found Sancti Spiritus. He also oversaw a new edition of the rule of Santiago that made it impossible for sisters establish a communal life outside a convent. It seems therefore that the life of sisters within the Order of Santiago had become more structured by the middle of the thirteenth century than it had been before. By then, there was a distinction between the wives of the brothers, who were protected by the order who but lived in their own houses,628 and the sisters, who

626. Ibid.

627. “E estos lugares todos sobredicho dámosvoslos por heredamiento de sancti spiritus de Salamanca, en e qual cassa vos don Martín Alfonso e donna María Meléndez fazedes monasterio de donnas de nuestra Orden,” El monasterio femenino de Sanctí Spiritus de Salamanca: Colleción diplomática (1268-1400), ed. M. Echániz Sans (Salamanca, 1993), no. 20; Echániz Sans, Mujeres, p. 58;

628. Lomax, Orden de Santiago, Appendix 1, p. 225, caps. 18, 19: When the brothers were away, their wives could stay with the sisters in their convent.
lived in convents and who dedicated themselves to the divine office and to the education of the daughters of the members of Santiago.\footnote{Echániz Sans, Mujeres, p. 86, n. 232.}

The Teutonic Order

Far removed from Spain, the Teutonic order was conceived in the Latin East in the context of the Third Crusade and later concentrated its efforts in the eastern parts of Europe.\footnote{A. Forey, The Military Orders from the Twelfth to the Early Fourteenth Centuries (Toronto, 1992), p. 20.} It began as a field hospital for German-speaking patients outside Acre in the winter of 1189 or more likely in the early months of 1190, and later that year a permanent hospital was established in Acre.\footnote{Klaus Militzer, Von Akkon zur Marienburg : Verfassung, Verwaltung un Sozialstruktur des deutschen Ordens, 1190-1309 (Marburg, 1999), p. 10.} In 1196 it received recognition from the papacy, and in 1197 it found support from the Holy Roman Emperor Henry VI.\footnote{Militzer, Akkon zur Marienburg, p. 19.} A year later, the members of the hospital had decided to take up arms. The Hospital became a military order and it was approved as such by Pope Innocent III in February 1199.\footnote{The reasons given for this change are no more than hypotheses. Forey, Military Orders, p. 21; Militzer, Akkon zur Marienburg, p. 20.} A mid-thirteenth century chronicler relates that

It seemed advantageous and honourable to many of the German princes and magnates who were there that the rule of the Temple should be given to the
aforesaid hospital (of the Germans). When this had been discussed, the German
prelates, princes, and magnates who were in the East met in the house of the
Temple, and called the available prelates and barons of the Holy Land to give
counsel on so salutary a matter. All were in full agreement that the aforesaid house
should have the regulations of the Hospital of Saint John concerning the sick and the
poor, as in the past, but for the rest should have the rule of the Militia of the Temple
with regard to clerics, knights, and other brothers.634

The founders of the Teutonic Knights thus combined welfare with warfare,
and very consciously imitated the Hospitallers in the former while following the
Templars in the latter. When it came to accepting women, however, they followed
neither. Like the Templars, they did not want to accept women because “women
made the men go soft,” but they did not want to fully reject them either, because
“women were more suited than men for the care of the sick and the animals.”635 The
solution was, unlike the Hospital, to disallow the full membership of sisters but,

634. “…pluribus autem principibus et magnatibus alamanie, qu aderant utile et honestum
visum est, ut hospitali prelibato ordo milicie Templi donaretur, super quo ordinato prelati,
principes et mangates teutunicorum, qui ibi aderant, in domo Templi convenerunt,
invitantes at tam salubre consilium prelatos et barones terre sancte, qui tunc haberi poterant,
qui omnes unanimi consilio constituerunt, ut domus sepedicta ordinem hospitalis sancti
Iohannis lerosolimitani [in] infirmis et pauperibus haberet, sicut antea habuerat, ordinem
veri milicie Templi in clericis, militibus, et aliis fratribus de cetero haberet.” M. Perlbach,
Die Statuten des Deutschen Ordens nach den ältesten Handschriften (Halle, 1890), p. 160,
translated in Forey, Military Orders, p. 20.

