Charity and the Economy of Power: The Ospedale di Santa Maria della Scala and Siena’s Network of Charity in the Sixteenth Century

by

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Abstract
This study examines charitable institutions as a source of power through an analysis of Siena’s largest and most prominent hospital, the Ospedale di Santa Maria della Scala. This analysis is accomplished by situating Santa Maria della Scala in the context of relationships between Siena and its surrounding territory before and after Siena’s loss of independence in 1555. From its eleventh century origins, Santa Maria della Scala developed social, religious, and political power within Siena, serving as the city’s central source of charity and playing a key role in civic rituals and devotions. Additionally, through its vast network of farms and small hospitals, Santa Maria della Scala exercised economic power and influence across the Sienese state. Through the early sixteenth century, Siena’s government drew as needed on the social, religious, and economic power of the hospital to reinforce ties with both the urban population and subject communities. However, internal political strife, increasing foreign involvement in local affairs, and a war at mid-century upset the distribution of power and strained relations between Santa Maria della Scala and the city government. After Siena’s loss of independence in 1557 and subsequent governance by Cosimo de’ Medici, competition for control of the hospital between local elite and the Medici of Florence resulted in a process of negotiation which demonstrates the ability of hospitals to function simultaneously as local power centres and as arms of the territorial state.
Thus, an analysis of Santa Maria della Scala and Siena in the sixteenth century not only highlights the complex power dynamics that comprised the Grand Duchy of Tuscany, but also contributes to debates surrounding the transition in Italy from medieval communes to early modern states, and the distribution of power within those states.
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Chapter 1
Introduction

The winter of 1554 was a desperate time for Siena. In the last throes of a war with the imperial troops of Charles V and the Medici of Florence, the battles of the summer left the city in grave circumstances.¹ Under siege and faced with severe famine, the city’s dwindling food supply was of the utmost concern, particularly for Siena’s main charitable institution and foremost landowner: the Ospedale di Santa Maria della Scala. The Balìa, Siena’s head governing council, relied heavily on Santa Maria della Scala to provide the grain necessary for the city’s survival.² During times of peace and prosperity the hospital performed this task with remarkable efficiency; the war, however, had severed connections between the hospital and its outlying grance (farms), making the transportation of grain and other foodstuffs from the countryside to the city nearly impossible. Additionally, as Florentine and Spanish troops encroached on Sienese territory they did not hesitate to seize the animals, goods, and grain stores of the grance for themselves.

*Note: All translations from Italian, unless otherwise indicated, are my own. In transcribing the Italian from archival materials I have expanded abbreviations but otherwise chose to follow the orthography of the original documents.

¹ For detailed accounts of the War of Siena, see Fausto Landini, Gli ultimi anni della Repubblica di Siena, 1525-1555 (Siena: Edizioni Cantagalli, 1994); Roberto Cantagalli, La guerra di Siena (1552-1559) (Siena: Accademia Senese degli Intronati, 1962); Arnaldo D’Addario, Il problema senese nella storia italiana della prima metà del Cinquecento (La guerra di Siena) (Firenze: Felice Le Monnier, 1958).

² In modern Italian literature the name of this council is often written as “Balìa” with an accent over the “i,” though this is not always the case: see Alessandro Orlandini, Piccola Storia Di Siena (Siena: SeB, 2011), 128; Guarini, “Le instituzioni di Siena e del suo stato nel ducato mediceo,” 50. English sources also vary usage but tend to omit the accent: see Christine Shaw, Popular Government and Oligarchy in Renaissance Italy (Boston: Brill, 2006), 15, 24. I have chosen to retain the accent.
Fraught with these troubles and seeking help to overcome them, on 17 December 1554 the rector of Santa Maria della Scala, Scipione di Mariano Venturi, composed a letter to Piero Strozzi, the vicar-general of the French king in Italy and leader of the French troops supporting Siena. Venturi’s letter implores Strozzi to exert his influence on the hospital’s behalf in obtaining and transporting grain to the city. Recounting the situation of the hospital Venturi states:

Wherefore, seeing this most religious house in such great extremity, which ought to have hope in God for the preservation of the city, because of the good works and piety on which it was founded, which act as a sacrifice to continually placate the anger of God, I cannot prevent my heart from grieving greatly seeing that I lack the power befitting my office and seeing continually the troubles of the whole city, which cannot be endured without great sorrow. The poor lack places to go, and the sick who come to us daily can no longer be received by the hospital; the abandoned boys are dispersed throughout the city and dying of hunger, while the orphaned girls, lacking bread, remain in danger of death by starvation or some other evil, wherefore I beg and I beseech you that . . . my family and I will not have to die of hunger . . .

This description of the hospital’s tragic condition is further elaborated upon in a letter to the Cardinal of Ferrara, Ippolito d’Este, dated only two days after the above, in which Venturi offers another description of Santa Maria della Scala’s condition: “Amidst the infinite troubles and great tribulations that I have felt this year, not only as a citizen because of the universal damages our poor and afflicted Republic has suffered through this long and dangerous war, but also as minister of this holy hospital due to the difficulties that I have had in preserving and defending it

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from many destructions and persecutions public and private, nothing could give me greater relief or more consolation than to hear of your coming . . .”

Besides emphasizing the severity of conditions in the hospital and Siena generally, what is significant in both of Venturi’s letters is the connection he draws between the suffering of the Sienese Republic and that of the hospital. This connection is inherent in the nature of the Renaissance hospital as both a providing and a dependent institution. For the communities they served hospitals were a source of charity, providing care of the body and care of the soul for pilgrims, abandoned children, the poor, and the sick. Charity was both a physical and spiritual act, and communities depended on the good works and piety of hospitals to provide life-sustaining physical relief and act as a righteous sacrifice on behalf of society. However, at the same time that hospitals acted as physical and spiritual providers, they were also dependent institutions. Hospitals often relied on local church and civic government in matters of administration and support, and their financial stability depended to a large degree on donations and bequests. Times of crisis, such as war, only served to heighten the challenges associated with such interdependence.

Also evident in Venturi’s letters is the extension of Santa Maria della Scala’s network of care and responsibility well beyond the walls of Siena and the hospital’s reliance on its outlying farms for the grain they supplied. Not only did Santa Maria della Scala sit at the centre of Siena’s urban life, it also played an essential role in connecting the city with the countryside. The

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network of public charity and poor relief which Santa Maria della Scala had, from the thirteenth century, constructed and consolidated, was a crucial part of its identity and function. The Ospedale di Santa Maria della Scala, its role in Siena, and its network of charity during the tumultuous sixteenth century are central focus of this study.

The Ospedale di Santa Maria della Scala began, like many other medieval hospitals, as a pilgrim’s hospice and home for abandoned children. The earliest documented evidence of the hospital comes from a deed of gift dating to 1090, and although it is generally accepted that the hospital was founded by Siena’s cathedral canons, legend also tells of a mythical founder from the late ninth century named Sorore. A cobbler whose mother had visions of her son’s future charitable work, Sorore is said to have opened a hostel for travelers in which he mended their shoes, gave them food and a place to sleep, and cared for those who were ill. According to the legend, before his death Sorore founded an order of hospital friars to carry on his work. Sorore’s importance as a founding legend is signified by his recognition as one of the local saints honoured in Siena’s “civic pantheon” and also by one of the famous frescoes in the hospital’s Pellegrinaio. Painted by Lorenzo Vecchietta around 1441, the fresco depicts the dream of Sorore’s mother, the reception of the first orphan, and other scenes from his life. Regardless, however, of whether Sorore or the cathedral canons established the hospital, its size and activities grew quickly during the eleventh and twelfth centuries and it rapidly became central to the community as a charitable institution, medical facility, and landowner. Santa Maria della Scala’s great wealth, combined with the fact that the church, the communal government, and a

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5 Gerald Parsons, *Siena, Civil Religion, and the Sienese* (Aldershot: Ashgate, 2004), 17-18. Vecchietta’s fresco illustrates the vision Sorore’s mother saw of children climbing a ladder (located on the current site of the hospital buildings) into heaven and being received by the Virgin. Sorore was also included with other local saints on the wooden doors Vecchietta painted for a reliquary to house Santa Maria della Scala’s relics; he is also depicted in the frescoes of the arch over the high altar in the Cathedral. See Parsons, 18.
number of lay confraternities participated in its administration and operation, made it a key meeting point of civic and religious power and politics in Siena.

The Ospedale di Santa Maria della Scala was so firmly integrated into the social, economic, and religious life of the city that, as Judith Hook states, “[Santa Maria della Scala] completely exemplifies all the civic values of Siena.”

Facing the cathedral but controlled by the communal government, the hospital offers the opportunity to study the mingling of the spiritual and secular in Siena and, more broadly, Renaissance Italy. Although originally administered by the cathedral canons, Siena’s communal government began to exercise its influence in the early fourteenth century, ordering a plaque with the commune’s arms to be hung on the main doors of the hospital. The commune also assumed the privilege of electing the hospital rector in 1404, and total control was finalized in 1460 by a papal bull of Pius II which officially freed Santa Maria della Scala’s administrators from obligation to the canons.

Although the commune certainly took advantage of the hospital on occasion, it also took great pride in the institution and saw its endurance and prosperity as key to the survival of the Siena. Even in the midst of political and financial difficulties complicated further by war in the mid-sixteenth century, the hospital always remained a priority among the government’s concerns.

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7 Enrico Toti, *Santa Maria della Scala, A Thousand Years of History, Art, and Archaeology* (Siena: Protagon Editori, 2008).

8 To demonstrate this connection Hook quotes from a letter written in 1553 by the Balia to the Sienese commissioner in Grosseto: “You will know how, at all times in the past, the magistrates of this city have always kept in mind the safety and the security of the affairs of the hospital of Santa Maria della Scala. They have kept these things in mind, since the hospital is a sacred foundation. Because we have always done so, we daily witness miraculous demonstrations of God’s favour towards our city and so we are obliged to keep its interests constantly in mind.” See Hook, 147.
Although there are a number of scholarly works regarding Santa Maria della Scala, many focus heavily on the art and architecture of the hospital. In addition to these, there are studies which discuss the charitable functions and daily life of the hospital. In their work *Il libro del Pellegrino (Siena 1382-1446)* Gabriella Piccinni and Lucia Travaini connect the hospital with five areas of study applicable to the history of public charity. First is the practice of charity by the church and the laity, and how it changed over the years. Second is the story of the poor and needy of society, including their material life and daily needs. Next is the involvement of charity in the political and economic life of Siena, and the role of the hospital in urban growth, art, and architecture. Finally, Piccinni and Travaini argue that the hospital is also useful for the study of pilgrimage and travel, which is the subject of their book. These categories are an excellent representation of the potential contributions that a study of Santa Maria della Scala can make to enrich our understanding of medieval and Renaissance charity. However, Piccinni and Travaini

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10 Examples include: Michele Pellegrini, *La comunità ospedaliera di Santa Maria della Scala e il suo più antico statuto: Siena, 1305* (Ospedaletto, Pisa: Pacini, 2005), which uses the hospital’s original statutes to paint a picture of its daily life and operation; Maddalena Belli, Francesca Grassi, Beatrice Sordini, *La cucina di un ospedale del Trecento: gli spazi, gli oggetti, il cibo nel Santa Maria della Scala di Siena* (Ospedaletto, Pisa: Pacini Editorie SpA, 2004), which uses both archaeological and textual sources to discuss the importance of food to the hospital; Pierre di Toro and Roberto di Pietra, *Amministrazione e contabilità nel XV e XVI secolo: lo spedale senese del Santa Maria della Scala attraverso i libri contabili* (Padua: CEDAM, 1999), which details and analyzes the finances and record keeping practices of the hospital in the sixteenth century.

frame each of these categories with an internal focus on the hospital itself and Siena. The present study best fits into the category of the role that charity played in the political and economic life of the city, but it also looks beyond the walls of the hospital to more carefully examine its relationship not only with the city of Siena but also with the surrounding territories and, ultimately, the Medici of Florence and the Grand Duchy of Tuscany.

Recent work in the field of civic religion and charity has established the importance of situating charitable institutions in the context of the construction of social order and the relationship between power centres and the periphery. This study aims to accomplish this for Santa Maria della Scala, Siena, and Sienese territory, by placing the hospital in the context of relationships between Siena as a capital city and its surrounding territory. Additionally, by following Siena’s transition from independent republic to its incorporation into the Grand Duchy of Tuscany it is possible to observe what occurs when one dominant city becomes a periphery to another power centre. During the sixteenth century Siena’s communal government used Santa Maria della Scala to maintain connections and secure power relationships with both its urban population and its dependent territories during a time of political instability. By examining the fall of Siena to Florence in 1557 and its annexation to the Tuscan state from the perspective of one of the city’s key civic institutions, it is possible to determine how the political economy and

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power dynamics in Siena altered and adapted to the new Medici government. Beginning in 1562, the Medici grand dukes claimed the privilege of personally appointing Santa Maria della Scala’s rectors.\textsuperscript{13} In 1592, under the direction of the Ferdinando de’ Medici, the hospital began operating under a newly published set of statutes, and by 1599 the entire administration of the hospital had been reformed.\textsuperscript{14}

In light of these reforms, it is important to question in what ways the Medici used Santa Maria della Scala and charity to consolidate their own power in Siena, and in what ways the hospital and its network were part of the attempt to maintain a distinct Sienese identity. In his work on civil religion in Siena, Gerald Parsons argues that after becoming part of the Grand Duchy of Tuscany, the Sienese used civic religion and ritual to maintain their distinct culture and identity.\textsuperscript{15} However, Santa Maria della Scala is noticeably absent from his discussion, except when mentioned in connection with art and relics honouring the Virgin and Sienese saints.\textsuperscript{16} This study explores the gap left by Parsons and highlights the role that Santa Maria della Scala played in helping Siena cultivate and maintain its civic identity, while also considering the ways in which the hospital became an arm of the Tuscan state.

By studying the effects of conquest and incorporation into the Tuscan state on the hospital and Siena, this study hopes to contribute to our understanding of changing modes of charity and the rise of early modern territorial states. As Elena Fasano Guarini has pointed out, territorial or regional states have long been, and continue to be, a favourite field of study for

\textsuperscript{13} Girolamo di Giovanni Biringucci was the first rector to be appointed by Cosimo I; see Luciano Banchi, \textit{I Rettori dello Spedale di Santa Maria della Scala di Siena} (Bologna: Tipographia Fava e Garagnani, 1877), 202.
\textsuperscript{14} ASS, \textit{Ospedale di Santa Maria della Scala}, Stauti e Ordinamenti, N. 4.
\textsuperscript{15} Parsons, \textit{Siena, Civil Religion, and the Sienese}, 33-34.
\textsuperscript{16} Parsons, \textit{Siena, Civil Religion, and the Sienese}, 5-6, 17-18.
those interested in the political history of early modern Europe. Territorial states are particularly important to the study of Renaissance and early modern Italy, and the formation of various political states and empires, including the Grand Duchy of Tuscany, has remained a prominent topic in the field.

There are a variety of ways historians approach the study of these states, and a survey of the historiography leads to the identification of several prominent themes. One central theme is the relationship between dominant cities and their subject territories. In seeking to characterize the nature of these relationships historians have focused heavily on the financial aspects of conquest and governance, as well as exploitation. For instance, in his work on Renaissance Florence Marvin Becker argued that the Florentine government’s quest for revenue led to its pursuit of territorial expansion. Marxist historians have supported the idea of exploitation, arguing that dominant cities established tyrannical regimes over their conquered subjects, but over time this idea has been modified to portray a more mutually beneficial relationship between

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18 Specifically, Becker states that: “[Florence] in its search for money, was acting to integrate rural territories into a political complex that can perhaps be best described as a Renaissance state.” Becker’s focus on the economic motivations for territorial expansion is still relevant today; however, his ultimate argument (that the internal political and economic developments which occurred during the growth of the Florentine territorial state caused the rise of civic humanism) is a bit out-dated. The Renaissance state which inspired civic humanism, Becker argues, was markedly different from the “lax and easy government of the Middle Ages.” He sees it as a shift from medieval laissez-faire rule to the strict rule of the Renaissance state, an almost Burckhardian view of the state as a work of art. See Marvin B. Becker, “The Florentine Territorial State and Civic Humanism in the Early Renaissance” in *Florentine Essays: Selected Writings of Marvin B. Becker*, ed. James Banker and Carol Lansing (Ann Arbor: University of Michigan Press, 2002): 195-221.
centre and periphery before the Black Death, and a more exploitative relationship afterward.\(^{19}\)

Also related to the issue of exploitation is the distribution of wealth. Looking at Florence, Herlihy and Klapisch-Zuber argued that although the great extent of Florentine markets encouraged prosperity, the wealth generated by trade was unevenly distributed between Florence and its subject territory. Brucker, on the other hand, expressed skepticism of the exploitation thesis, arguing that the relationships between centre and periphery “were not inherently exploitative but were influenced primarily by short-term fiscal and military pressures . . . the economic burden of subject areas carried indirect proportion to the fiscal and military needs of the dominant cities.”\(^{20}\)

In an attempt to shift historical examination away from focusing on the power centre to treating instead the perspective of “the peripheries,” Judith Brown undertook a study of Renaissance Pescia.\(^ {21}\) In her work, Brown examined the economic, fiscal, and political consequences of Florentine territorial expansion into Pescia. Central to Brown’s study were the questions of what caused territorial expansion, whether Renaissance states acquired new territories out of necessity for their economic and political survival, and whether dominant cities exploited subject areas for their own benefit and to the detriment of the region.\(^ {22}\) These are difficult questions to answer and, as Brown pointed out, even in the fifteenth and sixteenth

\(^{19}\) Anthony Molho’s studies of Florence and its financial history have supported this point of view; see Anthony Molho, *Florentine Finances in the Early Renaissance, 1400-1433* (Cambridge, MA: Harvard University Press, 1971).


\(^{21}\) Brown, *In the Shadow of Florence*, xvii.

\(^{22}\) Interesting here is Brown’s use of the word imperialism to describe territorial expansion. This term is not frequently used in more current works due to the problematic assumptions associated with it. See Brown, *In the Shadow of Florence*, xviii.
centuries public opinion on territorial expansion was divided. Some Renaissance scholars, such as Guicciardini, argued that the resulting military and political security as well as economic benefits made expansion worthwhile, while others, including Machiavelli, believed that the cost of conquest and the animosity it was likely to create in conquered areas outweighed the advantages.23

Since Brown’s goal was to explore Renaissance imperialism from the perspective of the subject towns she examined the social, political, and economic structure of Pescia both before and after its integration into the Florentine state in the mid-fourteenth century. She justified her choice of Pescia because it was dependent on, but not favoured by Florence and was incorporated at the beginning of the Renaissance after lengthy self-rule.24 Using the relationship between Florence and Pescia as a case study, Brown argued that local histories should be placed in a wider regional context and relationships between cities, both urban-rural and inter-urban, should be examined.25 Using Brown’s study as a model, certain points are certainly applicable to the case of Siena. For example, most historical works on Siena conclude with the fall of the Republic in 1557 and offer only a general discussion of Siena under the Tuscan state, while many histories of Tuscany treat the incorporation of Siena briefly.26 However, unlike Pescia, which was a minor town in Tuscany, Siena was a prosperous and influential state. Therefore, this study hopes to add additional perspective to that provided by Pescia through examining what happens when Siena, itself a former power centre, became a periphery to the Florentine state.

23 Brown, In the Shadow of Florence, xviii-xix.
24 Brown, In the Shadow of Florence, xxii-xxiii.
Placing Siena and Santa Maria della Scala into two regional contexts, both the Republic of Siena and the Duchy of Tuscany will further contribute to our understanding of the history of Siena, the Florentine state, and the relationship between dominant cities and their peripheries.

Brown’s study made important strides in exploring the Florentine political economy of the fifteenth and sixteenth centuries, and she does provide insight into the process of territorial expansion from the perspective of formerly independent communes in the fourteenth through sixteenth centuries. However, some have raised concerns about her conclusions, including contradiction in the argument that Florence did not exploit its subject territories socially and helped them economically, but ultimately had very little to do with the economic changes that occurred in Pescia. Molho criticized Brown for her narrow definition of terms and her treatment of Florence as a monolithic entity, when in reality the Florentine government and state were complex and subject to the same historical forces she observed in Pescia. Essentially, Brown’s definition of Florentine dominion over Pescia was not subtle enough for Molho’s taste, highlighting another common problem in understanding the history of territorial Renaissance states: the terminology.

Exactly how to define the Renaissance or early modern state is a problem historians continue to grapple with now as in the past. The development of the state, according to Jeremy Black, is one of the principal assumptions underlying the most popular interpretations of the early modern period. Traditionally, the Renaissance state has been viewed as the precursor to modern states, particularly with the development of bureaucracies and rational government. 

27 Molho, review of In the Shadow of Florence: Provincial Society in Renaissance Pescia, by Judith C. Brown, Speculum, Vol. 58, No. 3 (July, 1983): 738-739. Molho also argues that Brown’s main conclusion is less unique than she assumes since others (such as Herlihy in his study of Pistoia) argue for a regional Tuscan economy with local specialization.

Burckhardt viewed the Renaissance state as a work of art, and scholars such as Hans Baron and Marvin Becker argued for the existence of a strong connection between civic humanism and state development. Federico Chabod argued that the regional state was a product of the Renaissance and grew out of a complex process of bureaucratization and centralization where dominant cities brought surrounding territories under their control. He also claimed that these states were the beginning of the modern nation state, typical of the view that the Renaissance was the foundation of the modern world.²⁹

“State formation” was the term commonly used to describe this process; however, it has fallen out of favour in recent years due to its problematic implications, including the idea that the evolution of the modern state can be neatly traced and defined. Seeking to move beyond this perspective, revisionist scholars have cautioned that, despite historians’ tendency to distinguish between a public, political sphere and a private, social sphere, the Renaissance state cannot be approached as a political entity separate from society. According to Giorgio Chittolini, whose influential work on the development of regional states in northern Italy helped to define the field, Renaissance states are “characterized by a marked pluralism of bodies, estates, and political nuclei within the state itself, each of which has claims to authority and power; by a limited capacity and desire to act on the part of the central government and public agencies; and even by a certain institutional inclination to limit their own prerogatives and recognize instead separate and particularized forms of political organization.”³⁰ Therefore, rather than speak of “state

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formation” as an identifiable process, historians must seek to understand the multiplicity of powers and organizations within a state, as well as the interactions and negotiations that shaped them.

As one alternative to “state formation,” Jeremy Black proposes the idea of approaching Renaissance states as “composite states,” or political entities composed of number of separate territories with distinctive senses of identity. This approach allows for the more nuanced understanding of states and the relationship between dominant cities and subject territories that Molho felt was missing from Brown’s work on Pescia. The idea of composite states is particularly useful for a study of Siena post-1557, since it allows for a more accurate characterization of the incorporation of the former Republic of Siena into the Grand Duchy. Because the Medici dukes brought Siena into the Grand Duchy but retained it as a separate administrative entity from Florence, Tuscany itself can be described as a composite state.

As another useful approach to considering ideas of state formation and composite states, Elena Fasano Guarini has proposed the idea of treating territorial states as “geographies of power.” In a recent article Guarini reviewed the current perspectives of Italian scholars on the nature of the territorial state and showed that there has been a shift away from the centralized portrait of Chabod to “models that emphasize the relation of the ‘centre’ (whether the prince’s court or the patriciate of a dominant city) to the ‘periphery’ (the villages and feudal lords in the provinces).” However, according to Guarini, both Chabod’s concept of a dominant power centre and the centre-periphery approach are overly simplistic and do not adequately allow scholars to explain and describe the economy of political power within Italy’s territorial states.

31 Black, States and Societies in Early Modern Europe, 2.
32 Guarini, “Geographies of Power,” 89.
33 Guarini, “Geographies of Power,” 89.
The difficulty is that historians tend to take up one side or the other; either concentrating on the centre or, as in the case of Samuel Cohn’s work on the small peasant villages in the mountains of Tuscany, shifting the perspective of state formation to the peripheries. While both perspectives are valuable, in order to consider both together Guarini suggests that historians instead think about these states and the distribution of political power within them not as centre versus periphery but as “geographies of power.”

Similar to Black’s idea of composite states, Guarini’s concept of geographies of power lends itself more easily to the contemplation of political diversity within territorial states. Recent studies have emphasized the degree of local autonomy exercised by subject towns and villages, the maintenance of local identities, and the overlapping of jurisdictions within territorial states. Guarini argues that because of the diversity of political organization within each territorial state, historians should not approach their study with the traditional language of Renaissance political theory but instead in terms of power as manifested in law, taxation, trade, and the use of military force. As Guarini explains, the goal is: “to offer not so much an overview of the formation of these states as a consideration of the ways in which power was distributed within them. Was power concentrated, as many scholars have argued, in the political centres of these states? That is, did the ruling groups ... dominate the territories they had conquered? Or were various

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34 Cohn’s work broke important ground by demonstrating the ways in which peasant responses to the actions of the Florentine government helped to shape the Florentine state, acting not as barriers but as facilitators of change. His work also suggests the value of examining these forces over time rather than at one particular time and place. See Samuel K. Cohn, Jr. Creating the Florentine State: Peasants and Rebellion, 1348-1434 (Cambridge: Cambridge University Press, 1999).

35 There have been a number of studies published in recent years focusing on local identities within Renaissance states, including: Cecilia Hewlett, Rural Communities in Renaissance Tuscany: Religious Identities and Local Loyalties (Turnhout, Belgium: Brepols Publishers, 2008); Gerald Parsons, Siena, Civil Religion, and the Sienese (Burlington, VT: Ashgate, 2004); David M. D’Andrea, Civic Christianity in Renaissance Italy: The Hospital of Treviso, 1400-1530 (Rochester, NY: University of Rochester Press, 2007).
institutions in the peripheral or outlying areas – towns, communes, villages, feudal lords, monasteries and castles – also sites of power, capable of contesting the authority of their sovereign? By focusing on issues of law, jurisdiction, and distribution of power, Guarini’s concept of geographies of power moves away from a simple centre-periphery model and allows for the consideration of relationships and networks throughout a region, not just between the ruling city and its subject cities. Additionally, it provides the possibility of looking at territorial states from above and below. Treating states as interactive systems enables historians to create a more complete picture of the ways in which power relationships grew and functioned within political entities.

Noticeably absent from Guarini’s list of power sources are civic religion and public charity. While perhaps not as obvious as law, military, or trade, charity and civic religion were nevertheless a source of power within the political economy of late medieval and early modern states. Renaissance hospitals, confraternities, public charity, civic religion, and civic Christianity have all received growing interest in recent years. There are several prominent works which examine these issues across the Italian peninsula, just as this study proposes to examine the role of charity in politics and state growth in Siena. For example, in her book Charity and Power in Early Modern Italy: Benefactors and their Motives in Turin, 1541-1789, Sandra Cavallo looks at public charity and the conflicts and power struggles that occurred between the bureaucrats, administrators, and patrons of Turin’s charitable institutions. According to Cavallo, in the subject city of Turin, the city council was able to maintain some political power for itself by using charity and charitable institutions as a bargaining tool in negotiations with both the

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36 Guarini, “Geographies of Power,” 90.
occupying French and, later, the dukes of Milan. Cavallo demonstrates that although Turin’s submission to a greater power centre stifled the authority of local government in some ways, through their control of the municipal relief system Turin elites maintained a degree of authority and autonomy in their city.\(^{38}\)

While Cavallo’s study helps to establish the connection between political power and charitable work, based on the situation in Turin she argues that the importance of Renaissance hospitals has been overrated. In Turin, more charity took place outside of major institutions than within them until the seventeenth century when wealthy individuals began to sponsor hospitals and they became more bureaucratized by the state.\(^{39}\) While this may hold true for the case of Turin, this is certainly not the case in Siena, nor other places in Italy.\(^ {40}\) In Siena and throughout Sienese territory, the hospital of Santa Maria della Scala was the most significant source of charity and, as the present study will show, played an important role in politics and power struggles both before and after Siena’s loss of independence.

Perhaps the most significant recent study of public charity in Renaissance Italy is David M. D’Andrea’s study of the confraternity of Santa Maria dei Battuti in Treviso during the fifteenth and sixteenth centuries.\(^ {41}\) Building on previous work and seeking to explore the gaps in the scholarship, D’Andrea’s study uses the hospital of Santa Maria dei Battuti, run by the

\(^{38}\) Cavallo, *Charity and Power*, 40-41.

\(^{39}\) Cavallo’s arguments regarding the private financing of charity can also be found in the following article: Cavallo, “Charity as Boundary Making: Social Stratification, Gender and the Family in the Italian States (Seventeenth – Nineteenth Centuries),” in Hugh Cunningham and Joanna Innes, eds., *Charity, Philanthropy, and Reform: From the 1690s to 1850* (New York: St. Martin’s Press, 1998): 108-129.

\(^{40}\) In his review of the work, Nicholas Terpstra points out that “Cavallo . . . does not adequately recognize that Turin’s reliance on outdoor relief rather than hospitals may be a simple consequence of its size.” Nicholas Terpstra, review of *Power and Charity in Early Modern Italy*, by Sandra Cavallo, *Renaissance Quarterly* Vol. 50 No. 4 (Winter 1997): 1209.

confraternity, as a window to examine Renaissance religion, public charity and poor relief, and the territorial state. Specifically, he looks at the ways in which the confraternity responded to the needs of the Trevisan community and negotiated the regional objectives of the Venetian Empire while seeking to maintain local power and identity.

D’Andrea ties the study of charity, politics, and power dynamics to the concept of civic Christianity as proposed by Herlihy.42 In his own work, Herlihy used social indicators of piety such as almsgiving and the wealth of charitable institutions to measure religious activity, since it is otherwise difficult to gauge religious sensibilities. Herlihy observed a shift in wealth from ecclesiastical institutions to hospitals and religious brotherhoods, and he called the “spirit which built and enriched” these hospitals “civic Christianity.” However, D’Andrea objects to the connections Herlihy draws between civic Christianity and Renaissance civic humanism. As D’Andrea explains, scholars such as John Henderson, whose own work has identified medieval roots for early modern modes of charity and notions of the common good, express similar concerns over Herlihy’s definition. This includes Terpstra, who argues that creating such a strong link between civic humanism and charity has led scholars to focus mainly on charity in politically independent city-states.43 D’Andrea seeks to overcome this tendency with his study of charity in Treviso, a subject territory of the Venetian state.

This does not mean that D’Andrea completely disregards the concepts of civic Christianity and civic religion. Rather, he focuses on religion as a key motivation for charitable activities in Treviso, and in doing so coincides with works which demonstrate the religious nature of the Italian Renaissance state. Studies of high and low culture, local and Catholic

42 Herlihy based his concept of civic Christianity on his study of Pistoia; see David Herlihy, Medieval and Renaissance Pistoia: The Social History of an Italian Town, 1200-1400 (New Haven: Yale University Press, 1967).
43 D’Andrea, 4-5.
religion, governing symbols and religious rituals, all generally argue in favour of a significant connection between political and spiritual power. D’Andrea describes this connection and his own definition of civic Christianity as an “important nexus of confraternities, civil government, and charity,” in Treviso. This nexus of civic Christianity, according to D’Andrea, helped to shape power dynamics between centre and periphery, as the citizens of Treviso attempted to preserve their local identity both before and after the city’s integration into the larger Venetian state. D’Andrea explains that:

The study of state formation, traditionally the realm of political theorists, has been supplemented by new methods of social history and increasingly focused on the relationships between the ruling and subject cities. The same phenomenon that Pullan observed in Venice also functioned in the relationship between a ruling and subject city, where local elites turned to confraternities and charitable organizations as surrogates for direct political power. Once communes were subsumed in territorial states, they searched for an institution to call their own, and local confraternities became rallying places for civic pride.

As indicated above, Pullan, Cavallo, and Terpstra have demonstrated the truth of this statement for Venice, Turin, and Bologna respectively, and D’Andrea himself certainly shows this to be the case in Treviso. The use of charity as a source of power and local resistance is thus well-

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45 D’Andrea, 2-5.
46 D’Andrea, 5.
47 See Brian Pullan, *Rich and Poor in Renaissance Venice: The Social Institutions of a Catholic State to 1620* (Cambridge, MA: Harvard University Press, 1971); Cavallo, *Charity and*
established in the historiography, as scholars have treated charitable institutions not only in the context of independent city-states but also as a means of negotiating power between the centre and peripheries in larger territorial states. This approach has direct relevance to the present study and its examination of charity in sixteenth-century Siena.

Following the example of the scholars above, this study treats the Ospedale di Santa Maria della Scala as a source of power and a site of negotiation, providing an avenue to explore the geography, or distribution, of power in the Sienese state. Up to the mid-sixteenth century Siena was a powerful, independent republic that governed a large territorial state. As the city’s largest and wealthiest charitable institution, Santa Maria della Scala played a crucial role in the civic, economic, and religious life of the city. Furthermore, Santa Maria della Scala’s extensive patrimony and its network of farms and small hospitals facilitated the strong ties between city and countryside which characterized the Sienese state. Thus, Santa Maria della Scala sat at the centre of its own network of power while also contributing to the city of Siena’s authority as the centre of a territorial state.

By the early sixteenth century, however, factional disputes among the Sienese nobility, the growing power of neighbouring Florence, and the intensifying competition between Spanish and French claims to Italy all combined to threaten Siena’s independence and political stability. By mid-century Siena found itself engaged in a devastating war, the loss of which led to the end of the Sienese republic and Siena’s annexation to the Grand Duchy of Tuscany. Analyzing this series of events enables us to better understand how the geography, or economy, of power in the

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[48] Already by the fourteenth century Siena controlled an area that stretched as far as 100 kilometers south and south-west of the city that encompassed around 300 communities; see Diana Norman, *Siena and the Virgin: Art and Politics in a Late Medieval City State* (New Haven: Yale University Press, 1999), 9-10.
Sienese state altered as Siena became adjacent to the Tuscan state. By using charity and Santa Maria della Scala as the means to examine this transition and the distribution of power, it is possible to observe the multiple layers and complexity of the power dynamics that created the composite state of the Grand Duchy of Tuscany. Furthermore, it provides an opportunity to deepen our understanding of the role of charity in centralizing the Tuscan state and the ways in which the Medici dukes used charity as a means of negotiating power with subject territories.

This role of charity in building the Grand Duchy of Tuscany is especially pertinent given that scholars such as Carol Menning, Nicholas Terpstra, John Henderson, and Daniel Bornstein have demonstrated that the Medici government did indeed use charity as a tool of political consolidation. Henderson’s study of charity in late medieval Florence shows how the Medici increased their power by suppressing confraternities and taking control of hospitals in the late 1400s and 1500s, using them to build patronage networks.49 Likewise, Menning’s work on the Florentine Monte di Pietà in the sixteenth century shows that charitable institutions were an important part of the Medici family’s personal and political agenda in building the Tuscan state.50 According to Menning, the Medici used the Monte as a bank and required it to make loans to their family, friends, and clients. Their support turned it into a strong financial institution, and helped it to maintain its charitable function as well: providing low-interest loans to the poor. This, in turn, helped the Medici solidify their networks of patronage and establish more state control.51

51 Menning, 2-3, 10. It should be noted that Menning’s work has been criticized for failing to make many comparisons with other monti or financial institutions within Florence and Tuscany; she does include a discussion of the Medici’s use of Siena’s Monte di Pietà, but
Research by Terpstra and Bornstein provides even more nuanced evidence regarding the role of charitable institutions in the Tuscan political economy. Terpstra’s article on the Bigallo magistrates and Cosimo I de’ Medici’s creation of bureaucracies to regulate public charity demonstrates the significance of charity as a tool of political consolidation within the Medici government. According to Terpstra, as the Medici sought to centralize Tuscan hospitals under one bureaucracy they often met with resistance from local administrators who used hospitals to increase their own authority.\(^\text{52}\) He argues that one of the factors which shaped the power dynamics in the case of Florence was a difference in how local communities and the bureaucratic centre viewed the practice of charity: the centre saw charity as an institution to be administered while towns and villages treated charity as part of the community’s daily life.\(^\text{53}\) In response to this, Cosimo I’s strategy became what Terpstra calls “negotiated absolutism” in which the central bureaucracy took over administration while appearing to compromise with local interests. In this way, Cosimo I built loyalty among Tuscan elites and goodwill with local administrators, while securing his position of power and becoming essential to both the periphery and the centre.\(^\text{54}\)


\(^{54}\) Terpstra, “Competing Visions of State and Social Welfare,” 1321. In another article published around the same time, Terpstra further emphasized that the idea of centre and periphery should be studied in terms of negotiation and cooperation, and he also makes it clear that different political situations across the Italian peninsula yielded varied results when it came to the politics and power of charity. However, in all of these contexts (Genoa, Bologna, Treviso,
Bornstein’s study of Medici involvement with charitable institutions in Cortona offers a case study which confirms Terpstra’s notion of negotiated absolutism.\(^{55}\) Cortona, which came under Florentine dominance in the early fifteenth century, had two powerful civic charitable institutions. The first, the hospital of Santa Maria della Misericordia, existed before Cortona came under Florentine rule. The second, a union of all lay confraternities in the city called the Unioni dei luoghi pii, was created under Medici rule in 1537. Although the Florentine government took over the appointment of local administrators and influenced the selection of Cortona’s ecclesiastical officers, they largely ignored the city’s charitable institutions. As Bornstein argues, the hospital and confraternities became a way for Cortona’s elite to exercise power in the city and retain some autonomy, especially since the Misericordia owned more land than the bishop and the cathedral chapter.\(^{56}\) After Cosimo I came to power in the early sixteenth century and began his consolidation of the Tuscan state, he sought to bring Cortona more firmly under Florentine control. He did this, however, by lending his support to the Unioni of Bergamo, Modena) the significance of charity and charitable institutions in the process of state formation is clear; see Terpstra, “The politics of confraternal charity: centre, periphery, and the modes of confraternal involvement in early modern civic welfare,” in Vera Zamagni, ed., Povertà e innovazioni istituzionali in Italia dal medioevo ad oggi (Bologna: Società Editrice Il Mulino, 2000): 153-173.


\(^{56}\) Bornstein, “Civic Hospitals,” 7. In his article, “Bounds of Community,” Bornstein uses the city government’s practice of auditing Cortona’s religious insitutions to demonstrate the financial concern and close relationship that existed between local elite and these institutions. The insertion of Florentine officials in Cortona’s affairs after 1411 put a strain on these connections, as Bornstein explains, since “it forced the leading families of Cortona to play a more complicated political game, jockeying for social position and cultural esteem under the eye of a foreign power.” See Bornstein, “Bounds of Community,” 73-81.
confraternities and leaving the Misericordia in local hands. According to Bornstein, this enabled Cosimo I consolidate power in several ways. First, since the *Unioni* was governed by laymen it helped to limit ecclesiastical power in Cortona, thus decreasing potential resistance to Medici power from the local church authorities. Second, it put Cosimo I in the good graces of Cortona’s elites, and gave him the opportunity to eventually incorporate the *Unioni* into the wider Tuscan bureaucracy and draw on its revenues to finance Florentine initiatives.57

Two significant themes emerge from these studies regarding the Medici and their use of charitable institutions as tools of centralization. The first is that the Medici dukes used the regulation of charity to create and bind ties between Florence and its subordinate territory. The second is that a difference existed between the way that the centre and the peripheries viewed charity, and the local significance and character of hospitals prompted rural elite to compete with the centre for control of these institutions. Local resistance to central control combined with Cosimo I’s willingness to negotiate with elites and allow them a degree of autonomy helped create a power dynamic in the Tuscan state in which charity and charitable institutions could serve as both sites of local autonomy and as arms of the territorial state. By addressing these themes and applying them in a Sienese context through an examination of the distribution and negotiation of power between the Ospedale di Santa Maria della Scala, Siena, and the Sienese state before and after Siena’s annexation to the Tuscan state, it becomes clear that hospitals served both these functions simultaneously.

The primary sources and documentation for this study come mainly from the Archivio di Stato di Siena, which houses a large collection dedicated to the Ospedale di Santa Maria della Scala. The richness of the available source material is one of the benefits of studying Santa...

57 The most significant of these was funding for students at the University of Pisa; see Bornstein, “Civic Hospitals,” 20.
Maria della Scala; both the size and wealth of the institution prompted careful and copious record keeping of deliberations, donations, finances, inventories, statutes, privileges, and correspondence among other resources. Additional collections in Siena’s state archives also proved useful, including the records of Siena’s various governing councils, especially the Balìa and the Concistoro. For the late sixteenth century and the period of Medici governance, the Mediceo del Principato archives in the Archivio di Stato di Firenze supplied valuable supporting documentation, which has enriched source material found in Siena.

The four chapters of this study follow a general chronological structure but are thematic as well, covering the origins and growth of the hospital, its importance to the social, religious, political, and economic life of the city, its network of farms and charitable institutions, the impact of the crises and war on the hospital and its network in the first half of the sixteenth century and the effects of the Medici administration, reform, and incorporation into the Tuscan state on the hospital in the latter part of the sixteenth century. The two chapters which follow this introduction treat the growth and development of Santa Maria della Scala as the centre of Siena’s charitable network. Chapter 2 looks at the social, religious, and political power of the hospital within the walls of Siena, addressing the history of Santa Maria della Scala, its foundation, administrative history, and the roles it played in the community in terms of charity and religious life. Most importantly, this chapter establishes the close relationship between the hospital and communal government, as well as the early competition for control of Santa Maria della Scala (and, thereby, access to the hospital’s social, civic, and religious power) that took place between the cathedral canons, the hospital confraternity, and the communal government.

Taking up this discussion, Chapter 3 then looks outside the walls of Siena and addresses the economic power of Santa Maria della Scala. Tracing the origins, extent, and growth of the
hospital’s patrimony (including both farms and small hospitals) this chapter examines the power
dynamics between Siena and its surrounding countryside from the perspective of Santa Maria
della Scala and its network of properties. It includes two case studies, one of the Grancia di Prata
and one of the Ospedale di Todi, which highlight the power relationships between the hospital
and its properties. It shows that, through its economic activities, the institution of Santa Maria
della Scala shaped and negotiated its own geography of power across the Sienese state.

Chapter 4 focuses on the dynamics of power within the hospital’s own network and the
relationship between Santa Maria della Scala and the city government during the sixteenth
century. The chapter is divided into two sections, the first of which takes a detailed look at the
gathering political crises in Siena during the first half of the sixteenth century and their effect on
the hospital and its network. Following this, the second part of the chapter is a detailed study of
the war of Siena in the 1550s, concentrating on the issues confronting Santa Maria della Scala
and its network during the war, the final siege, and the loss of Siena’s liberty. While much of the
current scholarship on charity and civic Christianity treats civic religion as a collaborative,
unifying force, this chapter breaks new analytical ground by exploring how times of crisis and
transition disrupt and raise tensions within civic religion, leading to a disruption in the economy
of power.

The fifth and final chapter looks at Santa Maria della Scala as a source of political and
economic power, as well as a site of negotiation during the post-war adjustment to Medici
governance. Specifically, Chapter 5 examines how Siena’s economy of power, exemplified by
Santa Maria della Scala, altered as Siena adapted to its place in the Tuscan state. It argues that
although the Sienese government attempted to exercise authority and autonomy through its
regulation of Santa Maria della Scala, because Siena’s nobility were not united the Medici dukes
were able to exploit these divisions to increase their power in Siena. However, because Santa Maria della Scala maintained its network and remained central to Siena’s civic and religious life, it was able to function simultaneously as a local power centre and as an arm of the territorial state.

In this way, an analysis of Santa Maria della Scala and Siena in the sixteenth century provides a better understanding of the Sienese state and the importance of charity in creating ties between city and countryside. It also contributes to a more robust understanding of the ways that the Medici dukes used charity and charitable institutions as tools of centralization to consolidate their political power, highlights the complexity of power dynamics that comprised the Grand Duchy of Tuscany, and demonstrates that charitable institutions deserve continued and increased attention in debates surrounding the transition in Italy from medieval communes to early modern states, and the distribution of power within those states.
Chapter 2
Santa Maria della Scala: A Sienese State Agency

“I remind you that [the Ospedale di Santa Maria della Scala] is one of the eyes of your city, and
the right is the Episcopate, while the left eye is the hospital. Look how the piazza in between is
sort of long, like a nose. Hear me! Citizens, give charitably to the hospital!”

San Bernardino di Siena

“Every aspect of life in Siena was thus, in some way or another, connected with the hospital.”

Judith Hook

By nature, the Renaissance hospital was both a providing and a dependent institution. As a
charitable resource for the communities they served, hospitals supplied care of the body for
pilgrims, abandoned children, the poor, and the sick. In addition to the physical services hospitals
provided, the acts of charity performed by the men and women who lived and worked in
hospitals were also spiritual; the good works and piety of hospitals served as a righteous sacrifice
on behalf of society. Through the practice of civic charity, hospitals exercised social, religious,
and civic power. However, at the same time that hospitals fulfilled the role of physical and
spiritual providers, they were also dependent institutions. Hospitals often relied on local church
and civic government in matters of administration and support, and financial stability depended
to a large degree on donations and bequests. By the sixteenth century the Ospedale di Santa
Maria della Scala was the model of a well-developed civic hospital: run by a lay confraternity of
brothers and sisters committed to a life of charitable service, dedicated to the Virgin Mary,
patron saint of Siena, and controlled by the communal government. The transformation of Santa Maria della Scala from a small pilgrim’s hostel in the late ninth century to a multifaceted charitable agency of the Sienese state is attributable to two factors: the evolution of its relationship with the city government and the development of an extensive charitable network. The second of these attributes will be discussed in the next chapter, while the first is the focus of this chapter, which examines the hospital’s origins, administrative history, and its development of social, civic, and religious power in Siena.

**Foundation and Origins: The Cathedral and the Hospital**

The exact founding date of the Ospedale di Santa Maria della Scala is unknown, but the origins of the hospital can be placed in the late tenth or early eleventh century. Of course, like many medieval religious institutions, there is a legend associated with the foundation of the hospital, complete with a mythical founder called the Blessed Sorore. Sorore, a late ninth century cobbler, began his charitable labours by fixing the shoes of the pilgrims and travelers who passed through Siena on their way to Rome. He eventually extended further hospitality by providing them with a place to stay and nursing those who fell ill on their travels. The legend states that before his death, Sorore founded an order of hospital friars to carry on his work, and thus Santa Maria della Scala was born. The legend also states that Sorore’s life of charity was foreseen by his mother, who had a vision shortly after his birth in which she saw a ladder stretching from the earth to the heavens. Climbing the ladder were a number of small children who, when they reached the top, were received into the arms of the Virgin Mary. Depicted in a fifteenth-century fresco by
Vecchietta in the Pilgrim’s hall of Santa Maria della Scala, this dream predicted Sorore’s calling and the eventual service of the hospital as a foundling home.¹

Although the story of Sorore provides Santa Maria della Scala with a history of divine origins, the reality of such a founding is questionable, and because no documentary evidence of Sorore exists the tale is impossible to prove.² There are no records to indicate for certain what happened on the hospital site in the late Roman and early medieval periods; but it is known that by 1075 a hospital structure, located across from the bishop’s palace and church, existed.³ Around the year 1000 records mention the construction of a bishop’s palace and church, canonica sancte Marie domus episcopio Senense, and documents from 1023 provide evidence for the construction of additional buildings associated with the church and palace, including a refectory, a cloister, and a xenodochio et hospitale.⁴ The location of the hospital thus makes it

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¹ For more on the legend of Sorore see Alessandro Orlandini, Gettatelli e pellegrini: gli affreschi nella sala del Pellegrinaio dell’Ospedale di Santa Maria della Scala di Siena: itinerario didattico su una summa figurativa dell’assistenza ospedaliera fra Medioevo e Rinascimento (Siena: Nuova imagine, 1997), 45-46; also H.W. Van Os, Vecchietta and the Sacristy of the Siena Hospital Church: A Study in Renaissance Religious Symbolism, (The Hague, 1974), 1-3.
² It is, however, important to note that even though the story of Sorore may be nothing more than legend, those who governed the hospital and Siena’s city government treated the story of Sorore as the hospital’s origin. This influenced the way in which Santa Maria della Scala was perceived by the people of Siena, a point that will be discussed in more depth later in this chapter.
³ According to some archaeologists, the hill on which the cathedral and Santa Maria della Scala currently sit was originally the site of a Roman temple; there is also some indication that development and construction on the hill began as early as the second century CE. See Federico Cantini, “Prima dell’ospedale: Siena tra tarda antichità e XI secolo. Genesi della città altomedievale a partire dalla definizione della civitas christiania,” in Fabio Gabrielli, Ospedale di Santa Maria della Scala: ricerche storiche, archeologiche e storico-artistiche (Siena: Protagon, 2011): 31-54; Beatrice Sordini, Dentro l’antico ospedale: Santa Maria della Scala, uomini, cose e spazi di vita nella Siena medievale (Protagon, 2010), 19. See also Roberto Parenti, “Santa Maria della Scala: Lo Spedale in Forma di Città,” in Roberto Barzanti, Giuliano Catoni, and Mario De Gregorio, eds. Storia di Siena, I. Dalle origini alla fine della Repubblica (Siena: Alsaba, 1995), 240.
⁴ Sordini, Dentro l’antico ospedale, 19.
plausible that its foundation was precipitated by the bishop and the cathedral canons, an idea supported by documentary evidence from the eleventh and twelfth centuries. For example, the first recorded mention of the hospital comes from a deed of gift dated to 1090, detailing a grant of land to the “xenodochium et hospitalis de Canonica Sancte Marie.” This deed of gift for a xenodochium, or hostel, named after Mary and attached to the cathedral canons, is the earliest known mention of the hospital by name and is generally cited as confirming evidence that the cathedral canons should be credited with Santa Maria della Scala’s founding.

Further proof of the connection between Santa Maria della Scala and the cathedral canons comes from documents which date to the late twelfth century. On 16 April 1188 an agreement was forged between the hospital brotherhood and the canons which stated that the cathedral would no longer assume possession of lands donated specifically to the hospital. Then, in 1194, Pope Celestine III granted two privileges to Santa Maria della Scala. One offered apostolic protection to the hospital and the other gave the hospital brothers the right to select their head administrator, the rector, themselves. However, these privileges did not free the brothers from all obligations to the canons; in fact, the pope specifically stated that the canons still held parochial rights, “ius parochiale,” over Santa Maria della Scala’s staff and administration. The direct connection between the cathedral and the hospital in these documents makes it clear that prior to 1194 the canons participated in Santa Maria della Scala’s administration. However, by granting

5 Orlandini, 24; also Michele Pellegrini, *La comunità ospedaliera di Santa Maria della Scala e il suo più antico statuto* (Siena: Pacini, 2005), 27.
6 Pellegrini, *La comunità ospedaliera*, 37; also Stephan R. Epstein, *Alle origini della fattoria toscana: L’ospedale della Scala di Siena e le sue terre (meta ‘200 – meta ‘400)* (Firenze: Salimbeni, 1986), 7. Epstein clarifies that these privileges marked the conclusion of a long dispute between the hospital brothers and the cathedral canons concerning the right of the brothers to control land given to the hospital.
the hospital brothers the freedom to select their own rector and the right to retain control of lands
granted to them, these papal privileges paved the way for a more independent institution.

In its origins, then, it is probable that, as Michele Pellegrini suggests, Santa Maria della
Scala was really no different from other charitable institutions of the time, most of which were
connected to a church or monastery and operated on a small scale to provide assistance for
pilgrims and the community at large. Indeed, the growth of Santa Maria della Scala throughout
the eleventh and twelfth centuries was a process that advanced quietly through donations and
bequests until the hospital achieved a prominent place amongst the city’s institutions. One
obvious reason for this prominence is reflected in the hospital’s name and physical location.
Santa Maria della Scala was not associated with just any church in Siena; rather it was tied to and
founded by the cathedral church, which gave the hospital an advantage that no other charitable
institution in the city possessed. Although it is not clear exactly when the use of the cathedral’s
steps as an identifying factor for the hospital began, the first recorded use of the word *scala* (step
or stair) to describe the hospital comes from the 1188 agreement between the hospital brothers
and the cathedral canons.
Santa Maria della Scala’s first set of statutes, issued in 1305, named
the institution as the “Ospedale di Santa Maria Vergine di Siena,” and emphasized the building’s
location as “innanz[i] la chiesa maggiore de la citta,” or “in front of the major church of the
city.” Thus, the hospital’s proximity to the cathedral gave it a place of geographic importance in
the city and directly connected it to the church dedicated to Siena’s patron saint, the Virgin
Mary.

8 Pellegrini, *La comunità ospedaliera*, 28-29. It is also possible that “scala” could be a
reference to Jacob’s ladder or the ladder in the vision of Sorore’s mother, but I have not yet
found evidence to directly confirm this.
9 See ASS, *Ospedale di Santa Maria della Scala*, Statuti e Ordinamenti, N. 2b, f. 1v.
Seeking Independence: The Hospital and the Commune

Throughout the earliest centuries of Santa Maria della Scala’s history, then, the hospital should not be considered as an institution separate from the cathedral. In addition to the physical proximity of Santa Maria della Scala and the cathedral, the daily life of the hospital’s family fell under the jurisdiction of the cathedral canons, who administered hospital affairs and oversaw the lay brothers and sisters who joined the hospital’s confraternity. However, in the thirteenth century, Santa Maria della Scala’s rectors began the process of distancing the hospital from the cathedral and increasing its association with the communal government. Indeed, the events of the late twelfth and thirteenth centuries established important precedents for the years to come. Through a series of papal bulls and interventions by the city government Santa Maria della Scala was steadily removed from ecclesiastical control and placed instead in the hands of the communal government.