635. M. Tumler, Der Deutschen Orden im Werden, Wachsen und Wirken bis 1400 (Vienna, 1966),
unlike the Templars, to formally accept women as “halb-schwestern,” that is, as
consorores, who would wear a Teutonic half-cross on their clothes as confratres did.
Thus originally the Teutonic sisters were supposed to be half-sisters, lay women
who were to serve the order by performing menial tasks.\(^636\) In the records, however,
the half-sisters are again often simply called “sisters.”\(^637\)

Some of the Teutonic sisters seem to have served in hospitals. Count Ulrich
and Countess Adelheid von Taufers, for example, founded a hospital with brothers
and sisters in Sterzing am Brenner in 1235, whom the Countess Adelheid subjected
to the Teutonic order after her husband’s death in 1254. By this time she had become
a sister herself.\(^638\) There were sisters at the Teutonic house in Saarburg am Saar,
which had came to the order as a hospital in 1222.\(^639\) The commandery of Cologne

\(^{636}\) “de mulieribus ad servicia recipiendis. Statuimus insuper, ut mulieres ad plenum huius
ordinis consortium non admittantur, cum viriles animos per feminarum blandicias
frequenter contingat emolliri. Sane quia quedam infirmorum in hospitalibus et pecorum
obsequia apcias per muliebrem sexum efficiuntur, liceat mulieres in consorores
[halvensusteren, halpswesteren] at talia minesteria recipi, ita ut de ipsarum recepcione
auctoritas provincialis commendatoris requirat ut et receptis talibus feminis domicilium
speciale extra fratrum habitacionem preparetur. Castitas enim religiosi cum mulieribus
habitantis, etsi forte sit conservata, non tamen tuta nec sine scandalo diu poterit remanere.”
Statuten des deutschen Ordens, pp. 51-2. Tumler, Deutschen Orden, p. 373. I disagree with
Limburg that the statutes were about not having full sisters within commanderies rather
than not having full sisters within the order. Müller, “Schwestern, Halbschwestern, und
Halbbrüder des Deutschen Orden im Mittelalter,” in Von Akkon bis Wien: Studien zur
Deutschenordensgeschichte von 13. bis zum 20. Jahrhundert: Festschrift Marian Tumler (Marburg,

\(^{637}\) A clear example is the case of Gertrud Seynthze and her husband, who, when they
associated with the Teutonic order in Koblenz in 1287 were called “frater et soror ordinis
fratrum domus beate Marie theutonicorum.” The couple remained married and therefore

\(^{638}\) Tumler, Deutschen Orden, p. 87.
had a hospital and a community of (segregated) brothers and sisters in 1269. The order also had a hospital in Luxemburg, in which at least one sister lived in 1281.

Other women associated with the Teutonic order in houses that were not necessarily hospitals. Gerburg Schonweder, for example, joined the order with her children, Peter and Matilda, in Koblenz in 1276. A sole sister lived in a Teutonic house in Hemmert, near Utrecht, in 1284, and another was killed during a fire in Terwete, Livland, in 1279. The countess von Hiltenberg entered the order with her husband in Würzburg in 1230 as a “servant.” The association by married couples with the Teutonic order, as with the Hospital, was relatively common: of the six women who associated with the Teutonic order in Koblenz, three were married and associated together with their husbands.

According to the Teutonic rule, the sisters were supposed to live at some distance from the brothers. When Walter von der Brugge entered the Teutonic

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639. Ibid.

640. See below, p. 248.


order in 1290 in Beuggen, near Basel, with his daughter, he followed these statutes by building her a little house near the house of brothers. A few years later, a sister by the name of Hiltburg von Dossenbach lived in the same little house and she, together with two maidens, took care of the washing and clothing of the brothers.\textsuperscript{647}

An exceptional arrangement was made for Hildegund, a citizen of Cologne in 1269.\textsuperscript{648} The commander of Cologne offered her a place among the brothers and sisters of his commandery in exchange for a donation. She was offered a room in a house near the hospital, commandery and cemetery, in what may have been a house for sisters, with whom she was allowed share the table (and who had their meals apart from the brothers).\textsuperscript{649} Hildegund was also offered a pension by the order. However, instead of the habit of Teutonic sisters, she was asked to wear the habit of a beguine, for which she herself had to pay.\textsuperscript{650} Hildegund was therefore not a Teutonic lay sister, but a beguine supported by the order who had the option to become a Teutonic consoror at a later date, which she apparently did a year later.\textsuperscript{651}

\textsuperscript{647}. Tumler, \textit{Deutschen Orden}, p. 126


\textsuperscript{649}. “…quod nos concessimus sibi soli camerulamm sito in domo nostra contigua cimiterio nostro et hospitali…” “…et cum sororibus nostris comedet et bibet de cinariis secundum quod de domo nostra eiusdem sororibus ministramus…” Ibid., p. 18.

\textsuperscript{650}. “Se ad domum nostram transtulit in habitu becginarum…se vestiet de suo.” Ibid., pp. 17-18.

\textsuperscript{651}. See for a different opinion Ibid., p. 17.
The general chapter of the Teutonic order decided in 1264 that more direction as to the behavior of its membership was appropriate. Among the guidelines it is specified that lay brothers and sisters who were received into the order were to be chaste, obedient, and without property, and if they were to transgress, they were to be expelled from the order. With this regulation, the distinction between a half sister and a full sister had become minimal and is open to question: Was the presence of half rather than full sisters merely semantics?

The new regulation on chaste, obedient, and poor sisters may have coincided with the foundation of a new house specifically for Teutonic sisters at Hitzkirch near Luzern, Switzerland. Unfortunately, the date of its foundation is not known, nor is there enough evidence to assess the status of the first sisters housed at Hitzkirch, but the wording of the regulation suggests that the Teutonic order accepted fully professed sisters by then. According to tradition, the sisters here lived like nuns by the time the convent was moved to Suntheim in 1300. Eleven years later it was incorporated with the commandery of Beuggen. In the fourteenth century women’s houses were also founded in Frankfurt (1344), Bern (1341), and elsewhere. The Teutonic order had changed its attitude, but not its rhetoric.

652. Hitzkirch was a house in the thirteenth century, but the exact date of its foundation is not known.

653. It moved again in 1323, this time to Beuggen. The commandery at Beuggen had between 10 and 15 brothers in the period 1247-1414. Tumler, Deutschen Orden, p. 126, and p.126, n. 41.

654. Militzer, Akkon zur Marienburg, p. 76.
A Brief Comparison

Until now, an assessment of Hospitaller attitudes towards accommodating women has shunned a comparison with other religious military orders, because women in military orders have not been included in general studies of female monasticism. A full integration of the history of women in military orders into the history of female monasticism is clearly too large a topic to be fully addressed here. Furthermore, I do not believe it prudent to draw conclusions about women in military orders before systematic research has been conducted that better informs us about their numbers. Some conclusions can be drawn, however, from the collection of smaller studies presented above.

<table>
<thead>
<tr>
<th>Houses for Sisters</th>
<th>Temple</th>
<th>Calatrava</th>
<th>Teutonic</th>
<th>Santiago</th>
<th>Hospital</th>
</tr>
</thead>
<tbody>
<tr>
<td>12th century</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>1</td>
<td>4</td>
</tr>
<tr>
<td>13th Century</td>
<td>0</td>
<td>1</td>
<td>1</td>
<td>5</td>
<td>10</td>
</tr>
</tbody>
</table>

Table 2. Houses for sisters in religious military orders, by order and century. The numbers reflect the minimum of houses for women in military orders in the twelfth and thirteenth centuries.

When we compare the number of foundations for women among the various military orders [Table 1], there seems to have been a fundamental difference between those orders with Augustinian roots and those with reformed Benedictine (Cistercian) roots. The Augustinian military orders (Hospital, Santiago) were more

655. Ibid., pp. 76-7; Tumler, Deutschen Orden, pp. 386-7.
open to establish houses for women (twenty in total) than the Cistercian-influenced military orders (Temple, Calatrava) (one in total). The Cistercian-influenced military orders, like the Cistercians themselves, showed a much greater anxiety with regard to the proximity of the female sex, but they reacted in different ways: while the Templars officially renounced the membership of women, Calatrava decided to allow affiliated foundations of enclosed nunneries according to Cistercian fashion. The Teutonic order, which opportunistically appropriated elements of both traditions, treated association by women in an unusual way. Officially, it did not follow the Temple (the Teutonic order allowed women), but did not follow the Hospital either (it only allowed lay women). In practice, the Teutonic order created houses for women by the end of the thirteenth century and asked its lay sisters to be chaste, obedient, and poor. The Templars did not practice what they preached either: while their rule forbade association with women, many women associated with the order, some of whom took vows and may have been fully professed sisters. Ideological difference among the orders apparently only carried so far.
CHAPTER X

CONCLUSION

The twelfth century saw both a flourishing and a decline of opportunity for female religious. In the early years of that century, an enthusiastic wave of religious renewal promoted experimentation with forms of religious life for men and women, often together in community. By the 1170’s however, these movements had become institutionalized and the initial co-habitation of men and women made place for a segregated existence. In many religious orders women became less welcome.