Santa Maria della Scala’s first step towards autonomy was initiated by the papal bulls of 1194 which established the right of the hospital brothers to choose the rector themselves. From the first election on, the voting body typically chose wealthy men of noble status to serve as rector. This practice became important to the history of the hospital since along with their status and wealth these noblemen also brought to Santa Maria della Scala the power and influence they had in the community. The first documented rector selected by the hospital brothers was Incontrato Incontrati (rector circa 1195-1202), a member of a prominent aristocratic family. His successor, Beringario di Uguccione Beringhieri (rector circa 1202-1218) was a former city

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10 Michele Pellegrini, “L’Ospedale e il comune: immagini di una relazione privilegiata” in Arte e assistenza a Siena: Le copertine dipinte dell’Ospedale di Santa Maria della Scala (Siena: Pacini, 2003), 30.
11 Incontrati is recognized as the first true rector of the hospital since he was the first selected by the confraternity rather than the canons; see Sordini, Dentro l’antico ospedale, 25-26.
consul. Then, in 1218 Cacciaconte di Beringario Cacciaconti was appointed to the rectorship. Cacciaconti was from a wealthy consular family and had a vast network of political connections in Siena and throughout the countryside. Cacciaconti took full advantage of the hospital’s newly earned right to administer its own property and spent his twenty years as rector earnestly building the hospital’s network and expanding its patrimony. Cacciaconte was able to use his political connections to amplify the hospital’s possessions and acquire the submission of rural hospitals to the control of Santa Maria della Scala.\(^\text{12}\)

Another sign of growing independence came in 1262 when the Bishop of Siena, Bonfiglio, granted the hospital’s request to construct a church of its own. Prior to this, in 1257 Santa Maria della Scala’s rector had obtained authorization from Pope Alexander IV for the construction of a hospital church and the ability to appoint a private chaplain.\(^\text{13}\) The exact dates for the construction are unknown, but most likely began sometime between 1270 and 1280, although the earliest reference to Santa Maria Annunziata as a dedicated church comes from 1328.\(^\text{14}\) Regardless, the construction of its own church enabled Santa Maria della Scala to distance itself further from the cathedral canons and act not only as a house of charity but also as a house of worship.

As the hospital slowly expanded physically within the city and constructed a network and power base throughout the countryside, it began to attract the attention of the communal government. In addition to receiving permission to construct a church in 1262, the communal statutes of the same year required the podestà of Siena to swear, among his other duties, to take upon himself the responsibility to protect and defend Santa Maria della Scala. This made Santa

\(^{12}\) Epstein, 8.  
\(^{13}\) ASS, *Ospedale di Santa Maria della Scala*, Privilegi, N. 115, 169v. See also: Sordini, *Dentro l’antico ospedale*, 28; Os, 3-5.  
\(^{14}\) Sordini, *Dentro l’antico ospedale*, 44; Os, 89.
Maria della Scala the first charitable institution in the city to come under communal protection. Then, in 1274, the commune turned this written promise into a reality, establishing a committee of three men, each a representative from one of the three terzi, or districts, of the city, to oversee the economic affairs of the hospital and ensure that no fraud or embezzlement occurred. The government’s responsibility toward Santa Maria della Scala was re-emphasized in 1337 with a clause requiring the commune to not only defend and protect the hospital, but also to see that its property and the number of its oblates increased.

In addition to taking responsibility for the protection of the hospital, the city government also selected Santa Maria della Scala as the repository for the white flag Siena’s armies had flown at the battle of Montaperti in 1260, where they won a great victory over Florence. The hospital housed the city’s ballot box for elections, and during elections both the flag and the ballot box were displayed together to remind the Sienese of their city’s greatest victory. Not only was the possession and care of these items, which symbolized the civic pride and ideals of Siena, an honour for the hospital, but it also began to legitimize the hospital as a civic institution.

Under the rule of the Nine, which commenced in 1287, the communal government began a more determined effort to exert authority over Santa Maria della Scala as part of a broader program to govern Siena in the interest of the whole community. In order to prevent the church from holding too much power in the city, the Nine asserted the rights of the commune over the clergy, and Santa Maria della Scala was a part of their strategy. For example, in 1309 the Nine ordered the hospital to hang the balzana, Siena’s black and white coat of arms, on either side of

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15 Other charitable institutions, such as the Casa della Misericordia and the Spedale di Monna Agnese were not granted similar status until 1287; see Lucia Brunetti, Agnese e il suo ospedale, Siena, XII-XV secolo (Siena: Pacini Editore, 2005), 43-44.
16 Epstein, 9. The commune’s involvement with the hospital and its growing network and property will be treated a length in the next chapter.
17 Hook, Siena, 7.
the hospital’s main doors as a sign of the commune’s interest in and ownership of the hospital.
The cathedral canons protested, but since they no longer had full authority over hospital affairs
the balzana was hung as ordered.\footnote{William M. Bowsky, \textit{A Medieval Italian Commune: Siena Under the Nine 1287-1355} (Berkeley: University of California Press, 1981), 273. The details of the dispute are unclear; Bowsky gives it the most attention but does not fully explain the disagreement, only the outcome. See also Bowsky, \textit{The Finance of the Commune of Siena 1287-1355} (Oxford: Clarendon Press, 1970), 215-216.} Furthermore, as part of the Nine’s program to enrich and
beautify the city, Santa Maria della Scala received permission and funding to construct new
buildings.\footnote{The rector and chapter of the hospital petitioned the Consiglio Generale for permission
and funds to undertake new construction beginning in 1336; see Sordini, \textit{Dentro l’antico spedale}, 67-69.} This was particularly beneficial for the hospital, which had almost reached its
capacity in the old structures and needed to expand to allow for further growth; it also showed
that the interest of the Nine went beyond merely having claim over the hospital.

Thus, between 1262 and 1309 the relationship between the hospital and the commune
quickly altered from one where the government simply claimed a responsibility to protect Santa
Maria della Scala to a patronage relationship in which the commune exerted authority over the
hospital.\footnote{Pellegrini, “L’Ospedale e il Comune,” 33.} However, the cathedral canons and local religious leaders still had some control of
hospital administration. For example, at the same time that the communal symbols were hung by
the main doors, Santa Maria della Scala’s governing chapter decided, under ecclesiastical
direction, to create a formal rule to better regulate the daily life of the hospital community. The
creation of statutes or a rule for the hospital was to be based on the format of a religious life, to
bring more order to the lay brother and sisterhood which included members who gave their
possessions to the hospital and then went to live and work there, as well as members (married
couples in particular) who transferred their property and served in the hospital daily, but still lived at home.

This undertaking was a threat to the communal government’s relationship with the institution because, as Pellegrini explains, the government viewed the creation of the statutes as a way for the cathedral canons to bring Santa Maria della Scala back under their control. Additionally, the change potentially meant that the commune would lose the financial benefits that came from having jurisdiction over the hospital. It appears that Santa Maria della Scala’s administration was also opposed to going back under ecclesiastical control: in 1298 Ristoro di Giunta, rector at the time, petitioned the city priors to aid the hospital in its quest to remain independent of the clergy, stating that the hospital belonged to the commune and should be governed by the Nine. Similar disagreements and interventions continued to occur periodically: for example, in provisions dated to 29 December 1329 the Nine claimed the right to settle all civil cases that involved Santa Maria della Scala and the other Sienese hospitals in secular rather than ecclesiastical courts. The Nine claimed that this right was owed to them since the government officially protected and defended the city’s charitable institutions but Siena’s ecclesiastical authorities fought them on the matter. After four months of disputes and

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21 Pellegrini, “L’Ospedale e il Comune,” 33-34. One of the financial benefits of exerting control over the hospital was their ability to use it as a lending agency rather than relying on a member of the nobility or a bank; for example, in 1316 the government pawned two-thirds of the land it owned in Campagnatico to Santa Maria della Scala and when, in 1332, they could not repay the loan they were able to convince to hospital to give them a semi-illegal extension. The government finally repaid the loan in 1339. See Bowsky, A Medieval Italian Commune, 190.

22 “L’Ospedale ‘aparteneva’ al Comune e doveva essere governato dalla provvidenza dei Nove e dell’intera colletività.” The latin reads: “cum ipsum hospitale proprium sit Comunis et vestra et comunis providentia debeat gubernari.” as quoted in Pellegrini, La comunità ospedaliera, 34.
consultation with experts in both civil and canon law the Nine relented and withdrew their claim.  

Although disagreements over the few remaining ties to the cathedral still took place, by the early fourteenth century Santa Maria della Scala had become a Sienese state agency. This was partly due to the concerted efforts of the Nine to bring the hospital under communal control, but also because the rectors made a conscious choice to side with the government. There were many benefits to status as a civic institution, but in some ways the hospital merely exchanged one dependency for another. Santa Maria della Scala obtained privileges and immunities from the communal government that helped its wealth and power to grow, including various tax exemptions. However, the government also gained more direct access to the hospital and its resources as a failsafe in times of financial distress. For example, in both 1304 and 1305 the government pawned land to the hospital, thereby receiving the loans it needed to survive. Although these forced loans often saved the city, they placed a heavy financial burden on Santa Maria della Scala. As this process was repeated during the fourteenth, fifteenth, and early sixteenth centuries, the communal government’s use of forced loans frequently left the hospital near its own financial ruin, an issue which will be explored in the next chapter.

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23 Bowsky, *A Medieval Italian Commune*, 116. The experts informed the Nine that removal of this jurisdiction from the church would constitute an offense against the church’s liberty and could result in excommunication.

24 A record of various tax exemptions granted to the hospital (compiled in the late sixteenth century) can be found in: ASS, *Ospedale di Santa Maria della Scala*, Privilegi, N. 115, ff. 114r-129v.

25 This is not to say that the church did not object to this action by the commune and the hospital, but it lost the argument over jurisdiction in the end; see Bowsky, *A Medieval Italian Commune*, 273. Additionally, Bowsky cautions against assuming too much antagonism between the church and communal government in Siena; while they disagreed on certain issues the two actually worked together quite well during this period. One example he cites is the fact that the main financial offices of the city, the Biccherna and the Gabella, were both administered by Cistercian monks from San Galgano.
The Fourteenth Century: Organization, Administration, and Expansion

Prior to 1305 Santa Maria della Scala did not have any written statutes or rules; instead, the form and function of the hospital’s services grew organically over the centuries, and it is clear that even without a firm set of rules the hospital managed to adapt and function well, even prosper. However, with the hospital’s expansion and the multiplicity of services it provided by the end of the thirteenth century, as Pellegrini explains, the hospital community was multiform and nearly impossible to define.\textsuperscript{26} The creation of statutes thus helped to provide improved organization and a more uniform way of life for those who lived and worked within the hospital’s walls.

The brothers and sisters of the Santa Maria della Scala’s lay order were referred to as oblates, and technically fell under the category of Augustinian tertiaries. Oblates were required to dedicate not only their time and energy to serving in the hospital, but also all their possessions as well. They made no formal religious vows except promises to obey the rector and to commit their lives to the practice of charity through serving and working at Santa Maria della Scala.\textsuperscript{27} Upon entrance into the hospital family each oblate put these commitments in writing by signing a notarized statement declaring his or her dedication to the hospital and wish to renounce the world.\textsuperscript{28} Becoming an oblate and joining the order did not necessarily mean living in the hospital; men and women had the option of choosing to continue living on the property they donated to Santa Maria della Scala rather than staying in the hospital itself.\textsuperscript{29} However, those who lived in the hospital faced more restrictions than those who chose to live outside its walls. The most significant difference was that those who continued to live in their own property

\textsuperscript{26} Pellegrini, \textit{La comunità ospedaliera}, 41.
\textsuperscript{27} ASS, \textit{Ospedale di Santa Maria della Scala}, Stauiti e Ordinamenti, N. 2b, ff. 6v, ff. 45v-46v.
\textsuperscript{28} These statements are preserved in record books titled “Donazioni e Oblazioni;” see ASS, \textit{Ospedale di Santa Maria della Scala}, Donazioni e Oblazioni, Nos. 62-63.
\textsuperscript{29} Toti, 62.
retained the right to revoke their commitment and donation of land. On the other hand, the brothers and sisters who elected to live in the dormitories of Santa Maria della Scala promised never to attempt to recover their possessions. These property requirements were not only for the oblates; those given the office of rector donated all personal possessions to the hospital as well.

The purpose of the statutes was to create a more firm set of guidelines for the administration and daily life of the institution. Santa Maria della Scala’s administrative chapter did not come up with a code of conduct on its own; instead the chapter enlisted the aid of a local Augustinian prior who is generally recognized as the unaccredited author of the 1305 statutes: the Blessed Agostino Novello. Agostino was an aristocrat from southern Italy who had a doctorate in civil and canon law from the University of Bologna.\(^{30}\) He had a career at the court of Manfred of Sicily (r. 1258-66) but joined the Augustinian order as a lay brother after having a religious experience during the battle of Benevento (1266). He kept his former profession a secret for many years, until a dispute with the local bishop compelled him to write a defence of his monastery’s property rights and another lawyer recognized him as a former colleague from Bologna. When the general of the Augustinian order, Clement of Osimo, heard about Agostino he brought Agostino to Rome, ordained him as a priest, and commissioned him to work on the order’s constitutions. Agostino completed a full reform of the constitutions and in 1298 was elected Prior General of the order; he tried to refuse, but Pope Boniface VIII ordered him to accept. He resigned only two years later and spent the last ten years of his life at the hermitage of San Leonardo al Lago, located just to the north-west of Siena. Both his background and his

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\(^{30}\) The statutes do not name Novello as their creator and Novello himself did not claim authorship, however most scholars agree that if he was not the author of the statutes themselves, he was at least the author of a rule upon which the statutes were based. See Pellegrini, *La comunità ospedaliera*, 22-24.
involvement in charitable work with Santa Maria della Scala made Agostino an appropriate choice for author of the statutes.

Agostino’s influence is one of the reasons that the statutes read much like a monastic rule, despite the fact that the brothers and sisters of the hospital were not considered monks or nuns. Meant to govern and structure the daily lives of the men and women who worked in the hospital the statutes cover everything from when to pray, sleep, and eat, to the proper distribution of alms and the duties and functions of each division of the hospital (infirmary, hostel, and orphanage). Additionally, the statutes allude to Santa Maria della Scala’s growing relationship with the communal government and the city of Siena and reflect the hospital’s growing importance as a civic institution. The first provision of the statutes makes it clear that the rector and all members of the hospital family should dedicate themselves to love, guard, and honour the commune of Siena and its officials, and to serve the poor of the city. In return, the communal government assured that it would defend the hospital, and all its possessions, including all of the benefits and exemptions which were the hospital’s right.

The growing relationship between the hospital and the communal government visible in the statutes is further reflected in the growth in Santa Maria della Scala’s popularity with the Sienese community. As the hospital grew in prominence, increasing numbers of individual citizens took an interest in supporting the hospital through donations and bequests, and by the fourteenth century Santa Maria della Scala received the bulk of donations made to hospitals in

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31 The statutes are made up of 61 individual capitoli; see ASS, Ospedale di Santa Maria della Scala, Stauti e Ordinamenti, N. 2b

32 ASS, Ospedale di Santa Maria della Scala, Stauti e Ordinamenti, N. 2b, f. 2v.

33 “... volendo che spessamente sia detto pubblicamente per lo rettore e per li frati del detto spedale nella congregazione del capitolo del detto spedale che nesuna cosa o ver possessione la quale non sia del detto spedale sia defesa de le gravezze da le exactioni del Comune de Siena per alcuno a nome del detto spedale,” ASS, Ospedale di Santa Maria della Scala, Stauti e Ordinamenti, N. 2b, f. 2v.
Siena. The donations ranged from small amounts of money, to the contribution of homes and large tracts of land. One prominent example is that of the Blessed Giovanni Colombini, who was a member of the ruling elite, part of the wool guild, and a banker. Just before the fall of the Nine in 1355 Colombini decided to retire from public life and turn to the religious life instead. He founded the Order of the Gesuati and gave away all his property: one portion to a Sienese convent and the other to Santa Maria della Scala. These kinds of donations helped not only to enrich the hospital and expand its holdings, but also to place Santa Maria della Scala at the centre of Sienese charitable giving and civic religion.

The importance of the hospital as a meeting point for civic devotions and the practice of charity are evidenced by the various lay confraternities which participated in the hospital’s charitable services. The confraternity of St. Anthony Abbot in San Martino spent time at the hospital each week, assisting with nursing in the infirmary. Likewise, the members of the Company of the Blessed Virgin Mary, the Company of Santa Caterina della Notte, and the Company of San Girolamo all spent time serving the poor and nursing the ill, as well as conducting meetings in the hospital. The Company of Santa Caterina della Notte became particularly important since they made it their mission to help the hospital with the burial of the dead. During her lifetime in the late fourteenth century Saint Catherine of Siena herself spent a great deal of time working and serving in Santa Maria della Scala, and she often used the hospital crypt to hold meetings with her followers.

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The increasingly important civic role of Santa Maria della Scala allowed the hospital to serve the city not only by caring for the sick, the poor, and the needy but also to lobby the government on behalf of the poor. One example comes from 1350, just before the fall of the Nine and immediately following the devastation of the Black Death. The rector of Santa Maria della Scala was the only speaker at a meeting of Siena’s General Council held in early May to discuss how the government could alter existing ordinances to alleviate and prevent acts of violence and oppression against the poor of the city. The council voted in favour of the rector’s proposals, and although the changes were never fully implemented (most likely due to the political troubles of the time), the example still stands as evidence of the hospital’s role in the community at large.37

Indeed, civic reliance on Santa Maria della Scala intensified during the crises and famines of the fourteenth century. In 1336 the hospital began construction on new buildings which provided jobs for many of the city’s poor. Prior to the Black Death, Santa Maria della Scala’s vast network of farms enabled it to supply grain for the urban population during famines in 1328-29, 1339, and 1346.38 The hospital managed to endure the Black Death and the financial difficulties which accompanied the collapse of the government of the Nine in 1355, flourishing during the decades of political upheaval that followed. Throughout the fourteenth and fifteenth centuries Santa Maria della Scala’s connection to the urban community remained close and with the help of continuous bequests and its activities as a pawn broker, the hospital managed to profit and become progressively wealthier.

37 For more details on the event see Bowsky, A Medieval Italian Commune, 41.
38 Hook, Siena, 19.
Art, Preaching, Civic Religion, and Santa Maria della Scala

The increasing wealth of Santa Maria della Scala was put to good use by hospital administration after the Black Death, transforming the institution into one of Siena’s major patrons of the arts. During this period, hospital rectors commissioned a number of works to decorate the hospital’s church and ordered the construction of new chapels to house a growing collection of relics. In 1359 Santa Maria della Scala purchased a large collection of relics from Byzantium for the sizeable cost of 3000 gold florins. The relics came from the personal collection of the Imperial family in Constantinople and included the Virgin Mary’s belt, pieces of the True cross (one housed in a valuable enamel Byzantine reliquary), and rope from the scourge Christ used to drive the money-lenders from the temple, pieces of his final garments, and the lance and sponge from the crucifixion.39

The acquisition of these relics became another way for the hospital to serve the community, since the attraction of such a collection provided an additional enticement for pilgrims to stop in Siena. This, in turn, helped stimulate the city’s economy in the difficult years after the Black Death.40 Moreover, the acquisition of the relics, which were housed in the hospital’s church, served to enhance the place of Santa Maria della Scala in the city’s civic and religious devotions. In fact, in 1359 the city government asked the hospital to host Siena’s annual celebrations for the festival of the Annunciation (March 25) and from 1359 on this became

40 McClanan, “Bulgarini’s Assumption with Doubting Thomas,” 67. Os points out that the hospital was most likely able to afford such a purchase because of the wealth it acquired during the Black Death as numerous citizens died and left their money and estates to the hospital; see Os, 5-6.
standard practice.\textsuperscript{41} As part of the festival, the people of Siena gathered in the piazza between Santa Maria della Scala and the cathedral to view the relics, which were lifted and shown through a small window in the hospital’s façade. Although the window is no longer extant, the stone bench constructed as a seat for city officials to occupy during the celebrations, still exists.\textsuperscript{42}

In the late fourteenth century Pope Urban V increased the attraction of Santa Maria della Scala’s relics by conferring an indulgence on those who worshipped the relics on certain festival days. To further impress those who came to view the relics, enterprising rectors such as Giovanni di Francesco Buzzichelli (r. 1434-1444) commissioned artists to “visualize the historical importance of the hospital and the exceptional value of its relics in works of art.”\textsuperscript{43} New altarpieces, reliquaries, and shrines were commissioned from Sienese artisans working in gold, silver, and bronze, in order to highlight the saints and their relics. Buzzichelli also had a new sacristy built to house the relics and commissioned Vecchietta to decorate it. The city supported Buzzichelli’s efforts to emphasize the relics by agreeing to give the hospital a certain weight (48 libre) of beeswax candles for the ceremony each year.\textsuperscript{44}

In addition to the relics, Santa Maria della Scala’s administrators also embarked on an ambitious decoration program, engaging local Sienese artists to decorate the hospital’s church and the \textit{pellegrinaio}, or pilgrim’s hall. Since the church was dedicated to Maria Annunziata, Ambrogio and Pietro Lorenzetti were commissioned in 1335 to paint four frescoes with scenes of

\textsuperscript{41} The celebration of this Marian feast was second only to the feast of the Assumption, the city’s primary and most important civic religious celebration; see Norman, \textit{Siena and the Virgin}, 15.
\textsuperscript{42} Os, 6.
\textsuperscript{43} Os, 8.
\textsuperscript{44} Os, 10.
Mary’s life on the façade of the church. In 1434 Buzzichelli also hired Vecchietta, Pellegrino di Mariano, Priamo della Quercia and Domenico di Bartolo to decorate the *pellegrinaio* with frescoes. The resulting works of art illustrate, perhaps better than any documents, the ties between the hospital, its charitable work, and Siena’s patron saint, as well as the strong relationships between the hospital, the Sienese community, the cathedral, and the communal government. As Fabrizio Nevola explains in his work *Siena: Constructing the Renaissance City*, Buzzichelli’s construction and decoration projects for both the exterior and interior of the hospital “improved [Santa Maria della Scala’s] visible standing as one of Siena’s most important public institutions, projecting the city’s munificence onto the public stage of the piazza, which separated it from the cathedral.” Additionally, the surviving interior cycle of frescoes makes some important suggestions about the ways in which the hospital viewed itself and its relationship to the religious and civic life of the city.

In the hospital’s Pellegrinaio there are two cycles of frescoes, one on the eastern wall depicting important events in the Santa Maria della Scala’s history and one on the western wall illustrating the various charitable functions of the hospital. First on the eastern wall is Vecchietta’s fresco which shows the vision of Sorore’s mother. (Figure 1)

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45 The cycle of frescoes included scenes of Mary’s birth, presentation at the temple, betrothal to Joseph, and the Assumption. Painted by the Lorenzetti brothers and Simone Martini the frescoes decorated the façade until 1720 when they were removed during renovations. See Norman, *Siena and the Virgin*, 87-91.

46 Nevola, *Constructing the Renaissance City*, 131-132.
In the foreground the blessed Sorore is shown kneeling before the bishop of Siena, reciting of his mother’s dream, which is depicted behind the bishop. Then, on the right side of the fresco, the
bishop, with a small child at his side, places an offering in Sarore’s hand so that the saint may begin his charitable work. With this combination of scenes Vecchietta provides a compelling account of the hospital’s founding, showing that Sarore was destined to serve the poor and that Siena’s bishop supported him in this undertaking.

Ecclesiastical support is also a theme of the accompanying fresco, which illustrates the architectural expansion of the hospital. (Figure 2) In this scene, painted by Domenico di Bartolo, the bishop of Siena and his court observe construction work on the hospital from their horses,

Figure 2. Detail from Domenico di Bartolo, The Bishop Giving Alms (1442/1443). Public domain, via Wikimedia Commons, cited 21 March 2013.
while the rector (identifiable by the habit he wears) receives a donation from one of the canons. The prominent place given to the cathedral in the fresco makes it clear that the hospital recognized its ties to the church. In addition to this, the busy workers climbing scaffolding, collecting bricks, measuring, and planning demonstrate not only the prosperity of the hospital but its role in the community as an employer. Indeed, the constant construction, renovation, and expansion of the hospital from the late thirteenth through the early sixteenth centuries provided job security for many Sienese, especially the many immigrants to the city from the countryside.

Just as the frescoes emphasize the connection between the hospital and the church, they also highlight events that transformed the hospital into a civic institution. First, to recognize the creation of the 1305 hospital statutes and the role that Agostino Novello played in their composition, Priamo della Quercia painted a fresco that shows the Blessed Agostino bestowing the hospital’s habit on a new rector.47 (Figure 3) The position of the rector as he kneels before Agostino to receive that habit recalls the traditional practices of ecclesiastical robing ceremonies. To the right there is an open doorway through which the stairs and the façade of the cathedral are visible, showing the physical relationship between the church and hospital. There are also three men standing behind Agostino examining a book, perhaps representative of the hospital statutes.

The final fresco on the east wall depicts the event which granted Santa Maria della Scala its freedom from the canons and put it on the path to becoming a civic institution: Pope Celestine III’s grant of autonomy to the hospital. In this work Domenico di Bartolo places the rector of Santa Maria della Scala kneeling before the enthroned Pope, who offers the papal bull to the

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47 The story of Agostino’s involvement with the hospital also includes the idea that he created a new habit for the lay brothers of the hospital: a white cap to cover the head with a black wool cap on top of that and a mantle with a little ladder sewn in yellow silk to the left shoulder. See Orlandini, Gettatelli e pellegrini, 49.
outstretched hands of the rector. The painting is full of various additional figures as well: cardinals, jurists, richly dressed men and women (a few in imperial garb) and several people who

Figure 3. Priamo della Quercia, *The Investiture of the Rector by the Blessed Agostino Novello* (1442). Public domain, via Wikimedia Commons, cited 21 March 2013.
are clearly foreign. One new interpretation of this fresco suggests that Bartolo chose to include all these figures in his depiction of this event from the hospital’s past to coincide with a contemporary event. Between March and September of 1443 Pope Eugene IV and his court resided in Siena, staying in a building near the hospital. While in Siena he conducted a great deal of foreign, diplomatic business, and focused on his preparations for a new crusade against the Turks. This could explain the presence of the foreign figures in the painting and the rich gathering around the Pope.48

With the history of the institution on the east wall, the artists used the west wall to create a cycle representing the hospital’s many functions and charitable activities. The most famous fresco on the wall, titled *Care and Government of the Ill*, is meant to provide a window on the daily activities of Santa Maria della Scala’s infirmary. (Figure 4) As Orlandini points out, while most of the frescoes on the east wall were set in imaginary locations, those on the west wall were instead based on actual spaces within the hospital.49 The viewer’s eye is immediately drawn to a figure on the front left side: a man seated on a bench with a gaping wound in his upper thigh. One of the hospital friars kneels in front of him, performing a service that all patients would receive upon admission: the washing of their feet. This was required for health and sanitation reasons, but also as an act of service in emulation of Christ.50 From behind, another friar covers the wounded man with a cloak, while one of the hospital’s surgeons watches nearby, waiting with pincers in hand for these preparatory acts to conclude so he can begin to suture the wound.

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48 Enrico Toti, *Santa Maria Della Scala, A Thousand Years of History, Art, and Archaeology* (Siena: Protagon, 2008), 47.
49 Orlandini, *Gettatelli e pellegrini*, 52.
50 Based on the detail he provided in these frescoes it seems that Bartolo either read or was told about the hospital’s statutes since every action he depicts here can be found recorded in the statutes themselves; see Toti, *Santa Maria della Scala*, 58-59; also, ASS *Ospedale di Santa Maria della Scala*, Statuti e Ordinamenti, N. 2b, ff. 23v–25r, 34v–35r.
Around this central scene, various other activities can be observed: on the far left an attendant lowers a patient into bed, behind them two doctors consult a urine specimen for diagnosis,

Figure 4. Domenico di Bartolo, *The Care and Healing of the Sick* (1440/1441). Public domain, via Wikimedia Commons, cited 21 March 2013.

while on the far right a priest hears the confession of a patient while servants move through the infirmary carrying a bier on their shoulders. But beyond the figures in the painting, it is the small details Bartolo included that really make the fresco work as window into the hospital’s daily life. The blankets, bottles, slippers, basins, towels, and even the cat and dog help to create a sense of what the infirmary would have been like. The blending of activities in the painting also
emphasizes the dual nature of the infirmary’s mission: to provide both care of the body and care of the soul.\textsuperscript{51}

Similar to this depiction of the infirmary, the other frescoes depict a number of activities and small details that help to project an image of the hospital as a busy, productive, charitable institution. To the right of the infirmary fresco, Bartolo painted a scene representing the distribution of alms, and once again the location is an actual space in the hospital: the church of Santa Maria Annunziata. (Figure 5) As in other frescoes, there are multiple activities occurring simultaneously. In the foreground, we see a woman with a two children, one holding her hand and one in her arms, a figure perhaps meant to symbolize charity. To her left a man receives clothing from one of the hospital friars and to her right we see a crippled beggar. On the far side of the scene the rector stands, tipping his hat and conversing with a well-dressed man, perhaps meant to represent a benefactor of the hospital. Behind them a crowd of people (including men, women, children, and even an infant in a basket) who have received their alms exit through the main church doors. Meanwhile, at another door one of the hospital friars hands out bread baked with the hospital’s insignia on it to the poor waiting at the door.\textsuperscript{52} This daily distribution of bread sustained many of the city’s poor, as well as pilgrims and travelers the hospital hosted.\textsuperscript{53}

\textsuperscript{51} For more on this idea see: John Henderson, \textit{The Renaissance Hospital: Healing the Body and Healing the Soul} (New Haven, Conn.: Yale University Press, 2006).

\textsuperscript{52} Through this door, the cathedral is once again visible, reminding the viewer of the physical connection between the hospital and other spaces in the city. As Nevola puts it: “Moreover, the images of the Pellegrinaio not only contained frequent references to the Commune through the display of arms, but also made a tangible link between ideal views of hospital life and the urban environment of Siena, by portraying the open doors of the Spedale and the Duomo and bishop’s palace beyond.” See Nevola, \textit{Constructing the Renaissance City}, 132.

\textsuperscript{53} ASS, \textit{Ospedale di Santa Maria della Scala}, Stauti e Ordinamenti, N. 2b, ff. 26r–27r.
Related to the distribution of alms, another of the frescoes depicts the customary feeding of the poor through banquets which the hospital offered six times a year. In this scene Bartolo again emphasizes the same themes of charity that can be observed in the other frescoes; there are tables with a number of people seated for the meal, while members of the hospital confraternity move about carrying trays of food to serve them. In the centre the rector receives a poorly-clothed man, helping him rise up from a stooped position, while several richly dressed figures look on.

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54 The six banquets coincided with Easter, Pentecost, the feast of Saint John in May, the Assumption, All-Saints Day, and Christmas; see ASS, Ospedale di Santa Maria della Scala, N. 2b, ff. 46v–47r.
Rounding out this cycle of frescoes is one which depicts the life of the hospital’s foundlings. (Figure 6) The care of abandoned children was a charge that Santa Maria della Scala took seriously, and those children taken in by the hospital were considered fortunate. Children were systematically registered when they arrived at the hospital, as records from the mid-thirteenth century on demonstrate. At first infants were simply abandoned in the piazza in front of the hospital, but in the fourteenth century a stone basin was placed in the square for this purpose and then later replaced by a wheel. Once a child was registered he or she would be placed in the Casa delle Balie. Bartolo gives a glimpse into the daily activities of the balie on the left side of this fresco: in a busy scene wet nurses and other women feed, dress, cook, and care for infants, while young children are instructed by a school master. On the right side of the fresco Bartolo paints a happy ending for these small children as a daughter of Santa Maria della Scala is married in the hospital’s church. The rector offers the right hand of the girl to her husband while holding in his other hand a money pouch, no doubt meant to represent the dowry the hospital would have bestowed upon her. Archival records show that this was indeed more than just a fantasy as the hospital did indeed find worthy husbands and provide small dowries for those of its daughters who wished to marry.

55 Most children were abandoned with some kind of identification so that at least one of their parents’ names was known; this was meant to allow a parent to reclaim a child should future economic circumstances allow. After being recorded upon entry, infants were then placed with a wet nurse (these assignments were also documented) until they were old enough to return to the hospital for care and education. For the instructions on the duties of the “scrittor de’ balii” see: Ordini, e Provisioni sopra il buon governo della Santa Casa di Santa Maria della Scala (Siena: Bonetti, 1599), 66-71.

56 During the sixteenth century the wheel was still in use as the main method of receiving infants; see Ordini, 126 and Toti, Santa Maria della Scala, 48.

57 The book of “Sposalizi” records all the marriages of hospital daughters and dowry payments made on their behalf from 1498-1698; see ASS, Ospedale di Santa Maria della Scala, Sposalizi, N. 1348.
Finishing the decoration of the west wall there are two frescoes of the late sixteenth century which, though of a different style and lesser quality than those of Bartolo and Vecchietta, still represent an important part of the hospital’s activities. Titled *The Payment of the Wet Nurses* these paintings highlight the women Santa Maria della Scala hired to care for the children they could not house in the Casa delle Balie. In one fresco, the women are receiving wages for their
work in the form of grain from the hospital’s granaries. In the other, women and their husbands receive money from the hospital’s treasury as payment. These women were an important part of the hospital’s ability to function as a caregiver for abandoned infants; as the prominence of Santa Maria della Scala and the population of Siena grew in size, the number of abandoned children increased as well. Eventually, it became necessary to contract out some of the children to wet nurses outside the hospital and the city who were willing to take and raise the child in a fashion similar to the modern foster care system.

These two cycles of frescoes not only communicate the history and activities of Santa Maria della Scala, but they also provide a sense of how the hospital viewed itself and its relationship to the Sienese community. Or, at the very least, the frescoes portray how the institution desired to be understood. By emphasizing the various connections of the hospital to the cathedral and Siena’s religious leaders, the involvement of city officials and nobility in hospital affairs, and their charitable work with the poor, the sick, and the abandoned children of Siena, the frescoes present Santa Maria della Scala as a central institution of the city, connected to its people, politics, economics, and religion. The frescoes show the hospital as a truly Sienese institution, dedicated to the city’s patron saint, tied to the cathedral, supported by pious members of the nobility, and providing care for the less fortunate of the community.

The connection between art and the civic religion of Siena manifests itself not only in the works of art themselves but also in the recorded sermons of Siena’s preaching friars. San Bernardino, Siena’s famous fifteenth-century Franciscan preacher, provides several examples of the significant part that art and architecture could play in civic preaching. In San Bernardino’s

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58 San Bernardino had a long-standing relationship with Santa Maria della Scala; he was a member of the Compagnia della Vergine, a confraternity that met in the hospital, and he spent time in the infirmary helping to nurse plague victims. Several of Bernardino’s miracles were said
surviving sermons there are many references to Sienese works of art which would have been 
familiar to his audience, and his interpretations of such works can give us a better understanding 
of how the Sienese linked the two. For example, in sermons preaching peace and unity San 
Bernardino frequently referred to Ambrogio Lorenzetti’s famous frescoes representing good and 
bad government to remind the people of Siena of the results that violence and discord could 
produce. The fact that during the fifteenth century these frescoes were called *Peace and War* 
helps to suggest that the message was a common contemporary understanding of the painting.⁵⁹ 

Besides using works of art, San Bernardino also used the physical locations of the 
cathedral and the hospital to remind the Sienese of their civic duty to charity and to God. The 
best example of this is the quotation included at the beginning of the current chapter. In a sermon 
preached in the piazza between Santa Maria della Scala and the cathedral, San Bernardino 
offered the citizens an interpretation of the physical space in which they stood: “I remind you 
that [the Spedale di Santa Maria della Scala] is one of the eyes of your city, and the right is the 
Episcopate, while the left eye is the hospital. Look how the piazza in between is sort of long, like 
a nose. Hear me! Citizens, give charitably to the hospital!”⁶⁰ Using the open space of the piazza 
as a nose and buildings of the cathedral and the hospital as eyes, San Bernardino turned the 
Piazza del Duomo into the face of the city. The idea of these institutions as the observers of the 
city has interesting implications: one is that he saw the cathedral and Santa Maria della Scala, 
both institutions dedicated to the patron saint of the city, as a central part of the physical 
representation of the city; just as a face is an essential part of a portrait. Additionally, the 

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⁶⁰ As quoted in Parenti, 239.
implication that the hospital and the church are two eyes watching the city reminds the people that the Virgin, as patron of the hospital, the cathedral, and Siena itself, is aware of and observes all that they do. His exhortation to the people to give charitably to the hospital seems to add some weight to this interpretation.

Additionally, Santa Maria della Scala’s connections with its network outside the city helped to promote Siena’s devotion to the Virgin Mary. In her study of Sienese artwork which encouraged depictions of Mary as Siena’s patron and defender, Diana Norman has identified contacts and connections, in addition to similarities in decoration, between Siena’s cathedral, Santa Maria della Scala, and outlying religious structures such as the hermitage at San Leonardo al Lago and the churches of Sant’Agostino and San Francesco in Montalcino. Citing the rector of Santa Maria della Scala as the patron of the decoration at San Leonardo al Lago in the fourteenth century, Norman states that “it is highly probably that the city authorities actively welcomed the initiative of a prominent member of a major civic institution such as the Spedale di Santa Maria della Scala to contribute to the embellishment of one of its more remote and isolated churches – especially when the initiative resulted in a pictorial scheme which honoured the Virgin, the protector and defender of both the city and its outlying territory.”

Thus, Santa Maria della Scala played a role in helping to promote the city’s civic religion throughout the Sienese state.

In addition to its prominence with the city and countryside of Siena, by the end of the fourteenth century Santa Maria della Scala had acquired a reputation throughout Italy as an exemplary charitable institution. For example, Gian Galeazzo Visconti heard of Santa Maria

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della Scala and, in 1399, requested to know the history and the organization of the hospital so that he could begin making plans to build a similar hospital in Milan. These plans were finally carried out under Francesco Sforza’s rule in 1452, who also insisted that the Ospedale Maggiore in Milan be constructed after Siena’s hospital. Likewise, in 1441 the Emperor Sigismund visited Siena and, upon seeing the hospital, requested a copy of its layout and design. Brescia likewise created a unified charitable network based on the hospital’s model in 1427 and in 1449 Pope Nicholas V authorized the building of a hospital in Pavia with the requirement that it be in the form of Siena’s grand hospital.63

Beyond developing a reputation and serving as the main charitable institution for Siena, in the fourteenth and fifteenth century the hospital became central to the city as a financial institution as well. Due to its vast land holdings and all the goods and products they produced, as well as the donations and bequests they received daily, the hospital had a large budget which allowed it to give financial assistance and loans, especially to the communal government.64 Gabriella Piccinni discusses this aspect of Santa Maria della Scala, explaining that the hospital functioned essentially as a bank, but today we might also call it a non-profit organization.65 The government encouraged this function of the hospital, promising in 1389 to support anyone who wanted to donate their goods to or deposit their money with the hospital. Piccinni points out that the hospital was successful with banking because of its nature as a charitable institution dedicated to the Virgin; it was as if “the Madonna guaranteed an ethical treatment of money.”66

Although it will be the focus of the next chapter, a word should be said here about the development of the hospital’s patrimony and charitable network. In his study of Santa Maria

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63 Gabriella Piccinni, “L’ospedale e il mondo del denaro” in Arte e assistenza, 19.
64 Piccinni, “L’ospedale e il mondo del denaro,” 20.
66 Piccinni, “L’ospedale e il mondo del denaro,” 20, 23.
della Scala’s patrimony from 1200 to 1400 Stephan R. Epstein details how the hospital’s network grew and expanded. He cites the grant of independence from the canons as the impetus for this growth, and the submission of small hospitals as an important part of the process, since these hospitals gave Santa Maria della Scala a reason to express interest in and acquire the land surrounding them.\(^67\) In 1232 Santa Maria della Scala gained its first subject hospital, and in the 1290s the hospital acquired several significant grants of land through the bequests of wealthy citizens.\(^68\) Through both receiving grants of land and purchasing land, by 1305 Santa Maria della Scala owned and operated 9 large farms and a number of smaller farms throughout Sienese territory.\(^69\) Annuities left to the hospital increased as well over the course of the fourteenth century, peaking in the 1360s when the hospital received 1000-1100 florins a year from annuities. This amount declined quickly however, and by 1400 it dropped to only 400-500 florins per year.\(^70\) Nevertheless, by 1400 the hospital had also doubled its holdings from the previous century and it owned nearly one-third of the land within Siena’s territory, making it the most powerful landowner in the state.\(^71\) This network of farms and hospitals was in many ways the key to Santa Maria della Scala’s success as a charitable institution. However, by the end of the fourteenth century expansion of the hospital’s land holding slowed, and the political and economic problems Siena suffered after the Black Death began to take a toll on the hospital as

\(^67\) Epstein, 29.
\(^68\) For example, in 1295 Simone Cacciatoni left the hospital his possessions in Montisi which included a significant amount of land, several vineyards, and a house. Then, in 1297 the hospital gained a large grant of land in Serre di Rapolano from Bernardino del fu Alamanno Piccolomini; see Epstein, 31.
\(^69\) These include farms in San Quirico, Val d’Orcia, Corsignano, Asciano, Serre, Montisi, Chiusure, Meliandra, Spedalotto, Grosseto, Massa, Montepescali, Radicondoli, Casole, Radicofani, Talmone, and Magliano; see Epstein, 32-33.
\(^70\) Epstein, 56.
\(^71\) Epstein, 58; also Cohn, *Death and Property in Siena, 1205-1800*, 20–21.
well. As a civic institution and an agent of the state, Santa Maria della Scala’s status and stability came to reflect that of the city and communal government.

**Conflict and Change in the Fifteenth Century**

During the fifteenth century Santa Maria della Scala’s status as a civic institution was solidified by changes that occurred within hospital administration. Most significantly, in 1404 the commune claimed the right to elect the hospital’s rector, removing that privilege from the hospital’s confraternity. This, as Enrico Toti explained it, “basically transformed the position [of rector] into a public office.”\(^{72}\) The right of the communal government to appoint the rector was confirmed when, during a visit to Siena in 1460, Pope Pius II issued a bull that freed the rector from any obligation to the cathedral canons. Specifically, the bull confirmed the privileges of independence already granted by other popes and cancelled the need for the canons to approve the government’s chosen candidate for rector.\(^{73}\) While it may seem odd for the head of the church to free the hospital from the final ties of ecclesiastical control, it is useful to remember that Pius II was from one of Siena’s most prominent families, the Piccolomini, and he had a strong understanding of Siena’s socio-political dynamics. It also helpful to note that, as mentioned above, this privilege was granted during a visit of Pius II to Siena. The actual date he gave the bull was 19 August, the two year anniversary of his coronation, for which the city hosted a celebration in his honour that same day. This bull was one among many other acts and

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\(^{72}\) Enrico Toti, *Santa Maria Della Scala, A Thousand Years of History, Art, and Archaeology*, 9. The government claimed the same privilege with the hospital of Monna Agnese over two decades later in 1422; see Brunetti, *Agnese e il suo ospedale*, 50.

privileges he issued during the visit, showing great favour toward his home town.\textsuperscript{74} It was also not the last time he granted privileges or gave attention to the hospital; on a visit to Siena in March 1464, just five months before his death, Pius II toured the hospital, visited its collection of relics, and left a blessing on the institution.\textsuperscript{75} The pope’s involvement with the hospital and the favour he showed toward it thus had a significant impact on the history of the institution and its relationship to the cathedral canons and the city government.

Pius II’s bull of 1460 was the final step in the transition of the hospital’s administration to communal hands; it severed the last link of jurisdiction the cathedral had over the hospital, giving full control over the rectorship to the city government. The desire of the commune to solidify its control of Santa Maria della Scala and other charitable and civic institutions in the city during the fifteenth century was perhaps a result of the city’s desire to create a sense of Sienese unification in an atmosphere of political instability. The fall of the government of the Nine in 1355 followed shortly after the devastation of the Black Death, and this ushered in nearly two centuries of constantly shifting politics in Siena.\textsuperscript{76} The Nine were replaced by the short-lived administration of the Twelve, a group of middle class guildsmen who held onto power only until 1368, when they were replaced by governments of the Riformatori and then the Popolari, two parties representing the artisan and trade community of the city. During these brief governments,

\begin{footnotesize}
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\item For the details of Pius II’s visits to Siena, see Fabrizio Nevola, “Ritual Geography: housing the papal court of Pius II Piccolomini in Siena (1459-60),” in Beyond the Palio: Urbanism and Ritual in Renaissance Siena (Oxford: Blackwell Publishing on behalf of the Society for Renaissance Studies, 2006).
\item The details of his visit are recorded in the hospital’s deliberation records, see ASS Ospedale di Santa Maria della Scala, Deliberazioni, N. 24, f. 148r. See also Polidori, ed. Statuti Senese, Vol. 3, 264.
\item The Nine were forced to abdicate by the Emperor-Elect Charles IV, who stopped in Siena on his way to be crowned in Rome. His actions seem to have been influenced by the efforts of the Piccolomini and other noble families who incited the people of Siena into cries of “Long live the Emperor, death to the Nine!” as Charles entered the city. See Hook, Siena, 51-52.
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political power in Siena shifted away from noble families, some of whom were even barred from holding office.\textsuperscript{77} While the placement of political power in the hands of the people might seem like a positive development, the competition, in-fighting, and constant alternation between parties in power created a disruptive and unstable civic atmosphere. When a second government of Twelve was overthrown in 1403, the Popolari, Riformatori, and Nove decided to form a coalition which successfully blocked the city’s two other political parties, the Dodici and the Gentilhuomini, and lasted until mid-century.\textsuperscript{78}

At this juncture Siena saw the development of what Paton refers to as a ‘new aristocracy’ that endeavoured to create stability in the government by restricting power to its own. This led to the formation of a new city council, the Balìa, whose membership was exclusive to the members of the monti. The Balìa’s status as the head of the city’s administration (over the General Council) was confirmed in the 1460s when Pius II’s patronage saw the reinstatement of previously excluded nobility. These changes, of course, meant that the city government was no longer in ‘popular’ hands but was once again in the hands of the wealthy elite. Although their rule was not always unanimous and was certainly characterized by suspicion and mistrust, this rule by oligarchy lasted until the loss of Siena’s independence in 1555.\textsuperscript{79}

However, despite their political and economic disagreements, the common theme running through both popular and elite regimes of the fifteenth century remained the same: to retain the independence and civic ideals of Siena. And since the government could not be counted on to represent a united, peaceful Siena, that task fell to other Sienese institutions such as Santa Maria

\textsuperscript{77} These families included the Tolomei, Salimbeni, Piccolomini, and Malavolti; see Paton, 12-13.
\textsuperscript{78} Christine Shaw, Popular Government and Oligarchy in Renaissance Italy (Boston: Brill, 2006), 227. Shaw points out that for a time this government was seen as modeled on the Holy Trinity, which gave it an additional sanction to govern the city.
\textsuperscript{79} This transition and process will be treated a length in later chapters.
della Scala. In her work on civic preaching, Paton has shown how Siena was “bound by local fervor and a sense of its own destiny . . . Like that of Florence, Milan and Bologna, the civic consciousness of Siena had been moulded, over the centuries, by the ‘myth’ of its unique role in the destiny of Italy and the world.” The civic institutions of the city, the hospital among them, played a key role in shaping that myth and presenting themselves as a representation of Siena’s civic virtues and ideals. From its associations with Sienese saints who served within its walls, to the art work and relics that filled its church and buildings, the hospital in the fifteenth century was a representation of Siena’s civic ideals. The canonization of Bernardino Albizzeschi (San Bernardino) and Caterina Benincasa (Santa Caterina) in the mid-fifteenth century gave Santa Maria della Scala, where both had worked and preached, an additional claim to prestige.

The image of a strong and unified populous was indeed a myth, given the many struggles the Sienese faced. By the late fifteenth century the population of the city was somewhere between 20-25,000, nearly one-third less than it had been two centuries before. The Sienese contado was large (approximately 7000 sq. km) but also had a small population of around 80,000. By the end of the fifteenth century the nobility’s wealth had shifted from the strength of its banking and trade enterprises in the thirteenth and fourteenth centuries to a more land-based

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80 Paton, 17. Paton mentions here specifically the city’s belief in its ties to ancient Rome, the pride it took in its Ghibelline association and support of the Holy Roman Empire, and the idealized vision the Sienese had of their own republicanism and communal justice. These ideals, Paton argues, are visible in the preaching of Siena’s friars in the fifteenth century.

81 San Bernardino was canonized in 1450 by Pope Nicholas V and Santa Caterina in 1461 by Pope Pius II.

As Pinto points out, despite the fact that Siena was the capital of a large territory, even contemporary cities such as Pisa and Arezzo (which were both subject to Florentine rule) had a much larger presence in trade and manufacturing. According to Christine Shaw, “If it had not been for the major north-south route running through Siena and its territory, it would have been something of a backwater.”

In the late fifteenth and early sixteenth centuries the source of Siena’s wealth shifted from banking to agriculture and its role as the capital of a territorial state grew in importance. The *contado*, or countryside territory that Siena controlled, became an important part of the city’s civic identity as well. The fact that Santa Maria della Scala owned land and farms throughout the countryside, and operated small hospitals and charitable institutions in various villages and towns, gave the Sienese government another foothold in those communities and created an additional tie between the capital and its subject lands. During the yearly celebrations of the Virgin that took place in the Piazza del Duomo and the cathedral itself, Siena’s subject towns and territories were required to bring gifts and tributes. Parsons explains the significance of these ritual celebrations, stating: “These ceremonies and rituals were also, in most cases, an important annual reassertion and reconfirmation of the intimate relationship that existed between a late medieval Italian city-state and the subject towns and territories of its surrounding possessions or

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84 G. Pinto, “‘Honour’ and ‘Profit’: Landed Property and Trade in Medieval Siena,” in Trevor Dean and Chris Wickham, *City and Countryside in Late Medieval and Renaissance Italy: Essays Presented to Philip Jones* (Continuum International Publishing Group, 1990), 81-83.

These ties were especially important as the city and its political independence came under attack in the early sixteenth century.

The volatile political environment of late fifteenth and early sixteenth century Siena had a definite impact upon Santa Maria della Scala’s leadership and administration. As mentioned previously, the tradition of selecting a wealthy nobleman as the rector of the hospital was well-established by the early fourteenth century, and the communal government, which had appointed the rector since the early fifteenth century, had that right confirmed by Pius II in 1460. For the hospital, this meant that whichever faction controlled the government also had the ability to select a rector of its choice. Although the rectorship was meant to be a life-long office, constant shifts in political power meant that this was not always true in practice. The case of Salimbene Capacci, rector of the hospital in the late fifteenth century, provides a good example of the impact that political maneuvering had on the administration of the hospital.

Capacci, who was related to both the Piccolomini and Sozzini families, was a member of the Riformatori monte. He was appointed as Santa Maria della Scala’s rector in February of 1479, filling a position that had been vacant for six months after the previous rector died during a bout of plague in the summer of 1478. Capacci held the office of rector for just over a year; in the summer of 1480 the Nove seized control of the government from the Riformatori and Capacci was deposed, exiled, and replaced by the Nove’s own candidate, Cino di Cecco Cinughi. However, only a few years later power again changed hands and Capacci regained his position as rector in February of 1483. This time he held the office until his death in 1497.87 During

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86 Parsons, Siena, Civil Religion, and the Sienese, xvi.
Capacci’s tenure as rector he was selected to act on behalf of the government as part of an important diplomatic trip to Rome in 1484. He and three other ambassadors were sent to the Vatican to curry favour with the new Pope Innocent VIII. This mission was particularly important since the new pope had visited Siena as a papal legate prior to his election and had been forced to flee the city due to the violence and discord between warring political factions. The choice of Capacci as one of the embassy may have had to do more with his personal skills than his role as Santa Maria della Scala’s rector. However, the selection of the hospital’s rector for a diplomatic mission indicates that the communal government viewed the office and the hospital as a key part of Siena’s civic government and life.

Another indicator of the prominence Santa Maria della Scala gained as a civic institution was the peace-making rituals which were staged in the hospital. These rituals were designed to bring the various warring factions of the city into a state of truce with each other, and were held in places of civic significance to add extra weight to the oaths of peace contracted. For example, in 1494 the hospital and the cathedral acted as the staging ground for a ceremony of reconciliation between the Nove and Popolare monti. For the ceremony the Nove gathered in the bishop’s palace while the Popolari convened in Santa Maria della Scala. After both groups heard a reading of the peace agreement and consented to its terms, they left their respective locations,

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88 As an interesting side note which tells us something about the role a rector’s wife could play, Capacci’s wife, Margherita Sozzini, also left a mark upon Santa Maria della Scala’s history. With the election of her husband as rector Margherita also joined the hospital order and, in 1483 was given the rule of the women’s convent. She retained this position until her death in 1511, actually spending more of her life in the hospital than her husband, who died in 1497. Both were buried in the hospital church and their tombs can still be seen there today. See Giuffra, et al., 532.
met in the piazza, and processed together into the cathedral, where the archbishop gave a reading and observed a representative from each group take an oath and exchange a kiss of peace.  

The hospital’s relics also played a role in these rituals of peace; in 1482 the government ordered not only a ceremony where oaths of peace were to be taken between the Nove and the Riformatori, but they also ordered that processions should be held for three days afterward to signify the peace. On the first day following the ceremony the government prescribed a procession in honour of the Holy Cross; for the second day a procession in honour of the Virgin, and on the third a procession in honour of the Trinity. Each procession contained a sacred object: during the first Santa Maria della Scala’s relic of a nail from the True Cross was featured, the cathedral contributed a painting of the *Madonna delle Grazie* for the second, and a consecrated host was carried in the third. According to records of the event, all those who took part in the procession said that they “had never seen the like.” Unfortunately, although these rituals emphasized civic unity and reminded the political factions and citizens of Siena of their civic ideals, the actual peace never lasted long. Nonetheless, these peace-making rituals demonstrate, at least on an ideological, if not a realistic, level, that the civic religion, of which Santa Maria della Scala was an integral part, was a uniting force for Siena. 

One outcome of the competition between various factions in the late fifteenth and into the early sixteenth century was the opportunity for those who possessed enough political skill to obtain great power within the government. One such individual was Pandolfo Petrucci, whose power over Siena’s political economy very nearly turned the government into the rule of a

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signoria. From 1495 until his death in 1512 Pandolfo Petrucci was, as Shaw puts it, the “political boss” of the city, meaning that he essentially controlled the communal government and its administration but was never formally acknowledged as the signore, or sole ruler, of Siena.

The key to Petrucci’s success came from his control of the military and his financial skill. Although there were many who were not pleased with Petrucci’s position of power, under his dominance the government did gain some balance between the participation of the monti and was able to achieve a degree of rest from the violent factional disputes that characterized late fifteenth-century Siena.

Sixteenth Century Overview

After Petrucci’s death in 1512, Siena continued to struggle with factional disputes and uprisings. The Petrucci family’s hold on the city ended in 1524 when Pandolfo’s son Fabio married a Medici and was exiled from Siena for allying himself with the Medici pope Clement VII. In the same year the other monti revolted against the Nove (which was the Petrucci family’s monte), formed a coalition, and allied themselves to Clement VII’s enemy, Emperor Charles V. In an attempt to claim Siena for himself, Clement VII sent an army to take the city and in 1526 the Sienese met the pope’s Florentine forces at what is known as the Battle of Camollia. In what the Sienese viewed as a repeat of their victory over Florence at Montaperti in 1260 they were able to defeat their enemies and maintain their independence. Siena’s liberty was confirmed a few years later.

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92 Shaw, Popular Government, 123.
93 Shaw describes how Petrucci spent a good deal of time and effort paying attention to the military and cultivating good relationships with the city’s military commanders so that the military would be loyal to him. He also served on most of the government’s financial commissions and thus had a significant impact on the government’s finances. See Shaw, Popular Government, 125-127.
later in 1529 with the Peace of Cambrai, although the city was required to allow Charles V to garrison troops in Siena as a condition of their independence. This, as we shall see in chapter 4, may have seemed like a new beginning for Siena but instead set in motion of a chain of events that would lead to the end of the Sienese Republic.

Before and after the Battle of Camollia, the prevailing political factions in Siena appealed, as in times past, to the city’s devotion to the Virgin in order to create a sense of communal loyalty. Thus, before the battle in July, the piazza between Santa Maria della Scala and the cathedral once again witnessed a devotional procession and a presentation of the keys of the city to the Madonna del Voto in the cathedral. After the battle, works of art were produced to commemorate the victory, the most famous of which is Giovanni di Lorenzo Cini’s *Virgin of the Immaculate Conception protects the Sienese at the Battle of Camollia*. The painting shows the Virgin, surrounded by angels and saints, looking down on Siena and a scene of the battle. As in many paintings of a protective Mary, here she is also spreading her cloak to envelop the city.94

The continued emphasis on devotion to Mary as the patron saint of Siena in the difficult decades of the early sixteenth century was important not just to the city as a whole, but also to Santa Maria della Scala. As the political situation in the city worsened, the government began to rely more heavily on devotions to Mary to bring the city together.95 This was good for Santa Maria della Scala, since it kept the hospital at the forefront of important civic institutions. Indeed, the hospital and the commune were so strongly connected by the sixteenth century that amidst all its other concerns, the needs of Santa Maria della Scala continued to be addressed. The commune’s actions were not always altruistic, of course, and they were quite capable of using

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the hospital and its resources for their own purposes, particularly during the battle for Siena’s independence in the 1550s.

One of the main concerns for the hospital during the early sixteenth century was the economy. Like many of the city’s individuals and institutions, Santa Maria della Scala suffered from a great deal of financial stress. One of the strategies employed by the hospital’s rectors in an attempt to improve the hospital’s situation was the sale of land. They were, of course, careful about choosing which lands to sell, usually selecting farms that were less productive than others, or selling off small parcels of larger farms. For example, Antonio di Iacomo Turamini, rector of the hospital from 1527 to 1529 sold off two farms belonging to the hospital’s vast holdings at Cuna, for an 8000 florin profit. These financial troubles and the economic life of the hospital will be the subject of the next chapter.

Another difficulty for the hospital in the early sixteenth century reflected the constant shifting of political power in the city. Between 1502 and 1529 Santa Maria della Scala was governed by 8 different rectors, a large number considering that for the entire previous century, from 1404 until 1502, the hospital had a total of 13 rectors. The frequent changes in leadership over the first three decades of the sixteenth centuries resulted not only from political reasons, as shown earlier with Salimbene Capacci, but can also be attributed to issues of illness and age. The last rector in the series of eight was Antonio Turamini, who served in the office for only two years, 1527-1529. In those two years Turamini showed great promise: he improved ties and reasserted Santa Maria della Scala’s authority over its subject hospitals in San Gimignano, Todi, Barberino, Castel della Pieve and Rieti. He also, as mentioned above, continued selling land to rebuild the hospital’s financial position, and he led the hospital through an epidemic of plague in

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96 The exact causes and details of these problems will be addressed in the following chapter.
1528. Unfortunately, Turamini fell seriously ill in 1529 and died in late March of that year. He was replaced almost immediately by Francesco di Tone Salvi, who took office on 8 April 1529. Salvi’s rectorship put an end to the pattern of short-lived administrations. In fact, at 23 years Salvi’s term as rector is one of the longest in Santa Maria della Scala’s history. While Salvi’s lengthy administration brought some stability to the hospital’s leadership, according to Luciano Banchi, Salvi was not the most apt administrator for these difficult years. To be fair, the 1530s and 1540s were a tumultuous time as the city endured a growing imperial presence and an atmosphere of discontent that led to war in 1552. Attempting to maintain Santa Maria della Scala and its network during these years would have been a challenge even for the most skilled administrator, and many of the hospital’s problems were caused by factors beyond his control. Still, several devastating losses occurred under Salvi’s rectorship, including the loss of the hospital in San Gimignano, and attempts by other subject hospitals, Poggibonsi included, to assert independence. Despite Salvi’s efforts and few successes, by 1552 with the city on the brink of war the government was not pleased with the state of the hospital. An emergency meeting was called and the General Council voted to ask Salvi to step down so they could appoint a new rector. This new rector, Scipione di Mariano Venturi guided the hospital through the difficult years of the war and beyond until he finally stepped down in 1562. Venturi’s administration of the hospital over the course of the war will be the focus of chapter 4.

Following the end of the war and the loss of it liberty in 1555, Siena experienced significant political changes. The city was first governed by the Spanish crown, until King Philip II granted Siena as a fief to Cosimo de Medici in 1557. Thus, Siena became a part of the Grand

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97 The hospital’s deliberation records contain accounts of Turamini’s acts and attest to the fact that he was well-liked among the hospital family. Banchi also provides a nice summary; see Banchi, 180-181.
98 Banchi, 182.
Duchy of Tuscany and fell under the administration of the Medici government. Due to its status as a major civic institution, the Medici took an interest in Santa Maria della Scala. Medici involvement in charitable institutions and reform was not a new development; prior to 1550 Cosimo I carried out an extensive program of reform for charitable institutions in the city of Florence and throughout the Tuscan state. However, in some ways Santa Maria della Scala and Siena represented a different situation than the rest of Tuscany. For example, in Florence sixteenth century reform efforts focused on consolidating small hospitals and institutions into larger, more centralized entities. In 1542 Cosimo established a magistracy called the Bigallo, and tasked them with overseeing and regulating all charitable institutions in the state. Such a measure, however, was unnecessary in Siena, where Santa Maria della Scala had already established and consolidated a network of hospitals and farms centuries before. The idea behind such consolidation in Florence was to root out corruption and improve efficiency. It also helped bring the regulation of institutions under the control of the central state rather than local government, and the Medici used this control to enhance their patronage networks and political power. Since Santa Maria della Scala already had a consolidated hospital network, Cosimo first turned his attention to bringing the hospital and its network under central state control.

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100 Brian Pullan even suggests that other hospitals based their re-organization and centralization on the model of Santa Maria della Scala; see Brian Pullan, “The Counter-Reformation, medical care, and poor relief,” in Ole Peter Grell, Andrew Cunningham, and Jon Arrizabalaga, eds., Health Care and Poor Relief in Counter-Reformation Europe (London: Routledge, 1999), 20.
One of the issues Cosimo had to deal with was the strong connection between the hospital and Siena’s city government. It is clear that what was left of the government intended to maintain influence over Santa Maria della Scala, since the first reforms issued for the hospital after 1557 came not from the Medici but from the Balìa itself. On 18 April 1561 the Balìa, one of the governing councils allowed to remain active under the Medici regime, released a set of provisions for the administration of Santa Maria della Scala. The hospital was in a precarious financial position after the war and these reforms intended to improve communication and exchange between the hospital and its farms to ensure that all goods and revenues were accurately reported and efficiently used. It is significant that despite their loss of independent political authority in the city, the Balìa continued to concern themselves with the welfare of the hospital. These provisions emphasize the responsibility and ownership the city felt towards the hospital and demonstrate Siena’s desire to continue promoting civic unity through continued reform and regulation of its local institutions.

There was, however, some difficulty instituting the new provisions since the rector at the time resigned not long after they were published. The trouble then became that from this time forward, Santa Maria della Scala’s rectors were personally appointed by the Medici dukes. The first was Girolamo di Giovanni Biringucci, who took office on 8 March 1562. Biringucci, whose tenure focused heavily on improving the financial situation of the hospital, seems largely to have ignored the Balìa’s provisions. The second rector appointed by Cosimo, Claudio di Sinolfo Saracini, took office in July 1572. In support of his election Cosimo sent a message exhorting the hospital family to receive and obey him, and recognize his authority. It appears that Saracini worked well with the hospital chapter and the city government in administering

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101 ASS, Ospedale di Santa Maria della Scala, Deliberazioni, N. 28, f. 127.
102 ASS, Ospedale di Santa Maria della Scala, Deliberazioni, N. 29, f. 10v.
Santa Maria della Scala; however, he disagreed with them concerning the provisions of 1561. By the 1580s the Balìa was unhappy that their reforms had been so long ignored and wanted Saracini to institute and enforce them. On 4 April 1584 the hospital chapter held its accustomed meeting and the Balìa’s ordinances were first priority on the agenda. The chapter debated, voted, and decided that since the rector took an oath to uphold all the statutes and ordinances of the hospital, he should observe these regulations as well.\footnote{103}{ASS, Ospedale di Santa Maria della Scala, Deliberazioni, N. 29, ff. 102r-102v.}

Opposed to this decision, Saracini turned to the grand duke for help. Taking advantage of a trip to Florence in May 1584 he brought the issue before Cosimo’s successor, Francesco de Medici. He visited the ducal court with copies of the statutes and ordinances and returned from Florence a few days later with a statement from Francesco declaring that the hospital was to continue following the ancient statutes and throw out all “new things.” He also decreed that the hospital should not put anything into action unless it was his express order.\footnote{104}{“Non si mettino in esecuzione cose nuove, e non mai messe ad effetto, se non c’è l’ordine nostro espresso,” ASS, Ospedale di Santa Maria della Scala, Deliberazioni, N. 29, f. 105v.} Under such direct orders the board could do nothing but obey the grand duke and ignore the Balìa’s provisions.

This incident raises several important issues and demonstrates the tension that arose in the late sixteenth century over the question of the superiority of the Medici government’s authority over that of the city and hospital chapter. Previous to this incident records indicate that the Medici did not interfere much with the activities of the hospital chapter, but as soon as the chapter demonstrated an inclination to allow the city government to direct its affairs the grand duke stepped in and took control. This incident also raises the question of the rector’s loyalty and whether he owed his allegiance to the Medici duke who appointed him or to the city and the hospital chapter. Saracini certainly showed an inclination towards the Medici and from his
rectorship onwards there is increasing evidence of the rector turning to the Medici grand dukes for help in resolving hospital matters, rather than turning to the communal government.

In fact, changes were soon set in motion to solidify the supremacy of the grand duke’s authority and the loyalty the hospital chapter should have towards him. In 1587 Ferdinando de’ Medici, who had become grand duke after his brother’s death earlier that year, issued a “Riforma delle Costituzioni dello Spedale,” which firmly asserted the right of the grand duke to appoint the rector and to choose four councilors (Consulta dei quattro Consiglieri) to oversee the administration of the hospital on his behalf. These four were to meet every 15 days to review the needs and problems of the hospital and prepare the agenda for the hospital chapter’s meeting. The chapter was not able to deliberate on matters beyond those proposed by the four councilors, and if they denied any of their proposals the four could intervene in their decisions. This was clearly a move to disarm the hospital chapter and prevent them from acting as agents of the Balìa.105

With the accession of Ferdinando de’ Medici to the ducal throne and the grand duke’s authority over the hospital firmly established, attentions were turned seriously to the issue of broader hospital reform. After Saracini’s death in 1593 Ferdinando appointed Pio d’Ambrogio Nuti as the hospital’s new rector. Nuti was the abbot of the Monastero degli Olivetani in Siena and he was the first ecclesiastic appointed rector since 1427. It appears that Ferdinando selected him for a specific reason: reform. Nuti’s reforms were ambitious and extensive: using the basic structure of the 1305 statutes, he produced a brand new set of ordinances for the administration of the hospital.106 Addressing specific areas which were lacking in the original statutes, Nuti

105 Banchi, 214. A copy of these reforms is held by the Biblioteca Comunale in Siena.
106 ASS, Ospedale di Santa Maria della Scala, Copia Lettere, N. 436, ff. 88v-97r.
established procedures and rules for the infirmaries and all the women’s areas of the hospital and created a set of regulations for the hospital’s farms.

Nuti presented his ordinances to the hospital chapter in January of 1597, but did not live to see them enforced. Ferdinando’s choice for Nuti’s successor was Agostino d’Agostino Chigi. Nuti’s statutes were clearly near the top of Chigi’s priority list; he took office in February of 1598 and by August of the same year he had compiled and organized all the statutes for publication. They were printed and published in 1599 by Bonetti, a Sienese publishing house, in a 142 page volume. Both Nuti and Chigi titled these regulations “ordini,” but the introduction to the published version states that the new ordinances are better defined as “riforma” because they were meant to renew or change practices that had become relaxed, lost, or far from the original statutes over time.  

The introduction also asserts that the compilation and publication took place in response to a command of Ferdinando, who is described as “the most kind Father of the city, and of the poor in particular.”

Taking these reforms into account, it seems that the Medici grand dukes’ regulation of charity in Siena, and specifically Santa Maria della Scala, was a two stage process. First, they had to assert their authority over the hospital and its administration in competition with the local government who still viewed the institution as Sienese. Once Medici authority was firmly established they turned their energy to the issue of reform, and created a set of statutes that reflect the post-Tridentine atmosphere in which they were composed. Studying the relationship between the Medici and Santa Maria della Scala provides a look at the way the Medici incorporated one Sienese institution into the Tuscan state and shows the importance the Medici

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107 Ordini, e Provisioni sopra il buon governo della Santa Casa di Santa Maria della Scala (Siena: Bonetti, 1599), 3.
108 Ordini, 3.
placed on the regulation of charity as a duty of the state. These issues, as well as the relationship between the hospital and the Medici government will be explored in greater detail in the final chapter.

From the eleventh through the late sixteenth century the Ospedale di Santa Maria della Scala was defined and shaped by the civic, religious, and political atmosphere of Siena. From its unassuming beginning in the eleventh century as a pilgrim’s hostel founded by the cathedral canons, by the sixteenth century the hospital had become a multi-faceted charitable institution. Through a process of papal privileges and bold assertions of authority the communal government came to possess full control of the hospital by the late fifteenth century. Its physical location had given the hospital not only its name but also a prominent role to play as part of Siena’s civic landscape. Furthermore, Santa Maria della Scala’s collection of relics and patronage and production of art enhanced its role as a promoter and site of Siena’s civic religion. Over the course of the sixteenth century as Siena became part of the Tuscan state, competition arose for control of the hospital between the city government and the Medici dukes. In the later half of the sixteenth century, the Ospedale di Santa Maria della Scala became, at least administratively, a Florentine rather than a Sienese state agency. However, despite the hospital’s administrative loyalty to the Medici, it still retained an important place in the civic religion of Siena. But before conducting this analysis it is necessary to move beyond the walls of Siena and consider what role the hospital’s outlying possessions played in its development as a central part of Siena’s civic economy. Santa Maria della Scala’s charitable network will thus be the focus of the next chapter.
Chapter 3
Santa Maria della Scala and the Sienese State Economy

Adorning the walls of the Room of the Nine in Siena’s Palazzo Pubblico are Ambrogio Lorenzetti’s famous frescoes, completed between 1338 and 1340, which depict the effects of good and bad government. One of the themes identifiable in the frescoes is the relationship between the city and the contado, or countryside, particularly in terms of the economy and prosperity. The viewer can observe in both scenes how the characteristics of good or bad government impact not only what occurs within the city walls, but also what takes place beyond their confines. Peace, safety, interaction and exchange between city and contado result from good government, as shown in the frescoes by people easily entering and leaving the city gates, bringing goods and animals with them, scenes of cultivation and harvesting, and depictions of well maintained homes, gardens, and fields. Bad government, on the other hand, results in devastation and deterioration, represented in the painting by fields lying fallow, homes burning, and armed men roaming the countryside. Lorenzetti’s inclusion of the Sienese contado in these frescoes provides evidence for what scholars such as William Caferro have argued: that for Renaissance Italian city-states, city and countryside were inextricably connected.¹

The economy of late medieval Siena relied on a combination of commerce, agriculture, and manufacturing. Siena’s location on the Via Francigena increased the city’s opportunities for economic growth and exchange, enabled Sienese merchants to influence Tuscan trade routes, and

gave them access to broader Mediterranean and European networks. During the twelfth and thirteenth centuries banking played a significant role in the economy, and Sienese bankers found great success. Likewise, during the thirteenth and early fourteenth centuries Siena participated in the circulation and trade of luxury goods. However, with the onset of the Black Death and the fall of the government of the Nine, as well as the growing frequency of mercenary raids in the fourteenth century, Siena’s economy entered a period of decline. Sienese bankers were eventually overtaken by their Florentine competitors, ensuring that Siena remained a more regional, instead of international, financial power, and Siena’s lack of any large-scale industry placed the city at a distinct economic disadvantage to larger states like Florence, Venice, and Milan.

Indeed, because Siena was smaller and less economically prominent than neighbouring city-states such as Florence, its reliance on the contado as a source of wealth was more pronounced. Siena, Caferro explains, was “ever-mindful that its own fate was intrinsically linked

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3 Prazniak discusses Siena’s role in European and Mediterranean trade with the east using Ambrogio Lorenzetti’s frescoes of good and bad government and his lost *Mappamondo*, a world map which placed Siena at the centre of a global trade network, as evidence of how the Sienese viewed themselves in relation to this world; see Prazniak, “Siena on the Silk Roads,” 178, 188-201.

4 Scholars have often characterized the period from 1300-1500 in Sienese history as one in which Siena suffered “a reduction from a ‘star of the first order in the economic sky’ to a sleepy regional town,’” see William P. Caferro, “Warfare and Economy in Renaissance Italy, 1350-1450,” *Journal of Interdisciplinary History*, xxxix:2 (Autumn, 2008): 204.

5 In his study of Sienese banking during this period Ed English cites the political troubles and factionalism of the Sienese nobility, their reliance on papal patronage, and the geographical position of Siena as factors which further disadvantaged Siena by the fourteenth century; see Edward D. English, *Enterprise and Liability in Siennese Banking, 1230-1350* (Cambridge, MA: The Medieval Academy of America, 1988), 111-114; also see Caferro, “Warfare and Economy,” 204-205.
with that of the countryside.”\textsuperscript{6} The taxes placed on the countryside by Siena’s communal
government are often used to demonstrate awareness of this link: because towns were generally
taxed in proportion to population and wealth and the communal government made adjustments to
tax rates on a regular basis, it seems that government attempted to treat the contado as fairly as
possible.\textsuperscript{7} The maintenance of positive relationships with rural areas was essential since Siena’s
access to a rich and diverse countryside meant a steady supply of food and raw materials for the
city’s inhabitants. As a significant landowner, the economic relationship between Siena and the
contado was a defining aspect of the Ospedale di Santa Maria della Scala’s role as a Sienese state
agency. In order to fully understand Santa Maria della Scala’s rise to become one of Siena’s
central institutions, it is necessary to understand the place of the hospital not only in Siena’s civic
and religious life, but also the roles it played in the economy.

Through the development and expansion of its patrimony from the thirteenth to the
sixteenth centuries, Santa Maria della Scala’s administrators constructed an extensive network of
farms and hospitals that provided the foundation and source for the hospital’s economic
activities. Santa Maria della Scala’s patrimony can be divided into two separate, but closely
connected networks. The first was a network of farms, called the \textit{grance}, which consisted of

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\item \textsuperscript{6} Caferro, “City and Countryside,” 85.
\item \textsuperscript{7} William M. Bowsky, \textit{The Finance of the Commune of Siena 1287-1355} (Oxford: Clarendon Press, 1970), 225-255. This fairness, however, was tested in times of crisis, especially during warfare when taxes could be higher than normal and towns had to cover the cost of damages and repairs on their own; see Caferro, “Warfare and Economy in Renaissance Italy,” 181-188. It is also worthwhile to point out that Siena’s government generally imposed a tax on a town, but left the division of payment for the tax up to the town itself. Without solid demographic statistics to tell us how many families were expected to contribute and what their annual incomes consisted of, it is difficult to determine exactly how burdensome a particular tax could be; see Duccio Balestracci, \textit{The Renaissance in the Fields: The Family Memoirs of a Fifteenth Century Tuscan Peasant}, Betsey Meredith and Paolo Squatriti, trans. (University Park, PA: The Pennsylvania State University Press, 1999), 90.
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cultivated land, vineyards, orchards, and pastures for raising livestock. This system of farms not only allowed the hospital to supply itself with grain, wine, olive oil, and other necessary products, but it also enabled Santa Maria della Scala to provide food for the poor on a regular basis and, through its stores, for the entire city in times of famine. Ownership and operation of mills, vineyards, kilns, pastureland and livestock further wove the hospital into the economic life of the Sienese state. Through a second network of small hospitals, spedali, Santa Maria della Scala created further ties with Siena’s subject communities. These spedali enjoyed the benefits of being part of a large, productive institution and enabled Santa Maria della Scala to provide charity in the city as well as in the countryside.

This chapter takes a closer look at Santa Maria della Scala as an economic institution through an examination of these two networks, surveying Santa Maria della Scala’s properties and the origins, extent, and growth of the grance and the spedali. An examination of the relationship between the hospital and its properties allows us to see how Santa Maria della Scala acted as a source of food, employment, investment, and charity both within and outside the walls of Siena. From its earliest years, the hospital’s efforts to expand its patrimony resulted in a consciously crafted network of charity which, by the sixteenth century, was an integral part of the hospital’s power and role as a Sienese state institution.

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8 The term grance (grancia singular) was originally used by Cistercians to refer to farms that were small-scale replicas of the larger monastery and had individual functions. Santa Maria della Scala took this institution and modified it for its own purposes: each grancia was a farm run by one of the hospital order who controlled and administered the land (some of it rented to small farmers) and organized the transport of goods between the grance themselves as well as between the grance and Siena. See Stephan R. Epstein, *Alle origini della fattoria toscana: L’ospedale della Scala di Siena e le sue terre (meta 200 – meta 400)* (Florence: Salimbeni, 1986), 36.
Santa Maria della Scala as an Economic Institution

While much of the research available tends to consider Renaissance hospitals in terms of religion, society, culture, and medical practice, it is necessary to acknowledge that the success of these institutions depended heavily on matters of economy and finance. Examinations of the finances and economic roles of hospitals, such as Matthew Thomas Sneider’s work on Bologna and Marina Garbellotti’s work on Verona, have shown that such inquiries can shed light not only on the internal and external activities of hospitals, but also on the relationship between charity and government (both at the local and regional level). Taking the lead set by these works, in order to properly examine the Ospedale di Santa Maria della Scala as a Sienese state agency and understand its relationship with the government, it is crucial to consider the hospital not only as a large, multi-functional charitable institution but also as a financial and economic institution.

In an intensive and detailed study of Santa Maria della Scala’s financial records and accounting system, Pierre di Toro and Roberto di Pietra provide a useful description of the

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9 Issues of finance and the economic nature of hospitals often inform studies but are generally restricted to the background; notable exceptions include studies of various monte di pietà which, as charitable lending institutions, centred on matters of money. See: Federico Arcelli, Banking and Charity in Sixteenth Century Italy: The Holy Monte Di Pietà of Rome, 1539-84 (Leicestershire: Upfront, 2003); Carol Bresnahan Menning, Charity and State in Late Renaissance Italy: The Monte Di Pietà of Florence (Ithaca, N.Y.: Cornell University Press, 1993).

hospital from an economic standpoint. They argue that Santa Maria della Scala can be understood as similar to a modern non-profit organization, since the hospital performed a variety of service functions for the community while simultaneously producing goods (food, wine, olive oil, wool, etc.) and managing assets (rental properties, mills, shops, and houses).

The hospital in the city sat at the centre of a network of farms, small hospitals, and additional economic assets; all of which, when put together, constituted the institution of Santa Maria della Scala. For those who governed the hospital, coordinating the interests of such an expansive institution with involvement in various economic activities presented an administrative challenge and required a defined organizational structure with strict reporting and recording regulations, as well as checks and balances, in order to ensure efficiency. This was true for the various divisions of the hospital and for hospital finances.

The head treasurer of the institution was given the title of camarlingo, and held the responsibility to compile and keep track of all financial records. These records included the spoglio dei debitori, a record of debts owed to the hospital and payments made towards those debts, as well as the bastardello di cassa, conti correnti, and giornali. Each of these last three recorded payments made and received from the sale and purchase of assets and were kept by the castaldo (official in charge of the hospital’s cellars and stores) and the pellegriniere who oversaw the operation of all charitable activities and the distribution of resources among the

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12 Toro and Pietra, *Amministrazione e contabilità*, 8, 47.
13 The financial records named here are housed in the Archivio di Stato di Siena as part of the fondo dedicated to the Ospedale. They are grouped under the title: *Amministrazione Patrimoniale dell’Ospedale* and although the chronological span for each type of record varies, the financial records in general cover a period from the thirteenth through the eighteenth centuries.
various parts of the hospital. Each year the camarlingo would compile all reports from the various accounts into one record, the entrata e uscita, which gave the totals of incoming and outgoing money (cash) for the year. At the start of each new fiscal year Santa Maria della Scala’s rector and governing chapter received this report, which was then audited by two calcolatori appointed by the city government in order to ensure the proper use of hospital resources. However, although the entrata and uscita are useful for gaining a sense of the yearly ebb and flow of the hospital’s liquid assets, it is important to note that these records do not provide us with information on profits lost or gained in the exchange and trade of goods in kind, nor do they contain information on the internal exchanges between the hospital and its properties.

The following table and chart provide data on the income and expenditure of Santa Maria della Scala from 1543-1601. The records were kept in lire, and typically, though not always, totaled on a yearly basis. Although a much closer reading of the records is required to fully understand the information represented here, it is significant to note that the hospital’s income and expenditure consistently keep in close range of each other. Their convergence is so consistent as to be somewhat suspicious. It is possible that record keepers adjusted numbers or that some degree of fraud occurred to ensure that, at least on paper, the hospital appeared fiscally responsible, but further study is required to identify clear evidence

14 The entrata e uscita for the sixteenth century can be found in ASS, Ospedale di Santa Maria della Scala, Entrata e uscita di denari, Nos. 880-917.; see Toro and Pietra, Amministrazione e contabilità, 238-239.

15 Although others have noted the involvement of city officials in the financial affairs of charitable institutions, Garbellotti has asserted that prior to 1600 the governments of most Italian city-states granted special tax privileges to hospitals and perhaps appointed administrators, but this was the extent of their participation; see Garbellotti, “Assets of the Poor, Assets of the City,” 117-119. The early and close involvement of the city government with Santa Maria della Scala’s administration thus emphasizes the significance of the hospital to the Siena.

16 Toro and Pietra, Amministrazione e contabilità, 238-239.
Table 1. Yearly Income and Expenditure in Lire, 1543–1601

<table>
<thead>
<tr>
<th>Fiscal Year</th>
<th>Income</th>
<th>Expenditure</th>
<th>Difference</th>
<th>Source</th>
</tr>
</thead>
<tbody>
<tr>
<td>1543 – 1544</td>
<td>17,522</td>
<td>18,723</td>
<td>-1,201</td>
<td>902, ff. 1r-16r; 62r-87r</td>
</tr>
<tr>
<td>1544 – 1545</td>
<td>25,817</td>
<td>24,583</td>
<td>1,234</td>
<td>902, ff. 16r-28r; 87v-113r</td>
</tr>
<tr>
<td>1545 – 1546</td>
<td>13,382</td>
<td>14,768</td>
<td>-1,386</td>
<td>902, ff. 28r-36r; 113v-131r</td>
</tr>
<tr>
<td>1546 – 1547</td>
<td>15,658</td>
<td>18,030</td>
<td>-2,372</td>
<td>902, ff. 36r-43r; 131r-148r</td>
</tr>
<tr>
<td>1547 – 1548</td>
<td>21,162</td>
<td>16,352</td>
<td>4,810</td>
<td>902, ff. 43r-50v; 148r-161r</td>
</tr>
<tr>
<td>1548 – 1549</td>
<td>20,144</td>
<td>18,077</td>
<td>2,067</td>
<td>903, ff. 13v, 86v</td>
</tr>
<tr>
<td>1549 – 1552*</td>
<td>58,260</td>
<td>60,219</td>
<td>-1,959</td>
<td>903, ff. 34v, 134v</td>
</tr>
<tr>
<td>1552 – 1553</td>
<td>26,339</td>
<td>25,458</td>
<td>881</td>
<td>903, ff. 53v, 197v</td>
</tr>
<tr>
<td>1553 – 1554</td>
<td>48,209</td>
<td>41,781</td>
<td>6,428</td>
<td>904, ff. 1v-14v; 86v-128r</td>
</tr>
<tr>
<td>1554 – 1555</td>
<td>87,157</td>
<td>86,697</td>
<td>460</td>
<td>904, ff. 28v, 153v</td>
</tr>
<tr>
<td>1555 – 1557*</td>
<td>23,507</td>
<td>23,510</td>
<td>3</td>
<td>904, ff. 38v, 128r</td>
</tr>
<tr>
<td>1557 – 1558</td>
<td>18,361</td>
<td>23,864</td>
<td>-5,503</td>
<td>904, ff. 39v-49v; 176r-207r</td>
</tr>
<tr>
<td>1558 – 1559</td>
<td>11,049</td>
<td>7,071</td>
<td>3,978</td>
<td>905, ff. 2v-10r; 61v-72r</td>
</tr>
<tr>
<td>1559 – 1560</td>
<td>13,911</td>
<td>14,702</td>
<td>-791</td>
<td>905, ff. 10v-22v; 72v-91r</td>
</tr>
<tr>
<td>1560 – 1561</td>
<td>17,912</td>
<td>13,841</td>
<td>4,071</td>
<td>905, ff. 23v-29v; 91v-115r</td>
</tr>
<tr>
<td>1562 – 1563</td>
<td>21,403</td>
<td>21,395</td>
<td>8</td>
<td>906, ff. 7v</td>
</tr>
<tr>
<td>1563 – 1564</td>
<td>85,716</td>
<td>84,568</td>
<td>1,148</td>
<td>906, ff. 131v</td>
</tr>
<tr>
<td>1564 – 1565</td>
<td>27,401</td>
<td>27,172</td>
<td>229</td>
<td>906, ff. 29v</td>
</tr>
<tr>
<td>1565 – 1566</td>
<td>26,469</td>
<td>25,934</td>
<td>535</td>
<td>906, ff. 38v, 168r</td>
</tr>
<tr>
<td>1566 – 1567</td>
<td>20,921</td>
<td>20,841</td>
<td>80</td>
<td>907, ff. 7v, 82r</td>
</tr>
<tr>
<td>1567 – 1568</td>
<td>25,423</td>
<td>25,289</td>
<td>134</td>
<td>907, ff. 14r, 95r</td>
</tr>
<tr>
<td>1568 – 1569</td>
<td>31,571</td>
<td>28,826</td>
<td>2,745</td>
<td>907, ff. 19v, 108r</td>
</tr>
<tr>
<td>1569 – 1570</td>
<td>65,607</td>
<td>56,686</td>
<td>8,921</td>
<td>907, ff. 25v, 122r</td>
</tr>
<tr>
<td>1570 – 1571</td>
<td>57,153</td>
<td>56,771</td>
<td>382</td>
<td>907, ff. 31v, 138v</td>
</tr>
<tr>
<td>1571 – 1572</td>
<td>46,731</td>
<td>44,647</td>
<td>2,084</td>
<td>908, ff. 6v, 83r</td>
</tr>
<tr>
<td>1572 – 1573</td>
<td>35,191</td>
<td>35,340</td>
<td>-149</td>
<td>908, ff. 11r, 100r</td>
</tr>
<tr>
<td>1573 – 1574</td>
<td>20,494</td>
<td>20,553</td>
<td>-59</td>
<td>908, ff. 16v, 113v</td>
</tr>
</tbody>
</table>

*Although totals were usually kept and calculated on a yearly basis, on occasion multiple years were combined in the records.

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1 Data drawn from: A.S.S., Ospedale di Santa Maria della Scala, Entrata e Uscita, Nos. 902–918.
Figure 7. Yearly Cash Income and Expenditure in Lire, 1543-1601
of this kind of practice. Another point worthy of note is that times of difficulty and transition, including war in the 1550s, adjustment to Medici rule in the 1560s, and famine in the 1590s rate as the times during the hospital spent, but also earned, the most money. Perhaps, although high grain prices no doubt cost the hospital a good deal, it also benefitted from those prices with the sale of its own grain. Although these points only begin to tap the potential usefulness of these financial records, they serve to reinforce the importance of the hospital as an economic power.

As discussed in the previous chapter, Santa Maria della Scala exercised its resources in a number of ways within the walls of Siena and administrators actively sought economic strategies that would allow the hospital to provide a variety of charitable services. In addition to the costs of distributing food and clothing for the poor and providing medicine and treatment for the sick, Santa Maria della Scala also shouldered the cost of caring for and raising abandoned children.\(^1\) From the wet nurses hired to care for the children as infants, to the cost of apprenticeships for boys and marriage dowries for girls, a large portion of Santa Maria della Scala’s funding went towards child care.\(^2\) Through the hiring of wet nurses Santa Maria della Scala also served as an

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1 Maura Martellucci, "I bambini di nessuno. L’infanzia abbandonata al Santa Maria della Scala. Secoli XIII-XV," *Bulletino Senese di Storia Patria*, Vol. CVIII (2001): 9-221. In this study Martellucci argues that unlike hospitals in northern Italy (Milan, Brescia, Venice) where efforts often focused on how to reduce the number of children abandoned at hospitals, Santa Maria della Scala instead looked for ways to financially support the children given to their care; see Martellucci, 18.

2 A record of the dowries paid for the marriage of girls raised by Santa Maria della Scala can be found among the hospital’s records in the Archivio di Stato di Siena. The book spans from 1498 to 1600 and records installments of the dowries paid each year. Dowries were typically 50 lire (which is double the 25 lire that boys were given at the age of 18 when they left Santa Maria della Scala’s care). Over the fifteen year period from 1498 to 1513 the hospital spent 6844 lire on dowries, which averages out to around 450 lire per year. See ASS, Ospedale di Santa Maria della Scala, *Sposalizi*, N. 1348, ff. 2r-15v.
employer for women both in Siena and in the countryside. Additionally, the hospital served as one of the city’s major employers, hiring architects, builders, and artists as the hospital expanded in the fourteenth century. The depiction of all these economic activities in the frescoes of the Pellegrinaio suggest that hospital administrators, staff, and the people of Siena saw these functions as central to the purpose and identity of the hospital. Those who lived and worked in the hospital, along with the communal government that defended it and the citizens of Siena who gave to the hospital recognized that the supplies, jobs, and cash flow generated by Santa Maria della Scala’s network were central to its success.

**Origins of the Network**

Like most charitable institutions throughout Italy, Santa Maria della Scala derived the bulk of its wealth from land ownership. Once the hospital confraternity gained the right to administer its own patrimony in 1195, Santa Maria della Scala’s administrators pursued the creation of a vast and productive network that could provide economic stability and the resources necessary to carry out the hospital’s charitable mission. The property and wealth that enabled the development of this network essentially came from three different sources. The first, and most important, was through the donations of oblates, the men and women who joined the hospital confraternity. Secondly, both money and land were accumulated through pious donations or

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3 Only two or three wet nurses at a time ever lived at Santa Maria della Scala itself in the city; most of the wet nurses employed by the hospital lived in the suburbs of the Masse or further away in the countryside; see Martellucci, “I bambini di nessuno,” 94.

4 In Bologna, for example, from 1564-1590 the hospital of Santa Maria della Morte brought in just under 160,000 lire from its rural holdings and just over 140,000 lire from its rental properties, while other sources of income such as sales and alms all brought in less than 20,000 lire for the same period. This pattern remained true throughout the seventeenth century; see Sneider, “The Treasury of the Poor,” 95-98.
bequests left to the hospital in wills. Finally, a third way that Santa Maria della Scala acquired land and property was through purchase.

First, the major part of Santa Maria della Scala’s wealth and property came from the oblates that joined the hospital confraternity. To become part of the order men and women were required not only to dedicate themselves and their lives to service in the hospital, but they were also required to donate all their worldly goods and possessions. This practice began in the early years of the hospital’s existence when the cathedral canons monitored the acceptance of oblates and controlled donations, and remained in place through the centuries as control shifted from the canons to the confraternity and the city government. Santa Maria della Scala’s 1305 statutes formally established the process of oblation, including the requirement to donate all of one’s belongings, in writing: “Also, we [establish] that no one can or ought to be received as a brother of the said hospital and convent if the same which will be received should not give himself and all his goods to the hospital without any exception or reservation.” The statutes also stress that if an oblate is found either in public or private to break this agreement he can immediately be thrown out of the order and turned out of the hospital itself, although the statutes stipulate that upon forced departure any goods or property given to the hospital will be returned.

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5 Michele Pellegrini, *La Comunità Ospedaliera Di Santa Maria Della Scala e Il Suo Più Antico Statuto: Siena, 1305* (Ospedaletto: Pacini, 2005), 27. The right to control the donations of their oblates without deference to the Cathedral canons was obtained by the hospital chapter in the late twelfth century from Pope Celestine III; see Michele Pellegrini, *Chiesa e Città: Uomini, comunita e istituzioni nella societa senese del XII e XIII secolo* (Roma: Herder Editrice e Libreria, 2004), 280-282.

6 “Anco che nessuno possa o ver debbia essere ricevuto ad essere frate del detto spedale e convento, a le spese del detto spedale, se colui lo quale sarà ricevuto non darà al detto spedale sé e tutti li suoi beni senza alcuna exceptione o vero reservatione.” ASS, *Ospedale di Santa Maria della Scala*, Statuti e Ordinamenti, 2b, f. 41r.

7 “E se sarà alcuno lo quale incontra faccia, publicamente o di palese o vero di nascosto, non sia tenuto el detto spedale osservare a lui alcuna impromissione o ver pacto fatta o fatto a lui, ma debbia colui lo quale incontra farà essere cacciato del detto spedale e essere privato deli
As Stephan R. Epstein points out in his work on Santa Maria della Scala, donations by oblates laid the foundation that made patrimonial expansion possible and shows that prior to the mid-fourteenth century the donations of oblates equaled the income generated from pious bequests and wills. The hospital achieved this high number of donations because the confraternity allowed two different kinds of oblates: those who joined the order and came to live in the hospital (called frati conventuali or frati di dentro) and those who joined but chose to continue living on and working their own property (called frati extrinseci or frati di fuori). Allowing men and women to join the order but live and work externally opened the way for a larger number of men and women to become part of the institution and thereby increased the number of farms and vineyards from which the hospital profited. According to Epstein, the admittance of both frati di dentro and frati di fuori provided Santa Maria della Scala with a constant supply of land, money, and goods which could be integrated into the patrimony or sold for a profit, as well as a workforce of men and women to carry out the hospital’s charitable activities.

The oblates themselves accrued definite economic advantages by becoming part of the hospital confraternity. For the frati di dentro these advantages included housing and food provided by Santa Maria della Scala, plus a yearly allowance for shoes and clothes. This

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8 Epstein, Alle origini della fattoria toscana, 46-47.
9 For more on the distinctions between the two and their responsibilities see Pellegrini, La comunità ospedaliera, 36-43.
10 The importance of oblates to the growth and development of the patrimony was important not just outside the city walls, but it also played an important part in the hospital’s expansion within the city. Beatrice Sordini provides an excellent survey of the development of the physical structure and location of Santa Maria della Scala from its earliest stages to the fifteenth century. See Sordini, Dentro l’antico ospedale.
11 Epstein, 47.
allowance was fixed at a maximum of 14 lire in 1318; by the sixteenth century records show that this allowance had increased to around 30 lire per year. For the frati di fuori the benefits included various property tax exemptions and the financial support of Santa Maria della Scala in terms of maintenance and supplies needed to care for their property. It is also important to note that there were also exceptions granted and some flexibility allowed, particularly for members of the nobility, so that hospital administrators could allow the amount of a donation to be determined by the oblate with the understanding that the benefits they received be proportionate to their donation. This flexibility of the hospital confraternity regarding oblation enhanced the growth of the patrimony by enabling the inclusion of men and women, especially the wealthy, who wanted the benefits of joining Santa Maria della Scala’s community but did not desire or were unable to give all their time and possessions to the hospital.

Of course, membership in the hospital confraternity was not required in order to donate to Santa Maria della Scala: the second way the hospital obtained land and wealth was through the pious bequests of the people of Siena. As Samuel K. Cohn demonstrated in his work Death and Property in Siena, 1205–1800, charitable giving was popular among the Sienese. In a survey of

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12 Two examples: from 1508 to 1511 one oblate, Frate Pietro d’Agnolo received a total of 112 lire for shoes and clothing, which is about 28 lire per year; another oblate, Frate Alexandro di Antonio Venturi from 1552-1555 received 139 lire for clothing and shoes, or around 34 lire per year. See ASS Ospedale di Santa Maria della Scala, Vestimenti degli Oblati, N. 1347, ff.73v, 191v.

13 Epstein, 60-61.

14 Sordini, Dentro l’antico ospedale, 245. Sordini looks specifically at the case of Bernardino di Alamanno Piccolomini, who late in his life wanted to reap the spiritual benefits associated with dedicating himself to the practice of charity but only wanted to donate a small part of his land and fortune to Santa Maria della Scala. His gift of farmland near Serre di Rapolano worth 2000 lire later caused problems with his heirs, who wanted to reclaim the land; see Roberta Mucciarelli, La Terra Contesa: i Piccolomini contro Santa Maria della Scala 1277-1280 (Firenze: L.S. Olschki, 2001).
660 wills from the period of 1205–1500 Cohn found a total of 416 bequests to hospitals.\(^{15}\) Among the charitable institutions represented in these wills Santa Maria della Scala was the most popular, but it was not until the time of the Black Death that it became the chief recipient of charitable gifts.\(^{16}\) In fact, from the year 1200 until 1347 Santa Maria della Scala received less than one-third of all bequests to hospitals, with the remaining two-thirds spread between other charitable institutions in Siena such as the hospitals of Mona Agnese, San Lazzaro, and the Misericordia. Out of the 268 bequests to hospitals recorded in Cohn’s sample of Sienese wills between 1205 and 1348 Santa Maria della Scala received 84, or 31.3\% of all total gifts.\(^{17}\)

The practice of bequeathing money and land to more than one institution is evident in Blasius Tolomei’s will of 1299, which divided his entire estate between Santa Maria della Scala and Siena’s mendicant orders (Dominicans, Franciscans, and Augustinians), leaving land and money to each of them with specific instructions that they were to use his donation to build new hospitals. Tolomei’s bequest for Santa Maria della Scala, for example, dictated the establishment

\(^{15}\) Samuel Kline Cohn, *Death and Property in Siena, 1205-1800: Strategies for the Afterlife* (Baltimore: Johns Hopkins University Press, 1988), 47. Cohn selected his sample of wills from the *Notarile* and *Diplomatico* fondi of the Archivio di Stato di Siena since these, unlike other collections, house only original wills or copies made contemporaneously. Because the number of wills surviving in the *Notarile* increases from 1205-1800 Cohn varied his method of selection; for example from 1223-1300 he drew from all existing notarial protocols, but from 1300 to 1480 he used one notarial volume for each notary working within Siena. This was then narrowed to the wills recorded by four randomly selected notaries per decade for 1480-1585. From 1585-1800 he examined 30 wills from at least 3 notaries per decade. All 600 wills found in the *Diplomatico* were included in his study. The samples focus mostly on urban Sienese, but will from the suburbs and towns within the state are included, as identified in the map on pp. 6-7. For a full explanation of Cohn’s method, see his appendix, 251-258.

\(^{16}\) Cohn, *Death and Property*, 21.

\(^{17}\) Cohn, *Death and Property*, 21, 262n. Anabel Thomas’s work on thirteenth Sant’Angelo in Colle shows that this pattern held true for inhabitants of the countryside as well: Santa Maria della Scala figured heavily in the wills of Sant’Angelo in Colle, especially after the Black Death, but there were donations to other hospitals such as that of Monna Agnese and local institutions as well. See Anabel Thomas, *Garrisoning the Borderlands of Medieval Siena: Sant’Angelo in Colle: Frontier Castle under the Government of the Nine (1287-1355)* (Surrey, England: Ashgate, 2011), 286-287.
of a hospital for refugees in an area where none existed. Cohn found, however, that bequests to multiple institutions such as that of Tolomei began to disappear from wills around the late fourteenth century, so that by 1400 Santa Maria della Scala received close to half of all charitable donations recorded in the wills sampled. Out of the 99 gifts to hospitals Cohn found in select wills from 1348–1399, 47 of them went to Santa Maria della Scala. According to Cohn this number only increased and “... [Santa Maria della Scala] dominated the thoughts of the testators from the city and the territory as they lay on their deathbeds ... for the Quattrocento, it culled more than two-thirds of the gifts to hospitals.” Looking at the timeline established by Cohn, it is interesting to note that Santa Maria della Scala’s rise in popularity among givers coincides with the hospital’s increasing association with Siena’s communal government. As Santa Maria della Scala became an agency of the Sienese state, it also became the main point of donation for Sienese citizens, both in the city and countryside. These gifts of wealth certainly contributed to the growth of the hospital and its status as the pre-eminent charitable institution in Siena. It also provided the hospital with property to work, rent, and sell, as well as money to purchase additional land and farms.

The third way that Santa Maria della Scala acquired property and built its network was through the sale and purchase of land. Even a cursory survey of the minutes from the meetings of Santa Maria della Scala’s governing chapter shows consistent attention to taking inventory of properties, deciding which lands to keep and develop, and determining which properties to sell.

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18 Cohn, Death and Property, 22.
19 Cohn, Death and Property, 21, 262n.
20 Although Santa Maria della Scala became the recipient of the majority of charitable donations, it is also possible that, as Anabel Thomas has noted, Santa Maria della Scala’s prominence also helped some of Siena’s smaller hospitals, like the Misericordia and the hospital of Monna Agnese, to establish contacts with the contado and obtain more gifts than they may have otherwise; see Thomas, Garrisoning the Borderlands of Medieval Siena, 308-309.
The chapter made decisions to purchase land carefully and typically only after the receipt of a gift of property in a particular area. In fact, as Epstein points out, Santa Maria della Scala’s administrators consciously purchased land in locations where the hospital already owned property. This process can be clearly observed beginning in the early thirteenth century, when the governing chapter used several small rural hospitals under Santa Maria della Scala’s jurisdiction as a base for the organization and expansion of the patrimony by acquiring land around these rural hospitals and developing farms. One result of this process was the Grancia di Cuna, which became one of the hospital’s longest-lasting and most important fortified farms. The history of the grancia began with Santa Maria della Scala’s acquisition of the hospital of Sant’Angelo a Tressa in 1232. Located along the Via Francigena south of Siena, Sant’Angelo a Tressa served mostly as a stop for pilgrims and travelers, and was surrounded by good farmland. Over the course of the thirteenth century, Santa Maria della Scala purchased the land in and around this hospital and by 1322 the area of Cuna was home to one of the largest of the hospital’s grance.

A similar process occurred with the grancia at San Quirico and Spedaletto: in the 1230s Santa Maria della Scala took rural hospitals in each of these areas under its protection and then proceeded to purchase the surrounding farmland. It is not insignificant, as Epstein notes, that Santa Maria della Scala chose to expand its patrimony and build a network in this way. Subject hospitals located along the Via Francigena, such as Sant’Angelo a Tressa, connected Santa Maria della Scala to trade and pilgrim routes and gave the hospital a foothold in prime locations.

21 Epstein, Alle origini della fattoria toscana, 29.
22 Epstein, Alle origini della fattoria toscana, 29-30.
for exchange and interaction with the urban market. Furthermore, it became common practice to sell off any scattered property (holdings not located near any of the grance) which could not easily be administered by another of Santa Maria della Scala’s farms. In other words, hospital administrators placed a heavy priority on the geographical location of new holdings in relation to other properties and consciously constructed networks with centres that could easily access trade routes.

**Network Growth and Expansion**

Whether property was acquired through donation of oblates, pious bequests, or purchase, the independence to control and administer its patrimony was a crucial step in Santa Maria della Scala’s construction of a charitable network. A large part of the cathedral canons’ reluctance to lose their hold on Santa Maria della Scala was the wealth of its growing patrimony, since as long as the canons administered the hospital they could appropriate its land, possessions, and income for their own ends. As mentioned previously, Pope Celestine III issued a bull in 1195 that granted Santa Maria della Scala autonomy from the canons and gave the hospital confraternity the ability to not only control the administration of the institution itself but also greater freedom to administer its property and possessions. However, although detachment from the canons brought administrative freedom, it also opened the door for Siena’s communal government to assume a more active role in hospital affairs. The earliest actions of the government towards Santa Maria della Scala focused on financial matters: in the late thirteenth century the government lent its support for Santa Maria della Scala’s autonomy by putting in place measures

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23 Epstein, *Alle origini della fattoria toscana*, 30. The Via Francigena played an important role in the establishment of Santa Maria della Scala itself as well; see Sordini, 21.
to protect the rights of the hospital when it came to the receipt of property, specifically stating that city magistrates had a duty to guarantee the collection of monies and properties owed to the hospital.\textsuperscript{26}

The communal government made another helpful contribution to Santa Maria della Scala’s ability to build its network in 1292 when they granted the hospital, along with several other charitable institutions in the city, exemption from all taxes and fees normally charged for the import, export, and sale of goods.\textsuperscript{27} This exemption came with a caveat, however: rather than waiving the fees upfront, the hospital still had to pay them and then, at the end of each fiscal year, obtain a reimbursement from the government for fees paid. This practice lasted until 1400 and allowed the communal government to occasionally keep a little money for themselves. For example, in the fiscal year of 1367-1368 Santa Maria della Scala paid 491 lire for the “gabelle delle porte,” or gate tax (fee paid to bring goods into the city), but the government only reimbursed the hospital for 400 lire.\textsuperscript{28} But whether the city gave a full reimbursement or not, tax exemptions still benefitted the hospital financially since they gave it the right to make a profit from its land and keep most of that profit without financial obligation to the commune.