Attitudes towards women’s monasticism has been measured by Venarde, Elkins, and others by counting the number of new foundations for women: as they see it, a greater number of foundations reflects an enthusiasm for female monasticism and a declining number shows a diminishing willingness to care for nuns. According to Venarde, the multiplication of the total number of newly founded nunneries in England and France at an unprecedented rate from 1080 to 1170 was checked in the years 1170 to 1215 on account of a combination of “economic troubles, authoritarian tendencies, and a failure of nerve in the relations of men and religious women and without the catalysts of wandering preachers,
pastor-bishops, and a dynamic lower aristocracy." It briefly revived in the period 1251–1275 [Fig. 4], but the female monasticism in this period lacked the creativity and variety of the previous century.\footnote{Venarde, Women’s Monasticism, pp. 132, 168, 183.}

In conclusion of this study we will test the attitude of the Hospitallers towards their female members against this pattern. We have seen how in the twelfth century the Hospital developed from a hospital into a mature religious order, increasingly sophisticated in its organization and diversified in its function. By the third quarter of the twelfth century, it had become an international military order that continued its dedication to charitable activities and never abandoned its religious dedication. It was also a great landowner and administrator of many churches, castles, and hospitals.

Over time, the Hospital of Saint John created an extensive hierarchy, which consisted of individuals who varied in their commitment to the orders. There were lay brothers and sisters who were connected with the Hospital without making a full profession. By 1180 they can be typed as consorores, who generally paid a yearly fee and expected spiritual benefits including burial but without expecting to become full members at a later time, or as donati, who gave an entry fee in advance and expected to make vows and be received a full brothers or sisters at some time in the future. There were also fully professed brothers and sisters, who had taken vows of poverty, chastity and obedience, and who were to wear the

\footnote{Ibid., p. 170 and above, p. 37.}
Hospitaller habit for life. However, as we have seen, contemporary sources are not always clear in distinguishing between types of lay associates or between lay associates and fully professed members, calling all members brothers or sisters without specification of their commitment.

The acceptance of women into the Hospital would complicate the organization of the order. This was not so much the case before 1170, when a small number of women was accepted into commanderies and lived among men. However, when the number of women increased, and the general opinion regarding the presence of women in religious communities swayed from acceptance to criticism, the Hospital welcomed the establishment of houses for women and, like other religious orders, at first aimed at segregating its membership. In England and in Aragon, this was done with the support of royal patrons. Notwithstanding this initial attempt to segregate its membership, evidence of the thirteenth century shows that the Hospital abandoned this project and in larger numbers than before accepted women in commanderies as well as in houses specifically founded for Hospitaller sisters. It seems that contrary to the general trend in female monasticism, which has been described as “deteriorating,” the Hospitallers remained positive towards the acceptance of women.658

How do the foundations for female Hospitaller houses compare to those of other religious orders? In contrast to the general pattern described by Vernarde, new female Hospitaller foundations were concentrated in the period 1170-1190 (four houses) and peaked in the 1290’s (four houses), but in general were spread thinly over the period from 1170 to 1299 [Fig. 11], and do therefore not conform to the pattern described by Venarde for religious orders (excluding the Hospitallers) in England and France.

It must be noted, however, that the foundation pattern of Cistercian houses in southern France does not exactly conform to Venarde’s pattern either: While according to Berman’s data, a relatively large number of houses were indeed founded in the period 1150-1169 (eight houses), and a decline in the number of new foundations followed in the period 1170-1189, the number of new Cistercian foundations for women peaked in the period 1200-1209. When we compare her data with the data on Catalan nunneries provided by Zaragoza Pascual, we see that the foundation of female Cistercian houses in Catalonia roughly, though not precisely, followed the pattern of similar foundations in southern France [Fig. 11]. We should, therefore, keep in mind that there was a difference in the foundational patterns among the different orders before drawing conclusions about the Hospitaller diversion.
Figure 11: Female Cistercian Houses in Catalonia and Southern France, 1100-1349, based on Ernest Zaragoza Pascual, Catàleg dels Monastirs Catalans (Barcelona, 1997) and on Constance Berman, The Cistercian Evolution (Philadelphia, 2000), Appendix 3.