The rules regarding tax exemption were fairly straightforward when property bequeathed to the hospital was inhabited or cultivated at the time of its donation, but the issue became more complicated for the property of oblates. Usually this property was already lived on and maintained by either the oblate or his or her family. As mentioned, those who joined the

\begin{footnotesize}
\begin{itemize}
\item \textsuperscript{26} “Il magistrato deve garantire la riscossione di ‘pensionibus et affictis debitis dicto hospitali,’” Epstein, 16. Similar policies and exemptions were practiced in other Italian city-states and Garbellotti cites examples from Genoa, Florence, Venice, and Milan; see Garbellotti, “Assets of the Poor, Assets of the City,” 118-119, 131n.7-8.
\item \textsuperscript{27} At the same time the commune also granted this privilege to two other Sienese charitable institutions: the Casa della Misericordia and the Spedale di Monna Agnese; see Lucia Brunetti, \textit{Agnese e il suo ospedale, Siena, XII-XV secolo} (Siena: Pacini Editore, 2005), 41.
\item \textsuperscript{28} Epstein, \textit{Alle origini della fattoria toscana}, 14-15.
\end{itemize}
\end{footnotesize}
confraternity as external members (frati di fuori) were allowed to continue living on and working their land so as long as they paid rent and dues to the hospital. In the late thirteenth century the communal government expressed concerns regarding this arrangement, since the practice deprived the city of tax revenue previously collected. In 1304 the Consiglio Generale attempted to solve this problem with a ruling that required Santa Maria della Scala to provide the government with a list of all properties received through oblation so that back taxes could be calculated and paid. This order proved difficult to execute, however, since the hospital’s records did not always distinguish between properties obtained through oblation versus through bequest, so the Consiglio Generale ultimately ruled that properties which were inhabited by the original owners or didn’t pass in their entirety to the hospital until the death of the giver still had to pay taxes. This meant that oblates who chose to be external members of the confraternity had to continue paying taxes to the city.

With the freedom to control and administer the patrimony and exemption from taxes established, the late thirteenth and early fourteenth centuries saw the greatest period of expansion for Santa Maria della Scala’s network. Extension into the countryside south and east of Siena began in 1265 when the hospital acquired land near Asciano for the purpose of establishing a pilgrim’s hospice and a farm there; the hospital then continued to acquire land eastward from Asciano into the Serre di Rapolano, establishing a series of farms which by the mid-fourteenth

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29 Pellegrini, *La comunità ospedaliera di Santa Maria della Scala*, 39-41. There is even some indication that the hospital would offer to provide partial funds to help someone purchase land with the requirement that they then become an oblate and donate that land to Sanat Maria della Scala. See Epstein, *Alle origini della fattoria toscana*, 48-49.
31 Sordini’s work shows how the physical structure of the hospital itself was expanded and developed during this time, reflecting the growth of the hospital’s networks as well. See Sordini, *Dentro l’antico ospedale*, 35-52.
century became one of the largest of the grance.\textsuperscript{32} Further acquisitions to the south-east came in 1295 as Sienese nobleman Simone Cacciaconti left all of his possessions in Montisi (including 6 farms, vineyards and a house) to Santa Maria della Scala, and in 1297 when Bernardino del fu Alamanni Piccolomini donated the entirety of his possessions in Serre di Rapolano.\textsuperscript{33}

Santa Maria della Scala’s statutes of 1305 list San Quirico, Val d’Orcia, Corsignano, Asciano, Serre, Montisi, Chiusure, and Meliandra as the hospital’s major patrimonial interests, with the bulk of its possessions located in the areas of Val d’Orcia, San Quirico, and Corsignano.\textsuperscript{34} As Epstein points out, these three locations form a triangle with most of the hospital’s possessions divided between the Val d’Orcia and the Crete Senese, both landscapes well known for the production of grain, wine, and olives.\textsuperscript{35} Epstein further divides Santa Maria della Scala’s properties into four areas or zones: the suburbs of Siena, the zona di Cuna (south of the city), the zona della Berardegna (east of the city), and zona di Montisi (south-east of the city). Based on records compiled between 1316-1318, Epstein calculates that the hospital had a total of 3,765.58 staia and 489.5 hectares of land (1209.58 acres) worth 36,965.29 lire or 12,746.7 florins.\textsuperscript{36} From this point on, expansion continued steadily so that by the fifteenth century Santa Maria della Scala’s holdings comprised one-third of Sienese subject territory, encompassing the

\textsuperscript{32} Epstein, \textit{Alle origini della fattoria toscana}, 30-31.

\textsuperscript{33} Epstein, \textit{Alle origini della fattoria toscana}, 31-32; also Muccarelli, \textit{La terra contesa}.

\textsuperscript{34} ASS, Ospedale di Santa Maria della Scala, \textit{Statuti e Ordinamenti}, 2b, f. 18v-19r, 20r-22v.

\textsuperscript{35} Epstein, \textit{Alle origini della fattoria toscana}, 33-34, 38-39.

\textsuperscript{36} Epstein, \textit{Alle origini della fattoria toscana}, 40.
Map 1. The Grance of Santa Maria della Scala, circa 1305.
most fertile land to the south-east of the city. This total made Santa Maria della Scala the single largest landowner in the Sienese state.\(^{37}\) (Map 1)

The trend of rapid expansion and growth in wealth over the thirteenth and early fourteenth centuries began to slow into the early fifteenth century. According to Epstein’s survey of financial records from 1301-1335, the hospital received an essentially balanced amount of property from both testamentary bequests and other donations, although the donations generally brought in more money. However, from 1335 though 1350 this trend shifted so that income from wills and bequests outpaced donations. Epstein’s findings are displayed in the following table:

<table>
<thead>
<tr>
<th>Year</th>
<th>Bequests</th>
<th>Donations</th>
<th>Year</th>
<th>Bequests</th>
<th>Donations</th>
</tr>
</thead>
<tbody>
<tr>
<td>1301-05</td>
<td>16</td>
<td>28</td>
<td>1326-30</td>
<td>23</td>
<td>21</td>
</tr>
<tr>
<td>1306-10</td>
<td>23</td>
<td>28</td>
<td>1331-35</td>
<td>28</td>
<td>31</td>
</tr>
<tr>
<td>1311-15</td>
<td>15</td>
<td>12</td>
<td>1336-40</td>
<td>36</td>
<td>15</td>
</tr>
<tr>
<td>1316-20</td>
<td>17</td>
<td>8</td>
<td>1341-45</td>
<td>17</td>
<td>9</td>
</tr>
<tr>
<td>1321-25</td>
<td>25</td>
<td>10</td>
<td>1346-50</td>
<td>117</td>
<td>14</td>
</tr>
</tbody>
</table>

Table 2. Bequests and Donations, 1301-1350\(^{38}\)

Epstein’s findings make sense when taking the Black Death into account, and his work accords with Cohn’s research on Sienese wills before and after the plague.\(^{39}\) This slowing of patrimonial expansion, however, can also be seen as a result of the increased focus which the hospital’s late

\(^{37}\) Epstein, *Alle origini della fattoria toscana*, 58. Other significant land-holders included the Gallerani, Salimbeni, Tolomei, and Malavolti families, whose combined properties in the early fourteenth century made up one-third of the Sienese state, equaling Santa Maria della Scala’s total. See Giuliano Pinto, “‘Honour’ and ‘Profit’: Landed Property and Trade in Medieval Siena,” in Trevor Dean and Chris Wickham, eds., *City and Countryside in Late Medieval and Renaissance Italy: Essays Presented to Philip Jones* (London: The Hambledon Press, 1990), 89.

\(^{38}\) Table reproduced from Epstein, *Alle origini della fattoria toscana*, 46.

\(^{39}\) Cohn, *Death and Property in Siena*, 21.
fourteenth century rectors placed on internal expansion, turning much of their attention to the relics, artwork, and renovations to the hospital buildings discussed in the previous chapter.40

The Black Death, Depopulation, and Economic Stagnation

Perhaps the most transformative effects of the Black Death on Siena and Santa Maria della Scala were the depopulation it caused and the stagnation of economic growth. On the eve of the Black Death the population within the walls of Siena was approximately 52,000 people, making it one of most populous cities in Europe at the time.41 Estimates for the population of the entire Sienese state in 1348 indicate that there were at least 100,000 inhabitants throughout the contado.42 Although it is difficult to calculate exact numbers of the plague’s demographic impact on Siena, estimates fall within the range of one-third to one-half of the population. This drastic decline is noticeable less than a year after the plague’s arrival in Siena: in 1349 the number of registered military companies in the city dropped from 43 to 21, and the number of contrade dropped from 60 to 42.43 This depopulation and the resulting economic decline of Siena following the Black Death heavily impacted both the city and countryside. And although the fifteenth century brought a slow demographic recovery within the city walls (records for the period show a steady increase of births recorded) the same did not hold true for the contado.

One of the results of depopulation in the countryside at the time of the Black Death was the abandonment of farms. Quoting from Sienese records, historian Duccio Balestracci explained: “By 1378, the countryside was so desolate that a committee appointed by the urban

41 Cohn, Death and Property, 5.
42 Bowsky gives this estimate but suggests that it may be a gross under-estimation since one post-plague study of the Massa Maritima provides a population of 12,000-15,000 inhabitants in that part of the state alone, indicating that pre-plague numbers must have been much higher; see Bowsky, A Medieval Italian Commune, 7-8, 11.
43 Brown, Siena, 50.
authorities had to confront the situation, since ‘workers and other people who were taxed as subjects have taken refuge in Siena for twelve years, so as not to pay this tax in any way; and on account of this our possessions are all ruined and we cannot find anyone to stay on the land.’ These were very harsh years for country people, both because of the fiscal pressure and also because of the looting perpetrated by mercenary bands . . .”44 The combination of depopulation with the attacks of mercenary bands in the latter half of the fourteenth century prompted many people to abandon their farms in the countryside and move to the city to seek safety and work, meaning that farmland which had been productive in prior years was left to lie fallow with no one to work it.45

The raids perpetrated by mercenary companies on the farms and communities of Siena’s countryside had a serious economic impact on the entire Sienese state, and as a major landowner and civic institution Santa Maria della Scala did not escape unscathed. In fact, as William Caferro points out in his work on the connection between mercenary companies and the decline of Siena, the cost of maintaining its network of farms, paying ransoms for stolen livestock, and being forced to loan money to the city government stretched the hospital’s resources to the limit.46 Because of its close ties to the communal government Santa Maria della Scala was an ideal lender; in its prosperity the hospital offered a dependable source of funds and provided the government with low interest rates. In the last two decades of the fourteenth century, however,

45 The abandonment of the countryside in conjunction with depopulation, the plague, and warfare is a point emphasized in an article by Caferro; see Caferro, “Warfare and Economy,” 167-209.
46 The farms in the Val d’Arbia south of the city (such as the Grancia di Cuna) were often targeted because of their large livestock holdings; mercenaries stole livestock and then sold it back to the hospital so frequently that they often purchased the same animals several times. William Caferro, Mercenary Companies and the Decline of Siena (Baltimore: The Johns Hopkins University Press, 1998), 67, 125.
these loans added an extra financial burden. Reproduced from Caferro’s work, Table 2 shows various loans imposed on Santa Maria della Scala by the communal government from 1381 to 1399.\footnote{Table reproduced from larger table found in: Caffero, \textit{Mercenary Companies}, 113-116.}

<table>
<thead>
<tr>
<th>Year</th>
<th>Date</th>
<th>Amount Loaned</th>
</tr>
</thead>
<tbody>
<tr>
<td>1381</td>
<td>Nov. 11</td>
<td>3,000 florins</td>
</tr>
<tr>
<td>1382</td>
<td>June</td>
<td>300 florins</td>
</tr>
<tr>
<td>1384</td>
<td>July (?)</td>
<td>2,000 florins</td>
</tr>
<tr>
<td>1394</td>
<td>?</td>
<td>600 Florins</td>
</tr>
<tr>
<td>1399</td>
<td>July 11</td>
<td>?</td>
</tr>
</tbody>
</table>

Table 3. Loans imposed on Santa Maria della Scala from 1381-1399

It is important to note, as Caferro himself points out, that the loans recorded here are only those given to the government specifically for the purpose of paying mercenary companies in response to or to prevent raids.\footnote{Caferro, \textit{Mercenary Companies}, 111-116.} In addition to loans from Santa Maria della Scala the government also imposed a number of loans on the communities of the countryside: from 1354 to 1399 there were at least 92 total loans, which averages out to one and a half loans per year. Ranging in size from 200 florins to 20,000 florins, these loans took an immense toll not just on the hospital but also on the communities it served.\footnote{The communal government was, in fact, so worried about the economic impact of these loans on the countryside that they convened a special council in 1382 which warned the government that the citizens throughout the entire state were being taxed beyond their means and the welfare of the state was in jeopardy. The same sentiment was repeated by the government during the following decades; see Caferro, “Warfare and Economy,” 181-182.}
Perhaps more influential than the depopulation, mercenary attacks, and forced loans which followed the Black Death was the intense political competition and factionalism in Siena. As discussed in the previous chapter, the collapse of the Nine led to a period of political instability in the city, with frequent leadership changes and inconsistency in government. As the nobility of Siena became more concerned about obtaining and maintaining political power, the government became less equipped to effectively deal with the problems confronting the state and struggled to help Siena recover from the Black Death. The population in Siena’s contado reached its lowest point between 1400 and 1450. The government was so alarmed at the impact of this decline on food production and agriculture that they tried tax exemptions, tax delays, and special provisions to re-stimulate growth. In 1399 the government issued orders for rebuilding the communities of the Maremma, where towns such as Grosseto had experienced drastic population decreases and desertion. In 1412, the city council voted to aid in the restoration of buildings publicly and privately owned in Grosseto, including over 70 houses and buildings owned by Santa Maria della Scala.

However, despite these efforts abandonment of the countryside continued and by the 1440s Siena’s government noted that homes in the Masse “are lost and go to ruin. The closer they lie to the city, the more shameful for our government, and more damaging to our citizens

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50 Samuel Cohn has argued that political factors and government responses are more to blame for the after-effects of the Black Death than the depopulation caused by the disease itself. The variation in taxation policies and treatment of subject communities by governments accounts for the success of some cities (such as Florence) after the Black Death and the decline of others, like Siena. See Samuel K. Cohn, Jr., “Insurrezioni contadine e demografia: Il mito della povertà nelle montagne toscane (1348-1460),” Studi Storici, Anno 36, No. 4 (Oct.-Dec., 1995): 1023-1049.

51 The pre-plague population of Grosseto was around 1200 inhabitants; this number fell to only 100 by the turn of the century; see Angelo Biondi, Grosseto e la Maremma al passaggio da Siena al Granducato (Grosseto: Portici Editori, 1996), 6.

52 Biondi, Grosseto e la Maremma, 6.
who own them, is this situation.” Balestracci calculates that by 1450, the suburbs of the Masse declined 12% in population and he cites the drastic examples of the district of Camollia, which dropped from 245 active households to 10, and the district of San Martino which fell from 280 to 85 over the course of the fifteenth century. By 1500, the population of Siena is estimated to have been only 15,000 inhabitants (about one-third of what it had been in 1300) and the population of the entire state at 80,000.

As the owner of one-third of the land in the state, Santa Maria della Scala certainly felt the economic pressure caused by political unrest, depopulation, and war. Confronted with these troubles, during the fifteenth century the administrators of Santa Maria della Scala turned their attention from the growth and expansion of the hospital’s vast network to its maintenance and preservation. In the late fifteenth century Santa Maria della Scala’s interactions with the Sienese Pope Pius II produced several favourable results for the hospital and its network. As discussed in the previous chapter, Pius II issued a bull in August of 1460 which broke the remaining ties between the hospital and the cathedral cannons, officially and fully freeing Santa Maria della Scala from any interference on the part of the canons and any claims they might have made over land given to the hospital. Pius II also confirmed privileges previously granted and intervened in a transaction for the purchase of land at Corsignano at a fair price so that Santa Maria della Scala

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55 Pinto, “‘Honour’ and ‘Profit,’ 82-83.
56 Epstein, Alle origini della fattoria toscana, 58.
57 It should be noted that his involvement extended to the whole of Siena and particularly helping to return the aristocracy to full political participation; see Hook, Siena, 164-165.
could construct a hospital there.\footnote{Luciano Banchi, \textit{I rettori dello spedale di Santa Maria della Scala di Siena} (Bologna: Tipographia Fava e Garagnani, 1877), 123.} This purchase was among several made near the end of the century, including the purchase of Prata and the organization of a grancia there in 1492.\footnote{ASS, \textit{Ospedale di Santa Maria della Scala}, Amministrazione delle Grance, Documenti e Memorie, Grancia di Prata, N. 1413, f.113.}

While these purchases might suggest continued expansion, administrative records for the period actually show that during the final decades of the fifteenth century the sale of land was far more common. Along with the alienation of a number of minor properties during the 1480s, the hospital also parted with significant holdings such as the entire grancia at Stigliano, sold for 4,500 florins in 1489.\footnote{Banchi, \textit{I rettori}, 141n.} The sales of the grancia at Stigliano and other properties were intended to alleviate some of the financial stress the communal government continued to place on Santa Maria della Scala through forced loans, such as a loan of 2000 florins the hospital was required to give in 1483.\footnote{Banchi, \textit{I rettori}, 140.} Due to these loans, which continued to be imposed on the hospital into the early sixteenth century, any financial relief brought through the sale of property was only temporary.

**Maintenance and Preservation: The Network in the Sixteenth Century**

As the other sources of hospital revenue decreased, administrators increasingly turned to short-term solutions for easing the hospital’s financial stresses, including the sale of land. From Cohn’s survey of Sienese wills it appears that by the sixteenth century bequests were no longer a significant source of income for Santa Maria della Scala. While the hospital still received the majority of recorded gifts, the number of gifts to hospitals in will surveyed from 1500 to 1600
drastically decreased compared to earlier periods. In fact, from 1400-1450 the ratio of bequests for hospitals dropped from one in every three wills to one in four, and by 1500 Cohn observed a dramatic decline so that only one in every 25 wills contain gifts to hospitals. Rather than interpreting this decline in gifts as an overall decline in charitable giving among the Sienese, Cohn instead attributes these changes to other social and economic factors in the city. For example, Cohn points out that the peak of gifts to hospitals was contemporary with the period of San Bernardino’s preaching, which often highlighted hospitals of the city as an object of charitable giving. Cohn also emphasizes that although it seems as if charitable giving declined into the sixteenth century, in reality people were simply giving in different ways and not necessarily giving less than before.

Still, the decline of financial gifts and pressure caused by loans to the government meant that the turn of the sixteenth century marked the beginning of an unfortunately long-lasting, difficult financial period for Santa Maria della Scala. In 1502 a new rector, Pier Feliciano di Bartolomeo Benassi, took office. His administration, according to Luciano Banchi, commenced a “series of years more or less fatal for the administration of the hospital.” As explained in the previous chapter, the political upheavals of the late fifteenth century caused constant shifts in hospital administration which led to inconsistent management of the network. Additionally, under the influence of Pandolfo Petrucci the civic government set aside care and attention to the stability of the hospital and instead used Santa Maria della Scala for the commune’s own financial needs. The government continued the practice of forced loans and also employed a

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62 In his survey of 403 wills from the period 1500-1600 Cohn found only 34 gifts to hospitals, a significant decrease compared to the previous century: from 1363-1500 Cohn examined 369 wills and found 99 gifts to hospitals. See Cohn, Death and Property, 47, 116.  
63 Cohn, Death and Property, 115-118.  
64 Banchi, I Rettori, 285.
related tactic, requiring the hospital to buy land belonging to the commune at high prices. The idea was for the purchase of the land to serve as a kind of loan, which the government would repay within a specified amount of time by re-purchasing the land from Santa Maria della Scala. This system worked well for the needs of the communal government but did not necessarily benefit the hospital. For example, in 1503 Pandolfo Petrucci asked Santa Maria della Scala to contribute 500 ducats to the city treasury, in addition to requiring the hospital to buy several tracts of land at the cost of 9600 lire. Petrucci re-purchased the land from the hospital for the same price a few years later, but then immediately forced the hospital to buy 4000 lire worth of land at Prata and San Giusto.65

Since Petrucci essentially controlled Siena’s government at the time, he also seems to have been the governing force behind the hospital during this period. Benassai did little to stop Petrucci from interfering during his tenure as rector and Benassi’s replacement, Giovan Battista di Lodovico Tondi, also governed the hospital in accordance with Petrucci’s influence. From a financial and economic standpoint, it seems that as Petrucci’s power in the city increased, the condition of the hospital grew steadily worse in proportion. Banchi points to the lack of records for this period as proof of Petrucci’s involvement in Santa Maria della Scala’s administration; most of what he did was ‘under the table’ and the minutes of the hospital’s administrative meetings for the early years of the sixteenth century record little beyond the election of administrative offices and the sale of minor properties.66

Although these records may not contain all the financial dealings of the hospital, the yearly recording of offices and officers does provide valuable information regarding the extent and organization of Santa Maria della Scala’s network during the sixteenth century. At the time

66 Banchi, I rettori, 290.
of Petrucci’s death in 1512, administrative records indicate that the hospital’s farms were organized into ten grance at the following locations: Cuna, Serre di Rapolano, Grosseto, Montisi, San Quirico, Spadaletto, Castelluccio, Prata, San Giusto, and Montepescali. There are also three additional officers appointed to head the hospital’s farms in the Masse, or suburbs, of Siena: one for Ravacciano, one for Pilli, and one for Tufi. While most of the grance had only one administrator, called a grancieri, assigned to oversee and run them, Cuna and Serre di Rapolano each had two officials assigned, suggesting both impressive size and significance to the hospital.\footnote{ASS, Ospedale di Santa Maria della Scala, Deliberazioni, N. 27, ff. 4v-5r.}

In comparison to the organization and the size of the patrimony in the fourteenth century, there was only a slight change in the number of grance which comprised Santa Maria della Scala’s holdings (there were 8 grance in 1305 and 10 in 1512). However, if the physical locations of the grance are examined it becomes clear that many of the original grance were, by 1512, combined with other holdings and a significant amount of land had been added. All of the original grance were located to the south and east of the city, but the additions of Grosseto and Montepescali gave the hospital a presence in the south-western part of the Sienese state, while the additions of Prata and San Giusto rounded the patrimony out to the north and the west of the city. Thus, not only did the hospital’s network of farms encompass a one-third of Siena’s territory, it was no longer restricted to the Val d’Orcia, Val d’Arbia, and Crete Senesi south of the city. (Map 2)

For the most part, the extent of the patrimony remained essentially the same across the sixteenth century, with records showing more reorganization of existing grance to form new boundaries rather than the acquisition of new properties. Some purchasing of land did occur, but
Map 2. The Grance of Santa Maria della Scala, circa 1512.
not until the late sixteenth century, when acquisitions were made for the purpose of eliminating what Oscar Di Simplicio refers to as “enclaves.” These “enclaves” were pieces of land not owned by Santa Maria della Scala but surrounded by hospital property. Just as the administration’s policy for the sale of land was to sell only properties distant from core holdings, the goal of purchasing land was to eliminate enclaves by buying land the hospital should logically own based on location so that the borders of the hospital’s lands would be more clearly defined. Since these purchases were already enclosed by Santa Maria della Scala’s land, the organization of the grance remained fairly consistent in the late sixteenth century, with only minor changes or additions. For example, the yearly office appointments for 1595 list the same 10 grance as those given in 1512: Cuna, Serre di Rapolano, Montisi, Castelluccio, Spedaletto, San Quirico, Grosseto, Montepescali, Prata, and San Giusto. There is, however, the addition of another grancia at Camigliano, near Montalcino (south-west of Siena). Also, whereas in 1512 the possessions of the Masse (including Bossi, Ravacciano, Campi) were divided into three separate holdings, in 1595 they were once again placed under the jurisdiction of one official. Within these 11 grance and the possessions of the Masse, there were around 200 farms in total.

The table below (Table 3) is based on information contained in Cecchini’s survey of Santa Maria della Scala’s patrimony and helps to give a clearer picture of the holdings and purposes of each of the grance and demonstrates the various economic activities in which the hospital was engaged across the Sienese state. Common elements among the various grance

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69 ASS Ospedale di Santa Maria della Scala, Deliberazioni, N. 29, f. 271v.
70 G. Cecchini, “Le Grance dell’Ospedale di S. Maria della Scala di Siena,” *Economia e Storia*, 3 (1959): 407-409. Cecchini’s article is a survey of the documents in the Archivio di Stato di Siena relating to the grance and he includes a brief survey of the grance at the end of the
include the presence of houses (meaning houses which the hospital owned and rented out), small hospitals, and churches over which Santa Maria della Scala had jurisdiction. It is also easy to see that while many of the grance were primarily used for farming, several of them (most especially those located in the Maremma) were used for raising and pasturing livestock instead of growing crops.

<table>
<thead>
<tr>
<th>Grancia</th>
<th>Fortified</th>
<th>Farms</th>
<th>Houses</th>
<th>Hospital</th>
<th>Mills</th>
<th>Kilns</th>
<th>Churches</th>
<th>Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cuna</td>
<td>Yes</td>
<td>34</td>
<td>Numerous</td>
<td>1</td>
<td>2</td>
<td></td>
<td>1</td>
<td>2 osterie; orchards; Hermitage; meadows</td>
</tr>
<tr>
<td>Serre di Rapolano</td>
<td>No</td>
<td>25</td>
<td>Numerous</td>
<td>4</td>
<td>1</td>
<td></td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>Montisi</td>
<td>Yes</td>
<td>19</td>
<td>13</td>
<td>1</td>
<td>1</td>
<td></td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>San Quirico</td>
<td>No</td>
<td>15</td>
<td>9</td>
<td>1</td>
<td>1</td>
<td></td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Spedalotto</td>
<td>Yes</td>
<td>18</td>
<td>Numerous</td>
<td>1</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Castelluccio</td>
<td>Yes</td>
<td>18</td>
<td>Numerous</td>
<td>1</td>
<td></td>
<td></td>
<td>1</td>
<td>1 osteria; Orchards; meadows</td>
</tr>
<tr>
<td>San Giusto</td>
<td>No</td>
<td>9</td>
<td>Few</td>
<td>1</td>
<td>1</td>
<td></td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Camigliano</td>
<td>Yes</td>
<td>14</td>
<td>8</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Several vineyards; forest and meadows; 1 osteria</td>
</tr>
<tr>
<td>Grosseto and Montepescali</td>
<td>No</td>
<td>Few</td>
<td>Numerous</td>
<td>2</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Prata</td>
<td>No</td>
<td>Few</td>
<td>Numerous</td>
<td>1</td>
<td>2</td>
<td></td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Bossi/Campi/Ravacciano</td>
<td>No</td>
<td>14</td>
<td>3</td>
<td>3</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Masse</td>
<td>No</td>
<td>9</td>
<td>?</td>
<td></td>
<td>1</td>
<td></td>
<td>1</td>
<td>meadows</td>
</tr>
</tbody>
</table>

Table 4. The Grance and their possessions circa 1600

The hospital gained additional economic benefit not only from the rent of its buildings and houses but also from having its own mills and kilns. These were useful not only for Santa Maria della Scala’s own use, but also because others could be charged to use them as well. Since the hospital’s records only refer to land with fixed residents who cultivated crops as farms, and since

sixteenth century, based on the hospital’s records of yearly visits. The table is my own creation based on the information in Cecchini’s article.
records do not always provide the number of meadows, orchards, vineyards, and forests associated with each of the grance, it should be noted that a significant amount of the hospital’s holdings cannot be adequately quantified.

Records can, however, provide some idea of the kind of staff required to operate and administer each grance. The numbers varied by the size and purpose for which a particular grancia was used, as well as how much of the land was rented to sharecroppers. The yearly visits made by hospital officials to each of the grance can provide some data, but although the statutes specify that all the grance should be visited yearly, this was not always the case. In 1594, for example, administrators visited Cuna, Serre, Montisi, Castelluccio, Spedaletto, San Quirico, Camigliano, San Giusto, but no visits are recorded for the grance of the Maremma: Prata, Grosseto, and Montepescali. Still, for the eight grance visited officials recorded a total of 1,403 inhabitants and 143 farms.\footnote{The break down for each individual grancia runs as follows: Cuna had 34 farms and 339 inhabitants; Serre had 20 farms and 171 inhabitants; Montisi had 15 farms and 125 inhabitants; Castelluccio had 20 farms and 195 inhabitants; Spedaletto had 18 farms and 226 inhabitants; San Quirico had 15 farms and 175 inhabitants; Camigliano had 8 farms and 62 inhabitants; and San Giusto had 13 farms and 110 inhabitants. See ASS, \textit{Ospedale di Santa Maria della Scala}, Visite, N. 3084; also, Lucia Bonelli Conenna, “Crisi economica e demografica della stato senese agli inizi del XVII secolo,” in Giovanni Cherubini, Tommaso Detti, Mario Mirri, Giorgio Mori, Simonetta Soldani, eds. \textit{Contadini e proprietari nella Toscana moderna; Atti del Convegno di studi in onore di Giorgio Giorgetti}, Vol. 1 Dal Medioevo all’età moderna (Firenze: Leo. S. Olschki Editore, 1979): 495-533.}

In addition to the visite (the records of yearly visits to the grance) there are other surveys of the network which provide us with similar numbers. One survey conducted during the second half of the sixteenth century provides an account of the number of people it took to work and maintain this large network, and shows just how many lives were tied to and dependent on Santa
According to the survey, there were 564 inhabitants of Santa Maria della Scala itself in Siena, including the members of the hospital order, 120 medical patients, 278 abandoned boys and girls (225 girls, 53 boys), and other staff. For the grance, the survey gives a total of 2,433 people, encompassing 76 administrators and staff and 1,320 renters, sharecroppers, and families who worked Santa Maria della Scala’s land. This makes for a total of nearly 3000 people, both in Siena and throughout the countryside, whose livelihood and survival were tied to Santa Maria della Scala, a significant number for any charitable institution. The hospital’s network of grance were thus the key not only to bringing this many people under the hospital’s jurisdiction, but also in the ability of the institution to support such a population and carry out charitable activities on such a large scale.

Although it is difficult to quantify the total worth of the hospital’s patrimony and possessions across the sixteenth century, records of income and expenditure do provide data regarding Santa Maria della Scala’s yearly cash flow. Table (?) provides the yearly totals of income and expenditure in lire from 1543–1601. The years highlighted in gray are those in which the hospital recorded a negative balance. From the 1540s through the war the hospital seems to have vacillated between posting positive and negative balances; after the war it is interesting to note that income totals significantly decrease before regaining.

During the sixteenth century, then, the theme for Santa Maria della Scala’s network was not one of growth and expansion as much as it was one of maintenance, re-organization, and solidification. Heavily influenced by the political and economic challenges Siena experienced in

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72 ASS, Ms D 113, Diplomatico, ff. 20v-21r. There is, unfortunately, no date given on the document, but it references 1548 and is included with other documentation from the post-war, Medicean period, making it likely to be dated sometime in the late sixteenth or turn of the seventeenth century.

73 ASS, Ms D 113, Diplomatico, ff. 20v-21r.
the sixteenth century, the hospital’s treatment of its patrimony was, as will be seen in the next chapters, dictated by the challenges of war, the political and economic situation in Siena, the annexation of Siena to the Grand Duchy of Tuscany, and the reforms and involvement of the Medici Dukes. The war with Spain and Florence at mid-century converted much of the hospital’s patrimony into battle ground, necessitating negotiations with local political and military leaders as well as the enemy. During the war, several of the grance, including most prominently the Grancia di Cuna, were placed directly into the communal government’s hands and used by the military to garrison troops and serve as strongholds. Recovery from the war involved further negotiation with the Medici government for the return of seized properties and the frequent sale of land in an attempt to regain financial footing. From the 1570s the Medici government, in addition to the reforms enacted for the government of the Sienese state, encouraged efforts to reform Santa Maria della Scala and its network, culminating in a new set of statutes for the hospital in 1598.

Unlike prior statutes which included individual capitoli dedicated to the grance, the new provisions of 1598 separated the grance from statutes for the hospital, giving Santa Maria della Scala’s network of farms its own set of regulations, made up of thirty individual capitoli. Addressed to the grancieri, sharecroppers, farmers, and other related officials, the orders and provisions contained in these thirty capitoli cover a wide array of issues including the behavior and duties of officials, the practice and maintenance of charitable activities on the grance, the procedure for yearly visits and inspections, instructions for record keeping, and the storage,

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74 The hospital’s financial records for the period of the war show that in daily transactions of money coming in and going out, it essentially broke even with very little profit. For example, for 1553-1555 the total entrata was 87,157 lire, while the uscita was 86,697 lire, leaving a difference of 459 lire; see ASS, Ospedale di Santa Maria della Scala, Entrate e Uscite, N. 904, f. 28v.
transfer, and sale of goods, produce, and livestock. Although these statutes (which are examined in more detail in chapter five) describe an ideal of organization and operation that was not entirely consistent with reality, at the very least they still indicate that by the end of the sixteenth century Santa Maria della Scala’s network continued to serve as an integral part of the hospital’s identity and function.

The “Other” Network: Santa Maria della Scala’s spedali

As mentioned previously, Santa Maria della Scala’s patrimony encompassed and governed both farms and small hospitals. As is clear from the discussion above, the grance and small hospitals, or spedali, were closely connected, and it is difficult to discuss one without mentioning the other. Since the focus to this point has been primarily on the grance, it is worthwhile to briefly consider the spedali and their role in Santa Maria della Scala’s charitable network.

There were two ways by which small hospitals became a part of Santa Maria della Scala’s network: they either requested or offered to be placed under Santa Maria della Scala’s administration or they were founded by Santa Maria della Scala itself. The earliest hospitals to be added to the network fall under the first category, including Sant’Angelo a Tressa, which became the first of Santa Maria della Scala’s subject hospitals. Attached to a church, Sant’Angelo a Tressa was founded by Benedictine monks who ceded administration of the hospital to Santa Maria della Scala in 1232.75 Other early examples include a hospital at Ponte d’Orcia, confirmed as subject to Santa Maria della Scala in 1236 by the bishop of Chiusi, and a hospital at Ponte al Sasso which was acquired in 1237 under the confirmation of the Bishop of Siena.76 There are also early examples of the second kind of subject hospital: those founded by Santa Maria della

76 Epstein, Alle origini della fattoria Toscana, 20, 30.
Scala itself. These spedali were usually the result of a donation of land or property to the hospital; for instance, in 1237 Santa Maria della Scala received in donation a piece of land and a vineyard at San Quirico, with a house on the property which was transformed into a hospital for abandoned children. Likewise, in 1299 Blasius Tolomei left land and money to Santa Maria della Scala for the specific purpose of establishing a hospital for refugees in an area where none existed.\footnote{Epstein, \textit{Alle origini della fattoria Toscana}, 30; Cohn, \textit{Death and Property}, 22.}

As previously noted, these early subject hospitals were all located along the Via Francigena and were used as a base from which Santa Maria della Scala could expand its holdings and establish grance. Even moving away from main thoroughfares such as the Via Francigena, the acquisition of spedali (whether through subjection or foundation) appears to have preceded the establishment of grance. This is especially true in the Maremma, where in 1295 a hospital at Grosseto was placed under the protection and jurisdiction of Santa Maria della Scala and in 1296 a hospital was founded at Montepescali, about 17 kilometers north of Grosseto.\footnote{Epstein, \textit{Alle origini della fattoria Toscana}, 32.}

The establishment and subjection of small hospitals such as these gave Santa Maria della Scala the opportunity not only to expand its charitable activities beyond the walls of Siena, but it also gave the hospital a foothold in communities where they would later acquire property and gain substantial holdings. The presence of this important Sienese institution and the various charitable activities associated with the spedali also helped to create ties between Siena and its subject communities, bringing the Sienese state into one charitable network.

Unlike the hospital’s system of grance, the network of spedali under Santa Maria della Scala’s jurisdiction also extended beyond the borders of the Sienese state. These expansions began in the fourteenth century with the addition of hospitals in other parts of Tuscany, including
a hospital at San Gimignano (1315), one in Florence (1316), one at San Miniato (1334), and a hospital at Barberino Val d’Elsa (1381). Several spedali were also acquired from the Lazio region, the most prominent being a hospital at Rieti (1364). For these spedali, sometimes referred to as spedali di fuori, the main motivation behind voluntary submission to the governance of Santa Maria della Scala was the general economic stability associated with being part of the larger institution. For Santa Maria della Scala, the addition of the spedali di fuori served to spread and increase the institution’s reputation and prestige. Agreements and terms of annexation varied with each hospital, but most often Santa Maria della Scala’s rector nominated or appointed the administrators of the spedali di fuori and then stayed mostly removed from day to day operations.

By the early sixteenth century Santa Maria della Scala had, in addition to the small hospitals associated with the grance, a total of 10 spedali di fuori. These included hospitals in: Florence, Poggibonsi, San Gimignano, San Miniato, Barberino, Monte San Savino, Rieti, Todi, Castel della Pieve, and Acquapendente. (Map 3) By mid-century three more hospitals (at Menzano, Piancastagnaio, and Proceno) had joined the network, and by the end of the century a hospital at Pian della Fornaio also attached itself to Santa Maria della Scala.

Unlike the institution in Siena, neither the spedali associated with the grance nor the spedali di fuori provided multiple charitable services. Instead, the spedali typically focused on one or two specific charitable activities. Most commonly Santa Maria della Scala’s subject

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79 Epstein, Alle origini della fattoria Toscana, 56.
80 Epstein, Alle origini della fattoria Toscana, 56-57.
81 ASS, Ospedale di Santa Maria della Scala, Deliberazioni, N. 27, ff. 5v-6r.
82 List based on the deliberations for the year 1557 (when Siena was placed under the Grand Duchy of Tuscany), 1569, 1586; see ASS Ospedale di Santa Maria della Scala, Deliberazioni, N. 28, ff. 82v, 198v; N. 29, ff. 143r-v.
Map 3. Spedali di Fuori, circa 1500.
hospitals were pilgrim’s hostels or homes for abandoned children, though there were a few that
provided medical services. The distribution of alms for the poor was, of course, part of every
hospital’s duty. Duccio Balestracci’s work on the small hospitals of the Sienese contado gives a
good overview of what the spedali were like in the fourteenth, fifteenth, and sixteenth
centuries. According to Balestracci, those spedali in the countryside which were part of Santa
Maria della Scala’s network were often larger and better maintained than other rural hospitals,
but some were also rather small, such as the spedale at Monte San Savino, which had 3 beds, and
the hospital at Piancastagnaio which had only 2 beds. Restricted by the number they could take
in, these hospitals limited their charitable activities to those of a hostel. Subject hospitals which
were larger, such as the hospitals of San Gimignano and San Miniato al Tedesco, took in
abandoned children in addition to their function as a pilgrim’s hostel.

It follows logically that these small hospitals would be staffed according to their size and
the number of people they could serve. In many of cases, the staff consisted solely of a
spedalingo, selected and appointed by Santa Maria della Scala to oversee the hospital, his wife
(if he had one), and a handful of servants. However, even the larger spedali operated on a small
scale: the hospital of San Gimignano had a staff of 7-8 men and women, while San Miniato al
Tedesco was run by as few as 5 women. Inventories show that the hospital buildings
themselves also reflected the size of the staff and number of beds and often had simple plans; for
example, in addition to the main room used for charitable service (usually called a pellegrinaio
or an infirmeria depending on the hospital’s function) the small hospital of Monte San Savino

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83 Duccio Balestracci, “Per una storia degli ospedali di contado nella Toscana fra XIV e
XVI secolo: strutture, arresi, personale, assistenza,” in Giuliano Pinto, ed., La società del bisogno:
povertà e assistenza nella Toscana medievale (Firenze: Salimbeni, 1989), 37-59.
84 Balestracci, “Per una storia degli ospedali di contado,” 42-43.
85 Balestracci, “Per una storia degli ospedali di contado,” 48-49.
had two bedrooms, one common room, a kitchen, and a storehouse.\textsuperscript{86} Larger hospitals such as those at Poggibonsi, Todi, and San Gimignano had dormitories with individual cells for the staff, multiple rooms for their services, several storerooms, and sometimes even outbuildings like stables and chicken coops. Spedali attached to one of the grance often had a chapel as well.

Balestracci’s survey of various hospital inventories reveals that the situations of Santa Maria della Scala’s spedali varied based on their location and purpose. Like the larger institution, rural hospitals often received bequests and donations of land and money, which meant that they had patrimonies of their own. Inventories of farming equipment owned by the hospitals as well as financial records help to determine the extent to which the spedali were involved in agriculture. Some, such as the hospital at Poggibonsi, actively pursued agriculture and cultivated the land belonging to the hospital, while others such as the spedale in San Gimignano appear to have rented out land to sharecroppers.\textsuperscript{87} Hospitals like that of San Gimignano functioned almost as a microcosm of the larger institution of Santa Maria della Scala: just as the central institution provided jobs, food, and charity through its patrimony, some rural hospitals served a similar economic function for their communities.

As is the case with the grance, Santa Maria della Scala’s statutes are an excellent source of information regarding subject hospitals and how they functioned. In the 1305 statutes the spedali are not mentioned on their own but are instead included in the directives for the farms and possessions of the patrimony.\textsuperscript{88} This is likely because at the time all of Santa Maria della Scala’s rural hospitals were part of the grance. By time of the 1598 statutes however, although

\textsuperscript{86} Balestracci, “Per una storia degli ospedali di contado,” 42.
\textsuperscript{87} Balestracci, “Per una storia degli ospedali di contado,” 57.
\textsuperscript{88} Capitolo XXVII of the 1305 Statutes outlines policies for Santa Maria della Scala’s houses and possessions (“case e possessioni”) in San Quirico, Serre, Montisi, Chiusure, and Melianda. There is no specific mention of the small hospitals which were associated with these grance. See Banchi, \textit{Statuti Senese Vol. III}, 38-40.
still included in the rules and regulations for the grance, the spedali received closer attention. Several capitoli are dedicated to instructions for those officers in charge of grance with hospital which offer medical services or act as a hostel (“faranno Pellegrinai o Infermerie”), reminding them to receive and serve the poor according to their needs. Additionally, all of the grancieri are directed to distribute alms without partiality to all the poor, sick, and afflicted who come to them seeking charity.

In addition to these services, there are also specific instructions for those grance which are equipped with a spedale for abandoned children. In the case of these hospitals there was a significant increase in the communication and exchange that occurred between Santa Maria della Scala and the rural hospital. For example, records of all children taken in were to be kept and sent to Siena, and the records must distinguish between those children actually living on the grance versus those which are received and then sent to live with a wet nurse. It seems that the preferred method was to send children to live with wet nurses in the countryside rather than keeping them at the hospital, since most of the spedali were too small to accommodate more than a few children and it was too costly to send all abandoned children to Siena. However, if a local wet nurse could not be found, the grancieri were instructed to send the child to the main institution in Siena. Also, the spedali were forbidden to take in children under the age of six

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89 “Siano li Grancieri, e ministri predetti nelle Grancie dove faranno Pellegrinai, o Infermerie, diligentì in accarezzare li poveri, e caritativì, con rivederli in persona, somministrando loro, di mano in mano ciò che sarà di bisogno, secondo l’obbligo, e uso di quella Grancia,” ASS, Ospedale di Santa Maria della Scala, Statuti e Ordinamenti, N. 4d, p. 5.

90 “Facciano li Agenti, e ministri delle Grancie, elemosina per l’amor d’Iddio; a tutti i poveri Infermi, stroppiati, o viandanti che vi capitano, con quella maggior carità che potranno,” ASS, Ospedale di Santa Maria della Scala, Statuti e Ordinamenti, N. 4d, p. 5.
months; exceptions could only be made if the grancieri recognized the child or knew that the
mother was dead, or unless he made an appeal to the rector in Siena.91

In all of these instructions there is an underlying concern for the economics of these
institutions and the services they provided. When it came to the charitable activities of the
spedali, the 1598 statutes advocate an ideal of generous charity for all the poor while at the same
time establishing rules which cautioned administrators to give charity with great care.
Administrators and staff were admonished to distinguish between those who were truly in need
and those who were simply looking for a handout: in the same exhortation to care for all the
poor, officials are also told to avoid giving to cheats and scoundrels (birboni and furfanti). The
warning for those receiving abandoned children is even more severe: the spedali are directed not
to receive any child with parents at home or parents who are well-off, and they are to be
particularly careful not to give a child to its own mother for nursing. While the practice of
abandoning and then taking in your own child to nurse was enterprising on the part of peasant
parents, Santa Maria della Scala and other hospitals across Italy viewed this as fraud. To guard
against it, Santa Maria della Scala’s officials were required to make frequent visits to all hired
wet nurses at least once a year.92

The care of abandoned infants thus highlights the interdependence that could occur
between the spedali and the communities they served. While poor parents relied on the hospital
to care for children they could not afford to raise, Santa Maria della Scala likewise relied on rural

91 All of these instruction are contained in the same capitolo; ASS, Ospedale di Santa
Maria della Scala, Statuti e Ordinamenti, N. 4d, pp. 5-6.
92 “Et avvertischino di non le ricevere tutt’hora, che sappino, che habbino Padre, o Madre
nel proprio paese, o vero che fussero bene stanti; ma solo delle persone povere, e fuora del paese,
e sopra tutto ponghino cura di non le rendere a bàlia alle propie madri; per non introdurre questo
uso: avvisando li Grancieri che si mandarà annualmente Ministro a posta visitarle . . .,” ASS, Ospedale di Santa
Maria della Scala, Statuti e Ordinamenti, N. 4d, p. 6.
women to act as wet nurses and provide the care needed to raise orphaned children. The attention which Santa Maria della Scala exercised in directing the charitable activities of its outlying hospitals and the ways in which they served and interacted with local communities demonstrates that not only were the spedali an important part of Santa Maria della Scala’s economy, but they could also be used by local poor as part of their own economic strategies. Women could seek employment as wet nurses for the hospital, parents who could not care for their children could give them to the hospital, and the “deserving” poor of local communities could receive alms of food and clothing. Thus Santa Maria della Scala’s network can be seen as both a network of charity and economic interdependence.

The desire to successfully maintain this interdependence is evident in other policies set down in the 1598 statutes. First, the statutes establish extensive and detailed record-keeping policies, which require all people, products, and transactions to be recorded and sent to Siena at specific times of the year. Additionally, restrictions were placed on the conduct of business: grancieri could not lend or donate any product or possession of the grance or spedali without the permission of the rector, nor are they allowed to incur any kind of debt, collect money, or take credit without permission of the rector in Siena. If administrators were caught selling any grain, wine, oil, fodder, or other foodstuffs without the consent of the rector, they could be asked to not only repay the amount they sold, but also to repay it at whatever price the rector chooses. Furthermore, grance staff and administrators were forbidden to undertake any large expenses (such as new construction or cultivation) without permission from Santa Maria della Scala.

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93 There is a concession made that in the case of perishables; grancieri can use their discretion in distributing items that would otherwise deteriorate without use; see ASS, Ospedale di Santa Maria della Scala, Statuti e Ordinamenti, N. 4d, p. 8.
Finally, grancieri were charged to watch costs carefully and try to eliminate extravagance and waste of resources.94

All of these restrictions seem designed to ensure that the grance and spedali would remain on solid financial footing and continue to supply the centre with the provisions and funds it needed, while simultaneously providing charity and poor relief to the local community. Of course, as the central institution, the prosperity of the grance and spedali meant the prosperity of Santa Maria della Scala as well. However, the restrictions could also be a response to economic policies which the Medici imposed upon the Sienese state. From 1562 onward there were periods of time when the exportation of grain outside the state, especially by sea, was forbidden, which limited the trade and circulation of Sienese grain. Exportation was open from 1566-1577, 1590-1599 and 1604-1607, but closed or limited in other years.95 In light of such policies, it is possible that Santa Maria della Scala’s statutes were written to ensure that the hospital’s network operated within the bounds set by the government. The annexation of Siena to the Grand Duchy of Tuscany brought a new element in to the relationships between the Santa Maria della Scala and its network, including the grance, spedali, and spedali di fuori, which will be explored in the final chapter.

**Two Case Studies: The Grancia di Prata and the Ospedale di Todi**

The economic benefits and exchange between Santa Maria della Scala and its network varied according to the location and individual agreements the hospital had with local communities. The following case studies look at two examples, one grancia and one spedale, which allow us to move beyond the rhetoric of statutes and observe the interactions, power dynamics, and practices

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95 Conenna, “Crisi economica e demografica,” 497-498.
that characterized the relationship between subject hospitals, farms, and the central institution of Santa Maria della Scala.

*Case Study I: The Grancia di Prata*

In 1492 Santa Maria della Scala acquired the last significant property (in terms of both size and worth) added to its network: the Grancia di Prata. Established around the year 1000, the town of Prata had grown up around a castle and was governed by the Count of Prata. Following several decades of conflict with its neighbours, Prata came under Sienese dominion in 1282, when Bertoldo detto Tollo, Count of Prata, signed an agreement with the Nine. Siena’s control of Prata was solidified by a series of acts promulgated between 1293 and 1321, but Siena’s relationship with the town was not harmonious.96 After the citizens of Prata rebelled against Siena in the mid-fifteenth century, the Sienese military tore down the castle and other fortifications and sacked the countryside. Then, in 1492, the communal government decided to grant possession of Prata to Santa Maria della Scala.97

The transfer of Prata to the hospital is referred to in the documents as a purchase (*compra*), and the government did receive 7000 florins in payment from Santa Maria della Scala.98 However, despite its ownership of Prata, the hospital did not have complete control over the town and its inhabitants. The statutes issued at the time of the transfer in 1492 and the additions made in 1505 indicate that while Santa Maria della Scala controlled the land and water rights of the town, Siena’s communal government also retained ties to Prata. For example, the

government of Siena and the local officials of Prata retained all civil and criminal jurisdictions and Santa Maria della Scala was forbidden to interfere in such affairs.\textsuperscript{99} Furthermore, the town and people of Prata (including the farmers and labourers employed by the hospital) were still required to pay annual taxes to Siena and send a representative to the annual celebrations of the Annunciation in March and the Assumption in August.\textsuperscript{100} The privileges and authority which the statutes did reserve for Santa Maria della Scala included water rights for their fields and livestock, exemption from paying a tax on wine produced and distributed locally, and freedom from paying the tax typically associated with the sale and movement of livestock.\textsuperscript{101}

In addition to these privileges, the statutes give a good indication of the various economic activities Santa Maria della Scala engaged in and the profits it gained through ownership of Prata. Based on lists provided in the statutes, the countryside around Prata was rich in vineyards, olive and chestnut groves, farmland, and meadows all of which fell under control of the hospital.\textsuperscript{102} Besides farming, Santa Maria della Scala further dominated the economy of Prata as the owner of two water mills, the town’s slaughterhouse, a bakery, and an osteria. The hospital’s

\textsuperscript{99} “In primis che si intenda liberamente reservato al Magnifico Comune di Siena el mero e misto Imperio e Galdii potestatem ogni Iurisd[ition]e di detta terra e che lo detto hospitale in cause o materie civili o criminali non si possi per alcun modo intermettere.” ASS, Ospedale di Santa Maria della Scala, N. 1413 as transcribed in Conenna, \textit{Prata}, 117.

\textsuperscript{100} The annual \textit{censo} for the Palio of the Assumption is specifically mentioned and set at 16 lire; see ASS, \textit{Ospedale di Santa Maria della Scala}, N. 1413 as transcribed in Conenna, \textit{Prata}, 117-118.

\textsuperscript{101} In regards to the gabella del Mosto, a similar policy appears to have applied to the hospital’s other vineyards; the only tax they had to pay in connection with wine was the usual gate tax for bringing wine into the city: “dovendo solo pagare per quello che mettessero dentro alle porte della Città di Siena,” ASS, \textit{Ospedale di Santa Maria della Scala}, Contratti, N. 1417, ff. 1-3, as transcribed in Conenna, \textit{Prata}, 118. The policy regarding the sale and movement of livestock specifies that only livestock born and raised in the hospital’s care and branded with Santa Maria della Scala’s sign can be sold and moved (in numbers up to 100 large livestock and 200 pigs) without the payment of the gabella di tratta; see Sica, 18.

\textsuperscript{102} Descriptions from the 1505 agreement include: “terreni lavorativi, olivati, vigne, castagneti, e prati,” see ASS, \textit{Ospedale di Santa Maria della Scala}, Contratti, N. 1417, ff. 1-3 as transcribed in Conenna, \textit{Prata}, 120.
ownership of these businesses created a kind of monopoly that prevented others from opening shops of a similar nature. With such control of a variety of Prata’s economic activities and needs, Santa Maria della Scala was an everyday presence in the lives of the town’s inhabitants.

For the hospital, the most important asset of the grancia di Prata was its rich pasture land. Since animal husbandry was the major economic occupation of the area, Prata was predominantly used by Santa Maria della Scala as a place to house and raise livestock. An inventory taken in 1552 lists the following livestock at Prata: 29 cows, 10 calves, 4 oxen, 5 horses, 34 pigs, 40 piglets, 50 goats, and 24 kids. These animals were pastured on the best land surrounding the town, and to care for the animals the grancia had a staff of 60 men who, along with the 10 other officials and workers listed in the inventory, made for a total of 70 people who lived on the Grancia di Prata. In addition to the land worked by hospital staff, the 1552 inventory lists two farms owned by the hospital but rented out to sharecroppers. Besides the cultivation of grain, one of these farms raised 158 goats and 117 pigs, while the other farm was much smaller with fewer crops, only 60 goats and no pigs.

Not only did Santa Maria della Scala monopolize all the best pastures in Prata, but they had the right to designate where and when those outside the hospital organization could pasture their animals. Furthermore, in addition to the strict regulations Santa Maria della Scala’s administrators placed on the use of pastures, there were also limitations on the number of livestock the inhabitants of Prata were permitted to own. According to the 1505 capitoli, Prata’s citizens could possess up to sixty sheep or goats and had to pay a yearly tax on the livestock. If,

103 Conenna, 18-19.
104 Sica, 19. Additionally, the capitoli of 1505 require Santa Maria della Scala to assign land for pasture for both itself and the community of Prata; see Conenna, 119.
105 ASS, Ospedale di Santa Maria della Scala, Visite, N. 3066, ff. 2r-3v.
106 ASS, Ospedale di Santa Maria della Scala, Visite, N. 3066, ff. 1r-v.
107 ASS, Ospedale di Santa Maria della Scala, Visite, N. 3066, ff. 3v-4r.
by chance, someone owned land outside of the hospital’s possession, they were free to work that land and keep all the profits, as long as they paid all established taxes.\textsuperscript{108} However, according to Conenna’s study, although the statutes appear to preserve the freedom of those who “justly” owned land, the hospital used the wording of this clause to challenge the ownership of land and, through a series of lawsuits over the sixteenth century, Santa Maria della Scala came to possess most of Prata and the land surrounding it.\textsuperscript{109} In 1572 Santa Maria della Scala’s rector, Claudio Saracini, reinforced and clarified the terms of the 1505 statutes with a series of additions that focused on defining the borders between hospital-owned and public-use pasture land, as well as the limits placed on the ownership of livestock by Prata’s residents.\textsuperscript{110} Then, in 1605 the hospital produced a new set of statutes that forbid the inhabitants of Prata to sell their property to anyone except Santa Maria della Scala.\textsuperscript{111} This particular decree resulted in Santa Maria della Scala’s eventual acquisition of the entirety of Prata by the early eighteenth century.

Discontent between the citizens of Prata and Santa Maria della Scala over these restrictions and the hospital’s domination of the town finally gave way in the early seventeenth century to a series of complaints brought before Siena’s communal government and the regional Medici government as well. In letters addressed to the Florentine governor of Siena and to the grand duke himself, the Prategiani denounced the damages and abuses that the hospital’s policies

\textsuperscript{108} A copy of these capitoli can be found in ASS, \textit{Ospedale di Santa Maria della Scala}, Grancia di Prata, N. 1417, ff. 1r-3r; for clauses on taxes see especially ff.1v-2r.
\textsuperscript{109} Conenna, 7.
\textsuperscript{110} The full version of these revisions, as well as government approval of the revisions, can be found in ASS, \textit{Ospedale di Santa Maria della Scala}, Grancia di Prata, N. 1415, ff. 47r-50r.
regarding livestock ownership, taxes, and the use of pastures caused. In response, Santa Maria della Scala’s administrators denied the accusations and insisted that their actions were entirely within the bounds of the established capitoli. For instance, in response to the accusation that the hospital refused to sell licenses to collect wood from public forests to certain individuals, the hospital insisted that they always sold licenses to those who could pay the proper fee, according to the established rules. Although a more thorough analysis of this dispute is necessary to discern all its implications, what emerges from even a cursory reading of these documents is an understanding that although the acquisition of Prata proved economically beneficial for Santa Maria della Scala, the Prategiani felt that the presence and control of the hospital stunted the economic growth of the town and its inhabitants.

All of this is not to say that the community of Prata did not accrue any benefits from the presence and ownership of Santa Maria della Scala. Similar to the hospital’s other grance, part of Santa Maria della Scala’s activities in Prata included the establishment of charitable entities, including a pilgrim’s hostel and a hospital for abandoned children. The foundling hospital was particularly important to the community and was large enough to take in children from the countryside surrounding Prata. However, even in the practice of charity the hospital seems to have fallen short in the eyes of Prata’s residents. As part of the 1604-1605 dispute, the citizens of Prata claimed that the hospital did not provide shelter for pilgrims and the poor as it should, even though the Santa Maria della Scala’s administrators asserted that they did indeed maintain a

112 ASS, Ospedale di Santa Maria della Scala, Grancia di Prata, N. 1415, ff. 95r-101r.
113 “La licenza si negarà mai, ma con il dovuto prezzo,” ASS, Ospedale di Santa Maria della Scala, Grancia di Prata, N. 1415, f. 107r.
114 There is, of course, a great deal more to be said about this dispute and its eventual conclusion, but further research is required before anything definitive can be said.
115 Sica, 19-20.
“celebrated” hospital in Prata and that they welcomed all who sought entry. There appears to be, then, a difference between the two parties regarding the actual practice of charity by Santa Maria della Scala in Prata. It is an undisputable fact that the hospital offered charitable services to the community of Prata, but this charity was insufficient to overcome hard feelings caused by the economic limitations Santa Maria della Scala placed on the Prategiani.

Although it is certain that the relationship between Santa Maria della Scala and Prata was not identical to its relationship with all the grance, the exchange that existed between the two provides insight into the kinds of power dynamics that existed within the hospital’s network of farms. Because it owned and controlled much of the land in and around Prata, as well as many of the town’s other resources, such as mills, Santa Maria della Scala was a consistent presence in the lives of Prata’s inhabitants. The use of Prata for raising livestock shows awareness on the part of the rector and other administrators of the best and most effective use of the grancia. All of the hospital’s activities in Prata were aimed at the support and prosperity of Santa Maria della Scala and demonstrate the ability of the hospital to wield extensive economic power. The evidence shows that the inhabitants of Prata felt that the hospital’s presence dampened the economic progress of the town, and by the end of the sixteenth century they viewed the relationship as exploitative. What this brief case study of Prata demonstrates, then, is that despite its charitable mandate, Santa Maria della Scala was clearly aware, and made good use of, its access to economic power through the grance.

116“In far’ la carità, massime à luogo si celebre, che ogn’anno da p[er] amore di Dio q[ua]nito ha d’entrata,” ASS, Ospedale di Santa Maria della Scala, Grancia di Prata, N. 1415, f. 107r.
Case Study II: The Spedale di Santa Caterina delle Ruote di Todi

Just as the grance often caused disputes with local communities over land distribution and use, competition also occasionally arose between local communities and Santa Maria della Scala for control over subject hospitals. The hospital of Santa Caterina delle Ruote in Todi, a small town about 146 km southeast of Siena, provides a good example of this. The Spedale di Santa Caterina delle Ruote, an institution that provided Todi and the surrounding area with medical services, shelter for pilgrims, and distributed alms to the poor, was founded and constructed by Lorenzo di Leone Manni, a wealthy citizen of Todi.117 Built on his personal property within Todi’s walls, Manni committed the hospital, along with its church and entire patrimony, to the “protection and government” of Santa Maria della Scala in 1421.118 The rector of Santa Maria della Scala at the time, Carlo d’Agostino Bartali, confirmed Fra Matteo Pietro as rector of Santa Caterina and for a few years Santa Maria della Scala’s involvement with the hospital’s affairs was minimal. Upon the death of Manni in 1428 the hospital passed entirely into the hands of Santa Maria della Scala and in 1429 they sent their own rector from Siena to Todi to take charge of the hospital.119 For

117 According to Manni’s own description of the hospital of Santa Caterina in his will, its purpose and mission were “. . . pro sustentatione pauperum, peregrinorum, et egenorum, ac infirorum . . .,” ASS, Ospedale di Santa Maria della Scala, Ospedali di San Gimignano, Firenze, e Todi, N. 3711, f. 189r.

118 “Et ipsam cappellam, [et] Hospitale, [et] totam d. haereditatem, [et] omnia eius bona, reliquit, submisit, [et] raccomandavit, sub dominio, protectione, [et] gubernatione D. Rectoris [et] Capituli d. Hospitalis S. Mariae de Scala,” ASS, Ospedale di Santa Maria della Scala, Ospedali di San Gimignano, Firenze, e Todi, N. 3711, 189r. The details of Manni’s association with Santa Maria della Scala are difficult to determine, but it is clear that some sort of relationship existed since his will additionally instructed that if he should die while in Siena he should be interred in Santa Maria della Scala’s church: “Et si contigerit eum mori in Civitate Senarum, reliquit eius corpus sepeliri apud Ecclesiam Hospitalis Sanctae Mariae de Scala . . . .” ASS, Ospedale di Santa Maria della Scala, Ospedali di San Gimignano, Firenze, e Todi, N. 3711, f. 188r.

119 When Santa Maria della Scala officially took over in 1429 Santa Caterina’s property and possessions consisted of rector’s quarters, a corte and cucina degli offerti, a pellegrinaio dei preti (with 3 beds), a pellegrinaio degli uomini (6 beds), a pellegrinaio delle donne (3 beds), a
the rest of the century exchange and administration continued in this manner with little
disturbance, and records state that Santa Maria della Scala “remained in peaceful possession” of
Santa Caterina. However, in the early sixteenth century things began to change.

In 1508 the city leaders of Todi began taking steps to detach the hospital of Santa
Caterina from Santa Maria della Scala. First, the priors wrote to Santa Maria della Scala and
claimed that they had received the right to elect the rector of Santa Caterina from the pope. The
rector of Santa Maria della Scala, Bartolomeo Bonaventuri, dismissed this claim since
documentation was easily produced which proved Santa Maria della Scala’s jurisdiction over the
hospital. Nevertheless, the priors and other government officials of Todi moved ahead in
March 1508 and expelled the rector of Santa Caterina, Fra Agostino, on the basis of claims that
he had badly mis-managed the hospital and its affairs were deteriorating: “gl’affari di quello
Sped[al]e andavano molto deteriorando . . .” They then appointed their own candidate as
rector of the hospital in Todi: Signore Stiglia, a cleric and the son of a prominent Todi family.
Upon hearing this news, Bonaventuri convened a meeting of Santa Maria della Scala’s
administrators to discuss the matter. In an effort to appease town officials, the hospital board
accepted the deposition of Fra Agostino and voted to ratify the appointment of Stiglia as rector.
In fact, Bonaventuri expressed complete confidence in Signore Stiglia and confirmed him as

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*casa degli offerti*, a chapel, 3 *botteghe* and several houses (2 attached to the *botteghe*) belonging
to the hospital and its *offerti* (similar to the frati di fuori of Santa Maria della Scala), 6 farms, and
one vineyard. See ASS, *Ospedale di Santa Maria della Scala*, Inventario dello Spedale [di Todi],
1429, ff. 2r-6v.

120 “. . . si è stato sempre in pacifico possesso . . .” ASS, *Ospedale di Santa Maria della

121 ASS, *Ospedale di Santa Maria della Scala*, Ospedali di San Gimignano, Firenze, e
Todi, N. 3711, f. 176r.

122 ASS, *Ospedale di Santa Maria della Scala*, Ospedali di San Gimignano, Firenze, e
Todi, N. 3711, f. 176r.
rector of Santa Caterina delle Ruote for life. At the same time, however, Bonaventuri and the hospital board voted to send copies of the original agreements made with Todi’s government at the time Santa Maria della Scala took charge of the hospital, to remind the priors that the rector could only be appointed by the central institution.

The actions taken by Santa Maria della Scala in response to Todi’s attempts to gain control of its own hospital are similar to policies practiced in other Italian states, such as Florence and Venice, where communities were allowed to nominate a candidate as rector for the local hospital, but the nomination had to be confirmed by the central governing institution. This strategy of negotiation allowed rural towns to have a sense of autonomy while at the same time allowing the centre to retain full control of affairs. This same kind of power dynamic characterized Santa Maria della Scala’s relationships with its spedali di fuori: the prevailing policy was that the rector of Santa Maria della Scala and the hospital board selected the rectors of the spedali di fuori, unless agreements between the two stated otherwise or, as in the case of Todi, more negotiation was required in order to pacify local leaders and retain jurisdiction over the hospital. However, as the political instability of Siena increased over the course of the early sixteenth century culminating in war at mid-century, challenges to Santa Maria della Scala’s authority began to arise. Enterprising local leaders took advantage of the opportunity provided by

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123 ASS, *Ospedale di Santa Maria della Scala*, Ospedali di San Gimignano, Firenze, e Todi, N. 3711, ff. 176v-177r.


Siena and Santa Maria della Scala’s uncertain situation and the chaos caused by the war to regain full control of local hospitals.

The communal government of Todi is a prime example of the ways that local leaders attempted to use the changing power dynamics in Siena to their advantage. It was a tradition for the rector of Santa Maria della Scala to make a yearly visit to Todi and the hospital of Santa Caterina, but in October of 1552, the rector Scipione Venturi sent a letter to the priors of Todi informing them that, due to the “suspect times” and impending war, his yearly visit had to be cancelled. Instead, Venturi expressed the hope that Fra Nicolo, Santa Maria della Scala’s appointed rector in Todi, and the priors could work together to continue to govern the hospital well. The good governance of Santa Caterina was especially important since Venturi anticipated that Todi, located in a prosperous location well to the southeast of Siena, would remain untouched by much of the war. Venturi planned to use Todi as a safe place for storing grain and housing livestock during the war, meaning that it was crucial for Santa Maria della Scala to maintain a good relationship with the town and its leaders.

Venturi set his plan in motion in February of 1553 when “a large number” of the hospital’s sheep were sent to reside in the safe mountainous countryside around the town. Fra Nicolo was also instructed to put away 8-10 moggia of grain in Santa Caterina’s storehouses and to keep 10-12 mules since it was likely that Santa Maria della Scala would not be able to stable any in the city once fighting started in earnest. Added to this, of course, Venturi also emphasized that Santa Caterina should continue to perform all of its charitable duties, including treatment of

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126 Fra Niccolo Capriata had been in charge of Santa Caterina della Ruote since 1545; see ASS, *Ospedale di Santa Maria della Scala*, Copia Lettere, N. 436, ff. 1r-1v.
the sick, housing pilgrims, and the distribution of alms. The service of the poor, Venturi reminded Fra Niccolo, should always be the priority.  

Although Venturi’s communications with Fra Niccolo and Todi’s priors show an effort to accommodate local interests while still using Todi for the benefit of the central institution, Venturi’s distance from Todi and lack of personal attention provided the opportunity for town officials to take action. As they had in the early sixteenth century, the priors of Todi attempted to claim authority over the hospital of Santa Caterina by calling into question Fra Nicolo’s diligence as an administrator. In May of 1553 Venturi received what seems to have been a scathing letter from the priors of Todi, in which they complained of Fra Niccolo’s immoral behavior. Their complaints surprised Venturi since only six months previously a letter from Todi’s priors praised Fra Nicolo’s work. Unable to ignore accusations of immorality, Venturi moved to pacify the priors by having Fra Niccolo investigated. 

Still confined within Siena due to the war, Venturi sent Fra Cherubino, the head of Santa Maria della Scala’s subject hospital in Aquapendente, and Fra Girolamo, who was overseeing the hospital’s livestock and serving as

127 ASS, Ospedale di Santa Maria della Scala, Copia Lettere, N. 436, f. 12r.
128 In 1545 and again from 1548 until 1552 Fra Niccolo traveled between Todi, Siena, and Rome under the orders of the rector and the Spanish governor Mendoza, to negotiate with ecclesiastical leaders the rights of Santa Maria della Scala over the hospitals of Todi and Rieti; see ASS, Ospedale di Santa Maria della Scala, Documenti e Memoriale degli Ospedali, N. 3711, f. 227r. An account of the expenses he incurred during travel can be found in ASS, Ospedale di Santa Maria della Scala, Documenti e Memoriale degli Ospedali, N. 3715, ff. 2r-18v. Upon a return visit to Todi in 1550 Fra Nicolo found the hospital and its farms in a state of disorder and disrepair which he sought to remedy through a series of renovations, a list of which can be found in ASF, Mediceo del Principato, Governi di città e luoghi soggetti, Siena, N. 2009, ff. 33-36r; see also Ospedale di Santa Maria della Scala, Documenti e Memoriale degli Ospedali, N. 3715, ff. 26v-28r. These absences and the cost of repairs no doubt contributed to the town’s complaints against him.
129 “... senza questo ne sia certo d[e]l’amor et ubidienza ch[e] portate a questa santa Casa ch[e] certo n’ho gran piacer’ et vi esorto a seguire questi caldi offitii cosi nele cose apartenenti a questo come a cotesto Hosp.le ch[e] tutto e servitio de poveri . . .” ASS, Ospedale di Santa Maria della Scala, Copia Lettere, N. 436, f. 15v.
head of the Grancia di Spedaletto, to Todi to visit the Ospedale di Santa Caterina and hear a personal report from the priors. Fra Cherubino was designated to govern Santa Caterina until it could be determined whether Fra Nicolo needed to be replaced or not.\textsuperscript{130}

Unfortunately, the details of the dispute and the investigation are not recorded, but in the end it appears that the priors’ accusations and all accounts of Fra Nicolo’s bad behavior were false. Fra Niccolo thus remained rector of Santa Caterina in Todi for the duration of the war, and the two investigators, Fra Cherubino and Fra Girolamo, returned to their respective duties. Following the conclusion of these events, a possible motivation for the prior’s complaints arose in Venturi’s correspondence: money. Venturi’s letters indicate that the government of Todi wanted the hospital of Santa Caterina to pay taxes to the city, and there was some disagreement between Fra Nicolo and the priors over whether the hospital ought to pay any taxes at all. At Fra Nicolo’s request, in July 1553 Venturi sent to Todi a copy of a bull in which Pius II confirmed previous tax exemptions granted to Santa Maria della Scala and its subject institutions.\textsuperscript{131} Venturi hoped that if Fra Niccolo showed the bull to the priors the matter would be settled. Interestingly, Todi was not the only subject hospital which carried on this kind of conflict with local

\textsuperscript{130} ASS, Ospedale di Santa Maria della Scala, Copia Lettere, N. 436, ff. 20r-20v. 
\textsuperscript{131} A copy of the privileges confirmed by Pius II in 1458 for Santa Maria della Scala and (by extension) its subject hospitals can be found in the Archivio di Stato di Siena. The privileges include the freedom of the goods and persons of the hospital from heavy taxes and protection from being forced to pay fines and taxes, so that they can best serve the poor and needy: “Quali privilegi essentano liberano, i beni et le persone offitiali, et lavoratori di d[et]ti Spedali da pesi gabelle datii impostsionii prestanze, funzioni, reali, et personali ne possino essere astretti al pagam[en]to di essi et lo ricevono sotto la loro prottetione, e questo perche possino piu facilm[en]te sovenire ai poveri, bisogniosi, infermi, et eseguire altre opere pie,” ASS, Ospedale di Santa Maria della Scala, Ospedale di Todi, N. 3712, f. 8r.
government at the time: Venturi requested that Fra Niccolo send the bull back to Siena as quickly as possible since it was needed to resolve a similar matter with the hospital in Poggibonsi.  

Santa Maria della Scala’s authority dominated in this instance; no taxes were paid and Fra Niccolo remained in charge of Santa Caterina della Ruote until 1572, when another financial dispute once again prompted Todi’s political leaders to request his removal or resignation. The priors enlisted the aid of their local ecclesiastical leader, the bishop of Todi, to raise the issue of taxes. The bishop argued that the hospital of Santa Caterina delle Ruote ought to pay a censo of one pound of wax to the church since all minor pious places paid a censo to the superior church. He argued that this should be done in place of the censo that Santa Caterina paid to Santa Maria della Scala each year. Santa Maria della Scala’s administrators refuted the bishop’s claims on the basis of the long-standing agreement with Santa Caterina, and employed a Sienese jurist in Rome, Giovannibattista Piccinni, to make sure that their refutation of the Bishop’s claim would hold up under canon law. Though the censo of one pound of wax seems hardly worth quibbling over, the wax was merely the physical representation of the real issue at hand. The rector of Santa Maria della Scala at the time, Claudio di Sinolfo Saracini, objected to the bishop of Todi’s claim not because it would deprive the central institution of one pound of wax but because it would represent a loss.

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132 ASS, Ospedale di Santa Maria della Scala, Copia Lettere, N. 436, ff. 26r, 29r. In addition to the troubles with hospitals in Todi and Poggibonsi, difficulties also arose with the Spedale della Misericordia in Rieti when the Bishop of Aquila claimed the privilege of appointing that hospital’s rector. To defend Santa Maria della Scala’s rights over the hospital Venturi actually sent Fra Niccola to Rome in April of 1551, and again after the war from 1555-1556. It seems that Fra Niccolo’s experience in Todi made him an excellent candidate for carrying out these matters on Santa Maria della Scala’s behalf. See ASS, Ospedale di Santa Maria della Scala, Ospedali di San Gimignano, Firenze, e Todi, N. 3711, ff. 227r-234r.

133 ASS, Ospedale di Santa Maria della Scala, Ospedale di Todi, N. 3712, ff. 30r-31r. Fra Nicolo left Todi and was installed as the granciere in Cuna according to the 1572 Visite records; see ASS, Ospedale di Santa Maria della Scala, Visite, N. 3069, f. 2r.

134 ASS, Ospedale di Santa Maria della Scala, Ospedale di Todi, N. 3712, ff. 13r-14r.
of authority. Santa Maria della Scala’s governing chapter agreed that the Bishop of Todi pressed his case “. . . not to have a pound of wax but to acquire control over [Santa Caterina] . . .” including its wealth and resources.\textsuperscript{135} In its deliberations on the matter, the chapter agreed that even though one pound of wax per year was a small price to pay, it did not want to grant the Bishop of Todi any reason to claim authority over Santa Caterina delle Ruote.\textsuperscript{136} Santa Maria della Scala’s administrators agreed that they could not be certain that this was the Bishop’s intention, but the fact that it was a possibility was enough for them to take all precautions possible to resolve the issue and retain control of the hospital in Todi. Their concern over the Santa Caterina’s property in addition to the hospital itself shows that Santa Maria della Scala’s subject hospitals did more than simply lend prestige to the institution; they could also be considered an economic resource when necessary.

With the support of the jurist Piccinni and also the support of Grand Duke Francesco de’ Medici (who had been informed of the affair by Saracini), Santa Maria della Scala successfully repelled the Bishop of Todi’s attempt to receive a censo from Santa Caterina della Ruote. This, by extension, meant that the priors of Todi had failed once again to wrest control of the hospital from Santa Maria della Scala. The hospital of Santa Caterina remained under Santa Maria della Scala’s jurisdiction, and thus a part of its charitable network, well into the seventeenth century and was ultimately one of the last subject hospitals to gain independence.\textsuperscript{137}

\textsuperscript{135} “. . . non p\[er\] havere una libra di cera ma p\[er\] acquistar[e] il dominio di detto spedale . . . ,” ASS, \textit{Ospedale di Santa Maria della Scala}, Deliberazioni, N. 28, f. 170v.
\textsuperscript{136} “perciò non s’acquisti al vescovado alcuno padronato ne alcuno dominio vale, o diretto di detto Sped[a]le o, di suoi beni,” ASS, \textit{Ospedale di Santa Maria della Scala}, Deliberazioni, N. 28, f. 171r.
\textsuperscript{137} The Ospedale di Santa Caterina della Ruote in Todi was one of only 5 spedali left under Santa Maria della Scala’s jurisdiction by the mid-seventeenth century. A discussion of this can be found in the final chapter of the present study; see also Banchi, 227.
The case of Todi thus offers an example of the economic importance of the spedali to the central institution, as well as an example of the ways in which crisis and shifting power dynamics in Siena affected relationships between the two. The leaders of Todi took advantage of the troubles brought on by war and the period of adjustment to the Medici government in an attempt to claim authority over their local hospital. Their efforts won them the right to nominate the rector, but their attempt to involve the Bishop of Todi in the fight for autonomy did not end as successfully. The Ospedale di Santa Caterina della Ruote in Todi demonstrates that the spedali were viewed, by both Santa Maria della Scala and local leaders, as a valuable economic resource and as an outlet for power.

**Conclusions**

As the discussion in this chapter demonstrates, the Ospedale di Santa Maria della Scala was the head institution of a vast patrimony from which the hospital derived not only the income and provisions necessary to carry out its charitable activities, but also a good deal of wealth and economic power. By the sixteenth century the patrimony placed Santa Maria della Scala at the centre of network of smaller hospitals and farms that connected the Sienese countryside to the city. This network enabled Santa Maria della Scala to provide charity in urban and rural areas of the Sienese state, in addition to serving as a source of employment. The ownership of mills, bakeries, and shops increased the reliance of local economies on the hospital, and meant that it was crucial for the institution as a whole to maintain financial stability. Over the centuries of its development it is possible to observe a concerted effort on the part of Santa Maria della Scala’s administrators to manage and cultivate the hospital’s properties to the best advantage possible. This dynamic exemplifies the relationship between city and countryside in Siena that other scholars have identified; namely, that Siena was highly aware of its dependence on the
countryside. These ties became even more important during the war of the mid-sixteenth century, which strained and cut off many connections. The economic power and resources of the hospital were also part of the reason the Medici were eager to control Santa Maria della Scala in the late sixteenth century. These issues are the focus of the next two chapters.
Chapter 4
Civic Charity and Crisis: The Ospedale di Santa Maria della Scala and the War of Siena

As established in the previous chapters, by the sixteenth century the Ospedale di Santa Maria della Scala was a powerful civic, religious, and economic institution. The rapid growth of the hospital within the city walls as well as the expansion of its patrimony during the thirteenth and fourteenth centuries led to Santa Maria della Scala’s position as the dominant charitable institution in the Sienese state. However, as political disagreements and factional divisions split the nobility in the fifteenth and early sixteenth centuries, these troubles were reflected in the hospital’s administration and financial stability. The sixteenth century was also a time when Siena, as historian Fausto Landi described it, came into the orbit of the great European powers of France and Spain. Its geographical location made it an ideal place to garrison troops, build fortifications, and establish strongholds, and the rich farmland and coastal stretch Siena controlled made it all the more attractive. As the monarchs of these kingdoms battled over the Italian peninsula, both were eager to gain a hold over Siena. Closer to home, Siena’s neighbouring enemy Florence sought to expand its territory, with Cosimo I de’ Medici’s end goal being Florentine control of Tuscany. The combination of these outside forces with internal divisions created a volatile political environment and a competition for power which erupted into war in 1552.

As the owner of one-third of the land which comprised the Sienese state and as the dominant charitable institution, Santa Maria della Scala found itself deeply involved in and affected by these disputes. The bonds forged between city and countryside became especially

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crucial during the war. As Mario Ascheri argues, the participation and support of Siena’s contado during the War of Siena emphasized the profound fidelity between city and territory that was the foundation of Sienese civilization.² The hospitals and farms of Santa Maria della Scala were a key part of this outlying support and the fidelity between city and countryside. Indeed, an examination of the primary documents shows that the financial stability and survival of the hospital depended on the success and maintenance of its charitable network. Moreover, as a central Sienese institution controlled by the city government, Santa Maria della Scala’s network was crucial to civic survival during the war.

Additionally, the hospital’s experience of the war provides a valuable perspective on the ways in which the war affected Sienese society. Most sources treat the war of Siena from a political point of view, examining it either in terms of the end of the Republic of Siena, the growth of the Tuscan state, or the power struggle between France and Spain over Italy.³ But this broader political perspective often overlooks the experience of smaller civic and religious institutions, such as hospitals. By using sources such as letters, which provide a detailed look at the impact of the war on the people and resources of the hospital, in conjunction with chronicles and other government records, it is possible to approach the war from the perspective of Santa Maria della Scala without losing the broader political context.

In order to explore these issues this chapter contains two sections. The first reviews the gathering political crises in Siena during the first half of the sixteenth century and their effect on

² This assertion was made by historian Mario Ascheri, as quoted in Landi, 7.
³ Examples of these studies include: Landi, Gli ultimi anni della Repubblica di Siena, 1525-1555; Leonardo Rombai, ed. I Medici e lo stato senese 1555-1609 storia e territorio (Roma: De Luca Editore, 1980); Roberto Cantagalli, La guerra di Siena (1552-1559) (Siena: Accademia Senese degli Intronati, 1962); Arnaldo D’Addario, Il problema senese nella storia italiana della prima metà del cinquecento (La guerra di Siena) (Firenze: Felice Le Monnier, 1958).
the hospital and its network. Following this, the second part of the chapter focuses on the period of the war in the 1550s and looks closely at the challenges confronting Santa Maria della Scala and its network during the final siege and the loss of Siena’s liberty. While much of the current scholarship on charity and civic Christianity treats civic religion as a collaboratve, unifying force, this chapter instead explores how times of crisis and transition disrupt and raise tensions within civic religion, leading to a disturbance in the typical economy of power. A collection of letters written by the rector of this period, Scipione di Mariano Venturi, allows us to observe patterns of interaction and relationships between the hospital’s administrators and the network, as well as the city government, Siena’s military leaders, and the enemy. The letters also provide a better understanding of how the hospital participated in and was influenced by the war. The chapter will conclude with a look at the aftermath of the war and lay the foundation for the final chapter, which examines the hospital’s transition from a Sienese to a Tuscan state institution.

**Siena in Crisis: Factions, Foreigners, Famine, and Civic Tensions, 1512-1552**

Before examining the events of the war and the fall of Siena, it is important to briefly survey the crises which opened the doors for foreign involvement in Siena and led up to the battle for Sienese independence. As previously indicated, the early sixteenth century was an unstable time for the Republic and the city of Siena. The factional disagreements and competition for power which had characterized the Sienese nobility since the fall of the Nine in 1355 intensified after the death of Pandolfo Petrucci in 1512. His son, Fabio Petrucci attempted to cement the family’s power (and, by extension, the power of their political faction, the Nove) through an alliance with the Medici in Florence. The Medici Pope Clement VII sent an army to help Petrucci force Siena to submit to his control. The threat of military force was great enough to generate a temporary unification between the other political factions in the city, who then sought out an ally of their
own. They enlisted Emperor Charles V to help defeat Petrucci and the Medici army. Charles V honoured his alliance, lending the military support Petrucci’s opponents needed to win the battle of Camollia in 1526. Though Siena’s nobility were successful in putting down the Petrucci family’s claims to power, their alliance with Charles V gave him the opening he needed to establish a foothold in the city. The Peace of Cambrais, which put an official end to the dispute in 1529, maintained Siena’s independence but gave Charles V the right to garrison Spanish troops in the city.

Unfortunately, with the Petrucci family removed from power, the alliance between factions crumbled and political consensus began to break down. From 1525 to 1552 the government of Siena was reformed ten times, as the monti and various noble families struggled with each other for power. 4 Cantagalli attributes this “chronic instability” to the failure of Siena’s political system to evolve beyond the factionalism of its political parties and argues that the bitter rivalries and bloodshed between these parties produced a chaotic political environment. Christine Shaw further adds that the divisions among the monti were not merely based on competition, loyalties, and alliances, they were also the result of “genuine political debate about which form of government was desirable . . .” 5 Amidst this environment, attempts were made to use civic devotion to Mary as a unifying force: between 1483 and 1555 the Sienese re-dedicated the city and gave the keys of Siena to the Virgin on at least four occasions. 6 In addition to this,

4 There were four of these political parties (called “monte” individually and “monti” in the plural) and each was based on a particular location and alliance of noble families in the city. The four are: the Nove, the Gentilhuomini, the Riformatori, and the Popolare. See Roberto Cantagalli, “La Guerra di Siena,” in Rombai, ed., I Medici e lo stato senese, 9.


6 The first of these occasions was in 1526 when, after a ceremonial procession and donation of the city’s keys to the Virgin, the Sienese fought and won the battle of Camollia.
government officials promoted a program of prayers, processions, and special masses intended to counteract factional strife and procure the good will of God on the city’s behalf.\(^7\)

A series of economic challenges for both the city and countryside of Siena only exacerbated the state’s political problems. A series of poor harvests from 1527-1529 brought on a period of famine, which coincided with outbreaks of plague.\(^8\) The loss of income due to bad harvests pushed Siena’s nobility, many of whom relied heavily on agriculture as a source of wealth, to seek new avenues of income. Government service was one of the options Siena’s nobility turned to, since salaries attached to various bureaucratic positions were an attractive feature of holding office. Competition amongst Siena’s elites for lucrative government positions began to increase, and served to intensify factionalism and the struggle between the monti for power.\(^9\) Furthermore, constant warfare around Siena and the attacks of bandits also caused problems; fighting both destroyed crops and made it impossible to plant new ones, while the theft and destruction caused by banditry decreased the safety of travelers and made merchants

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\(^7\) John Koenig goes so far as to argue that “the gravity of Siena’s political problems made them the focus of its state religion,” and that Siena’s “survival as an independent republic depended on an extra-strength divine assistance that high levels of state-religious activity and a variety of advanced devotional strategies were designed to deliver.” See Koenig, “Saving Siena: A Renaissance State’s Religious Response to Political and Military Crisis,” *Bulletino Senese di Storia Patria* Vol. CXI (2004): 73-74.

\(^8\) The outbreaks of plague in 1527 and 1529 marked a period from 1399-1529 during which 55 years saw an outbreak of plague in Siena; see Antonia Whitley, “Fear and Pity: Official Attitudes to Plague and Pestilence,” in Ascheri and Nevola, L’ultimo secolo della Repubblica di Siena, 450-451.

\(^9\) If it seemed that one or more of the monti gained too much power, it was not uncommon for the offending party to be banned by the others then readmitted later; for example, the Nine were banished from government participation in 1525 but were readmitted in 1530. See Cantagalli, *La guerra di Siena*, LXX-LXXI.
more apt to avoid the Sienese countryside.\textsuperscript{10} An influx of people from the country seeking work or charity was one byproduct of the above troubles, and an increase in poor, starving population led to unrest in the streets.

Taking advantage of the situation, in 1530 Charles V sent troops into Siena under the pretense of peacekeeping.\textsuperscript{11} The emperor’s troops returned order to the streets and then remained garrisoned in Siena to allow a new government to form. However, over the following decade the role of these peacekeeping troops slowly evolved and the Imperial presence and power in the city steadily increased. In 1541 Charles V’s appointed representative in Siena claimed the power to appoint all eight members of the Balìa and both criminal and civil justice was placed in the hands of a Captain of Justice selected by imperial representatives.\textsuperscript{12} Generally, men were appointed to these positions from across the monti, but within a few years it was rumored that the Imperial governor favoured the Nine and in 1545 the other monti had had enough – they revolted, drove the Spanish officials from the city and exiled the Nine. An attempt was then made to form a new government: a Balìa of ten men was organized, but this new government did not last long. In 1547 Charles V once again sent troops to Siena and took rapid action: the Spanish representative recalled the Nine, and created a new Balìa by personally selecting each member. This government lasted until the rebellion in 1552 and the start of the war.\textsuperscript{13}

As explained previously in chapter 2, the constant shifts in government and the tensions raised by competition between factions in Siena caused problems for the Ospedale di Santa


\textsuperscript{11} Cantagalli, \textit{La guerra di Siena}, LXXII - LXXIV.

\textsuperscript{12} Hook, “Sixteenth Century Siena,” 81.

\textsuperscript{13} Cantagalli, LXXVI-LXXIX.
Maria della Scala. Political instability meant inconsistency in hospital administration: just as the city’s government reformed ten times between 1525 and 1552, from 1502-1529 the hospital had 8 different rectors. This was a high turn-over rate considering that the entire fifteenth century only saw 13 rectors govern the hospital. Francesco di Tone Salvi, who took office as rector on 8 April 1529, altered this tradition by remaining rector of the hospital until war broke out in 1552. Despite the consistency Salvi brought to the hospital’s administration, under his leadership the hospital struggled to respond to the crises facing Siena.¹⁴ Prior to Salvi’s rectorship, the financial strain placed on the hospital though loans to the government and the burden to provide for the poor suffering from famine left the hospital in a precarious financial state.¹⁵ Maintenance of Santa Maria della Scala’s network also became problematic, as warfare threatened to cut off contact between the central institution and its properties, in addition to causing destruction and loss of property.

Furthermore, the combination of internal dissent and encroaching external powers (most especially the Medici of Florence) gave rise to Santa Maria della Scala’s loss of jurisdiction over its subject hospital, also called Santa Maria della Scala, in San Gimignano. Upon the death of the hospital’s rector, Salvi and the hospital board selected a new candidate and sent him to San Gimignano, only to find out that Cosimo I de’ Medici and San Gimignano’s local elite had already installed a rector of their own choice.¹⁶ San Gimignano had been part of the Florentine state since 1353, and it seems that Cosimo I decided to take advantage of the chaotic situation in Siena and make a move to bring the hospital of San Gimignano under Florentine control.

¹⁴ Banchi, 182.
¹⁵ For the years 1522-1524 (leading up to the famine) cash flow out of the hospital exceeded the cash flow in: the total *entrata* was 34,546 lire and the total *uscita* was 37,240 lire. See: ASS, Ospedale di Santa Maria della Scala, *Entrata e Uscita*, N. 896, ff. 2r-19v, 35r-126v.
Without informing Santa Maria della Scala’s administrators or Siena’s city government, Cosimo I wrote to Pope Paul III in July of 1541 and requested that the pope confirm his right to choose a new rector. Of course, amidst his description of the importance of the hospital to the people of San Gimignano, Cosimo failed to mention its long-standing ties to Santa Maria della Scala in Siena.¹⁷

These actions prompted the protests not only of Salvi and the hospital board, but also the Balìa and the General Council of Siena. All three wrote to Cosimo I, reminding him of the centuries-long agreement between Santa Maria della Scala in Siena and the hospital of Santa Maria della Scala in San Gimignano and requesting that he honour that agreement.¹⁸ Indeed, based on precedent Santa Maria della Scala had the right to appoint the rector and the interference of the Medici was a violation of that right. But without any other Sienese influence in San Gimignano, and the willingness of San Gimignano’s local leaders to cooperate with the Medici, there was little that could be done. San Gimignano’s hospital was thus freed from the oversight of Santa Maria dell Scala. While the loss of the hospital of San Gimignano was not a significant financial blow, it was a significant assault on Santa Maria della Scala’s power and, by extension, the power of the Republic of Siena. Furthermore, Cosimo I de’ Medici and the citizens of San Gimignano were not the only ones who took advantage of the Siena’s political troubles in an attempt to gain control of their own local hospitals: the subject hospitals in Poggibonsi and Todi also moved, though ultimately unsuccessfully, to assert independence.

The political crises, factionalism, plague, and famines of the early sixteenth century set the stage for the war that would be fought in the 1550s and demonstrate how clearly the struggles

¹⁷ ASF, Mediceo del Principato, N. 4, ff. 326r-328r.
¹⁸ ASF, Mediceo del Principato, Governi di città e luoghi soggetti, Siena, N. 1850, ff. 107r, 120r-121r.
of the city and state of Siena impacted and were reflected by the hospital of Santa Maria della
Scala. As the hospital attempted to perform its charitable duties and aid the poor suffering from
famine in the late 1520s, the civic tensions and competition for power among Sienese elite
undermined the ability of hospital administrators to retain full control of the network. An
unstable civic government meant uncertainty for civic institutions like the hospital, and resulted
in the encroachment of foreign powers in Sienese affairs. By 1547, when Don Diego Hurtado de
Mendoza, the last imperial representative appointed before the war, began his governance of
Siena the nobility once again had cause to set aside their political in-fighting and unite
themselves against a common enemy.

Santa Maria della Scala and the War of Siena I: 1552-1553

Although Mendoza, a well-educated man with ties to the Piccolomini family, seemed friendly
enough at first, he quickly showed that, as one historian put it, “under his velvet glove [there
was] an iron fist.”19 Not necessarily cruel, but determined to execute all of the emperor’s orders,
Mendoza was often forced to extend his powers as governor and take actions which displeased
the Sienese.20 For example, according to the original agreement between Charles V and the
Sienese, the city government promised to pay for the troops garrisoned in Siena to protect the
city while the emperor would cover the costs of the troops stationed there to protect Spanish
interests. However, Charles V rarely kept his end of the bargain, leaving Mendoza with no
money to pay the soldiers’ salaries. In order to raise sufficient funds, Mendoza increased taxes
and forced loans without consulting the Balìa, both of which made him unpopular with the

19 Landi, 36. See also Canatagalli, “La Guerra di Siena,” 9; Vincente de Cadenas y
Vicent, La Republica de Siena y su anexion a la corona de España (Madrid: Hidalguia, 1985),
47-60.
20 Konrad Eisenbichler, The Sword and the Pen: Women, Politics, and Poetry in Sixteenth
Mendoza was also the driving force behind the construction of a citadel in Siena intended for the housing of imperial troops. The construction of a fortress was, for the emperor, a move to safeguard imperial interests in Italy against a French invasion. The Sienese, however, viewed the citadel as a bid by Charles V to take full possession of the city. Their fears were reinforced by the fact that the Spanish themselves made up only a small percentage of the labourers and many Sienese were made to work on the fortress that symbolized their subordination.22

United in their hatred of the fortress, Siena’s nobility made a formal appeal to Charles V in September 1550 to halt construction. The Emperor explained that the fortress was not meant to take away Siena’s liberty but to secure it instead.23 Unwilling to accept or trust this response, they continued to send appeals which were ignored. When Mendoza received another order from the emperor in February of 1551 to continue with the construction of the fortress, many of the aristocracy left the city for the country where a plan for rebellion began to take shape. Knowing they would need an ally, the Sienese turned to the French who quickly pledged their support. In a last ditch effort to resolve matters peacefully, a final petition was sent to Charles V in February 1551. This time, although he acknowledged their appeal, Charles ultimately denied the request.24

The move to drive imperial forces and representatives from the city commenced in July of 1552, and the Ospedale di Santa Maria della Scala was involved from the beginning. Aeneas Piccolomini, a leader of the rebellion along with members of Siena’s other ruling families, led an army of French and Sienese troops to the Grancia di Cuna, one of Santa Maria della Scala’s

24 Landi, 42; Hook, Siena, 186-187.
fortified farms. Troops were garrisoned within the walls of the grancia as they prepared for battle, which then became a staging ground and was used by the Sienese military for the duration of the war. On 27 July the troops left the Grancia di Cuna for Siena, where, in the evening, the whole city rose up and drove the Spanish soldiers out the gates. French troops then entered the city through Porta Tufi and Porta Romana, while the Spanish retreated to San Domenico and into the citadel the following night. They remained under siege in the citadel until early August when Cosimo I de’ Medici intervened and the Spanish surrendered. As the Spanish left the city, the citizens of Siena and the army tore down the fortress. 25

Concurrent with these events, changes also took place within the administration of Santa Maria della Scala. As the city government readied themselves for retaliation by Charles V and the war they knew was coming, part of their preparations included ensuring that the hospital was capable of responding to the crisis. Aware that Salvi’s rectorship had been somewhat detrimental to the well-being of Santa Maria della Scala, in early spring 1552 the communal government decided to step in and appoint a new rector. 26 In order to preserve Salvi’s dignity, the Balia determined that he could remain rector in name, but he was required to step down from all

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25 This event was quite meaningful for the Sienese and they attributed the success of the rebellion to the Virgin Mary’s patronage of the city. The image of the Virgin watching as the Sienese tear down the fortress constructed under force of Charles V appears on two painted account book covers from 1552; see Parsons, 13. For a detailed description of this “battle” see also Landi, 52-54; also, Eisenbichler, The Sword and the Pen, 165-214.

26 Banchi, 184. Judith Hook also points out the strong connection that the communal government felt to Santa Maria della Scala. Hook quotes from a letter written in 1553 by the Balia to the Sienese commissioner in Grosseto: “You will know how, at all times in the past, the magistrates of this city have always kept in mind the safety and the security of the affairs of the hospital of Santa Maria della Scala. They have kept these things in mind, since the hospital is a sacred foundation. Because we have always done so, we daily witness miraculous demonstrations of God’s favour towards our city and so we are obliged to keep its interests constantly in mind.” See Hook, Siena, 147.
administrative responsibilities. A measure was also passed to ensure that when Salvi died the new rector could simply continue on and there would be no need for another election.\textsuperscript{27}

To replace Salvi, the Balìa chose a man by the name of Scipione di Mariano Venturi. Not much is known about his early life, except that Venturi came from an aristocratic family and was part of the Gentilhuomini faction.\textsuperscript{28} Prior to his appointment as rector Venturi held a series of administrative positions within the government: in 1548 he was part of the Magistracy of Trade and from 1549 to 1550 he served on the Balìa as a representative of the Gentilhuomini. The Balìa’s deliberations for that year show that Venturi was appointed to various committees as part of his service, including overseeing the repayment of debts, auditing the accounts of the Turamini bank, and investigating the business practices of the Monte dei Paschi di Siena.\textsuperscript{29} These positions suggest that Venturi had some experience with financial administration, which no doubt made him a good candidate for rector. Venturi’s service as a member of the Balìa continued through 1551 into 1552, when the Balìa voted to install him as rector.\textsuperscript{30} He officially took office on the seventh of April at a crucial point in the hospital’s history and administered Santa Maria della Scala through some of its most difficult years.\textsuperscript{31}

\textsuperscript{27} Banchi 185.
\textsuperscript{28} For a concise description of Siena’s government see Christine Shaw, \textit{Popular Government and Oligarchy in Renaissance Italy} (Boston: Brill, 2006), which uses Siena as a case study.
\textsuperscript{29} See ASS, Balìa, Deliberazioni, N. 140, ff. 2v, 43v-44r, 128v, 175r, 230r.
\textsuperscript{30} Examples of Venturi’s service as part of the Balìa up to his appointment as rector can be found in: ASS, Balìa, Deliberazioni, N. 141, fols. 2v, 85r.
\textsuperscript{31} Salvi, who was still technically rector in name but from all accounts was not active in any capacity after 1552, lived through the war and passed away in 1556, leaving Venturi sole rector of the hospital. In his letters from the period of 1552-1556 Venturi signs his name and is addressed as the “vicar” of the hospital, see ASS, Ospedale di Santa Maria della Scala, Copia Lettere, N. 436. Venturi is also named as the “Rettore” of Santa Maria della Scala in various government records from 1552 onward; see ASS, Balìa, Deliberazioni, N. 159, ff. 3r, 12v, 55r, and 161r for examples.
Although a general narrative of these years can be pieced together from the deliberations of Santa Maria della Scala’s administrators and various financial records, these minutes and accounts were not kept as frequently and diligently as typical during the decades prior to and following the war. Thus, the most illuminating source we have for the hospital during the years of Siena’s war is a collection of letters written by Venturi to recipients outside of Siena. Scribe’s copies are bound in a volume of 288 folios that span Venturi’s entire rectorship and go on to include letters from the rectors who followed him. The first 67 folios in the volume are comprised of 120 letters for the years of the war, 1552-1555, the first of which is dated to November of 1552, approximately six months after Venturi took office. There are over 50 different recipients across these 120 letters, several of whom Venturi corresponded with regularly. Unfortunately, the volume contains only a few responses to Venturi, and there are several unexplained chronological breaks. Nevertheless, in reconstructing the history of the hospital during the war, Venturi’s letters bring Santa Maria della Scala and its experience to life and provide a vivid depiction of the struggles the hospital faced and how its head administrator felt about them. Furthermore, the letter provide invaluable insight into the relationships and negotiations which took place between Venturi, the Balìa, Piero Strozzi and Blaise de Monluc (leaders of the Siena’s French allies), and even an enemy leader like Cosimo I de’ Medici during this time of crisis.

In addition to Venturi’s letters, another primary source which proves particularly useful for understanding the experience of Santa Maria della Scala during the war is the chronicle of Sienese nobleman Alessandro di Girolamo Sozzini, *Diario della Guerra di Siena*. While other chronicles of the war were written (most notably Orlando Malavolti’s *Dell’Historia di Siena*), Sozzini’s *Diario* is the only one which includes significant discussion of Santa Maria della Scala
in its account of the war.\footnote{There are several editions of Malavolti’s chronicle, but the earliest version was published in Venice in 1599. The most recent printing was in 1968; see Orlando Malavolti, 
\textit{Dell’Historia di Siena} (Bologna: Forni, 1968).} Written in 1587, 32 years after the end of the war, Sozzini used his own experience in conjunction with interviewing and obtaining documentation from participants in the war to reconstruct the events leading up to and during the struggle. According to his prologue, Sozzini felt this reconstruction was necessary because the experiences and events of the war deserved to be remembered and because he felt a knowledge of them should be handed down to future generations.\footnote{“È per il grande desiderio del sapere, naturale in tutti o nella maggior parte degli’uomini – di più per quelle cose veramente degne di essere ricordate – che ho cercato di ricostruire le vicende . . . In questa ricostruzione, raccontata in modo semplice (ma comunque importante per tramandare la conoscenza dei fatti a coloro che verranno dopo di noi), sono stato aiutato, oltre che dalla mia diretta partecipazione all’evento, dalle testimonianze di alcuni dei protagonisti che non solo mi hanno riferito i dettagli delle varie situazioni che si sono create, ma mi hanno anche dato copie di lettere, memoriali ed altri scritti che riguardano questa parte della storia della Città di Siena.” Sozzini, 2.} Historian Roberto Cantagalli has stated that Sozzini’s chronicle is by far the best among others of the period in terms of its humanity, emotion, and ability to give a real sense of the day to day life and mood of Siena’s people during the war. Nevertheless, Cantagalli discounts the historical relevance of the text, asserting that its worth lies mainly in its literary and linguistic qualities.\footnote{Cantagalli, XII-XIII.} However, Sozzini’s chronicle does have historical relevance, particularly when read together with Venturi’s letters. Where other chronicles are solely concerned with the political and military exploits of the war, Sozzini takes the time to mention the hospital and its experience. His chronicle thus helps us to place the hospital in the wider political context while providing details to supplement those found in the hospital’s own records.

The replacement of Salvi with Venturi was a response by the city government to the tense political atmosphere and preparations for war taking place within Siena. Despite successfully driving the Spanish out, the city leaders knew that the expulsion of the Imperial troops did not
mean an automatic return to independence, especially since Siena’s French allies sent representatives and garrisoned troops in the city. Siena had thus exchanged one foreign power for another, complicating the political climate.\(^{35}\) Another source of tension was the financial state of the Republic. The debts built up by the city government over earlier decades reached an unsustainable level by the time the Spanish were driven out so that: “In order to function at all the government of the commune had increasingly to resort to the most hand-to-mouth expedients . . . and in 1552 the Balìa grimly described the situation to the General Council: ‘We find that everything has already either been pawned or committed and that money is so short that we cannot make the kind of provision the situation demands. . . . without help from your excellencies it is clear that we shall be unable to provide for the defence of our city as it is both our desire and our duty to provide.’”\(^{36}\) These financial needs became even more crucial as news arrived in December 1552 that Charles V was readying troops at Naples, forcing Siena’s government and military leaders to move ahead with preparations for a war. War became an even clearer reality when in January 1553 Don Garcia de Toledo, the brother-in-law of Cosimo I, led an army of German, Spanish, and Italian troops into Sienese territory. This army took control of Valdichiana, Pienza, and Monticchielle; they also attacked the Maremma and laid siege to Montalcino for 80 days before retreating when French and Ottoman fleets arrived on the coast in June 1553.\(^{37}\)

\(^{35}\) Because Siena was traditionally a city that supported the Holy Roman Empire, the rebellion against Charles V caused some shifts in the political loyalties of the nobility. There were a strong contingent of nobility who supported the alliance with France, and Virginia Martini Salvi, one of Siena’s famous female poets, even wrote poetry in praise of King Henri II, painting the French as Siena’s saviours. However, others in the city did not share Salvi’s sentiments regarding their new allies; see Eisenbichler, *The Sword and the Pen*, 8-12, 180-181.

\(^{36}\) Hook, 178.

\(^{37}\) Landi, 82-83, 89.
The financial woes of the state and the threat of full-blown warfare meant that all civic institutions and resources, including Santa Maria della Scala, became fundamental to Siena’s ability to fight, survive, and win a war. The hospital had already given over several of its fortified farms, such as the grancia di Cuna, to the military for their use.Aware that the institution would be relied on for medical care and food supplies, the newly-appointed Venturi began making preparations during the winter of 1552 to store provisions and ensure the safety of Santa Maria della Scala’s resources. One of the major tasks overseen by Venturi was the movement of livestock, including cattle, mules, oxen, pigs, sheep, and chickens, from locations threatened by enemy armies to farms where the animals would be safe from plundering and destruction during the war. However, these transfers required Venturi to negotiate with Cosimo I de’ Medici, since some of the movement required passage through Florentine territory. On 9 December 1552 Venturi wrote to Cosimo I and requested a grant of safe conduct to move some 2000 sheep and 150 oxen from Poggibonsi to Volterra. Venturi also wrote to Ambrogio Nuti, Siena’s representative in Florence, and requested that Nuti bring the matter before Cosimo I himself and lobby to ensure that safe conduct would be granted. Both the letter to Cosimo I and the letter to Nuti emphasize the importance of the livestock to the survival of Santa Maria della Scala; Venturi stated that if the livestock were lost the ruin of the hospital would quickly follow.\textsuperscript{38} The underlying implication, of course, was that the ruin of Santa Maria della Scala would be a severe blow for the city and countryside of Siena.