Figure 12 shows how Venarde’s general pattern was built up from a variety of foundational patterns among religious orders. First, it is clear that over the course of the centuries new foundations of autonomous (not-affiliated) houses for women become less popular, but that they were still quite numerous and that until c.1195 most of the religious foundations for women were not affiliated with an order. Second, the chart shows that the orders which in the beginning of the twelfth century experimented with religious life for women among men (Gilbertines, Prémontré, Fontevrist) lost ground after 1150, while stricter, more rigorously enclosed affiliations became more popular (Cistercian, mendicant). The change took place gradually, but it is clear from the chart that during the period 1176-1200 the two trends coincided, causing a low point in the number of new female foundations. The real crisis, however, took place shortly after the middle of the thirteenth
The crisis in female monasticism does not seem to have affected the Hospitaller foundations, which remain low but steady in number. Furthermore, the low number of Hospitaller foundations seems not to have been a reflection of a negative Hospitaller attitude towards women. The Hospitallers had spiritual, economic, personal, and political reasons for accepting women, and on numerous occasions were willing to accommodate them within their order by providing priests
and other brothers in their care, by securing economic survival, and by providing leadership.

The records of the Hospital show no evidence of attempts to suppress its female membership. Moreover, rather than suppressing or merely accepting women, the Hospital showed that it was willing to engage in litigation in order to keep female religious houses within its order. This very positive attitude towards accepting women was an anomaly among the religious orders. It can be found only among hospitals, which often had mixed-sex communities, and in the Order of Santiago, a military religious order of the Iberian Peninsula that, like the Hospital, welcomed female members without overt anxiety regarding their presence. The Order of Santiago was explicitly a military order, the hospitals were devoted to charitable care, and the Hospital combined both functions. They had in common, however, an Augustinian rule, which was increasingly adopted by hospital congregations. To what extent was the choice of rule (Benedictine or Augustinian) related to a religious institution’s approach for accepting women?

Another important observation must be made: The Hospital was welcoming to women, but for some reason it was not very popular among women. Was it that the Hospitallers were never overwhelmed by the number of female postulants and therefore could maintain their positive attitude towards receiving women? Or was the Hospitaller life not appealing to women, who seem to have preferred a more austere setting for their religious vocation? If women were welcome in an order that gave them more freedom, why did they prefer to join Cistercian or Franciscan
houses? Did women simply follow the trend of male preferences, or were they attracted by the more ascetic cloistered life?

Additional questions remain. The work would benefit from a more complete investigation of German and Italian sources in order to provide a fuller picture of female participation in the Hospital of Saint John. Perhaps more importantly, a more detailed local investigation would be useful in which not only the sisters are studied but also the brothers. How many Hospitaller hospitals existed in the West in which women did not participate? How many commanderies? How many male members did the Hospital have in comparison to female members? This study began as a study of women, but the women themselves remained obscure and the analysis of gender relations within the Hospital has turned out to be more fruitful. I suggest this route for further research.

The work as it is, however, has gone beyond the articles of Forey, Tommasi, and Nicholson in detail and in scale. It has taken the study of women’s houses as began by Forey, combined it with the study of mixed-sex communities as studied by Tommasi, and put it in a framework of the study of female monasticism so that we can begin to understand the Hospitaller attitude towards women, which was not, as we have seen, merely a reflection of contemporary society. While some of the detailed research of this work has been sacrificed for the sake of a wider scope, new original research has brought to light a number of sisters hitherto unknown such as Guillelma of Faro, preceptrix of Orgeuil, Sibilia, ‘confrater’ of Cervera, and Prima, sister at Toulouse. These female Hospitallers were integral to the Hospital of Saint
John even if they were not leaving “at a moment’s notice to nurse wounded crusaders in the Holy Land!” 659

659. Byne, Forgotten Shrines, p. 263. For a different version of the same idea see Marco Antonio Varón, Historia del Real Monasterio de Sixena (Pamplona, 1773), 1, pp. 12-30.
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