\textsuperscript{38} “Io so ch’ ella e solita spandere la sua liberalità sopra i poveri et quanto questo luogo sia refugio et aiuto de miseri e noto a tutto ‘l mo[n]do p[er]o confido ch[e] p[er] amore di Dio la si degnera farai abilità di quanto se glie supp[li]ca et se altrimenti fusse ne seguirebbe la rovina di questa Casa Santa quale non si puo mantenere senza l’aiuto di V.E. . . .” ASS, Ospedale di Santa Maria della Scala, Copia Lettere, N. 436, f. 5v.
Venturi’s sense of urgency to complete the movement of the livestock before the spring came and fighting began in earnest came across in other letters as well. On 11 December, just two days after the previous letters were sent, Venturi wrote to M. Bartolomeo and M. Bandinello, two Florentine custom agents. Venturi requested that they waive the usual customs fees one would have to pay to move livestock across borders, explaining that: “since this hospital finds itself in great necessity due to the unbearable and extraordinary expenses with which it is burdened, nevertheless not knowing how to manage them without abandoning the poor, I wish to seriously plead with you that . . . you exempt the hospital from the customs fees we ought to pay for the animals . . .”

Without the reply to these letters it is difficult to determine the exact response; however, it seems that it was only a few weeks before matters were resolved with the customs office and pasture land near Volterra was secured. The only unresolved issue was the grant of safe conduct, which Venturi raised again in letters to Nuti on 27 and 31 December.

In addition to moving livestock to safety, Venturi also made an effort to sell livestock as well, not only to raise funds for the hospital but also to cut the cost of moving and caring for them during a time of war. For example, in January of 1553 the hospital made the sale of “a certain quantity” of pigs to one Francesco di Pietro di Biscotti Luchese. Much later that year, in November 1553, Venturi likewise attempted to sell 100 of the hospital’s cows in order to garner

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40 The letters indicate that Cardinal Mignanello (a Sienese nobleman and the pope’s legate in Siena) joined the effort to clear the matter with the customs office, see ASS, Ospedale di Santa Maria della Scala, Copia Lettere, N. 436, f. 7v. In his letters to Nuti, Venturi apologizes for continuing to bother him about this matter but "L'amor et obbligo ch[e] io ho a questa Santa Casa mi sforza a dargli noia, et il buono animo et caldi offitii di V.S. me ne dan[n]o animo . . ." see ASS, Ospedale di Santa Maria della Scala, Copia Lettere, N. 436, f. 8r-v.
some income. The cattle were sold in pairs for 16 scudi a pair, bringing the total of the sale to 800 scudi, a significant amount for the hospital. But sales such as this were not always easy to transact, since payment was often received in installments and collecting money owed could be a trying experience. In the case of the pigs, Francesco still owed the hospital 74 scudi for the purchase, but would not come to Siena to pay it, so Venturi negotiated for him to give the money to Ambrogio Nuti in Florence instead. Likewise, for the sale of the cattle Venturi had to rely on others to complete the transaction on Santa Maria della Scala’s behalf, since the sale took place in Rome.

In fact, it was not uncommon for Venturi to request assistance from those outside of Siena or invest others with the authority to carry out business in the hospital’s name. Due to the circumstances of the war, from 1552-1555 Venturi rarely, if ever, left the city. Instead, he remained in Siena and directed the movements of others from his central position. Based on the recipients of the letters, there were several men Venturi frequently relied on and trusted with hospital business. One of these was a family member; his nephew Pompeio Pamieri often acted as a messenger to Rome and conducted much of the hospital’s banking business there. Furthermore, for almost all of the hospital’s banking needs Venturi turned to Carlo Massaini, a Sienese banker in Rome who, based on his actions, was an important contact for Venturi. Massaini conducted transactions and changed money on Santa Maria della Scala’s behalf numerous times. Venturi also consistently turned to religious authorities for help, including

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41 ASS, Ospedale di Santa Maria della Scala, Copia Lettere, N. 436, f. 10v.
42 ASS, Ospedale di Santa Maria della Scala, Copia Lettere, N. 436, f. 40r.
43 It is unclear whether he lived in Rome or simply traveled frequently between Rome and Siena, but examples of his banking include: ASS, Ospedale di Santa Maria della Scala, Copia Lettere, N. 436, ff. 16v, 56r.
44 Venturi wrote to Massaini eight times during 1553-1554; see ASS, Ospedale di Santa Maria della Scala, Copia Lettere, N. 436, ff. 16r, 17v-18v, 22r, 40r, 49r-v, 56r.
Cardinal Mignanello, a papal legate and Sienese nobleman who travelled between Siena and Rome, and often exercised his influence on behalf of the hospital.

In addition to relying on certain men outside the institution, Venturi also relied heavily on the various administrators and members of the hospital family. In order to build up the hospital’s stores and secure Santa Maria della Scala’s network, Venturi relied heavily on the administrators of the various grance and subject hospitals. Four grancieri, Fra Nicolo, Fra Girolamo, Fra Lorenzo, and Fra Cherubino, show up in the letters on multiple occasions. Fra Girolamo was the head of the Grancia di Spedaletto and was tasked with overseeing all of the hospital’s livestock. Accordingly, he handled much of the business of actually moving animals between locations and took care of the associated expenses. Venturi frequently requested that Fra Cherubino, the head of the hospital in Aquapendente, travel to other hospitals and farms to conduct business on Venturi’s behalf. Fra Nicolo, the rector of the hospital of Santa Caterina in Todi, was charged with keeping stores of grain and caring for livestock. Meanwhile, Fra Lorenzo, the grancieri of the grancia di Cuna, took on the task of hosting and interacting with the Sienese and French troops which used the fortified farm as a stronghold.

The strong ties between Santa Maria della Scala and its outlying possessions and between Venturi and his administrators became especially important as fighting began in earnest over the summer of 1553. As Spanish and Florentine armies drew nearer to Siena they seized control of towns and villages where Santa Maria della Scala owned property, prompting the need for Venturi to negotiate with the enemy in order to ensure the preservation of the hospital’s possessions. In these negotiations, Venturi appealed to Santa Maria della Scala’s purpose as a religious and pious charitable institution in order to achieve a favourable outcome. Duke Cosimo I de’ Medici, with whom many of Venturi’s negotiations took place, often responded by showing
favour to the hospital. Ever the astute politician, Cosimo I realized that to treat the hospital fairly would not only enhance his growing reputation as a ruler who cared about the poor, but also that it would help him curry favour with Sienese nobility.\(^45\) Since his end goal was to gain possession of Siena, Cosimo I knew that the process would go more smoothly if he showed kindness to one of the city’s most important civic and religious institutions in the midst of a war. Venturi seems to have been aware of this fact, and even played on the duke’s kindness to benefit the hospital.

One of the earliest negotiations between Venturi and Cosimo I centred on the grancia of Castelluccio (located southeast of Siena near Montepulciano) and clearly demonstrates this dynamic. Florentine troops seized the fortified farm in the summer of 1553, and on 20 June, Cosimo I informed Siena’s government of his intent to restore Castelluccio to Santa Maria della Scala, along with payment for all the goods it possessed at the time that Florentine armies occupied the farm.\(^46\) Venturi sent a letter of thanks to the duke and requested safe conduct for a hospital representative to travel to Castelluccio and conduct an inventory to see what was missing and what needed to be restored. Cosimo I consented to the inventory and reiterated his promise that everything which had been taken or lost would be restored. To handle the matter, Venturi sent Fra Lorenzo, the grancieri di Cuna, informing both Cosimo I and the commanders of the Florentine troops in Castelluccio in separate letters.

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\(^{45}\) Prior to the 1550s Cosimo I had already accomplished an over-haul of the entire Florentine charitable system, setting in motion a state-wide reformation of charity and poor relief. This not only helped to streamline Tuscan bureaucracy and consolidate his power in Florence, but it also boosted his reputation as a ruler genuinely concerned about the poor. See John Henderson, “Charity and Welfare in Early Modern Tuscany,” in Ole Peter Grell, Andrew Cunningham, and Jon Arrizabalaga, eds., Health Care and Poor Relief in Counter-Reformation Europe (London: Routledge, 1999), 62; also Henderson, Renaissance Hospital, 104-105.

\(^{46}\) Sozzini’s chronicle records that on 20 June 1553 Cosimo informed the government of his intention to return the farm: “Il Duca di Firenze fece saper al Governo di Siena che voleva restituire il Castelluccio Bifolci dello Spedale di Siena e pagare tutto quello che c’era dentro quando era stato conquistato,” Sozzini, 53. See also Banchi, 186-87.
After Fra Lorenzo completed his inventory in early July, Venturi sent a copy to Florence, along with a reminder that Cosimo I promised to repay or restore everything. Seizing the opportunity, Venturi then commented on the difficult circumstances the war had created for the hospital and referred specifically to Santa Maria della Scala’s supply of wine. The war had caused a great deficit in the hospital’s stores and, according to Venturi, there was little wine to buy in Siena itself. Since wine was an essential part of Santa Maria della Scala’s care of the poor and the sick, and he requested that the Medici grant the hospital 60 some of wine as a gift of alms for the hospital.\textsuperscript{47} Cosimo I responded to this request positively, no doubt well aware that a favourable response would build good relationship with Venturi and the city government of Siena. He likely also realized, however, that the complications of war might make it possible for the promise to go unfulfilled.

Indeed, despite Cosimo’s charitable promises, the restoration of the Castelluccio’s possessions progressed slowly and the delivery of the wine met with difficulties. According to a letter dated 12 August 1553, Venturi hired a man named Lucaccino to transport the Florentine wine to Siena. For his work Lucaccino was paid 9.5 lire per soma of wine he brought, but in order to earn this pay, he had to promise not to withdraw more than 60 some from Florentine stores. However, Lucaccino broke his word and was caught with extra wine by Florentine customs agents as he left the city. As a result, he was thrown in the Bargello and his goods, including the wine and 7.25 gold scudi belonging to the hospital, were seized. Venturi was then

forced to ask a friend of the hospital in Florence, Alberto Ricasoli, to recover the money from the
Bargello and hire someone else to bring the wine to Siena.\textsuperscript{48}

Not only did the hospital incur problems obtaining the promised gift of wine, but the
return of the grancia was also delayed. By October of 1553, the previously agreed upon date for
full repayment had passed and Venturi was still trying to obtain the remaining funds (30 scudi)
owed for Castelluccio and the damage Florentine armies caused. Determined to ensure the
completion of the transaction, Venturi wrote not only to Cosimo I himself, but he also sent letters
to the duke’s secretaries and a friend in Florence, asking for their help to bring the matter to a
close.\textsuperscript{49} Citing devastation from the war and continuous rains towards the end of the summer
and early fall as the ruin of the hospital’s vineyards, Venturi proposed that the Florentines give
200 \textit{some} of wine to the hospital in place of the 30 scudi.\textsuperscript{50} Based on letters sent to the duke’s
secretaries, it appears that this exchange was carried out.

Venturi’s persistence in negotiating a resolution favourable for Santa Maria della Scala
and Cosimo I’s willingness to return Castelluccio and give alms to the hospital demonstrate a
dynamic of exchange that emphasizes the importance of Santa Maria della Scala and its network
to Siena. As rector of the hospital during a time of war Venturi knew how crucial Santa Maria
della Scala’s resources were to the survival of Siena, and he actively sought the preservation of
the hospital’s possessions. He wisely appealed to the religious dedication, activities, and
responsibilities of the institution as a reason for Siena’s enemies to show favour. At the same
time, Cosimo I must have weighed the costs and benefits of helping Santa Maria della Scala and
decided that a show of generosity would serve his interests better than ignoring Venturi’s

\textsuperscript{48} ASS, \textit{Ospedale di Santa Maria della Scala}, Copia Lettere, N. 436, f. 32r-32v.
\textsuperscript{49} ASS, \textit{Ospedale di Santa Maria della Scala}, Copia Lettere, N. 436, ff. 36r-37r.
\textsuperscript{50} ASS, \textit{Ospedale di Santa Maria della Scala}, Copia Lettere, N. 436, ff. 38r-39v.
requests for help. Although Cosimo likely knew that cutting the hospital off from its farms and allowing its resources to dwindle would affect Siena’s ability to successfully fight the war, he also understood that in the long term it might not help his political goals. Santa Maria della Scala can thus be viewed not only as an important civic institution and resource, but also as a site of power.

As the war continued over the winter of 1553-1554 several things happened which had an impact on tensions within Siena and the ability of Santa Maria della Scala to fulfill the increasing needs of the city government and the military. First, the French King Henri II sent Piero Strozzi, an exile from Florence, to be his vicar general in Siena. Strozzi arrived in Siena on 2 January 1554, and immediately set out to assess fortifications both in the city and the surrounding countryside. Strozzi was not only an exile from Florence, he was also Cosimo I’s enemy, which gave the duke personal reasons to become more involved in the conflict. It also gave him an excuse to openly declare war against Siena, since the employment of an exile broke previous agreements forged between the two cities. Strozzi also lent a new element to the political scene inside the city of Siena: as the representative the French king and commander of his troops Strozzi possessed a good deal of power, and since they desperately needed the help of the French in order to win the war, the Balìa deferred to his authority. Strozzi quickly realized, however, that he could not sufficiently control both the city and countryside on his own, so King Henri II sent a second man to represent French authority. The arrival of Blaise de Monluc in March of 1554 thus further strengthened French presence and power in Siena, the two men sharing


52 Pepper and Adams, 117.
responsibility for conducting the war.\textsuperscript{53} For Venturi and Santa Maria della Scala, the presence of Monluc and Strozzi meant the addition of another power with which the hospital would have to respond to and negotiate with in order to help preserve itself and Siena.

Movement by the Florentine and Imperial armies in early 1554 made the need for strong military leaders and resources in Siena of immediate necessity. While Strozzi was away in the Maremma the Florentines invaded from the north and an Imperial army led by the Marquess of Marignano invaded from the south, determined to hit the Sienese with a surprise attack. In the end, however, bad weather and Siena’s strong fortifications foiled Marignano’s plans. The Imperial armies captured a few forts outside the city but were unable to get into Siena itself.\textsuperscript{54} Despite the failure of the attack, it still brought the enemy to Siena’s gates and gave them the opportunity to begin preparations for a siege of the city, a siege that would have a significant impact on Siena and Santa Maria della Scala in particular.\textsuperscript{55}

\textbf{Santa Maria della Scala and the War of Siena II: 1554-1555}

Despite the proximity of enemy armies, as long as supply routes remained opened between Siena and the surrounding countryside, the city seemed able to defend itself. Reinforcements arrived consistently from Grosseto (76 km to the south-west) and Montalcino (44 km to the south), and although Spanish and Florentine armies controlled several small fortresses outside the city, a number of fortified homes and towns which remained in Sienese hands. In order to keep supply

\textsuperscript{53} Monluc’s own commentary on the war explains that Strozzi asked the French king to send a second person to help command the situation in Siena: “Or monsieur Strossy manda au Roy qu’il ne le pouvoit servir tenant la campagne et commandant dans Siene, et qu’il le supplioit tres-humblement vouloir faire élection de quelque personnage, de qui Sa Majeste se peut [put] fier, pour commander tant qu’il seroit en campagne.” Monluc, as quoted in Egnell, \textit{Le guerrier et le philosophe}, 85-86.

\textsuperscript{54} Hook, 190.

\textsuperscript{55} Pepper and Adams, 119-120.
lines open, the Sienese and French armies made efforts to strengthen Monastero’s fortifications (a small town with a castle about 5 kilometers from Siena) and secure the Maremma road by building another fort. These preparations, however, hurt more than helped in the long run, since Strozzi and the other Sienese commanders had to split their forces to accomplish these tasks. With the army divided between locations and the failure of promised French reinforcements to materialize, Siena’s army was weakened and the Florentines were able to seize control of Monastero in April 1554.  

Possession of Monastero made it much easier for the enemy to stop and divert supplies for the city, and from May to July of 1554 the situation steadily worsened. The arrival of promised French reinforcements prompted Strozzi to go on the offensive and attempt an invasion of Florentine territory in the Val di Nievole. This offensive was short lived, however, since a fleet that was supposed to meet his army at Porte Ercole was late. Without the fleet, Strozzi felt that his forces were not strong enough and so made a speedy retreat. The Spanish and Florentine army then moved to a camp south of Siena, and the supply of food and other provisions within the city walls began to decrease. By early July, Strozzi had moved much of Siena’s army inside the city walls and, without sufficient means to feed the soldiers he had the city government levy provisions from the citizens.

As the food supply in the city dwindled, Strozzi and the Balìa turned their attention to the city’s main grain storehouse: the Ospedale di Santa Maria della Scala. While the armies battled in the fields all spring and summer, Venturi had worked to set aside provisions both within the city and at various grance and spedali. He also focused on increasing the intake of funds or goods

56 Pepper and Adams, 120-125.
57 Pepper and Adams, 127.
58 Landi, 159.
as much as possible, whether through the sale of livestock, land, or seeking to collect money owed to the institution. The difficulty was in safely transporting foods, goods, or money to the city. For example, in March of 1554 Venturi wrote to the community of Sovana to request their annual tribute of 33 gold scudi to the hospital. However, the roads were completely unsafe for the transfer of such a large amount of money, so Venturi ordered them to instead give the money to the local hospital rather than send it to Siena.\textsuperscript{59} Wills were also a source of income for the hospital and another letter finds Venturi requesting help obtaining a copy of the will of Giovan Patritii, who left the generous sum of 600 scudi to the hospital upon his death. Venturi’s nephew Pompeo, who, as mentioned earlier, often conducted business for his uncle in Rome, was charged with obtaining the copy and bringing it to Siena.\textsuperscript{60} Financial help also came to the hospital through ecclesiastical channels; in June of 1554 Cardinal Ippolito d’ Este paid a visit to Siena and offered to pay for 100 to 150 some of wine as a donation to the hospital.\textsuperscript{61} However, these small successes were not sufficient to compensate for the other challenges facing Santa Maria della Scala and its resources.

One of these challenges was the continued seizure and/or damage of hospital property by enemy armies. In June of 1554 Florentine troops entered the Grancia di Serre and held its granciere, Bernardino, for a ransom of 90 gold scudi. The exact reasons for this are not clear, but based on his success with the restoration of Grancia di Castelluccio, Venturi requested mercy for Bernardino and explained that the hospital did not have the money to pay a ransom.\textsuperscript{62} Without copies of the reply made to Venturi and sparse administrative records for the period, it difficult to know all circumstances surrounding the issue, but in the end, only a week after Venturi

\textsuperscript{59} ASS, \textit{Ospedale di Santa Maria della Scala}, Copia Lettere, N. 436, f. 43r.
\textsuperscript{60} ASS, \textit{Ospedale di Santa Maria della Scala}, Copia Lettere, N. 436, f. 42v.
\textsuperscript{61} ASS, \textit{Ospedale di Santa Maria della Scala}, Copia Lettere, N. 436, f. 44r.
\textsuperscript{62} ASS, \textit{Ospedale di Santa Maria della Scala}, Copia Lettere, N. 436, ff. 45r-45v.
refused to pay the ransom, he wrote again agreeing to send the money to Bernardino’s captors. The only conditions made were that Bernardino’s liberation be conducted safely and that the Florentine soldiers return 3 hunting dogs which they had also stolen from the grancia.\textsuperscript{63} In addition to holding members of the hospital family for ransom, the opposing armies captured livestock as well. For example, in July some of the livestock housed at the hospital in Castel della Pieve were plundered and held for a ransom of 25 scudi by one Asciano Cornia. This time Venturi wrote that there was no way the hospital could afford to pay the ransom, and he once again appealed to the pious work and dedication of Santa Maria della Scala. If only Cornia could see the situation of the hospital and the sick and poor under its care, Venturi argued, he would certainly have charity and return the animals as an act of giving alms.\textsuperscript{64} In a letter to the head of the hospital in Castel della Pieve Venturi reaffirmed his decision not to pay the ransom because Santa Maria della Scala could not afford such an expense; rather he sent Jacomo Somella from Siena to negotiate with Cornia for the return of the livestock.\textsuperscript{65}

At the same time that Venturi continued negotiations with those outside of Siena for the preservation of Santa Maria della Scala’s network and resources, the fighting grew more intense. In late July the Sienese and French armies met Florentine forces under the command of the Marquess of Marignano at Marciano, about 50 kilometers east of Siena. This was a particularly

\textsuperscript{63} ASS, \textit{Ospedale di Santa Maria della Scala}, Copia Lettere, N. 436, f. 46r.  
\textsuperscript{65} "... perch[e] siamo talmente consumati che non potiamo piu. Io intendo ch[e] voglio no[n] si pagar[e] 25 scudi ch[e] mi par troppo grave spesa ..." ASS, \textit{Ospedale di Santa Maria della Scala}, Copia Lettere, N. 436, ff. 47r, 48r. Again, as with many other events described in the letters the exact outcome here is unknown. However, Sozzini substantiates Venturi’s claims, see Sozzini, 97.
unfavourable spot for Strozzi since it cut him off from supplies and reinforcements, and they had little fresh water. It also became clear that Siena’s forces could not defeat those of Marignano, so Strozzi planned to withdraw his armies by night.\textsuperscript{66} However, on the evening of 1-2 August the Florentine army followed them and on the morning of 2 August the two armies commenced in battle.

The Battle of Marciano was a grave disaster for the Sienese: Strozzi’s infantry was outmatched by the cavalry and fire power of the Florentines and by the end of the battle nearly 4000 of his men died in battle and at least that many were taken prisoner.\textsuperscript{67} With Strozzi’s force destroyed, Marignano was able to take control of the nearby towns of Lucignano and Monteriggioni by the end of August, and strengthen his position by building a fort at Poggio di Monsindoli and setting up a siege camp near Certosa. In the space of a little over a month, Marignano and his troops successfully controlled the entire Valdichiana, which was a staggering blow for Siena since towns and villages of this area were a major source of grain stores to supply the city.\textsuperscript{68}

The fall of 1554 thus marked the beginning of serious concern regarding Siena’s food supply. On 18 September 1554 Strozzi himself brought what was to be the last major food convoy into the city. Conquests by Florentine and Spanish armies throughout the fall at Casole, Radicondoli, Monterotondo, Chiusdino, and Massa Marittima cut off additional supply routes. Then, in November the castle of Crevole, which the French troops had been using as a base for blockade activities, was also taken by the enemy. After these losses it became virtually

\textsuperscript{66} Pepper and Adams, 129.
\textsuperscript{67} The Florentine army, on the other hand, lost only a few hundred men; see Pepper and Adams, 130.
\textsuperscript{68} Landi, 186. Here Landi quotes Sozzini, who estimated that the loss of Valdichiana resulted in the loss of about 3000 bushels of grain.
impossible for supplies to reach the city and only small amounts of food trickled into Siena. In response to the situation Strozzi, Monluc, and the Balìa immediately began to take steps to control what food supply remained within the city walls, turning their immediate attention to Santa Maria della Scala.

As the siege settled into place near the end of September, the communal government and the French representatives acted to take full control of the food supply within the city walls. Searches were conducted throughout the city to assess the grain supply and discover any hidden stores the government could appropriate. The government also claimed control over Santa Maria della Scala’s granaries. In preparation for a siege Venturi had used the summer of 1554 to set aside sufficient provisions for the winter. But on 28 September the Balìa ordered that, “for the sustenance of the citizens and the use and defence of the city,” Santa Maria della Scala should hand over a substantial portion of its grain stores to the Uffizio d’Abbondanza (the city officials who regulated the price and sale of grain in Siena) and give the keys to the hospital’s granaries to the Capitano del Popolo. Prior to this, the Balìa had already taken control of Santa Maria della Scala’s medical services. These services were sorely needed since, according to Sozzini’s chronicle, as the siege began Siena’s streets were full of so many starving and injured soldiers that they covered the walls and benches of the city. In order to treat these men, the Balìa (under the influence of Monluc) gave Santa Maria della Scala orders that the medical services of the

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69 Pepper and Adams, 130-131.
70 According to Orlando Malavolti’s chronicle, the search included “case, conventi, e altre luoghi”; see Malavolti, Dell’historia di Siena, 164.
71 “... il publico intende valersi del grano d’esso spedale per sostentatione dei cittadini e utile et difesa dell’[l]a città...”, ASS, Ospedale di Santa Maria della Scala, Deliberazioni, N. 28, f. 28r; see also Banchi, 189; Cantagalli, La Guerra di Siena, 333-336, 345.
hospital’s infirmaries should be restricted to the treatment of soldiers. Accordingly, the hospital took in as many wounded as possible, placing up to four men per bed.\textsuperscript{72}

By dictating the use of Santa Maria della Scala’s infirmary, the city government had already extended its authority over the hospital beyond usual bounds. To not only require that Santa Maria della Scala supply the city with grain but to also take control of the grain supply by forcing Venturi to hand over the keys, was a further exercise of power beyond typical practice.\textsuperscript{73}

However, Siena had never faced a crisis of this magnitude, and the government justified its actions as making provision for the city as a whole while Monluc and Strozzi certainly wanted to ensure that the army and defence of Siena were top priority. Although Venturi understood the responsibility of Santa Maria della Scala to serve the city, due to the already over-worked and under-supplied condition of the hospital he was not pleased to have the distribution of the grain taken from his oversight. Venturi and members of the hospital administration spoke with Strozzi attempting to explain the situation within the hospital and the difficulty of complying with the government’s orders. Although they did not necessarily begrudge the government’s use of the hospital’s grain supply, Venturi and the other members of the administration wanted the government to realize that the hospital had been placed in an impossible position.\textsuperscript{74}

How could the hospital family continue to provide relief, particularly for Siena’s soldiers, while starving? Perhaps sympathetic but unwilling to compromise, Strozzi and the Balìa removed grain from

\textsuperscript{72} For the 2 August 1554 Sozzini writes: “Chi avesse visto, la sera, in Città, tanti soldati di tante nazioni malconci, svaligiati e feriti buttarsi ad iacere piangendo per le panche e i murelli (nello spedale erano gia stati messi 4 per letto ed erano piene le panche, le tavole e la chiesa), non avrebbe potuto frenare le lacrime di fronte a tanta rovina e la popolazione tutta, con cibo e vino, fece ciò che poteva per alleviare il dolore di Francesi e Tedeschi che gemevano per le strade chiedendo acqua e sale per le ferite,” Sozzini, \textit{Diario della Guerra di Siena}, 103.

\textsuperscript{73} Since the fourteenth century Santa Maria della Scala had been under government requirement to provide grain for the city in times of crisis; in fact, they were required to keep enough grain on hand to feed the entire population.

\textsuperscript{74} ASS, \textit{Ospedale di Santa Maria della Scala}, Deliberazioni, N. 28, f. 28r.
Santa Maria della Scala’s stores and the Capitano del Popolo took possession of the granary’s keys. The orders of the Balìa and the extensions of its power under the influence of Monluc and Strozzi, thus began to raise tensions between Santa Maria della Scala’s administration and Siena’s civic and military leaders.

Tensions within the city increased further with the next step taken to prevent starvation. Aware that the current food stores within the walls could not feed the entire population, Monluc, Strozzi, and the Balìa decided to expel all the “bocche inutili,” or “useless mouths,” from within the city walls. Those deemed as “useless mouths” included women, children, men too old or too young to fight, and anyone else unable to contribute to the war effort. For his part, Monluc believed that the act of expulsion would enable the city to last for at least another three months until promised reinforcements arrived from France. The ability to endure the winter without starving was, indeed, crucial if Siena was to have a chance of winning the war, but in order to do this the city’s population needed to decrease. Therefore, after consulting with Strozzi and Monluc, the Balìa ordered that the civilian population within the city walls be reduced from 25,000 to 15,000. However, the Balìa hesitated to enforce expulsion on their own citizens, so Monluc took the lead and formed a commission of six men to identify all those who should be turned out of the city. After the commission produced a list of approximately 4,400 names, the first expulsion order was issued and an evacuation of 1,000 people took place on 22 September 1554. This group successfully left the city, but they were the first and last to do so; two days later another company of evacuees was stopped by the Spanish and Florentine troops outside

75 Monluc’s commentaries state: “[il] faut mettre les bouches inutiles hors la ville . . . ainsi nous prolongerons nostre pain trois mois, qui sera le temps que le Roy nous pourra secourir,” as quoted in Egnell, Le guerrier et le philosophe, 91.
76 Egnell, Le guerrier et le philosophe, 92.
Siena and was not permitted to pass. From this point on, enemy commanders allowed empty
handed people to go towards Siena but anyone attempting to leave was turned back.\footnote{Landi, 194-195.}

This was, of course, all part of the Imperial and Florentine strategy to either starve the
city into submission or provoke Strozzi and Monluc into a final fight. Increasing siege efforts,
Florentine commander Marignano ordered on 3 October that all blockade runners apprehended
by the army were to be executed, and some sources indicate that up to 1,000 men were killed in
accordance with this order. Yet, despite the unsuccessful evacuations of late September and the
punishment of death enforced on blockade runners, Strozzi, Monluc, and the Balìa still insisted
on expelling “useless mouths” from the city. As Pepper and Adams explain, “The expulsions that
followed caused deep resentment as well as anguish, for a disproportionate number of those
driven out to starve in no man’s land came from the disadvantaged groups of the besieged city:
orphans, foreigners, refugees from the dominio [countryside], and poor Sienese citizens with no
family influence.”\footnote{Pepper and Adams, 131.}

As the institution which housed and served the city’s disadvantaged populations, Santa
Maria della Scala was a main focus of the expulsion orders. In late September the government
requested that Venturi send away all of Santa Maria della Scala’s “bocche inutili,” but because
the majority of the hospital’s “useless mouths” were children, Venturi objected. Nevertheless,
Sozzini records that on 4 October 1554, at the request of Strozzi, the government ordered Santa
Maria della Scala to turn away 700 “useless mouths,” with the explanation that only the wounded
and ill, the workers necessary to care for them, and the wet nurses and infants could stay.
According to the order, the army would provide an escort to lead the expelled safely to a secure location.\(^{79}\)

Unable to refuse an official order, Venturi was forced to capitulate. On the morning of 5 October 1554 around 250 of the hospital’s orphans, from six to ten years old, in company with others also choosing to leave, departed the city escorted by four companies of soldiers. It did not take long for this expulsion to turn into a tragedy: after leaving Siena the caravan travelled just over a mile before a hidden force of Florentine soldiers and German mercenaries ambushed them. Outnumbered, many of the Sienese were wounded and killed, including women and children. The survivors made their way back to Siena and the next morning were found outside the Fontebranda gate. Sozzini, an eyewitness to the event, stated that he would have paid 25 scudi to have been spared the sight of the children lying on the ground, beaten and wounded. In fact, the scene had such an impact on him that he was unable to eat or drink for three days afterward.\(^{80}\) Venturi was upset by the outcome of the expulsion: in addition to the Sienese lives that were lost, Venturi estimated that in animals and goods the ambush cost the hospital nearly 2000 scudi, a significant amount of money, especially given the precarious financial state of the institution. Venturi went in person to Piero Strozzi to express his anger and told Strozzi frankly

\(^{79}\) “A richiesta dello Strozzi, il Governo deliberò che lo Spedale della Scala dovesse cacciare dalla Città 700 bocche inutili ed inviare subito a Grosseto o a Montalcino 500 moggia di grano che vi erano custodite; nello spedale potevano rimanere esclusivamente gli infermi, i familiari che li accudivano e le balie con i bambini. Quelli allontanati, sarebbero stati scortati fuori della Città fino a che non fossero arrivati in un posto sicuro,” Sozzini, 116.

\(^{80}\) Sozzini states: “Ed io avrei pagato 25 scudi pur di non aver visti, che per tre giorni non potei ne mangiare ne bere. In tutto, morirono piu di 100 fra uomini, donne e bambini . . .” Sozzini, 117.
that unless the government could find a safe route for refugees he refused to send away any more children.\footnote{“Messer Scipione Venturi, Rettore dello Spedale, stimando che le direttive dello Strozzi avessero causato allo Spedale anche una perdita di circa 2,000 scudi d’oro fra bestie e cose, andò a trovarlo e gli disse francamente che se non avesse trovato una via di fuga più sicura per le bocche inutili, lui non avrebbe più cacciato nessun bambino e, che, gli piacesse o meno, lui voleva fare il Rettore potendo dar da mangiare ai ricoverati e di questo se ne facesse una ragione. E, senza aspettar risposta, se ne venne via.” Sozzi ni, 117.}

Despite his refusal to turn away any more children, Venturi also recognized that some kind of compromise would be necessary. Therefore, after meeting with Strozzi, Venturi attempted to strike a deal with the city government that would help to extend the food supply without the need to expel the children of the hospital. For his part, Venturi agreed to reduce the number of occupants in the hospital to 300 and to suspend the distribution of alms. In return, Venturi proposed that the government agree to allow the hospital a monthly supply of grain. When the Balìa offered 15 moggia of grain per month, Venturi argued that this amount was insufficient.\footnote{“...io con[n] tutto l core supplico a V.E. ch[e] dia subito ordine à mons. di monluch ch[e] riduca i feriti secondo l'ordine sopra detto a n[ost]ri dia sicurta per quanto e possibile di poter cavare della città le boche ch[e] si e disegnato cavare . . dar ordine ch’io habbia quella quantita del grano ch[e] e necessaria per il sostentammen[t]o d’una tanta fameglia,” ASS, Ospedale di Santa Maria della Scala, Copia Lettere, N. 436, ff. 51r – 52r.} Nevertheless, it was the best the government would offer. To complicate matters further, when the government had taken control of Santa Maria della Scala’s granaries and removed grain in late September, some of Venturi’s personal grain had also been taken from the storehouses by the government.\footnote{The seizure of grain was, according to Malavolti, in accordance with an order which the King of France sent to Strozzi in October 1554, exhorting him to find all the grain hidden in the city. Malavolti explains: “si facesse dilige[n]te, e rigida ricerca per tutte le case, e Conventi, & altri luoghi, per vedere se alcuna quantità di grano vi fusse stato nascosta, e si mandass[ino] fuora le bocche inutili, et ogni pochi giorni replicando il medesimo, fu cagione che si mandaron fuore tra gli altri molti innocenti figliuoli dello Spedale della Scala, che have[n]do i nemici fatti prigioni quelli, che gli guidavano e ne tenevan cura e lassatoli abbandonati capitaron male,}
that you not wish me, as a public person, to be in worse condition than other private citizens who
are not denied the right to have enough grain in their homes for their own provision.”

Aware that his negotiations with the city would likely not produce the desired outcome,
at the same time that Venturi carried on this exchange with the Strozzi and city government, he
also wrote to the Florentine military commander, the Marquess of Marignano, to request safe
conduct for the hospital’s children should he be forced to turn them away again. Venturi
explained: “I was moved, perhaps through divine inspiration, to plead with you . . . to grant me
your permission of safe conduct so that I may securely send all the young boys and girls of this
most pious [hospital] between the ages of five and eleven out of the city, accompanied by some
matrons to care for them . . . in total about 300 mouths.” Venturi’s initiative in seeking a grant
of safe conduct suggests that he was not entirely confident that another expulsion could be
avoided. Although he attempted to negotiate with Strozzi, Monluc, and civic officials, he was
also determined to protect the family of Santa Maria della Scala and the poor they served as
much as possible. It also shows that although the Balìa had taken some authority out of his
hands, Venturi was determined to exercise what power he had left on behalf of the institution and
its people. It is telling that in all his letters Venturi never once referred to the children or the sick
as “bocche inutili,” a term used in other documents, including government records, chronicles,

84 “Io prego . . . ch[e] no[n] voglia ch’io come persona pubblica sia di peggior
cotidione ch[e] tutti gli altri privati cittadini di quali no[n] e negato l’haver in casa grano per
la necessita del vitto loro,” ASS, Ospedale di Santa Maria della Scala, Copia Lettere, N. 436, f.
52r.

85 “Mi son mosso e forse per divina ispiratione à supplicarla che . . . si degni concedermi
permesso di suo salvocondotte ch[e] io possi cavar sicuramente fuora de la città tutti li fanciulli e
fanciulline di questa piissima casa delo spedale da l’eta di cinq[ue] anni in fino ali xi con
compagnia d’alquante matrone à lor governo che faranno in tutto [ili] numero d’intorno a boche
300 . . .” ASS, Ospedale di Santa Maria della Scala, Copia Lettere, N. 436, f. 52v.
and Monluc’s own account of the events.\textsuperscript{86} There was, then, a significant difference between the way that Strozzi, Monluc, and the city government viewed the role of the hospital in response to the crises caused by war, and the way that Venturi as rector believed Santa Maria della Scala should be used. Each clearly understood the role of the hospital as a civic resource; the difference arose over what Venturi saw as the willingness of Strozzi, Monluc, and the Balìa to overlook Santa Maria della Scala’s charitable mandate and the men and women of the hospital family.

The discord between Santa Maria della Scala and the government might have dissipated if Strozzi, Monluc, and the Balìa had kept their end of the agreement with Venturi, but instead they failed to send the grain promised to sustain the hospital, along with reinforcing the order that Santa Maria della Scala’s medical services be restricted to soldiers.\textsuperscript{87} On 14 October 1554 Venturi appeared before the Balìa, expressed his displeasure with the actions of the government, and informed them of his communications with both Monluc (regarding the grain supply promised to the hospital) and Marignano (regarding safe conduct).\textsuperscript{88} The members of the Balìa thus found themselves on the receiving end of both Venturi’s complaints and the orders of Strozzi and Monluc and attempted to negotiate between the two, but it was difficult to balance appeasing Venturi with carrying out the military leaders’ commands. On 24 October tensions between these parties only increased when, on Strozzi’s orders, the city government confiscated the rest of the grain remaining in Santa Maria della Scala’s storehouses, leaving only enough to

\textsuperscript{86} Monluc refers to the refugees as “bouches inutiles”; see Egnell, \textit{Le guerrier et le philosophe}, 92.
\textsuperscript{87} The reinforcement of this order arrived on 12 October, not long after the disastrous expulsion on the fifth; see ASS, \textit{Balia}, Deliberazioni, N. 159, f. 8v.
\textsuperscript{88} ASS, \textit{Balia}, Deliberazioni, N. 159, f. 12v.
sustain 200 people.\textsuperscript{89} This was accompanied with an expulsion order directing Venturi to turn out
the rest of the hospital’s useless mouths. Sozzini records that Venturi, pushed to his breaking
point, informed the government that if they wanted to expel more children then they could do it
themselves since he refused to participate in another massacre. Venturi then returned to his home
and declined for the time being to have anything further to do with hospital business, essentially
resigning from his administrative duties.\textsuperscript{90}

Perhaps in an effort to ease Venturi’s anger and show support for the hospital, the Balìa
tried to intervene in order to make sure that Santa Maria della Scala would receive the grain
supply Monluc agreed to in his negotiations with Venturi.\textsuperscript{91} However, the members of the
council also acknowledged Venturi’s refusal to follow their orders as the reason for his
departure, and they moved to abide by Strozzi and Monluc’s orders for an expulsion.\textsuperscript{92}

According to Sozzini, on 31 October the Balìa ordered the expulsion of 45 boys between the
ages of 10 and 15 years old from the hospital. This small group was turned out of the city during
the day with no escort and a few possessions and were found again at the city gate awhile later,
barefoot and dressed only in their shirts. They had encountered the Imperial army on the road
which stopped them, stripped them of their belongings, including shoes and clothing, and then
refused to let them continue any further. With the failure of this expulsion and no easy way to

\textsuperscript{89} Sozzini, 119.
\textsuperscript{90} “Le autorità Francesi sequestrarono il grano dello Spedale, lasciandone solo per 200
persone, ed ordinaronu a Scipion Venturi di mandar fuori Città tutte le altre bocche inutili: il
Rettore rispose di farlo loro, perché lui, come aveva detto allo Strozzi, si rifiutava di compiere
ancora una volta un simile scempio. Si dimise dall’incarico, si rintanò in casa sua e rifiutò di
ricevere qualsiasi persona per trattare gli affari dello Spedale,” Sozzini, 119.
\textsuperscript{91} On 30 October the Balìa petitioned Monluc to send 10 moggia of grain to Santa Maria
della Scala “… p[er] sostentamento in parte delle bocche ch[e] stanno nello spedale,” See ASS,
\textit{Balìa}, Deliberazioni, N. 159, f. 51v.
\textsuperscript{92} ASS, \textit{Balìa}, Deliberazioni, N. 159, f. 55r
turn the children out of the city, the government had no choice but to allow them to return to the Santa Maria della Scala.\footnote{“Essendo rimasto lo Spedale senza rettore, per ordine dei Francesi i Deputati sopra le bocche inutili decisero di espellere dalla Città quarantacinque ragazzi dello Spedale, dai dieci ai quindici anni, di giorno e senza nessuna scorta, persuasi che gl’Imperiali non avrebbero fatto loro alcun male. Con i sainoi, calze e scarpe ed una canna in mano, i ragazzi, piangendo, uscirono da Porta S. Viene, ma dopo un po erano di nuovo sotto la Porta, scalzi ed in camicia, poichè a Santa Reina gl’Imperiali li avevano denudati e non li avevano fatti passare oltre: ritornarono allo Spedale, in fila per due, come in una mesta processione, e la gente lacrimava di pietà vedendoli passare.” Sozzini, 120. See also Cantagalli, 345.}

In the wake of another failed expulsion and Venturi’s departure, the Balìa deliberated on 1 November and recognized the authority of the hospital’s camarlingo, or treasurer, to act in Venturi’s place.\footnote{ASS, Balìa, Deliberazioni, N. 159, ff. 55r-55v; see also ASS, Ospedale di Santa Maria della Scala, Deliberazioni, N. 28, f. 28v-29r.} However, the Balìa also moved to increase its own control over Santa Maria della Scala: on 2 November, though the Capitano del Popolo already held the keys to the granary, the Quattro del Biado (officials over Siena’s grain supplies) took the keys to Santa Maria della Scala itself and removed the rest of the grain in the hospital’s stores.\footnote{Cantagalli, 345; also Sozzini, 121.} With the last of the grain stores removed, the hospital family became entirely dependent on Strozzi, Monluc, and the government to send the promised rations of grain to the hospital each month. Perhaps in response to the Balìa’s intervention, on the hospital’s behalf, Monluc sent one disbursement of grain at the end of October, but no others followed. After that, in order avoid starvation the young girls of the hospital’s orphanage would go out in groups each morning to collect wood which they could use to barter for food. According to Sozzini, the sight of these young girls, who were raised and cared for by the hospital, which itself was a symbol of hope and dedicated to the Virgin, greatly disturbed the city, especially since the Sienese hoped for the Virgin Mary to...
intercede and preserve their liberty. Many Sienese would later assert that Mary abandoned Siena in its hour of need precisely due to their treatment of the “bocche inutili” during the war.

That the Sienese would attribute the loss of a war to the lack of intercession from their patron saint was not unusual. They ascribed their greatest military victory (their triumph over the Florentines at the battle of Montaperti in 1260) to the Virgin’s intervention and their dedication to Mary was at the center of the city’s civic and religious life. As previously mentioned, this devotion increased in times of crisis and between 1483 and 1555 the Sienese re-dedicated and gave the keys of the city to the Virgin on at least four occasions. As a pious house tied to the Virgin, Santa Maria della Scala played an important role in Siena’s devotions. As the war progressed, the city government increased devotions to the Virgin within the city, and in August and early September of 1554 processions held in Mary’s honour had been led by the young, orphaned girls of the hospital. Furthermore, the hospital possessed a relic of the Virgin’s mantle and hosted the city’s Annunciation celebrations each year, instilling a firm connection

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96 “I Quattro del Biado si fecero consegnare le chiavi dello Spedale e levarono tutto il grano, con la promessa, poiché il Rettore non c’era più, che loro stessi avrebbero provveduto a somministrare dieci moggia al mese per le fanciulle, le citole e le balie dello Spedale; dopo il primo mese, però, non ne arrivò più. A gruppi, quindi, con gran pericolo, ogni mattina le fanciulle uscivano a raccattare un po’ di legna per barattarla con un po’ di cibo. La cittadinanza era turbata dalla sorte di questi figli della Città, prima accolti e cresciuti nella casa della misericordia che si pensava fosse il fondamento della speranza che l’uomo aveva affinché la Madonna Gloriosa intercedesse presso il suo unigenito Figliolo per liberare Siena dal pericolo di distruzione e ora, invece, alla fame e alla disperazione.” Sozzini, 121.

97 In his chronicle, Orlando Malavolti mentions the “innocenti figliuoli dello Spedale della Scala,” describing how, with “inhuman cruelty,” they were abandoned and exposed to evils such as enemy attacks, wild dogs and wolves, hunger, and death; see Malavolti, Dell’historia di Siena, 164v. See also Gerald Parsons, Siena, Civil Religion, and the Sienese (London: Ashgate, 2004), 15.

98 These dedications occurred in 1526 (before the battle of Camollia), in 1550 (after Spanish troops had occupied the city), in 1552 (after successfully driving the Spanish from the city) and in 1555 (near the end of the siege). See Parsons, Siena, Civil Religion, and the Sienese, 14-15.

between Mary and the hospital in the minds of the populace. Given these connections, it is not unsurprising that some would blame the suffering of the city and the loss of the war on the expulsions and the government’s treatment of the orphans of Santa Maria della Scala.

Whatever frustrations with Strozzi, Monluc, and the Balìa had driven Venturi into temporary retirement, it appears that the rapidly deteriorating condition of the hospital was enough to bring him back to his duties as rector by mid-December 1554. Venturi resumed communication with government officials and, in order to prompt them to keep their promise to provide Santa Maria della Scala with sufficient provisions, his letters consistently reminded government leaders of the hospital’s connection with Mary and its role as a religious house. For example, in a letter dated December 17, 1554, Venturi pleads with Strozzi for aid and describes the desperate condition of the hospital:

Wherefore, seeing this most religious house in such great extremity, which ought to have hope in God for the preservation of the city, because of the good works and piety on which it was founded, which act as a sacrifice to continually placate the anger of God, I cannot prevent my heart from grieving greatly seeing that I lack the power befitting my office and seeing continually the troubles of the whole city, which cannot be endured without great sorrow. The poor lack places to go, and the sick who come to us daily can no longer be received by the hospital; the abandoned boys are dispersed throughout the city and dying of hunger, while the orphaned girls, lacking bread, remain in danger of death by starvation or some other evil, wherefore I beg and I beseech you that . . . my family and I will not have to die of hunger . . .

I have yet to find any document that will fully explain Venturi’s resignation and return. Neither hospital nor the Balìa’s records give any indication of the exact date of his return to office.

This description of the hospital’s tragic state was followed by a request that Strozzi arrange for the 304 moggia of grain promised to the hospital earlier in the month to be sent.

Venturi makes a compelling case in this letter by reminding Strozzi of the hospital’s compliance with all of the government’s requests and their failure to respond in kind.

Highlighting the over-extension of the Balìa’s authority, he points out that the city seized not only the hospital’s grain, but also all of the fodder, rye, and other animal feed in its stores. Venturi also raises the issue of private grain again, explaining that 38 moggia of the grain taken (including 10 of his own) belonged to members of the hospital family. The reason for the storage of their private grain at the hospital is not clear, but the scarcity and high price of food during the siege no doubt meant that food theft was common, and it is likely that Venturi offered Santa Maria della Scala’s granary as a safe storage place. Or perhaps they were simply combining their own grain to keep the hospital family from starving; indeed, as Venturi tells Strozzi in his letter, the 15 moggia the city government sent to hospital in October only lasted for twenty days, indicating that this was clearly not enough to sustain the hospital through an entire month.102

Venturi explains that he has had to buy grain to supplement the government’s provisions, and he

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requests that the Balìa reimburse the hospital for the grain they removed, including the personal grain. Since the going rate at the time was 30 scudi per moggia and the government took 10 moggia of his own grain, Venturi concludes that he is owed 300 scudi.

Underscoring these requests for grain is an appeal to the hospital’s piety as a reason for its preservation. He calls the hospital a “most religious house” and refers to the righteousness and charitable works on which it was founded as “a good part of the hope that ought to be had in God for the conservation of this city.” Thus Venturi insinuates that through its good works the hospital “placates the anger of God,” and keeps destruction at bay.\(^{103}\) No doubt referencing the idea that Siena could lose the war if the Virgin abandoned them, Venturi argues that by seizing the hospital’s food supply and largely ignoring its cries for help, Strozzi, Monluc, and the Balìa only increased the anger of God and decreased their chances of success.

In both the case of the expulsion and the seizure of the hospital’s grain, Venturi never once objected to the Balìa’s reliance on Santa Maria della Scala to provide for the city. His letters, as demonstrated, frequently expressed the responsibility he felt, as head of the hospital, to aid the people of Siena. Likewise, Venturi never tried to argue that the hospital should not provide grain during the siege. Instead, he objected to the way that Monluc, Strozzi, and the city government exerted authority over Santa Maria della Scala and took everything, leaving the hospital family hardly able sustain itself, let alone continue providing charity. This idea is reinforced by the fact that Venturi only ever protested the seizure of personal grain and only requested reimbursement for grain the hospital purchased when the government failed to send

promised provisions. Once again, it is possible to observe a fundamental difference in the way the government and the hospital interpreted their relationship and the role of Santa Maria della Scala as a provider of food during the siege. The Balìa saw the expulsions and their seizure of the food supply as a necessary use of the hospital to preserve the city, while Venturi, who had to balance the hospital’s responsibility to provide food for the city while still sustaining itself, tried to argue the injustice of the government’s actions. He attempted to save the hospital (and by extension the poor of Siena) from total ruin by reminding the government of Santa Maria della Scala’s religious role and duties, warning that by ignoring this “most pious house” dedicated to the Virgin Mary, the government only caused increased suffering.

These sentiments are also found in a letter to the Cardinal Ippolito d’Este, dated 19 December 1554. Expressing the difficulties he faced both publicly and privately as rector of Santa Maria della Scala, Venturi stated: “Among the infinite troubles and great tribulations that I have felt this year, not only as a citizen through the universal damages our poor and afflicted Republic has suffered and through the dangerous war, but as minister of this holy hospital through the difficulties that I have had in preserving and defending it from many destructions and persecutions public and private, nothing could give me greater relief or more consolation than to hear of your coming . . .”104 In addition to emphasizing the severity of his troubles, Venturi’s statement here indicates a connection between the suffering of the Republic and that of the hospital. This shows once again that Venturi clearly understood the hospital’s role as a civic

resource and as a providing institution, but he lamented that the crises of war and the influence of Strozzi and Monluc had caused the city government to forget that Santa Maria della Scala was also a dependent institution. With the hospital in such a dire situation, the city under siege, and the impending loss of the war, the coming of Cardinal d’Este was indeed good news for Venturi, who hoped that his visit would help broker a peaceful end to the war, an end that would benefit both Siena and Santa Maria della Scala.

Venturi’s appeals in these letters seem to have had the desired affect: meeting on 20 December 1554 the Balìa recognized the sufferings of “the most pious house of Santa Maria della Scala,” noting in particular its lack of provisions and financial resources. The members of the council acknowledged Venturi’s efforts to maintain the institution and voted to exert their efforts on the hospital’s behalf. Representatives were sent to Monluc to discuss Santa Maria della Scala’s situation with him and remind him of the promises that Strozzi, the Balìa, and Monluc himself had made to Venturi regarding provisions for the hospital. Their mission succeeded and on Christmas day 1554 Monluc agreed to pay Venturi for the grain owed to the hospital. Furthermore, in January of 1555 Strozzi and Monluc agreed to raise Santa Maria della Scala’s grain allotment amount from 15 to 20 moggia per month.

Unlike past promises and agreements which were made and never kept, Monluc did attempt to keep his word. He offered 250 scudi in repayment for grain taken from the hospital’s stores to feed the army, which amounted to a price of 15 scudi per moggia. Venturi argued that since grain prices actually ranged between 30 and 39 scudi per moggia, the sum Monluc

105 Their actions, the deliberation records explain, should be for the good service and restoration of the hospital: “beneficio servizio et reparatione del detto spedale.” See ASS, Balìa, Deliberazioni, N. 159, f. 146v.
106 ASS, Balìa, Deliberazioni, N. 159, f. 161r.
107 ASS, Ospedale di Santa Maria della Scala, Copia Lettere, N. 436, f. 58r.
provided was less than half what the hospital had paid for the grain. Perhaps Venturi would have responded more graciously to Monluc’s offer if he had not simultaneously discovered that the army had recently removed at least 200 moggia of grain from Santa Maria della Scala’s farms in Grosseto. In a letter to Monluc, Venturi explained that unless Santa Maria della Scala was adequately repaid for its grain, the hospital and all the men, women, and children of the hospital family would truly be ruined. Even Venturi himself faced financial ruin: since his personal grain was taken from Santa Maria della Scala’s granary, Venturi’s family was forced to buy grain at high prices and to sell many possessions, including their silver plates, in order to have the money necessary to purchase food.108

Not only did the hospital lose funds, livestock, and grain during the war, but the men, women, and children of Santa Maria della Scala and its network also suffered much as a hospital family. Discussing the arrest of Federigo, a young man who was raised in the hospital, worked on the farm in Grosseto, and was arrested by Strozzi in December of 1554, Venturi wondered if there was a mistake in his arrest and asked Strozzi to have mercy on the boy. In fact, Venturi stated that Strozzi should show Federigo “pity as much as this pious house has suffered not only in the loss of goods but also in the loss of many young men who remain fighting in the war in the service of the King or who are dead or in prison or who suffer cruel tortments and most serious tribulations.”109 Venturi thus effectively reminds Strozzi that the war has taken a toll not only on the food supply of the hospital, but also on the children, men, and women who depended on Santa Maria della Scala for their survival. The hospital family was crucial to the institution’s

108 ASS, Ospedale di Santa Maria della Scala, Copia Lettere, N. 436, f. 58r.
ability to provide the relief services the government required of them and their religious
dedication acted to bring down the good favour of the city’s patron saint. It is clear that Venturi
hoped Strozzi would see this and take action to protect, rather than exploit, the hospital and its
family as a civic resource.

Unfortunately, the situation did not improve in February and a desperate Venturi begged
Strozzi to send the hospital at least 200 moggia of grain, stating that “in your hand rests the
lifting of this most religious house from extreme ruin.” The request for grain was apparently
granted, but rather than send it to Siena Venturi sent his trusted messenger and notary Agnolo to
Montalcino to obtain it. The journey, however, required a grant of safe conduct from the
Florentine commander Marignano. Since he had granted the safe conduct of the hospital’s
children the previous October, Venturi expressed the hope that he would grant safe conduct for
the hospital’s messengers and grain. Venturi even went so far as to send some marzipan with the
letters requesting safe conduct, though how they were able to make or obtain marzipan while
starving is somewhat of a mystery. Perhaps the marzipan did the trick, however, since
Venturi’s request was granted and Agnolo was able to make the trip to Montalcino and safely
obtain the promised grain supply.

The negotiations regarding the grain supply which took place over the course of the siege
reveal a dynamic in which the crises of war and the presence of foreign powers caused tension
between Siena’s civic institutions. In order to work with their French allies to defeat the enemy
and maintain Siena’s independence, the members of the Balìa used all civic resources at their

110 “. . . in man sua sta il sollevamento e la estima rovina di quest’a religiosiss.a casa . . .” ASS, *Ospedale di Santa Maria della Scala*, Copia Lettere, N. 436, f. 58v.
111 ASS, *Ospedale di Santa Maria della Scala*, Copia Lettere, N. 436, f. 60r.
112 Confirmation of safe conduct can be found in: ASF, *Mediceo del Principato*, Carteggio Universale, Cosimo I, N. 440, f. 271r.
disposal, most especially the Ospedale di Santa Maria della Scala. While Strozzi and Monluc exploited the hospital for military purposes, Venturi and the Balìa sought to find a way to employ Santa Maria della Scala’s resources for civic survival without ruining the hospital itself. Venturi showed extraordinary initiative in communicating not only with the city government but also with Strozzi and Monluc themselves, not to mention Cosimo I and the Marquis of Marignano, to defend and preserve the hospital, its people, and its properties. The Balìa, meanwhile, followed the directives of Strozzi and Monluc while also intervening with them on behalf of Santa Maria della Scala. The circumstances of the siege did cause the Balìa to extend their control and authority over the hospital beyond typical bounds, but the willingness of the council to defend Santa Maria della Scala against Strozzi and Monluc’s actions shows that the government saw the hospital as not only a civic resource but also a key civic institution that needed to be preserved.

**Post-War Resolutions and Shifting Power Dynamics: 1555-1562**

On 22 April 1555 Siena was forced to surrender to the Florentine and Spanish armies and the long siege finally came to an end. The act of capitulation that the Sienese signed yielded Siena to Cosimo I de’ Medici and Don Francisco di Toledo, a representative of Charles V, and brought the city under the protection of the Holy Roman Empire. The capitulation act also gave Siena’s nobility the right to restore the government as it previously functioned with the Signori, the Capitano del Popolo, and appointments to government councils divided between the four monti (Gentilhuomini, Nove, Popolari, Riformatori). However, the Sienese were allowed to conduct such business only under the oversight of a Spanish governor, in this case Don Francisco de

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Mendoza Bobadilla, the Cardinal of Burgos. His governorship, a period referred to as the Luogotenente Imperiale, lasted for two years, until possession of Siena was granted to Cosimo I in 1557.

The continued presence of these foreign powers in the city, combined with the arduous task of recovery from the war and the necessary adjustments to a new political order, meant that tensions in the city, and especially those between Santa Maria della Scala and the city government, did not dissipate with the end of the war. In fact, the governorship of the Cardinal of Burgos brought trouble to the hospital and to Venturi in particular. In what seems to have been an attempt by Spanish authorities to remove Venturi from office, an inquest was carried out from 1555 until 1556 based on accusations against Venturi by various members of the hospital family. According to documentation regarding the inquest, Venturi’s accusers included a group of the hospital’s orphaned girls, several chaplains and brothers of the hospital order, a baker, a cook, and one “Johannes Guerra hispanus.”

As a whole, the accusations depict Venturi as a negligent administrator who used hospital resources for his own benefit and left everyone else to suffer in dire circumstances. The complaint of starvation and not having enough to eat is emphasized, as well as Venturi’s failure to adequately fulfill his obligation to care for the poor. Other accusations included a lack of attention to the morality and piety of the hospital.

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114 ASS, _Luogotenente Imperiale_, N. 5, ff. 1r-16v. My sincere thanks to Elena Brizio for sharing her transcription of these pages with me.

115 For example, the girls complained that under Venturi’s governance they had so little to eat they feared they would die of hunger; ASS, _Luogotenente Imperiale_, N. 5, f. 1v. For a fuller analysis of what the girls’ letter might tell us about the life of the women of Santa Maria della Scala, see Gabriella Piccinni and Laura Vigni, “Modelli di assistenza ospedaliera tra Medioevo ed Età Moderna: Quotidianità, amministrazione, conflitti nell’ospedale di Santa Maria della Scala di Siena,” in Giuliano Pinto, ed., _La società del bisogno: Povertà e assistenza nella Toscana medievale_ (Firenze: Salimbeni, 1989): 131-174.
family; one chaplain indicated that Venturi knew of immoral behavior among the hospital staff but chose to ignore it.\footnote{ASS, \textit{Luogotenente Imperiale}, N. 5, ff. 1v-2r; Venturi is even accused of allowing the girls to roam the streets of Siena and associate with prostitutes, f. 11v.}

Unfortunately, there is no documentation providing us with the final decision of the Cardinal of Burgos after the investigation, but since Venturi retained his office until he chose to resign in 1562 it can be assumed that the case against him was eventually dropped. Furthermore, it is difficult to know how much to trust the allegations, but when the timing of the incident is taken into consideration, several possible explanations arise. First, it important to remember that Venturi was technically only the acting rector of Santa Maria della Scala, since the official title still belonged to Salvi, who Venturi had been called in to replace. Salvi lived through the war, but passed away in 1555. After Salvi’s death it was then up to the Balìa to either confirm Venturi’s appointment as rector or replace him with someone new. As Banchi speculated, the case against Venturi could therefore be interpreted as a ploy by the new Spanish governor to ensure that Venturi would lose his office and a new candidate for rector, one the governor could more easily control, could be selected.\footnote{Banchi, 194-195.}

The poverty and semi-ruined state of Santa Maria della Scala after the war also provided the perfect opportunity to accuse Venturi of negligence. While it is difficult to determine the accuracy of the moral and religious complaints against Venturi, it is easy to see how the circumstances caused by war and the demands placed by the city government on the hospital and its resources during the siege could be portrayed as the fault of a poor administrator. In the end, the facts that the case was dropped and Venturi retained his position for another six years suggest that there was not enough truth in the accusations, or that Venturi had a sufficient defence to prove that he deserved to remain in office.
While Venturi was under investigation, he and the hospital board worked to return Santa Maria della Scala to regular business, such as the appointment of new officials for outlying hospitals and farms. However, the effects of the war did not simply dissipate, and both the hospital and the city began a long process of recovery. For Santa Maria della Scala, this meant continuous efforts to regain financial ground, including appeals for aid from various aristocrats, and attempts to have plundered possessions restored. It also meant that administration expended even more effort into the maintenance and preservation of the network, since the farms, small hospitals, and subject hospitals were more crucial to Santa Maria della Scala’s survival than ever before. Accordingly, Venturi was much occupied with problems at the subject hospitals in Todi and Rieti, where he wanted to go personally to better assess the situation but couldn’t due to the state of affairs in Siena. He sent a new spedaliere, Giulio Guerrini, to the hospital in Rieti since local leaders there moved to escape the authority of Santa Maria della Scala, and he wrote to request the help of the pope in confirming Santa Maria della Scala’s control over the hospital.

Although the city government had its own share of recovery and adjustments to make, nearly a year after the end of the war civic administrators finally turned some attention to the aid of Santa Maria della Scala. In June of 1556, due to the poverty in which the hospital found itself, Venturi and the other hospital administrators called an emergency meeting. On 24 June, 118 Examples of these include the appointment of a new rector for the hospital in Castel della Pieve, ASS, *Ospedale di Santa Maria della Scala*, Copia Lettere, N. 436, f. 62r; letters to Marcantonio Borghesi and Marcantonio Pannilini for their help in recovering funds owed to the hospital, ASS, *Ospedale di Santa Maria della Scala*, Copia Lettere, N. 436, f. 61v; and a letter to the Duchess of Castro asking her to donate 40 or 50 bushels of grain from her land to the hospital, ASS, *Ospedale di Santa Maria della Scala*, Copia Lettere, N. 436, f. 60r. 119 After the end of the war the Balia moved to assess the damage in the city through conducting various surveys, including a count of all the inhabitants left within the city walls. One such survey, taken in 1556, placed the number of inhabitants at 10,217. See ASS, *Balìa*, Bocche, N. 957, f. 2r.
with the help and mediation of the Cardinal of Burgos and the Balìa, the Monte dei Paschi di
Siena provided a loan to the sum of 300 scudi, with the hospital pawning silver and the holdings
of Castelluccio, as well as a few smaller farms up for sale as collateral. That the administrators
would be forced to take such measures, especially after all the effort Venturi went through in
1553 negotiating with Cosimo to have Castelluccio restored, speaks to the dire financial position
of the hospital.

The Grancia di Castelluccio’s new owner was the duchess of Florence, Cosimo I’s wife
Eleonora di Toledo. Since the end of the war the duchess had become something of a patron to
Santa Maria della Scala. She sent gifts of grain to help maintain the hospital, and when money
was needed for the payment of debts she loaned 6120 scudi to Santa Maria della Scala. When the
loan could not be repaid within the originally specified time frame (by fall 1557), the hospital’s
administration offered the grancia of Castelluccio, worth 2000 scudi, to the duchess as collateral
and a good faith payment. The duchess then had control of Castelluccio, but allowed Santa Maria
della Scala to continue to administer the grancia. When Eleonora died in 1562 there was still a
balance owing and the grancia remained in her name. By 1567 Santa Maria della Scala still owed
1998 lire and 11 soldi to finish re-payment of Eleonora’s loan. Since five years had passed from
the time of her death, Santa Maria della Scala’s rector at the time, Girolamo di Giovanni
Biringucci commissioned several Sienese intellectuals to compose a request for the return of
Castelluccio to their hands and the request was granted.

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120 ASS, Ospedale di Santa Maria della Scala, Copia Lettere, N. 436, ff. 61r – 65r.
121 These actions seem to coincide with Eleonora’s patronage of charitable and religious
institutions in Florence, as well as her adept ownership and management of a good deal of land
in Tuscany. For more on Eleonora and the role she played in the political and social world of
Tuscany, see: Konrad Eisenbichler, ed., The Cultural World of Eleonora di Toledo, Duchess of
122 ASS, Ospedale di Santa Maria della Scala, Deliberazioni, N. 28, f. 168r-v.
When the Sienese state was granted to Cosimo I after only two years of governance by the Cardinal of Burgos, the city and the hospital were confronted with the prospect of further changes to the political, social, and economic climate of Siena. Almost immediately in September 1557, Cosimo I began to intervene in Santa Maria della Scala’s affairs. For example, Venturi and the hospital board appointed Antonio Casella as the new rector for the hospital in Castel della Pieve, but only after Venturi received notice from Agnolo Niccolini, the Florentine governor of Siena, that Cosimo I approved the choice of candidate. Similar events occurred with new rectors for the subject hospitals of Proceno (5 Feb. 1559) and Poggibonsi (11 October 1559).

As Cosimo I increased his power over Siena he reformed the government in 1561, leaving the city’s councils mostly intact, including the Balìa. The government functioned, however, under the oversight and direction of a Medici appointed governor, and Cosimo I claimed the right to appoint most major political and administrative offices. Having lost a good deal of their direct power to control their city, the Balìa looked for ways to preserve authority within the city and maintain some semblance of Sienese independence. One of the sources to which they turned for power was the Ospedale di Santa Maria della Scala. An analysis of the power dynamics within the city of Siena between the hospital, the communal government, and the Medici rulers of Tuscany will be the focus of the next chapter.

Conclusions

Venturi continued to administer the hospital until 1562, when he officially resigned as rector of Santa Maria della Scala. There is no reason given in documentation for his resignation, but the

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123 ASS, Ospedale di Santa Maria della Scala, Deliberazioni, N. 28, f. 86r.
124 ASS, Ospedale di Santa Maria della Scala, Deliberazioni, N. 28, ff. 102v, 108v.
fact that it coincides with the publication of Cosimo I de’ Medici’s reform of Siena’s government suggests that he had reasons other than simply tiring of the arduous task of hospital administration. Following his resignation in 1563 Venturi served as Capitano del Popolo, so it is possible that the attraction of this office was sufficient to convince him to leave Santa Maria della Scala. He didn’t entirely abandon the hospital, however: in 1572 the Balìa appointed Venturi one of the city government’s representatives on the hospital board. Whatever the reason for his resignation, Venturi’s departure gave Cosimo I the opportunity to appoint a rector of his own choice and begin bringing the hospital under central control.

A study of Santa Maria della Scala in the years leading up to and during the war of Siena demonstrates the impact that factionalism, political instability, and the interference of foreign powers had on the administration of the hospital and its network. It also shows how the inherent qualities of hospitals as both providing and dependent institutions defined their relationship with the civic community they served. Because of its role as a civic institution, and the great wealth and bounty provided by its network, Santa Maria della Scala was an effective resource not only for the poor, but also for the entire city. The crises of famine and war, as well as the influence of Strozzi and Monluc, disturbed the balance of power between the city government and the hospital. Although there seems to have been general agreement regarding Santa Maria della Scala’s role as a communal resource, and although it was quite practical for the government to take control of the food supply and seek ways to outlast the siege, discord arose over the manner

125 “Scipione di March’Antonio Venturi il 5 aprile 1552 . . . il di 8 marzo 1561 renuntio la carica al Seren[issi]mo Cosimo Medici Duca di Fiorenza,” ASS, Ospedale di Santa Maria della Scala, Ricordi e Memorie, N. 183, f. 107v; also ASS, Ospedale di Santa Maria della Scala, Deliberazioni, N. 28, f. 127r.
127 Banchi, 220-221.
in which these actions were carried out. Under the direction of Strozzi and Monluc the city
government over-extended its authority over the hospital with the result that by the end of the
war in April 1555 the once wealthy and self-sustaining institution could barely maintain itself.
The resources of Santa Maria della Scala Siena enabled Siena to endure the war, but at the cost
of they city’s largest charitable institution and network.

As Siena, Santa Maria della Scala and its network moved into a new era of government,
the effects of the tensions and troubles of the war and the insertion of foreign players into the
power dynamics of the city impacted Siena’s transition from a power centre in its own right to
becoming peripheral to a larger state. The events leading up to that transition as laid out in this
chapter provide the groundwork for understanding how the hospital, a distinctly Sienese civic
institution, became an arm of the Tuscan state. As the communal government lost its autonomy,
Sienese elite and the city’s governing councils sought ways to exercise and maintain power
within the city. Control over Santa Maria della Scala was a natural way to find power, but the
tensions raised between the city government and the hospital during the war drove a wedge
between the two which the Medici dukes used to their advantage.
Chapter 5
Santa Maria della Scala: A Tuscan State Agency

Following the crisis of war and the disruptions it effected within the civic economy of power, Siena and its subject territory confronted a new round of changes as Siena became part of the Tuscan state. This chapter seeks to examine the interactions and negotiations which shaped the power dynamics between Siena, once a power centre in its own right, and the larger territorial state (the Grand Duchy of Tuscany). Previous scholarship has examined the post-war period largely from a political and military perspective, taking into account various social, cultural, and religious issues.\(^1\) The common narrative throughout this scholarship treats the period as a time of decline, while also agreeing that the Sienese, despite their loss of political independence, maintained a good deal of autonomy as well as a distinct Sienese culture and identity.\(^2\) However, there is much work to be done in understanding the processes underlying this narrative, including the need for a more detailed understanding of the distribution of power within the state and the ways in which negotiations between the Medici and Sienese elite produced a balance of power.

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\(^2\) Gerald Parsons recently offered this description of the transition period, explaining that after the Medici takeover: “a complex pattern of continuities and discontinuities emerged within Sienese culture and society . . . whilst the Medici inevitably imposed their identity on the city, they did not simply seek to suppress all traces of the former independent Sienese state, but, instead, accepted the continued existence of a variety of Sienese institutions.” See Gerald Parsons, “Egregi facti antiqui senensium: the Reassertion of civic identity and civil religion in the Sala del Capitano of the Palazzo Pubblico, Siena, 1592-1600,” *Bulletino Senese di Storia Patria* Vol. CXVII (2010): 11.
where the centre maintained control while still allowing for Sienese autonomy. One useful way to approach such a study is to apply Guarini’s concept of geographies of power by examining various sites of power and the ways in which that power was manifested.

As demonstrated in the previous chapters, the Ospedale di Santa Maria della Scala was more than just a source of charity and poor relief, it was also a key civic institution and Sienese state agency. As such, the hospital was a legitimate source of power and can thus provide an opportunity to look more closely at the ways in which both the Medici and the Sienese elite participated in shaping a new economy of power. The case of Santa Maria della Scala shows how the Medici exploited divisions and promoted competition among the Sienese elite in order to consolidate central authority, using offices such as the rectorship of the hospital as means to build patronage ties. Siena’s city government also took action to retain control of the hospital, creating a dynamic in which Santa Maria della Scala’s administrators had to respond to and make choices between two competing authorities.

Through a series of negotiations, including reforms and resistance to, at varying times, both the Medici and the city government, a new distribution of power was achieved by the end of the sixteenth century. The Medici grand dukes successfully centralized control of Santa Maria della Scala and used the hospital as an arm of the Tuscan state, but the city government retained the ability to participate in hospital administration and Santa Maria della Scala remained central

\[3\] In his survey of modes of confraternal charity across Italy, Terpstra has shown how charitable reform was impacted “by the different dynamics of centre and periphery in different political contexts,” and he argues that “. . . confraternal-civic welfare contributes significantly to the dynamics of state formation.” His examples include work on Bologna, Modena, Genoa, Treviso, Bergamo, and Florence, but Siena is not included since the work has not (until now) been attempted; see Nicholas Terpstra, “The Politics of Confraternal Charity: Centre, Periphery, and the Modes of Confraternal Involvement in Early Modern Civic Welfare,” in Vera Zamagni, ed., Povertà e innovazioni istituzionali in Italia dal medioevo ad oggi (Bologna: Società Editrice Il Mulino, 2000): 153-173.
to Siena’s civic identity and religion. Rather than viewing Siena’s annexation to the Tuscan state in terms of simple centre-periphery dynamics, the case of Santa Maria della Scala provides evidence that it was interaction on multiple levels (such as those between the Medici, Siena’s government, and hospital administrators), rather than the imposition of centralized authority on the periphery, which shaped the development and centralization of the Tuscan state.\(^4\) Furthermore, the case of Santa Maria della Scala shows that charitable institutions should be viewed as sources of power that could function simultaneously as local power centres and arms of the territorial state.

The experience of Siena and Santa Maria della Scala in the late sixteenth century is best understood when situated in the wider contexts of Medici charitable reform in the Florentine state as well as charitable reform and state building across sixteenth-century Italy and Europe. One of the characteristics that scholars have connected with early modern state building is a change, beginning in the mid-fifteenth century, in modes of charity. While the degree of change and continuity between medieval and early modern charitable practices is still debated, the trend of consolidating charitable efforts and constructing centralized hospitals is evident throughout the Italian peninsula. Beginning the mid-fifteenth century, cities and towns including Turin (1440), Brescia (1447), Mantua (1450), Milan and Bergamo (1459), Genoa (1471), Parma (1472), Ferrara (1478), Ravenna (1513), Cortona (1440), L’Aquila (1445), and Piacenza (1472),

\(^4\) Just as the case of Santa Maria della Scala shows this to be true for Siena, others have shown a similar process occurring throughout the Tuscan state. One particularly apt description comes from Giovanna Benadusi’s study of the relationship between the town of Poppi and the Tuscan government. Benadusi argued for: “the importance of studying the interaction between human experience and institutions. . . the collective efforts of provincial elites in redefining their identity, consolidating their local authority and facilitating their integration into the new regional state interacted with the politics of central rulers. Intentions, circumstances and politics therefore combined to give shape to the Tuscan state.” See Benadusi, “Rethinking the State: Family Strategies in Early Modern Tuscany,” Social History, Vol. 20, No. 2 (May, 1995): 177.
undertook city-wide programs of poor relief and the construction of large, central hospitals. In the sixteenth century, similar programs can also be observed in England, the Dutch Republic, Germany, and Spain.\(^5\)

Given the unique political and religious climate of the sixteenth century, scholars have argued that alterations to the practice of charity were heavily influenced by the broader trends of state building and religious reform. During the sixteenth century the major cities of the Italian peninsula including Rome, Venice, Milan, and Florence each undertook projects to root out corruption and improve the efficiency of their systems of poor relief through creating centralized charitable administration (bringing together all charitable institutions within the state and coordinating their efforts) and constructing large hospitals. In connection with religious reform, new efforts were made to redeem “undeserving poor,” such as prostitutes, to preserve the virtue and honour of women in need of relief (whether abandoned, widowed, or placed in a convent), and, according to Brian Pullan, to help the poor overcome poverty and the sins that it led people to commit.\(^6\)

In addition to social, moral and religious reasons for charitable reform, historians have also shown that across Italy local elites used charitable organizations such as confraternities and hospitals as a means to maintain power and preserve local autonomy in the wake of dominance by powerful territorial states. In her work on charity in Turin under the House of Savoy, Sandra Cavallo found that: “the consolidation of central power did not bring a decline, but rather an

\(^5\) Sandra Cavallo gives a concise overview of these trends; see Cavallo, *Charity and Power in Early Modern Italy: Benefactors and Their Motives in Turin, 1541-1789* (New York: Cambridge University Press, 1995), 14-16.

\(^6\) Brian Pullan, “The Counter-Reformation, Medical Care, and Poor Relief,” in Ole Peter Grell, Andrew Cunningham, and Jon Arrizabalaga, eds., *Health Care and Poor Relief in Counter-Reformation Europe* (London: Routledge, 1999), 19.
expansion of the welfare system administered by the municipality . . . For nearly a century into the first phase of state-formation, the welfare system operating in the city would remain municipally run, sustained by a strong civic ideology characterized by non-institutional provision.” Likewise, David D’Andrea has found that although the city of Treviso was a periphery to the Venetian state, local Trevisan elite exercised a substantial degree of power and autonomy through the confraternity and hospital of Santa Maria dei Battuti. There is also ample work on hospitals in the Florentine state (discussed in further detail later in the chapter) which highlights charitable institutions as a site of local resistance to the power of the centre. Hospitals have thus proven to be a useful means to examine the dynamics between a power centre and its peripheries.

The case of Siena and Santa Maria della Scala provides an additional and somewhat alternative narrative to these commonly recognized trends both in terms of changing modes of charity and power in the centralization of territorial states. Since Santa Maria della Scala had provided Siena with a centralized hospital and state-wide network of charity from the thirteenth century, there was no need for consolidation by the sixteenth century. Instead, in the case of Siena changing modes of charity and the civic role of Santa Maria della Scala were motivated less by a need for centralization and more as a response to political crises, war, famine, and the city’s religious devotion to Mary. In terms of the growth of territorial states,

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7 Cavallo, Charity and Power in Early Modern Italy, 40.
8 D’Andrea’s study shows how civic institutions like hospitals became the focus of civic identity and authority once a city was made subject to a territorial entity, and he uses the analogy of child-parent relationships to describe how centre-periphery dynamics functioned in the Venetian state. To emphasize this he quotes James Grubb: “Filiation conveniently acknowledged, yet also limited, the aspirations of center and periphery. It established subordination, certainly cut off local claims to independence, and reminded subjects of the obedience due to parents, but it left the subject as a distinct person with at least a limited freedom of action,” see D’Andrea, Civic Christianity in Renaissance Italy, 8.
because Siena was the power centre of its own state, the Medici government faced the challenge of incorporating an entire bureaucratic state into the Grand Duchy. Rather than bring Siena under existing Florentine administration structures, the Medici chose to retain the Sienese state as a separate entity (the “stato nuovo”) within the duchy. Accordingly, Santa Maria della Scala and Siena’s charitable network remained independent from the Florentine state system of charity. Despite this separation, by exerting authority over the appointment of hospital rectors, creating new administrative offices, and issuing reforms the Medici were still able to use Santa Maria della Scala as part of their program to consolidate power in Siena.

However, at the same time that the hospital became a “Tuscan” agency, it also maintained its place as a Sienese institution. Santa Maria della Scala continued to serve not only as the city’s main source of charity, but also as a site of civic identity and devotion to Mary. The hospital also helped Siena retain its ties with the surrounding territory and maintain the connection between city and countryside that characterized the Sienese state. A study of Santa Maria della Scala thus highlights how hospitals could serve simultaneously as sites of local identity and resistance to central control while also being used by the centre as a means to consolidate power and create ties with its peripheries.

In order to demonstrate these issues, this chapter will first consider the regional context of charity and state building the Florentine state, in order to better understand how the Medici’s treatment of Siena compares with the rest of the Tuscan state. This will be followed by an examination of Siena as a Tuscan periphery divided into two parts: the first covering the period from 1559-1584, looking at the re-structuring of the Sienese state and the implications of this for Santa Maria della Scala, and the second part treating the period of 1587-1600, including the impact of the crises of the 1590s on the hospital and the Medici government’s response and
reform of Santa Maria della Scala. The chapter will examine Santa Maria della Scala's continued role as a Sienese institution, including its network and rural presence. The conclusion of the chapter will bring together these various pieces to suggest a more complete understanding of the economy of power within Siena and the Grand Duchy of Tuscany.

**Regional Context: The Medici, Hospitals, and State Building in Florence and Tuscany**

One of the many tactics that Cosimo I de’ Medici employed in building the Tuscan state and consolidating power was the reform and centralization of Tuscan charitable institutions. Prior to 1557 and the annexation of Siena, Cosimo carried out an extensive program to consolidate and improve the efficiency of charitable institutions and the practice of poor relief in the city of Florence and throughout the Tuscan state. His experience with charity and reform in Florence influenced how he later dealt with Siena, and although the reforms themselves differ, similarities are evident. These include: establishing control of the charitable system by the central state, use of charitable institutions to build patronage networks, and flexibility in creating a charitable network which still allowed for local involvement and identity.

Cosimo’s first step to centralizing charity was to take control of charitable institutions in Florence itself. This involved government funded relief packages for struggling institutions and, most importantly, the suppression of confraternities and hospital patrons as Cosimo assumed the

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right to appoint hospital rectors himself.\textsuperscript{10} During the crises of the early sixteenth century, including famine and outbreaks of plague in the 1520s, the hospitals and confraternities of Florence provided aid and relief for the city, but they also suffered heavy financial losses.\textsuperscript{11} Under Cosimo’s direction in 1533 the government initiated a program of financial relief for the hospital of Santa Maria Nuova, which included suspending repayment of the hospital’s debts, ensuring reclamation of funds owed to the hospital, granting a portion of the city’s tax revenue to the hospital, and arranging for loans from the Monte di Pietà. These actions certainly provided welcome aid to the hospital, but more importantly they opened the door for the Medici government to become involved in Santa Maria Nuova’s affairs. The commission originally established to audit Santa Maria Nuova’s financial state continued to function beyond 1533, auditing the hospital’s accounts each year. Other hospitals in Florence also came under more direct Medici control as Cosimo assumed the privilege of the selection and appointment of rectors, taking this right away from hospital patrons on claims that the poor, mis-managed conditions of the hospitals warranted his intervention.\textsuperscript{12}

Cosimo’s next step in centralizing Tuscan charity was the creation of a magistracy to oversee hospitals both in the city and throughout the Florentine state, called the \textit{Provveditori sopra li derelitti e poveri mendicanti}, more commonly referred to as the Bigallo magistrates. The creation of the magistracy was tied to the suppression of another of the city’s main sources of

\textsuperscript{10} Terpstra explains Cosimo’s strategy as a combination of three models of reform used by governments across Italy: the development of charity systems based on confraternal models (Genoa, Bologna), the incorporation of existing confraternal structures and institutions (Treviso, Bergamo), and the expropriation of confraternal institutions (Modena). As Terpstra argues, Cosimo’s adoption of different models for different local contexts and the wider political situation of the state showed that he favoured negotiation and cooperation over suppression; see Terpstra, “The politics of confraternal charity,” 156-169, 171-173.

\textsuperscript{11} Henderson, \textit{Renaissance Hospital}, 102-103.

\textsuperscript{12} Henderson, \textit{Renaissance Hospital}, 103-104.
charity: confraternities. The charitable activities of confraternities varied from donating time and/or money to the service of the poor, to administering hospitals and hospices. Rulers, however, often viewed confraternities as a danger since the aristocracy frequently used them as a means of gaining and exerting power within the community. Because of the threat that large, powerful confraternities posed to his power, one of Cosimo’s first actions as head of the government was the suppression of several significant Florentine confraternities.¹³

One of the confraternities targeted by Cosimo was the wealthy and powerful Compagnia di Santa Maria del Bigallo. However, rather than entirely disband the confraternity, Cosimo instead converted it into a government bureaucracy. In 1542 Cosimo took the remaining assets of the Bigallo and transferred them to a new magistracy called the Provveditori sopra li derelitti e poveri mendicanti.¹⁴ The chief officials, or captains, of this new magistracy were the former leaders of the confraternity, and Cosimo expanded their number so that the bureaucracy was governed by 12 men. Their official mandate was to oversee the hundreds of local hospitals scattered throughout Florentine territory. They were responsible for ensuring that hospitals operated properly and offered appropriate hospitality and that local administrators were honest.

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¹³ Cosimo was able to do this on the authority of a bull from Pope Paul III (granted in 1543) which gave him permission to redistribute bequests to confraternities and hospitals in Florence. According to Christopher Black, there was some precedent and sense in Cosimo’s actions; “There were grounds for curbing confraternities – or even abolishing them – as secret centres of political or religious dissent. There were good reasons for closing some confraternity hospitals as inefficient organisations. But if properly controlled, confraternities could be used positively for propagating orthodox religious ideas and practices, for consolidating a revitalised parochial organisation, or for ensuring the subordination of the lower orders to the established government and the social elites.” See Christopher F. Black, Italian Confraternities in the Sixteenth Century (Cambridge: Cambridge University Press, 1989), 58-59.

¹⁴ Nicholas Terpstra, “Competing Visions of the State and Social Welfare: The Medici Dukes, the Bigallo Magistrates, and Local Hospitals in Sixteenth Century Tuscany,” Renaissance Quarterly, Vol. LIV, No. 4.2 (Winter 2001): 1320. Cosimo’s actions here were supported by a papal bull which gave him the right to reallocate bequests and possessions of Florentine hospitals.
A third task, which proved both the most difficult to carry out and the most controversial with rural administrators, was the collection of excess revenue. This revenue was to be sent to Florence and used to fund a central hospital for the poor in the city which the Bigallo captains would manage.\(^{15}\)

Cosimo’s creation of the Bigallo captains and the authority he gave them was his first attempt at state-wide charitable legislation. Although many, such as Henderson, do attribute to Cosimo a genuine concern for the welfare of the poor and the ability of Florentine institutions to respond to the city’s needs, Cosimo’s reform of charity served also served political ends.\(^{16}\) Not only did Medici reforms increase the role of the government in the operation of charitable institutions and the organization of poor relief in the city, by extension it increased the government’s access to the resources controlled by hospitals and confraternities. Cosimo’s reforms also meant that those who administered charitable institutions relied more on and were more loyal to Cosimo himself, and it increased ties between rural communities and Florence.

As the state’s charitable administrative body, the Bigallo was meant to help consolidate poor relief in the city and countryside. However, the Bigallo’s approach to dealing with rural institutions caused friction between Florence (as the centre) and the towns and villages of Tuscany (its periphery), making the bureaucracy problematic from the start.\(^{17}\) The captains struggled to enforce their authority and found it difficult to elicit responses from local administrators: written requests for inventories, financial records, and other reports from local administrators: written requests for inventories, financial records, and other reports from local administrators:

\(^{15}\) Terpstra, “Competing Visions,” 1320.
\(^{16}\) Henderson, *The Renaissance Hospital*, 105-106.
hospitals yielded few results.\textsuperscript{18} Visits were more effective but difficult to make, since the Bigallo did not have sufficient means to fund frequent travel and Cosimo repeatedly denied or ignored their requests for more money.\textsuperscript{19} Additional trouble occurred as the Bigallo attempted to regulate both lay and religious institutions; here, Terpstra attributes the problem to a discord between the way that local communities and the central bureaucracy viewed the practice of charity. Where leaders of local communities might see a hospital as a way to provide a salary for local clerics, unless the hospital was properly administered the Bigallo captains saw it as a corrupt use of funds.\textsuperscript{20} Furthermore, the Bigallo faced additional local resistance when they attempted to collect excess revenue. Thus, the effort that Cosimo initiated to centralize the administration of Florentine charitable institutions instead resulted in frustrated Bigallo captains realized that their authority did not mean as much as they may have presumed, and risked alienating local communities and placing a distaste for Medici rule in their mouths.

To address these issues, rather than altering the Bigallo Cosimo created another new magistracy in 1560: the \textit{Nove Conservatori}. With the Nove, Cosimo remedied the problems associated with the Bigallo and struck a better balance between local autonomy and central control. As its name suggests, the Nove was a committee of nine men to whom Cosimo assigned, among other things, the oversight of rural hospitals. Because the Conservatori were salaried officials (as opposed to the Bigallo captains), they could visit rural communities more frequently and rely less on the cooperation of local officials in order to conduct their surveys; unlike the Bigallo, they also rarely harassed local hospitals about revenues and taxes. Additionally, whereas

\textsuperscript{18} The Bigallo’s survey received reports of only 104 institutions, whereas later surveys which treated hospitals as part of local communities rather than as the property of the centre, had much higher results: a survey in 1562 received a report of 379 hospitals while another just a year later yielded reports of 1,008. See Terpstra, “The politics of confraternal charity,” 170.
\textsuperscript{19} Terpstra, “Competing Visions,” 1347-1348.
\textsuperscript{20} Terpstra, “Competing Visions,” 1347-1348.
the Bigallo attempted to supervise both religious and lay hospitals, the Nove only dealt with lay hospitals, eliminating the potential for conflict with the church.\textsuperscript{21} These changes, according to Terpstra, made the Nove more effective than the Bigallo at building relationships and increasing centralized control over Florentine charitable institutions: “the Nove Conservatori’s approach to ospedali represented a strategic advance in the form of an apparent retreat: the bureaucracy released its grasp on particular local charities so as to gain a surer hold on the whole community.”\textsuperscript{22}

Despite the effectiveness of the Nove Conservatori, Cosimo did not do away with the Bigallo magistry. Instead, he continued to use the Bigallo to build his patronage network, granting the fairly powerless office of Bigallo captain to pacify those seeking for power at court. While Cosimo’s efforts to create bureaucracies and reform the Florentine system of poor relief may seem, and indeed actually were, contradictory, they tell us something important about his reforms as part of his larger program of centralization. Terpstra offers the convincing explanation that Cosimo’s idea of a centralized, absolute state was grounded in the principles of negotiation and compromise, and he explains that the Medici’s sometimes contradictory policies can be best understood “when read in light of what we know about the strategies of negotiated absolutism: avoid unnecessarily aggravating local interests, give the appearance of accommodating particularity while putting alternative bureaucratic structures in place, and use positions and sometimes empty honours as a means to bind friends and win over waverers.”\textsuperscript{23}

\textsuperscript{21} Terpstra, “Competing Visions,” 1347-1348, 1351.
\textsuperscript{22} Terpstra, “Competing Visions,” 1349. Also important to note is that in contrast to the Bigallo captains, who served life terms, the Nove Conservatori did not hold office permanently. This eliminated any fears Cosimo may have had with regard to men using the office of conservatore as a bid for power, one of the fears that likely influenced his reluctance to fully support the authority of the more permanent Bigallo captains.
\textsuperscript{23} Terpstra, “Competing Visions,” 1352.
This concept of negotiated absolutism fits well with the idea of geographies of power and the need to understand the relationship between centre and periphery in terms of the various ways in which power was manifested and negotiated. Scholars are continuing to find examples which validate the two as useful approaches, particularly in a Tuscan context. One recent example is Daniel Bornstein’s study of Cortona, a small town located to the east of Siena and just south of Arezzo. After Cortona came under Tuscan rule in the early fifteenth century the majority of public government and ecclesiastical offices were given to Florentine candidates, leaving local elites with less prominent offices. Among these lesser offices, however, was the administration of Cortona’s many charitable institutions, such as the hospital of Santa Maria della Misericordia, which turned out to be a significant source of power. Santa Maria della Misericordia had a network of smaller hospitals (similar to the network of Santa Maria della Scala in Siena) and a patrimony worth five times the land owned by the cathedral chapter and four times that of Cortona’s bishop. The control of such vast holdings and wealth gave Cortona’s local elites a good deal of power in the community and, as Bornstein argues, allowed them to “carve out for themselves an area of relative autonomy and considerable influence.”

In addition to their city’s hospitals, Cortona’s elite also turned to confraternities as a source of local power and autonomy. In 1537 the *Unione dei luoghi pii* was created, bringing twelve local devotional confraternities under one administration. When Cosimo I’s attention turned to consolidating central authority after his rise to power in Florence, he used the *Unione dei luoghi pii* to help solidify his power in Cortona. Rather than suppressing Cortona’s confraternities as he had done in the city of Florence, Cosimo instead supported the *Unione dei

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By defending it against the attempts of Cortona’s ecclesiastical authorities to regulate lay religious activities. As Bornstein argues, Cosimo’s support of the Unione provided him with three outcomes beneficial to the goals of central authority: it helped him win favour with Cortona’s nobility, it provided a way to limit ecclesiastical power in the city, and it gave him access to the wealth of the confraternities.27

In order for this strategy to work effectively, Cosimo balanced his involvement with the Unione by leaving control of the hospital of Santa Maria della Misericordia and Cortona’s other charitable institutions entirely in local hands. Indeed, ducal interest in the Unione meant that it was never supported by local elites to the same extent as the hospital. According to Bornstein, the result of this was that the hospital became a means of preserving local independence and identity while the Unione came to represent a fusion of local and territorial interests.28 The example of Cortona thus demonstrates how Cosimo’s strategy of negotiated absolutism enabled hospitals and charitable institutions in Tuscany to serve as both preservers of local identity and sites of compromise between local and central authority.

Furthermore, the examples of Cortona, the Bigallo, and the Nove Conservatori highlight the ways in which Cosimo I de’ Medici used the reform and regulation of charitable institutions as a tool to create stronger ties across the Tuscan state. In doing so, he developed a strategy of compromise which fused territorial and local interests, bringing communities and their institutions more firmly under central control while still allowing the peripheries to use these same institutions as a source of civic identity and autonomy. In the case of Siena and Santa Maria della Scala, Cosimo and his successors applied the same kind of negotiation and

27 Cosimo used money from the Unione to create scholarships for students at the University of Pisa, thus creating links between various parts of his territorial state; see Bornstein, “Civic Hospitals,” 14.

compromise, adapting to the social and political climate of Siena and exploiting the lack of unity among Siena’s elite to the advantage of his own power.

**Siena as a Tuscan Periphery, Part I: Medici Dukes and Local Authorities in Siena, 1559-84**

As discussed at the end of the previous chapter, when King Phillip II of Spain granted possession of Siena to Cosimo I de’ Medici in 1557, the city was in poor condition. The years of war and the famine brought on by the difficult siege which finally put an end to Siena’s resistance brought depopulation and financial distress to the city. Furthermore, the flight of nearly 2,000 Sienese nobles to nearby Montalcino in an attempt to re-locate and re-constitute the Sienese Republic had created confusion and a political vacuum in the city. Cosimo I could not fully annex Siena until the re-constituted Republic at Montalcino was put down, which took until April 1559, when the treaty of Cateau-Cambresis permanently solidified Medici possession of Siena.

Under the terms of Cosimo’s agreement with Phillip II, Siena remained a separate and distinct political entity from the Florentine state. This separation meant that Cosimo governed a truly composite state, encompassing both the former Sienese Republic, thereafter called the “Stato Nuovo,” and the Florentine Republic, or the “Stato Vecchio.” This separation also meant that Siena’s government and administrative bureaucracies remained largely in control of the Sienese state rather than being integrated into the existing Florentine government. However, the actions of Siena’s government were subject to Cosimo’s oversight, whose rule thus served to link

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29 For a more in-depth discussion of the Republic of Siena at Montalcino following the war, see Cantagalli, *La Guerra*, 425-529; also, Orlandini, *Piccolo Storia di Siena*, 118-119.
the two states. It was not until 1569, when Cosimo was made a grand duke and the Grand Duchy of Tuscany was created, that the Stato Vecchio and Stato Nuovo were more formally united.\footnote{For further explanation see: Guarini, “Le Istituzioni di Siena e del suo stato nel Ducato Mediceo,” 49-53.}

In 1561, two years after the treaty of Cateau-Cambresis, Cosimo I issued a new constitution for the Sienese state: La *Reformazione del governo del Città e Stato di Siena*. The *Reformazione* was based largely on Siena’s original constitution and was more a re-structuring and limiting of power than a complete over-haul of the government. The basic structure and organization of the city’s councils and governing bodies remained intact, but there were several key changes. The first was the establishment of a Medici appointed *governatore* who acted as the Medici’s representative in Siena and oversaw the administration and actions of all civic political and judicial bodies.\footnote{Instructions for the governatore are found in the first capitolo of the new reforms; see ASS, *Balia*, Deliberazioni, N. 173, f. 3v.}

Second, the *Reformazione* altered the selection process for the filling of various political and civic offices. Under the original Sienese constitution, most official appointments were made by election in either the Concistoro or the Balìa. However, Cosimo I created a new council, the Consiglio Grande, made up of 20 men selected personally by the duke and presided over by the governor.\footnote{The third capitolo of the reforms states that the consiglio members would be drawn equally from across all the monti and that no more than two men from any one family were allowed to serve on the council at a time; see ASS, *Balia*, Deliberazioni, N. 173, f. 4r.}

One of the Consiglio Grande’s responsibilities was to make appointments for those offices which Cosimo had not reserved for his own appointments.\footnote{A list of the offices they were to appoint is found in the seventh capitolo of the reforms and includes all city treasurers and scribes, as well as “offitiali di tutto lo stato generalmente;” see ASS, *Balia*, Deliberazioni, N. 173, f. 5r.} A third key change in the *Reformazione* dictated that the Balìa would remain the central governing
body of the city, functioning under the direction of the governatore and the Consiglio Grande.\textsuperscript{34} All other city councils were left in place, but were also placed under the oversight of ducal authorities.

The \textit{Reformazione} serves as an example of Cosimo’s program of negotiated absolutism; the new constitution created a Sienese state that functioned simultaneously as a power centre and a periphery. By leaving Sienese bureaucracy and governing councils intact, Cosimo allowed the Sienese to retain a good deal of local power and their civic identity.\textsuperscript{35} However, by establishing a governor and a new council in charge of filling political offices Cosimo effectively inserted central controls into Siena’s government. The \textit{Reformazione} thus show Cosimo trying to strike the same balance in bringing Siena into the state as he had in centralizing the Florentine state: securing power for himself while appearing to accommodate local interests; leaving local bureaucracies in place while also adding those of his own.

Cosimo’s interactions with Venturi during the war of Siena and his wife Eleanora’s patronage of the hospital suggest that he was familiar with the extent of Santa Maria della Scala’s network and patrimony and aware of the hospital’s social, religious, economic, and civic importance to the Sienese community. Knowing that control of the hospital would help to solidify his power over Siena, as part the \textit{Reformazione} Cosimo claimed for himself the right to appoint Santa Maria della Scala’s rector. He also authorized the governatore to serve as a liaison between himself and the hospital, and to conduct reviews and submit reports on its status to

\textsuperscript{34} Although the Balia had functioned as the governing body of Siena since the early fifteenth-century, the Consiglio Generale and Concistoro were technically the main governing bodies of the city, while the Balia had been an emergency form of government. Cosimo’s reforms changed this by solidifying the primacy of the Balia; see ASS, \textit{Balìa, Deliberazioni}, N. 173, f. 5v-6r, capitoli 11-13.

\textsuperscript{35} According to Parsons, Cosimo’s policies allowed the Sienese to retain more than a merely formal sense of autonomy; see Parsons, “Egregi facti antiqui senensium,” 11-12.
Florence. However, in line with Cosimo’s strategy of negotiated absolutism, the *Reformazione* left Siena’s government, particularly the Balìa, with some control over the hospital, including the ability to appoint *savi*, leaving the door open for local leaders to continue exercising authority over Santa Maria della Scala.\textsuperscript{36}

As the city began to operate under the *Reformazione*, the limits and boundaries of power between the Florentine centre and the new Sienese state were tested. Like other local governments in Tuscany and Italy, the Balìa of Siena found ways to exercise power locally, and one of its outlets was the regulation of Santa Maria della Scala. Regulation and control of the hospital by the civic government was, as shown in previous chapters, not a new phenomenon. However, the government’s treatment of Santa Maria della Scala during the war had raised tensions within their relationship and left the hospital in grave financial circumstances. Aware of the potential financial collapse of Santa Maria della Scala and recognizing their ability to control the hospital as one of their avenues to maintaining power in Siena, the Balìa decided to take action, and during the spring of 1561, following quickly on the heels of Cosimo I’s reform of the government, the Balìa compiled and approved a set of provisions for the administration of Santa Maria della Scala.\textsuperscript{37}

The primary intent of the provisions was to improve communication and exchange between the hospital and its farms to ensure that all goods and revenues were accurately reported and efficiently used. However, the provisions also increased the role and power of the Balìa in hospital administration through the creation of a new office and an expansion of the duties of the *savi*, the eight men who represented the Balìa on Santa Maria della Scala’s governing council.

\textsuperscript{36} The reforms make it clear, however, that the all of the Balìa’s actions had to be approved by the governatore: see ASS, *Balìa*, Deliberazioni, N. 173, f. 6r, capitolo 12.

\textsuperscript{37} The provisions were given to Venturi for his approval on 11 March and then officially passed by the Balìa on 18 April 1561; see ASS, *Balìa*, Deliberazioni, N. 173, f. 43r.
According to the provisions, the Balìa was charged annually to appoint a man who was not part of the hospital organization to serve as an auditor. Called a visitatore, his job was to visit and take account of all the hospital’s possessions and report on their productivity and management. Additionally, the provisions ordered that two of the savi make a yearly visit to the infirmaries and orphanages of the hospital and report on the conditions and management they find. Another two savi, the provisions indicate, should also be appointed to conduct a review of the rector, camarlingo, and other hospital administrative staff, to ensure that their duties were adequately carried out.38

The provisions not only increased the Balìa’s authority over the hospital through the visitatore and the savi, but they also sought to increase the Balìa’s decision-making power in Santa Maria della Scala’s financial affairs. For example, the Balìa claimed the right to approve all transactions associated with the buying, selling, leasing, or rental of any hospital property. Furthermore, hospital record keepers were required to report to the Balìa any negligence they observed with regard to adherence to these provisions.39

What becomes clear in the provisions, then, is an attempt by the Balìa to extend and consolidate their authority over Santa Maria della Scala. The provisions can be read as an attempt by the Sienese government to retain power and control over one of the city’s key institutions in order to compensate for their loss of independent political authority. By creating the office of visitatore and extending the duties of the savi, the Balìa sought to increase their ability to influence the hospital’s governance, and by claiming the right to approve all financial transactions they guaranteed themselves control over the hospital’s vast property and wealth. The

38 ASS, Balìa, Deliberazioni, N. 173, 64r; also Banchi, 200-201.
council recognized that the financial stability of Santa Maria della Scala was crucial to the city not only in terms of the charitable services supplied to the community, but also in terms of allowing the Sienese elite who served on the Balìa to retain some power within the state.

This perspective is further reinforced by the fact that in addition to setting down provisions for Santa Maria della Scala the Balìa simultaneously moved to exert its authority over the Spedale di Monna Agnese as well. Not only did the Balìa continue to appoint savi to represent the city government in the administration of the Mona Agnese hospital, but, similar to the provisions given for Santa Maria della Scala, the savi elected for the Mona Agnese hospital in 1561 were instructed to review all financial accounts and make a report to the Balìa. The concern over finances once again underscores that the city government viewed its charitable institutions as important resources and, due in large part to their financial and economic roles, as sites of power.

Mindful of the motivations behind the Balìa’s actions and aware of the degradation that instituting the provisions would cause their own power, the rector and other administrators of Santa Maria della Scala resisted implementing the provisions. This resistance led not only to a clash between the hospital and the city government but also to a much larger negotiation of power between the Medici dukes, the Balìa, and Santa Maria della Scala. From an institutional perspective, this was the first real clash between centre and periphery, and the outcome of the disagreement had a significant impact on the hospital’s relationship with local and regional government. At the time the provisions were passed in 1561 Scipione Venturi was still rector.

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40 ASS, Balìa, Deliberazioni, N. 173, ff. 43r, 44r-44v.
However, he resigned less than a year later in 1562 and did not attempt to put them in practice.\textsuperscript{41} The task of enforcing the provisions then fell to Venturi’s successor, but this was instantly problematic since under the new territorial government Santa Maria della Scala’s rectors were no longer selected by the city government but personally appointed by the Medici dukes. Cosimo understood the power of patronage and the importance of granting offices in maintaining central control, likewise the Balìa must have known that without control over the rector, his loyalty could not be guaranteed.\textsuperscript{42}

Cosimo’s choice for Venturi’s replacement as rector of Santa Maria della Scala was Girolamo di Giovanni Biringucci, who took office on 8 March 1562.\textsuperscript{43} Biringucci, from the prominent noble family of that name, was a former student of Sienese scholar Mariano Sozzini and worked for a time as a jurist in Naples.\textsuperscript{44} During his tenure as rector of Santa Maria della Scala he focused sharply on improving the financial situation of the hospital and rooting out corruption. This included the replacement of several spedalinghi in response to reports that grance and hospitals like those in Grosseto, Prata, and Acquapendente were not offering hospitality as they should. Biringucci also saw to the refurbishment of spedali in ill repair and was responsible for the recovery of the grancia in Castelluccio in 1567. Biringucci accomplished all of this, however, without putting the Balìa’s provisions of 1561 into action.

\textsuperscript{41} As noted in the previous chapter, the documentation does not give a specific reason for Venturi’s resignation but simply states that he gave up the office; see ASS, Ospedale di Santa Maria della Scala, Ricordi e Memorie, N. 183, f. 107v

\textsuperscript{42} Guarini has emphasized that Cosimo’s reforms purposely centralized the state and reserved a portion of the power for himself and his agents (while still allowing the Sienese some autonomy) and also intentionally favoured the ruling class to create an oligarchy with power distributed among the nobility and across the Monti. The power to appoint offices and Cosimo’s personal patronage were a key part of this strategy; see Guarini, “Le Istituzioni di Siena e del suo stato nel Ducato Mediceo,” 54-55.

\textsuperscript{43} ASS, Ospedale di Santa Maria della Scala, Deliberazioni, N. 28, f. 127.

\textsuperscript{44} Banchi, 206.
According to the hospital’s administrative records, Biringucci refused to put the provisions into practice “for the good of the hospital and for his own honour.” This statement has several interesting implications. The first is that Santa Maria della Scala’s administrators, led by Biringucci as rector, clearly understood that the Balìa’s provisions would give the city government increased control over the hospital. The second is that Biringucci viewed the provisions not only as a danger to the hospital but as a danger to the dignity and power of the rector’s office. The addition of external governmental controls to observe and report on the activities of hospital administration, like the claim of the record keepers’ loyalty to the Balìa, would certainly affect the ability of the rector and hospital chapter to act independently, and thereby decrease the prestige and power of the office. Biringucci’s concern was therefore not only for the institution, but also for his own place in Siena’s social and political hierarchy.

For Siena’s nobility, the importance of maintaining (and, if possible, improving) the honour and power of the family had always been at the heart of the factionalism and discord in the city. With the changes wrought in Siena’s social and political order by the city’s annexation to the Tuscan State, as well as the political vacuum left by those families who fled and established themselves in Montalcino after the war, the competition among the nobility in some

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45 “... per utile dello spedale e per honour suo non le volse osservare, si come manco si erano osservate al tempo di detto M. Scipione ...,” ASS, Ospedale di Santa Maria della Scala, Deliberazioni, N. 29, f. 102v.

46 Sienese concepts of honour were so strong that, for example, in his study of Sienese nobility and their economic activity, Giuliano Pinto has argued that Siena’s economic decline was due in part to the nobility’s view of trade and industry as less honourable pursuits than agriculture; other scholars have seconded this idea and emphasized the “landed aristocracy” of Siena. See Pinto, “‘Honour’ and ‘Profit’: Landed Property and Trade in Medieval Siena,” and also Bernadette Paton, “‘Una Città Faticcosa’: Dominican Preaching and the Defence of the Republic in Late Medieval Siena,” both in Trevor Dean and Chris Wickham, eds., City and Countryside in Late Medieval and Renaissance Italy: Essays Presented to Philip Jones (London: The Hambledon Press, 1990): 82-83; 110-111.
ways became more pronounced than ever before.\textsuperscript{47} Factionalism had been a characteristic of Siena’s nobility since the thirteenth century; after the fall of the Nine in 1355 this factionalism became more pronounced and was the source of much discord within the city. As discussed in the previous chapter, political divisions and competition among the elite were so severe in the early sixteenth century that the government was reformed ten times between 1525 and 1552.\textsuperscript{48} After the war and annexation to Florence, this factionalism did not dissipate; rather it intensified as families jockeyed for position in the new political order.\textsuperscript{49} Cosimo I and his successors were well-aware of Siena’s factional divides and consciously used this atmosphere of competition to their advantage. As an office appointed personally by the grand duke, the rectorship of Santa Maria della Scala was a position of power, and as the first rector appointed by the Medici, Biringucci set the precedent.

Biringucci’s refusal to implement the provisions on the grounds of preserving the office of rector also implies a connection between the good of the hospital and the rector’s honour. If the rector, as head administrator, relinquished some control to the city government and, by extension, lost his autonomy, then the prestige and power of Santa Maria della Scala as a regional institution would also decrease. Santa Maria della Scala’s extensive network and patrimony made it a source of power not just in the city but in the countryside as well. The decision of whether or not to implement the provisions thus had significant ramifications on

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\textsuperscript{48} Hook, \textit{Siena}, 172.

\textsuperscript{49} Although it can be said that, under the dominance of an external power, this period brought more unity to the city than it had experienced in previous centuries, it is also true that the new political order inspired the nobility to seek new ways to preserve and obtain family honour. See Paton, “‘Una Città Fatticosa,’” 110-111 and Gregory Hanlon, “The Decline of a Provincial Military Aristocracy: Siena 1560–1740,” \textit{Past & Present} 155, no. 1 (May 1, 1997): 64–108.
several various levels: the personal honour and power of the rector, the ability of the hospital to govern its own affairs, and the control of a vast part of Siena’s rural land and resources.

Furthermore, Biringucci’s choice can also be seen not only as a choice for the good of Santa Maria della Scala and the prestige of the rector’s office, but also as a choice for the Medici. By claiming the right to appoint the rector, Cosimo de’ Medici astutely placed himself in a position to divide Santa Maria della Scala from the city government. Because the Balìa needed the approval of the governor in order to pass the provisions, the provisions were, in a way, endorsed by the Medici government.\(^{50}\) However, since Cosimo appointed the governor to whom the Balia were subject and he also appointed the rector, he had the ultimate authority. As the first Medici-appointed rector, Biringucci was the first to face making a choice between loyalty to Siena’s government or to the Medici. It is likely that Biringucci knew he could choose to ignore the orders of the communal government by framing them as an insult to his office and, by extension, as an insult to the patron from whom he obtained his office and the associated power. Biringucci’s refusal to implement the provisions of 1561 thus serves to validate Cosimo I’s strategy of negotiated absolutism and offers evidence of the duke’s success in winning favour with local nobility.

The Balìa did not press Biringucci over his refusal and a combination of events helped to put the issue of the provisions on hold. From 1561 until 1572, as both the city and Santa Maria della Scala adjusted to a new form of government and continued to recover from the war, Biringucci was able to administer and direct hospital affairs without much interference from the Balìa. Since a key goal of the provisions was to improve the hospital’s economic situation,

\(^{50}\) The provisions are prefaced with the a statement that they have been promulgated “con participatione del molto mag[nifi]co et ecc[elent]o S. Gover[natore] n[ost]ro,” ASS, Balìa, Deliberazioni, N. 173, f. 64r.
Biringucci’s successes in helping the hospital recover its financial footing served as a way to put off the need for the increased oversight. It is also likely that neither the Balìa nor Biringucci wanted to risk an increase of Florentine authority by bringing the issue to the attention of the governatore or Cosimo I. However, by the time of Biringucci’s death in 1572 the Balìa had found its footing under the new system of government and adapted to working within the limitations established by the Reformazione, so they once again turned their attention to Santa Maria della Scala.

In July 1572 Cosimo appointed Biringucci’s replacement, Claudio di Sinolfo Saracini, as rector of Santa Maria della Scala, with a message exhorting the hospital family to receive and obey him, and recognize his authority. Like his predecessor, Saracini refused to institute the Balìa’s provisions, and the matter came to head in April of 1584. On 4 April the hospital chapter held its accustomed meeting, with the Balìa’s ordinances first priority on the agenda. As recorded in the deliberations, the provisions themselves and their history were well known; despite the fact that they had never been implemented, they were still inscribed on a tablet and hung in the chapter meeting room. In sight of this reminder, the main purpose of the meeting was to finally decide whether or not to put the provisions into practice. Accordingly, the chapter debated and by a vote of seven to two determined that because the rector took an oath to uphold all the statutes and ordinances of the hospital, he should observe the Balìa’s regulations as well. Two of the savi, Giulio Venturi and Tommaso Orlandi, were then commissioned to meet with

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51 ASS, Ospedale di Santa Maria della Scala, Deliberazioni, N. 29, f. 10v.
52 This, apparently, was the extent of Venturi’s obedience to the Balìa; “... per utile dello spedale e per honour suo non le volse osservare, si come manco si erano osservate al tempo di detto M. Scipione ...,” ASS, Ospedale di Santa Maria della Scala, Deliberazioni, N. 29, f. 102v.
the governatore to inform him of their decision and seek his help in ensuring that the provisions were enforced.53

The major force behind this debate and vote appears to have been the savi, who, it must be remembered, were comprised of 8-10 noblemen appointed by the Balìa represent the city government in Santa Maria della Scala’s administration. Attendees at the April 4th meeting included (as customary) the rector Saracini, the treasurer, and seven of the savi, with two listed as absent. Although the voting was anonymous, the split makes it safe to assume that the seven votes in favour of enforcing the provisions came from the seven savi present at the meeting, while the two votes in opposition came from Saracini and the treasurer. It seems then, that the Balìa was once again attempting to increase their control over Santa Maria della Scala, this time through their representatives on the hospital’s governing board. The timing of these actions indicates that perhaps the Balìa wanted to take advantage of the fact that Siena had recently acquired a new governatore, Giulio di Alessandro del Caccia; the deliberation records certainly suggest that the savi felt that Caccia would be sympathetic to their request.54 Thus, two of the savi agreed to meet with Caccia and “entreat him . . . to know his mind and his resolve” concerning this “matter of great importance.”55

Unfortunately for the Balìa, the timing of their attempt was also fortuitous for Saracini. While the savi met with the governor in Siena, Saracini took advantage a trip to Florence and brought the issue before Grand Duke Francesco de’ Medici himself.56 In his supplication (as

53 ASS, Ospedale di Santa Maria della Scala, Deliberazioni, N. 29, f. 102r-102v.
54 The previous governor, Federico Barbolani di Manotauto, whose term began in 1567, died in April of 1582. He was replaced by Giulio di Alessandro del Caccia, who went on to serve as governor until his death in 1591.
55 ASS, Ospedale di Santa Maria della Scala, Deliberazioni, N. 29, ff. 104v-105r.
56 Saracini went to Florence for the celebration of the marriage between Francesco I’s daughter Eleanora and Vincezo Gonzaga, which took place on 29 April 1584. It is not clear
found in the deliberation records) Saracini appeared before the duke, offering to provide him with reminders of Santa Maria della Scala’s established statutes and ordinances, and followed this with a request that Francesco give him any instructions which “appear necessary” for management of the hospital. These instructions, Saracini assured the grand duke, would allow him to fulfill his duties as rector and serve the grand duke “with more peace and satisfaction to both spirit and body.”

In the meantime, another chapter meeting was convened on 18 May, during which Giulio Venturi and Tommaso Orlandi reported that the governatore Caccia had refused to assent to their proposal on the grounds that he could not offer a ruling until Saracini returned from Florence. Caccia knew that Saracini intended to consult with the grand duke and that he would likely return with orders from Francesco. As Caccia predicted, when Saracini arrived in Siena a few days later he did indeed bring with him orders from the grand duke. First among Francesco’s instructions was the assertion that all additions and augmentations which had been made to the hospital’s administrative policies were costly and should be set aside. Specifically responding to the conflict between the rector, the savi, and the Balìa over the provisions of 1561, the grand...
duke commanded that Santa Maria della Scala should continue following its ancient statutes and throw out all “new things.” He also decreed that the hospital should not put anything into action unless it was his express order.60 With the matter thus settled, the chapter moved ahead with the selection and ratification of officers for the year, “as accustomed in other years and as anciently observed without putting into practice new things, according to the orders of [the grand duke].”61 This entry in the deliberation records marks the last time that the issue of the provisions was ever raised, and the last time the Balìa made a concerted effort to exert authority over Santa Maria della Scala.

Thus, in the case of the Balìa’s provisions of 1561 and the ensuing twenty-three year period of negotiation between the rector, the city government, and the Medici dukes, the economy of power shifted so that authority of the centre succeeded in limiting the power of the periphery. This change occurred without much cost or energy expended by the Tuscan state; rather it was local tensions and resistance between the rectors and the Balìa, brought on by the new political order and exacerbated by the competition for power among Siena’s elite, that acted as the agent of change. While the city government framed their efforts to regulate Santa Maria della Scala as a means to preserve an essential state agency and ensure that Siena recovered from the war by providing effective relief for both urban and rural poor, both the rectors Biringucci and Saracini understood that controlling the wealth and resources of the hospital was a way for the city government to increase and maintain power. For the rectors, appointed by the Medici

60 “Non si mettino in esecuzione cose nuove, e non mai messe ad effetto, se non c’è l’ordine nostro espresso,” ASS, Ospedale di Santa Maria della Scala, Deliberazioni, N. 29, f. 105v.
61 “. . . il detto S. Rett.re domando venirsì al appr ovatione o reprovatione delli Grancieri offitiali e Ministri del detto Hospitale secondo il solito delli altri anni et anticamente osservato senza mettere in esecutione cose nuove secondo l’ordine di S.A. . . .,” ASS, Ospedale di Santa Maria della Scala, Deliberazioni, N. 29, f. 106r.
dukes, their office and power over this key charitable institution provided a means of establishing their own place of power and influence in the new political and social world of Siena. Recognizing that any encroachment on the office of rector by the Balìa would diminish its significance, Biringucci simply refused to institute the provisions and Saracini chose to turn to the central authority for a final ruling on the issue.

This incident illustrates quite clearly the usefulness of understanding the power dynamics between the Florentine centre and the Sienese periphery in terms of geographies, or an economy, of power. This case shows how local power dynamics played a central role in shaping the distribution of power between centre and periphery and, in this instance, how local competition could enhance the power of the centre. Unlike the cases of Cortona and other Tuscan towns where the local elite were generally united in attempts to preserve local power and autonomy in resistance of Florentine authority, the Sienese elite allowed the factionalism and competition that characterized Siena to raise tensions within the city which the Medici were able to exploit. While some in the Sienese state sought to consolidate and preserve local authority, others attempted to solidify a place for themselves in the centre by courting the favour of the Medici. The Medici Dukes, in turn, took advantage of these divisions. Had Siena’s elite instead been united in their opposition of Medici authority, it may not have been so easy for Santa Maria della Scala to fall out of communal hands.\(^2\) With the ultimate ruling on the provisions of 1561, the precedence of

\(^2\) The case of Bologna and the Papal States, for example, provides evidence that local factionalism did not necessarily result in an increased loss of autonomy. In Bologna, there was great disagreement amongst political factions over the mode and means of charity in the city, but unlike Siena’s elite the Bolognese were united in the goal to keep the Papal states from interfering in government as much as possible. Thus, while divisions existed at the local level the nobility were careful to project unity in all their dealings with Rome. See Nicholas Terpstra, “Republicanism, Public Welfare, and Civil Society in Early Modern Bologna,” in Gian Mario Anselmi, Angela De Benedictis, and Nicholas Terpstra, eds., \textit{Bologna. Cultural Crossroads}}
grand ducal authority was established, paving the way for interaction and collaboration between the periphery and the centre to create new forms of administration.

Siena as a Tuscan periphery, Part II: The Medici Grand Dukes and Local Authorities in Siena, 1587-99

Francesco de’ Medici’s response to the Balia’s provisions deliberately curbed the power of the savi and, by extension, the city government’s ability to participate in the administration of Santa Maria della Scala. Saracini’s request for the duke’s intervention had preserved the authority of the rector, but it also opened the door for increased Medici interest and involvement in the hospital’s affairs and a stronger relationship between the rector and the duke. For example, in 1586, Saracini, having served for fourteen years as rector and reached the age of seventy, attempted to retire and relinquish his office. However, the grand duke commanded Saracini to retain his position, promising the he would see to it that Siena’s governatore “embraces the interests of the hospital” to defend and favour it just as Francesco would himself.63 Saracini, of course, abided by this request and served as rector for another ten years. For his part, Francesco took a more active interest in the hospital’s financial status and, as correspondence with Caccia shows, commissioned various report and reviews of Santa Maria della Scala’s finances, along with those of other lay and religious institutions in the city.64 Ferdinando de’ Medici, who acceded to the ducal throne upon Francesco’s death in 1587, followed his brother’s lead, using

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63 “... e che commessa et ordini al S.r Gov.re di Siena che abbracci l’interessi di quello Spedale come cosa propria di V.A.S. che in effetto è, et lo defenda e lo favourisca dove la giustizia e l’honesto lo ricerchì . . . .” ASS, Ospedale di Santa Maria della Scala, Deliberazioni, N. 29, ff. 146v-147r.

64 Although I have not been able to locate the reports themselves, the correspondence regarding them can be found in ASF, Medici del Principato, Governi di città e luoghi soggetti, Siena, N. 1878, ff. 122r, 124r-125r, 175v.
the hospital’s network to expand Medici patronage in the Sienese state and actively promoting measures to reform hospital administration and statutes. These efforts helped to consolidate central power over Santa Maria della Scala and convert the hospital into an arm of the Tuscan state.

One of Grand Duke Ferdinando’s first moves to bring the hospital under firmer central control and use its network to his advantage was to confer membership in the Order of Saint Stephen (Sacro Militare Ordine di Santo Stefano) on the heads of several of Santa Maria della Scala’s subject hospitals. This quasi-military order established by Cosimo I de’ Medici in 1562 was one of the ways the Medici created patronage ties with local elite throughout the Tuscan state, and the Order was especially popular among Sienese nobility. Between 1562 and 1699 over 350 Sienese noblemen joined the Order, meaning that about 1 in every 10 members was from Siena. Membership and service in the Order was one way for the nobility to bring honour to their families (especially since membership could be passed from father to son), and there were tax benefits associated with membership as well. Most significantly, these benefits included exemption from both state and church taxes on land owned by or donated to the Order and its members.

With the grand duke as head and patron of the Order, this placed a good deal of wealth and resources at his disposal. Perhaps seeking to create further ties to additional resources, Ferdinando, with Saracini’s agreement, bestowed membership in the Order of St. Stephen on the rectors of Santa Maria della Scala’s subject hospitals in Barberino, Poggibonsi, and Monte San

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Saracini’s only qualification to this request was that the Medici and the Order acknowledge that the hospitals still belonged to the jurisdiction of Santa Maria della Scala and not to the Order. This was no doubt in order to prevent the hospitals and their holdings from being removed from Santa Maria della Scala’s patrimony. Still, by successfully creating a connection between these hospitals and the Order Ferdinando gained access to their resources and it was unlikely that Saracini or his successors would deny a request by the grand duke for use of those resources in the future.

Beyond creating these subtle ties of power between Santa Maria della Scala and Medici authority, in 1592 Ferdinando also took more concrete action to consolidate control over the hospital with the institution of a Riforma delle Costituzioni dello Spedale. This reform of the administration and operation of Santa Maria della Scala increased Medici participation in hospital governance and decreased the power of the savi and the local government in several key ways. First, Ferdinando’s Riforma re-affirmed the right of the grand duke to personally appoint the rector, emphasized the rectorship as a life-long office, and confirmed the duties and obligations of the rector as given in other hospital ordinances. Second, after reinforcing the relationship between the Medici dukes and Santa Maria della Scala’s rectors, the Riforma introduced the creation of a new administrative body called the Consulta dei quattro consiglieri.

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66 Since the rector of Monte San Savino was a member of the Saracini family, this shows further favour of the grand duke towards that family and likely influenced Saracini’s agreement; see ASS, Ospedale di Santa Maria della Scala, Deliberazioni, N. 19, f. 188v.
67 Banchi, I Rettori, 213.
68 The connection between the Order of Santo Stefano and Santa Maria della Scala, as well as the families that were involved, is a topic that needs to be explored in greater detail and is something that I hope to treat in more depth in future research.
69 A copy of these reforms can be found in ASS, Governatore, N. 1045, no foliation or pagination; another copy can be found in ASS, Ospedale di Santa Maria della Scala, Privilegi, N. 116, ff. 79v-81v.
Finally, the reforms contained a number of provisions meant to improve and regulate the financial affairs of the hospital.\footnote{Twelve out of the twenty-six capitoli that make up the reforms deal with financial reporting and regulations in some way; see ASS, \textit{Governatore}, N. 1045.}

The emphasis on the relationship between the rector and the grand duke in the \textit{Riforma} suggests how significant this connection was in terms of increasing central authority over Santa Maria della Scala. However, the real innovation in the reforms which demonstrates a more concerted effort by the centre to control the hospital is the creation of the \textit{Consulta dei quattro consiglieri}. Made up of four men personally appointed by the duke, it appears that Ferdinando intended for the hospital’s consiglieri to mirror the quattro consiglieri who served as an advisory council for Siena’s Florentine governatore, who were also hand-selected by the grand duke. To make the consulta at least appear to be a representative body, the consiglieri could not be from the same family and the duke was to choose one councilor from each of the four monti in Siena.\footnote{“Si eleggeranno parimente da Noi, e nostri successori li quattro Consiglieri di ciascun’anno in Calende di Gennaro per distribuzione di Monti, li quali non siano della medesima famiglia,” ASS, \textit{Governatore}, N. 1045, [n.f.], cap. 7.}

The duty of the \textit{Consulta} as given in the \textit{Riforma} was to oversee the administration of Santa Maria della Scala on the duke’s behalf. This included meeting with the rector every fifteen days to review the hospital’s needs and problems. Based on their deliberations they were to help the rector prepare the agenda for monthly chapter meetings and approve the agenda by at least two-thirds agreement.\footnote{ASS, \textit{Governatore}, N. 1045, [n.f.], cap. 7-8.} If the goal of the reforms was to increase administrative efficiency, then the institution of a second governing body and additional deliberative meetings, as well as another level at which action items must be approved, seems counter-intuitive. But Ferdinando’s purpose was not necessarily to increase efficiency: rather, the idea behind the institution of the...
*quattro consiglieri* was to give the rector, the governatore, and, by extension, the Medici dukes, more control over the actions and voting of the hospital board. According to Ferdinando’s reforms, the hospital board could only deliberate on matters included on the agenda prepared by the rector and the four councilors, and if the board denied any of their proposals the rector and the *consiglieri* had the power to intervene in their decisions. If a two-thirds agreement could not be reached, the matter was taken to the governatore for resolution.\(^7\)

A two-thirds majority was crucial in both the meetings of the rector and *consiglieri* and the board meetings. In fact, there is quite a heavy emphasis on the chain of command and the necessity of having a sufficient number present in order for measures to be passed. If, for some reason, one of the consiglieri could not be present for the meetings, the Governatore was instructed to select a temporary replacement. Likewise, board meetings could not proceed unless at least six of the eight savi were present. The importance of the consiglieri to the deliberations of the hospital board is further emphasized in the *Riforma* by the statement that the Rector cannot remove any officers of the hospital, including the administrators of the grance and the spedali di fuori, without consulting the quattro consiglieri.\(^8\)

Thus, the creation and addition of the quattro consiglieri was clearly a move by the grand duke to decrease the power of the hospital chapter and prevent the savi from acting as agents of the Balia. In fact, the insertion of the consiglieri into the deliberation and approval process removed the power of the savi to take disputes to the Balia for resolution.\(^9\) Ferdinando also made it clear that although the Balia could continue to appoint the savi and the savi were still obligated to fulfill the responsibilities given to them to participate in and transact hospital

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\(^7\) ASS, *Governatore*, N. 1045, [n.f.], cap. 19, 21.
\(^8\) ASS, *Governatore*, N. 1045, [n.f.], cap. 7-8, 19-20.
business, they could only do all these things “without diminishing any of the authority given to
the Rector and the consiglieri by these Reforms.”

By clearly establishing the authority of the
rector and consiglieri over the savi, Ferdinando’s reforms successfully restrict the Balìa’s power
without entirely cutting them off. Through the savi the Balìa could still participate in Santa Maria
della Scala’s administration, but only under the direction of the hospital’s grand ducal
authorities. In this way, these reforms seem to address Biringucci’s view of the Balìa’s 1561
provisions as an insult to the honour of the rector’s office.

Not only did the 1591 reforms limit the power of the savi, they also granted authority to
the consiglieri that extended beyond administrative responsibilities. Just as the Balìa’s provisions
of 1561 had tried to set up the savi as visitors and regulators of the entire hospital institution,
Ferdinando’s reforms grant similar powers to the consiglieri. These include the charge to select
two of their number each month to visit the various divisions of the hospital to ensure that each
was operated in accordance with Santa Maria della Scala’s statutes. They were particularly
instructed to visit the hospital’s pharmacy and check to see that all medicines and remedies were
prepared with fresh ingredients, and to visit the young girls and women of the hospital to ensure
that the girls were appropriately raised and the women abided by the rules of enclosure.
Furthermore, the quattro consiglieri were given the power to confer with the camarlingo and
audit hospital accounts to see that alms were distributed properly.

As if the addition of the quattro consiglieri was not enough to fully insert ducal authority
into Santa Maria della Scala’s administration and decrease the role of the city government,

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76 “... e tutto questo s’intenda senza diminuzione alcuna dell’autorità, che si da per la
Riforma al Rettore, e consiglieri.” ASS, Governatore, N. 1045, [n.f.], cap. 19. Ferdinando did
give one concession to the Balìa in his reforms: the council is given the power each year to elect
two men to serve as “calcolatori generali” to review and audit the hospital’s accounts.
77 ASS, Governatore, N. 1045, [n.f.], cap. 15-17, 23.
Ferdinando also created the office of coadiutore, or “helpers.” These were two men, independent of other hospital offices, appointed by the grand duke and designated to serve as assistants to the rector or, essentially, as vice-rectors. As evidenced by his request for retirement six years prior, Saracini’s age and ill health left him no longer able to be fully, actively involved in his duties as rector. Rather than allow Saracini to retire, Ferdinando took advantage of the opportunity to place more Medici-appointed authorities in the hospital by creating the office of coadiutore.

This proved significant when the *Riforma delle Costituzioni dello Spedale* were put into effect in January 1592. Only two of the eventual four consiglieri had been appointed when the first board meeting took place, but at the first meeting of the Consulta (the council made up of the consiglieri and the rector) just a month later, all four consiglieri had been appointed and were in attendance. Saracini, however, was absent due to ill health and was instead represented by Antonio Beringucci, recently appointed by Grand Duke Ferdinando as the first coadiutore. Nothing momentous took place during the meeting; aside from filling vacant positions in the hospital hierarchy (including grancieri for seven of the grance) and discussion of a few properties donated to the hospital, the proceedings were fairly mundane. The significance of the Consulta meeting lies instead in what it represented: the first time that deliberations were held for the administration of Santa Maria della Scala by a board composed entirely of officers appointed by the Medici government. While all of these men were Sienese, their ties of loyalty and patronage were given more directly to the grand duke who appointed them, rather than the communal government of Siena. Thus, Ferdinando effectively stripped the Balìa of any real

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78 ASS, *Ospedale di Santa Maria della Scala*, Deliberazioni, N. 29, f. 146v-147r.
79 ASS, *Ospedale di Santa Maria della Scala*, Deliberazioni, N. 29, f. 212v. Fulvio Spinelli and Augusto Cerini were the two consiglieri.
80 ASS, *Ospedale di Santa Maria della Scala*, Deliberazioni, N. 29, f. 212r.
81 ASS, *Ospedale di Santa Maria della Scala*, Deliberazioni, N. 29, f. 213v.
power or control they might have exercised through the administration of Santa Maria della Scala. The Consulta dei quattro consiglieri continued to function for the remainder of Saracini’s term as rector, and the deliberation records show that the Consulta met faithfully and debated the issues prior to each monthly board meeting.\(^{82}\) In September of 1593 Ferdinando’s reforms were finally read before the Balìa, but solely for the purpose of information since the council no longer had power to ratify or disagree with the reforms.\(^{83}\)

In the same way that the provisions of 1561 provide insight on the ways in which Cosimo I de’ Medici negotiated power with subject territories, the reforms of 1592 affirm that his successors continued to use similar strategies. Although the Riforma established a new, centrally controlled administration for Santa Maria della Scala, it also signified the style of collaboration between the centre and the periphery favoured by the Medici. The Riforma certainly replaced a more Siena-centric form of administration, but the process so was not simply one of removing the local and inserting the central. Rather, elements of central control were combined with local administration, and the two together formed a new bureaucracy. While this new administration was not as ultimately successful as the grand duke hoped, the push and pull which occurred between the Medici, the Balìa, and Santa Maria della Scala’s rectors functioned as a sort of collaboration between centre and periphery that led to the creation of centralized bureaucracies in which local authorities felt they had a place. The Riforma mark the first real step in a process that led to a new system of administration by the end of the sixteenth century.

In addition to the political motivations behind the grand duke’s reforms of Santa Maria della Scala, he was likely also motivated by genuine concerns about the financial state of the

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\(^{82}\) The meetings are distinguished from each other in the margins of the records with the identifiers “Consulta” and “Capitolo.”

\(^{83}\) ASS, Ospedale di Santa Maria della Scala, Deliberazioni, N. 29, f. 242v.
hospital and its daily operations. As the central source of charity and poor relief in Siena and the surrounding countryside, and an important resource for the government, it was imperative that Santa Maria della Scala maintain itself and its network. However, as previously noted, after the war ended in 1555, both urban and rural areas struggled for decades to recover economically and demographically. Conditions worsened during the 1590s, as Europe experienced a general crisis that included repeated outbreaks of disease and famine across the decade.\footnote{Brian Pullan, “The Roles of the State and the town in the General Crisis of the 1590s,” in Peter Clark, ed., \textit{The European Crisis of the 1590s: Essays in Comparative History} (London: G. Allen and Unwin, 1985): 288-289.} Bad weather, heavy rain, flooding (a particular problem in Tuscany), and cold summers led to inconsistent harvests. Poor harvests were especially problematic since population increases in Tuscany from 1550-1580 meant that the grain supply struggled to meet the demand.\footnote{For example, the population of Florence rose 35 percent between 1551 and 1589; see N.S. Davidson, “Northern Italy in the 1590s,” in Peter Clark, ed., \textit{The European Crisis of the 1590s: Essays in Comparative History} (London: G. Allen and Unwin, 1985): 158.} The result, of course, was drastic fluctuation in the price of grain, as Tuscany imported grain from the north to try and compensate for the dearth in local harvests.

In Florence between 1560 and 1590 the cost of grain rose 140 percent; this was combined with “violent fluctuations” in which the price of grain could raise as much as 33 percent in one month.\footnote{During the 1580s in Modena grain prices doubled from previous decades; in 1590s Venice prices were 90 percent higher than in the 1560s and 70s. See Davidson, “Northern Italy in the 1590s,” 158.} This trend can be clearly observed in terms of the grain prices in Siena as well, as Table 4 demonstrates. The table shows that although grain prices were high in the first two years of Medici rule (1557-1559), prices generally remained between 40-50 soldi per bushel, with occasional moves above and below that line until the 1590s. After 1590, however, and continuing until 1597 the price of grain in Siena never dropped below 80 soldi per bushel and
ventured as high as 135 soldi per bushel. These high prices sustained over a period of seven years speak to the impact that the general crisis had on Siena.

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<td>1597</td>
<td>124.89</td>
<td>98.99</td>
</tr>
<tr>
<td>1576</td>
<td>49.94</td>
<td>48.80</td>
<td>1598</td>
<td>79.07</td>
<td>67.27</td>
</tr>
<tr>
<td>1577</td>
<td>48.87</td>
<td>52.83</td>
<td>1599</td>
<td>66.71</td>
<td>65.71</td>
</tr>
<tr>
<td>1578</td>
<td>58.48</td>
<td>67.21</td>
<td>1600</td>
<td>67.34</td>
<td>81.22</td>
</tr>
</tbody>
</table>

Table 5. Average Price for one staio of grain in Siena, 1557-1600 (in soldi and cent. di soldo)\(^{87}\)

High grain prices made charitable institutions like Santa Maria della Scala even more crucial to the survival of urban and rural populations. Accordingly, governments across Italy and Europe began to devote increased attention to the organization and finance of charitable institutions. There are numerous examples, as Pullan explains, of efforts “on the part of governments – or at least of individual governors – to analyse the problems of rural poverty; to confront those abuses which caused losses of the people through starvation and emigration, and

\(^{87}\) Table excerpted from larger table of grain prices found in Giuseppe Parenti, *Prezzi e Mercato Del Grano a Siena (1546-1765)* (Firenze, C. Cya, 1942), 45.
which choked the towns in time of dearth with thousands of unwelcome petitioners for relief; to think of attacking causes, rather than merely of devising palliative measures." However, Cavallo’s work on charity in Turin and Garbellotti’s work on Verona both suggest that although such efforts resulted in increased regulations, they did not provide real solutions to increasing the self-sufficiency and improving the financial problems of charitable institutions. However, in both cases the city governments of Turin and Verona passed regulations and appointed administrators, but this was the extent of their involvement. In Siena, the situation differed, because Siena’s communal government took an interest and participated in hospital administration through the appointment of the savi as early as the fourteenth century, and the Medici dukes likewise cultivated a relationship with the hospital. Ferdinando’s actions indicate that he was certainly one of the governors described by Pullan, as evidenced by his reform of Santa Maria della Scala and his awareness of the needs of the Sienese state.

88 See Pullan, “The Roles of the State and the town in the General Crisis of the 1590s,” 297; also, Davidson, “Northern Italy in the 1590s,” 168.
89 Cavallo’s work has shown that Italian charitable institutions in the seventeenth through nineteenth centuries relied on a mix of private and public funding, with private sources carrying the heavier burden; see Sandra Cavallo, “Charity as Boundary Making: Social Stratification, Gender and the Family in the Italian States (Seventeenth – Nineteenth Centuries),” in Hugh Cunningham and Joanna Innes, eds., Charity, Philanthropy, and Reform: From the 1690s to 1850 (New York: St. Martin’s Press, 1998): 108-129. Garbellotti’s work on Verona examines interactions between the Venetian government and Verona’s city officials regarding public charity and poor relief, showing that although government at both levels instituted a number of regulations to improve reporting and efficiency, neither government offered real solutions to the issues at hand; see Marina Garbellotti, “Assets of the Poor, Assets of the City: The Management of Hospital Resources in Verona between the Sixteenth and Eighteenth Centuries, in Henderson, et al., The Impact of Hospitals, 117-131.
90 Garbellotti asserts that although city officials appointed administrators, “. . . they did not take part in the hospital council meetings nor did they discuss welfare policies or give any indications about administration. The city authorities, however, acknowledged the major social role of charitable institutions which were rewarded with measures safeguarding their economic situation.” See Garbellotti, “Assets of the Poor, Assets of the City,” 118.
In fact, the grand duke was well-informed and well-aware of the problems besetting the Stato Nuovo. Reports from Siena, produced under the commission of Ferdinando, detail severe problems in the city and countryside at this period. For example, in 1593 Florentine officials conducted a review of the Stato Nuovo and compiled a report detailing the income and expenditure of the major Sienese towns and villages as well as the population and physical state of each location. The chart below represents a sample of some of the data collected on locations where Santa Maria della Scala owned land and administered hospitals, and offers a concrete idea of the need for poor relief throughout the Sienese state.\footnote{ASF, Mediceo del Principato, N. 2015, ff. 1v-3r, 35v-36r, 41v-42r, 56v-57r, 69v-70r, 88v-89r, 92v-93r. The first folio of the volume describes it as: “Ristretto et compendio di tutte l’entrare et spese Publiche dello stato di Siena . . .”}

<table>
<thead>
<tr>
<th>City</th>
<th>Income</th>
<th>Expenditure</th>
<th>Notes on Physical Condition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grosseto</td>
<td>6964 lire</td>
<td>10297 lire</td>
<td>The walls of the fortress are under repair; there are 1000 inhabitants with few land owners; the air of the area is not good.</td>
</tr>
<tr>
<td>Istia</td>
<td>4050 lire</td>
<td>2528 lire</td>
<td>The walls are broken and buildings are in ruins; the air is bad and there are at least 150 poor inhabitants; the Grancia di Spedaletto had an income of 40 scudi for the year 1592, including its goods and property.</td>
</tr>
<tr>
<td>Buonconvento</td>
<td>1854 lire</td>
<td>905 lire</td>
<td>Good walls; the hospital is of little use to the community.</td>
</tr>
<tr>
<td>Prata</td>
<td>None given</td>
<td>250 lire</td>
<td>Still belongs to the Spedale della Scala; the town sends 10 lire each year to Santa Maria della Scala.</td>
</tr>
<tr>
<td>San Casciano</td>
<td>5457 lire</td>
<td>4249 lire</td>
<td>Walls in decent condition.</td>
</tr>
<tr>
<td>Serre</td>
<td>795 lire</td>
<td>1071 lire</td>
<td>Broken walls; inhabitants are very poor.</td>
</tr>
<tr>
<td>San Quirico</td>
<td>1596 lire</td>
<td>1494 lire</td>
<td>Good walls; around 1500 poor inhabitants.</td>
</tr>
<tr>
<td>Asciano</td>
<td>1491 lire</td>
<td>1437 lire</td>
<td>Walls in ruins; there are 5400 inhabitants in the towns and surrounding villages who are generally poor; the hospital had an income of 150 scudi in 1592.</td>
</tr>
</tbody>
</table>

\textbf{Table 6.} Data excerpted from: “Ristretto et compendio di tutte l’entrare et spese Publiche dello stato di Siena . . .,” A.S.F., Mediceo del Principato, N. 2015, fols. 1v-3r, 35v-36r, 41v-42r, 56v-57r, 69v-70r, 88v-89r, 92v-93r. 

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What seems to stand out most in all the data which Cosimo Acciaioli, the official who compiled the report, chose to include is an emphasis on the general poverty of the people and the disrepair of the Sienese state. While a number of the areas had an income which exceeded their expenditure, several of these such as San Quirico and Asciano did so by less than 100 lire.\textsuperscript{92}

Even in locations where the income far exceeds expenses, such as Istia, there were still problems with crumbling walls and ruined buildings, as well as poverty among the people.\textsuperscript{93} Of special note are what Acciaioli’s assertions indicate regarding the role of Santa Maria della Scala in these locations: it appears from this report that while some grance and spedali (such as Spedaletto) had a good income and benefitted the community, in many other places widespread poverty was not kept at bay.

In addition to the information above, Acciaioli’s report also contained statistics on the population of the Sienese state and a description of its people generally. The population for the entire Stato Nuovo is given as 150,000 households, with 17,600 households in the city of Siena, 4,500 in the suburbs of the Masse surrounding the city, and 93,000 households throughout the rest of the countryside. Acciaioli then offers the following description of these households: “The people of this state are generally poor, as are generally those of the city of Siena, and these principally practice agriculture and raise livestock and are abundantly rich in oil and wine for the needs of the state, but in general there are few farmers; and were the people more industrious with the size and abundance of the land their business could be amplified and they be made more wealthy and rich men.”\textsuperscript{94}

\textsuperscript{92} ASF, Mediceo del Principato, N. 2015, ff. 88v-89r, 92v-93r.
\textsuperscript{93} ASF, Mediceo del Principato, N. 2015, ff. 2v-3r.
\textsuperscript{94} “Li populi di questo stato sono Generalmente poveri si come sono gener[a]le quelli dello Citta di Siena e quelli principalmente si esercitano nella agricoltura et in bestiami et sircio e olii et vini abondantemento p[er] il bisogno dello stato er in generale ci sono pochi contadini et si
These poor conditions are reflected in reports on the condition of Santa Maria della Scala from the same period. After the institution of his reforms, Grand Duke Ferdinando requested that the newly-appointed governor of Siena, Tommaso Malaspina, visit Santa Maria della Scala and assess the state of the hospital, its network, and its financial affairs. In September of 1592 Malaspina sent a report of his visit to the grand duke, stating that despite the new mode of government instituted by the reforms, the hospital unfortunately suffered from inattentive leadership. The problem, according the Malaspina, lay with Antonio Beringucci who, since his appointment as coadiutore in 1591, had essentially served as rector in Saracini’s stead.\textsuperscript{95} Although in Malaspina’s estimation Beringucci was “of a good mind, well-meaning and willingly does [his duty] with constancy and diligence,” the trouble was that “he does not reside in the hospital, but a half-mile away and in the end is not continually present [to attend to] the care and business of the hospital.”\textsuperscript{96} The lack of a physically present administrator, Malaspina explained, made it appear as if Beringucci did not intend to remain in the office of coadiutore beyond the term assigned by the grand duke, and this led to a sense of laziness among hospital staff who did not act with diligence in fulfilling their own duties and avoided tasks deemed inconvenient.\textsuperscript{97}

In addition to problems at the administrative level, Malaspina expressed special concern for the state of Santa Maria della Scala’s female population. Despite what he assumed were

\textsuperscript{95} ASS, \textit{Ospedale di Santa Maria della Scala}, Deliberzaioni, N. 29, f. 212r.


\textsuperscript{97} A.S.F, \textit{Mediceo del Principato}, N. 1891, f. 144r.
Beringucci’s good intentions for the care of the hospital’s women and children, their living conditions were far from ideal: the female staff resided in rooms which were filthy and old and the women slept up to four per bed. The twelve wet nurses resident at the hospital, each responsible for nursing two to three children, did not receive an adequate diet. These conditions no doubt increased the difficulty of daily life, made service unpleasant, and were not conducive to the care of body and soul which Santa Maria della Scala pledged to provide. Instead of blaming a specific practice, policy, or individual for the problems, Malaspina seems anxious in his report to emphasize that these issues were not caused by willful neglect on the part of Beringucci and the administration. Rather he emphasized that the administration simply needed to be reminded to attend to these problems and become more active in fulfilling their duties.

Aware of Malaspina’s visit and impending report to the grand duke, and perhaps wishing to counter-act any accusations or disparaging commentary he might make, Fulvio Spinelli, one of the newly appointed consiglieri, sent his own letter to Ferdinando. Dated two days prior to Malaspina’s report, Spinelli’s letter first acknowledges the governatore’s visit and then proceeds to assure the grand duke that despite appearances to the contrary, the new form of hospital governance was working. Spinelli states that “every day things will be a little better,” and that, notwithstanding the difficulties they face, the new administration “does not fail in attending to the benefit and good government of [the hospital].” Perhaps as proof of his assertions

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98 ASF, Mediceo del Principato, N. 1891, f. 144r-144v.
99 Malaspina’s report does allude to one discovered instance of corruption and malevolence among the administration, but he does not go into details since the offending parties had already been removed from office and the problem solved. A.S.F, Mediceo del Principato, N. 1891, f. 144r.
100 “. . . nondimeno no[n] si mancato d’attendere al benef[i]to e buon reggim[ent]o del luogo e ogni giorno piu sarà meglio,” ASF, Mediceo del Principato, N. 1891, f. 146r.
regarding their attention to conditions in the hospital, Spinelli informs Ferdinando that two men who worked in the infirmary who were not doing their duty were dismissed from service.

However, Spinelli’s confident letter was received simultaneously by a contradictory letter from one of these two men, a junior doctor named Giovanni da Pietra, addressed to the grand duke in the form of a petition. Beginning in May of 1591 da Pietra worked as a junior doctor in Santa Maria della Scala’s infirmary, but in early September 1592 he was dismissed from the hospital. Requesting that Ferdinando restore him to his position, da Pietra’s letter explains that Beringucci dismissed him on accusations of arrogance and conflict with others on the hospital staff. Rather than refute the accusations, da Pietra accepts them and offers an apology for his behavior. He also provides an explanation for his behaviour, which demonstrates to a small extent the challenges the hospital staff faced and how the inattentive administration exacerbated those problems. According to da Pietra, during the nearly 15 months he worked in the infirmary he treated over 300 patients, a substantial number even for a hospital as large as Santa Maria della Scala. Not only did this involve long hours of work, but he also spent 20 scudi of his own funds on medical supplies, since, he explained, his salary was not enough to maintain the good reputation required by his profession.101

Although it appears that Ferdinando did not grant da Pietra’s request for re-instatement, the doctor’s petition to the grand duke is indicative of the daily problems and challenges faced by those who worked and served in Santa Maria della Scala, as well as the responsibilities of the administrators who oversaw their labours. When taken together with Malaspina’s report on the conditions of the female staff, da Pietra’s letter serves as a reminder that despite the good

intentions of Beringucci and other officials, a disconnect existed between the ideals of administration and actual practice. On the other hand, if Spinelli’s letter is to be believed, with the implementation of Ferdinando’s reforms conditions were improving, and given time there was the possibility that these problems could be corrected.\(^\text{102}\)

These conflicting accounts of hospital conditions no doubt influenced the grand duke’s decision to take action. Prompted by Malaspina’s suggestion that Beringucci did not wish to continue his service as coadiutore when the term was up, in June 1593 Ferdinando replaced Beringucci with Pindaro Allegretti. The grand duke gave Allegretti full power to govern and administer the hospital on Saracini’s behalf, so that Saracini retained the title and privileges of the office of rector, but Allegretti held the actual power to govern.\(^\text{103}\) A few months later, Saracini contracted a fever and, after several days of intense illness, passed away on 5 October 1593. Allegretti oversaw the funeral and burial of Saracini and, since he had already received the power from Ferdinando, he continued to govern the hospital as an interim rector, aided by the consiglieri and the rest of the hospital board.\(^\text{104}\)

Originally, Allegretti’s term as vice-rector was meant to last a year, but Ferdinando extended his term of service so that Allegretti, always with the consultation of the consiglieri, directed Santa Maria della Scala’s administration for three years. Allegretti never officially received the title or office of rector and at first the records rarely refer to him as such, except in the case of a few letters signed: “The Rector and Councilors delegated to govern the Hospital of

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\(^\text{102}\) Of course, Spinelli’s letter can also be read as a concerned administrator’s attempt to ensure that he does not lose his position; ASF, Mediceo del Principato, N. 1891, f. 146r.

\(^\text{103}\) ASS, Ospedale di Santa Maria della Scala, Deliberazioni, N. 29, f. 240v.

\(^\text{104}\) ASS, Ospedale di Santa Maria della Scala, Deliberazioni, N. 29, ff. 244r-245v.
Santa Maria della Scala of Siena,” and the recorded proceedings of several chapter meetings.105 However, over time Allegretti assumed the title and by 1595 was consistently referred to as the rector of Santa Maria della Scala. When the grand duke and his wife visited Siena in June of 1596, it is likely that Allegretti expected to be officially confirmed rector, based on his long service as both coadiutore and vice-rector. However, after making a show of goodwill by taking nominations from the Balìa, Ferdinando selected Pio d’Ambrogio Nuti as Santa Maria della Scala’s new rector.106 Nuti was the son of famous Sienese ambassador and scholar Ambrogio Nuti, and he was also the abbot of the Monastero degli Olivetani just outside the city. As such, Nuti became the first ecclesiastic appointed to the office since Carlo d’Agnolino Bartali served as rector from 1410-1427.107

Nuti’s appointment as rector was a calculated move from Ferdinando, reminiscent of his father Cosimo’s strategy of negotiated absolutism. Ferdinando recognized that his reform of the hospital had raised tensions rather than solved problems, and that the lax administrative attitude potentially derived from his alienation of the savi and the Balìa from hospital administration. Thus, the grand duke selected a rector capable of bringing balance between the savi and consiglieri, while still ensuring the primacy of Medici authority. Under Allegretti’s leadership the savi had continued to be appointed by the Balìa each year, but their role in hospital affairs steadily decreased as the consiglieri became more entrenched as part of Santa Maria della Scala’s

105 This example comes from a letter to the Bishop of Todi regarding the hospital of Santa Caterina; there is also a letter to the grand duke regarding the same issue which is just signed “Pindaro Allegretti of the Councilors delegated to govern the Spedale Grande of Siena”; see ASS, Ospedale di Santa Maria della Scala, Deliberazioni, N. 29, ff. 259r, 260r.
106 ASS, Ospedale di Santa Maria della Scala, Deliberazioni, N. 30, ff. 6v-7r.
107 His father, Ambrogio Nuti, had negotiated with the Florentines on behalf of the hospital several times and was a frequent correspondent of the rector at the time, Scipione Venturi.
Thus, one of Nuti’s first acts as rector was to reaffirm the importance of the savi.

This was accomplished by reminding the hospital board and the consiglieri that Ferdinando’s *Riforma* gave responsibilities to and made room for both the consiglieri and the savi and that both groups were important to hospital administration. To place both offices on more level footing, Nuti abolished meetings of the Consulta since these meetings were attended only by the rector and the consiglieri, and all administrative meetings recorded under Nuti’s rectorship include the entire board, consiglieri and savi, meeting together at once. Efficiency was no doubt one of the main motivations behind this change; holding double meetings each month simply to debate the same issues was repetitive and time consuming, especially since the consiglieri were required to attend and had the power to intervene during board meetings, meaning that they could be just as effective a governing body without the extra meetings. At the same time, this gave at least the appearance of some power back to the savi.

After at least appearing to balance out the savi and consiglieri, Nuti then turned his attention to the rest of the hospital family. The grand duke’s *Riforma* of 1591 had focused mainly on the upper administration and institutional structure of Santa Maria della Scala and did not do much to reform the daily life and practices of those who lived and worked in the hospital. As evidenced by Malaspina’s report and da Pietra’s letter, conditions in the various sectors of the

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hospital demonstrated a need for more general reform.\textsuperscript{110} To address these internal troubles, Grand Duke Ferdinando commissioned Nuti to produce a new set of statutes. Nuti’s approach to the task was ambitious and extremely comprehensive; he embellished and expanded upon the basic structure of the original 1305 statutes to create a detailed set of regulations and instructions for the daily life and operation of the hospital.\textsuperscript{111} This expansion addressed specific areas lacking in the original hospital statutes and contained an extensive list of measures and rules for the infirmaries and all the women’s areas of the hospital. Nuti also created a set of regulations for the grance and spedali, something which did not exist in the original statutes.

Considering their length, Nuti’s speed in creating the new statutes was impressive: they were completed and read before hospital administration on 30 January 1597, less than a year after he took office. However, the process of implementation was prolonged by a swift decline in Nuti’s health. By August of 1597 he was no longer able to attend board meetings, so with the approval of Malaspina and the consiglieri, the hospital’s treasurer, Giorgio Borghesi, represented him at all board meetings.\textsuperscript{112} However, without Nuti’s personal oversight to ensure that the new statutes were put into practice, there continued to be a lax attitude among administration and staff. In an attempt to combat this behaviour, in September 1597 Nuti and the consiglieri created a new position in the administration: the maestro di casa. The maestro’s official task was to see that all rules and statutes were observed and that the hospital was administered according to

\textsuperscript{110} As discussed earlier, Malaspina’s report expressed serious concerns about the state of the hospital’s female population, and da Pietra’s letter indicates that the hospital’s busy infirmary was understaffed and unorganized.

\textsuperscript{111} These statutes will be discussed in further detail below; the first copy of the new statutes can be found in: ASS, Ospedale di Santa Maria della Scala, Copia Lettere, N. 436, ff. 88v-97r.

\textsuperscript{112} There is no discussion or mention of the possibility of the grand duke appointing a vice-rector to take Nuti’s place, perhaps indicating the hope that Nuti would recover or, more likely, indicative of Nuti’s desire to maintain at least the appearance of balance among hospital administration. See ASS, Ospedale di Santa Maria della Scala, Deliberazioni, N. 30, ff. 24r-25r.
established practices and reforms.\footnote{\textcopyright{} considered i[n] prima, discorso, e, co[n] matura discussione risoluto esser necessario allo spedale havere uno che eserciti l’Offitio di maestro di casa, e soprintende[n]dente e il quale procuri a diversi negotii di esso spedale, et invigili che tutti li ministri di quello fatto nella Città, quanto fuora esercitino, e facino con quella diligentia, che co[n]viene l’offitio loro, e informati della diligentia e esperientia dello spettabile m. Giovanbattista Preziani notaro pubblico . . .,” ASS, \textit{Ospedale di Santa Maria della Scala}, Deliberazioni, N. 30, f. 27r.} This position, however, did not last long since Nuti passed away just months later in December of 1597.

Though his time as rector was brief, Nuti’s accomplishments had a significant impact on the administration and governance of Santa Maria della Scala for the two centuries that followed. Nuti’s actions also provide insight into the way that centre-periphery dynamics functioned in the development of new bureaucracies. The dominance of the Medici over Santa Maria della Scala and its administration is evident in Nuti’s creation of new statutes at the request of the grand duke. Additionally, the role that Malaspina (as Siena’s Florentine governor) and the hospital’s Medici-appointed consiglieri played in finding a substitute for Nuti and creating the office of maestro di casa demonstrate the importance of these “central” authorities within the hospital’s administration. However, Nuti’s disbanding of the Consulta and his reinforcement of the place of the \textit{savi} on the hospital board suggest that the new form of government emerging at Santa Maria della Scala was more collaborative than it may seem. In Santa Maria della Scala’s administration, we see centre and periphery working together to create a new form of administration, one in which the local retained a degree of power while the centre solidified its dominant status.

This process of collaboration between centre and periphery continued under Nuti’s successor, Agostino d’Agostino Chigi. The grand duke’s choice of Chigi reflected his awareness of the kinds of power negotiation necessary to control the Tuscan state without alienating subject areas in several ways. First, Chigi was a member of one of the oldest, wealthiest, and most
important noble families in Siena. The Chigi were bankers, well-known and influential throughout Italy; they were also quintessentially Sienese.\textsuperscript{114} Just as with Nuti, Ferdinando’s choice of Chigi would have appeased some Sienese nobility, since one of their own was in charge of the hospital. Second, Chigi was a young man, one of the youngest ever to receive the office of rector. When Malaspina announced Chigi as the new rector before the Balìa, he conveyed the grand duke’s faith that although Chigi was not yet thirty-one years old, his intelligence, experience, and religious nature made him a satisfactory candidate for the job.\textsuperscript{115} Chigi’s youth also meant that, unlike his predecessors, he would likely be an active, energetic rector who had the potential to provide some consistency in hospital administration. His family and age were thus qualities that would have helped the Sienese to see Chigi as not only a good choice for rector, but also as one of their own, rather than a Medici implant.

At the same time, however, Ferdinando’s appointment of Chigi helped to consolidate central power over the hospital and guarantee that it could be used as an arm of the Tuscan state. For starters, the grand duke was well-aware of his role as Chigi’s patron, and took actions to gain Chigi’s loyalty. He granted several unusual privileges to the new rector, including Chigi’s request to live at home rather than residing in the rector’s house at Santa Maria della Scala and condoning Chigi’s decision not to wear the rector’s habit.\textsuperscript{116} Furthermore, Chigi was already a

\begin{flushleft}
\textsuperscript{114} The Chigi were part of a select few families among the Sienese nobility (including the Malavolti, Piccolomini, and Bandini), considered to be of ancient origin; see Hook, 163, 207. Chigi’s nephew, Fabio, would go on to become Pope Alexander VII (1655-1667); see Ilaria Bichi Ruspoli, “Spunti d’archivio sulla decorazione dell’Ospedale ai tempi di Agostino Chigi,” in Fabbio Gabrelli, ed., \textit{Ospedale di Santa Maria della Scala: ricerche storiche, archeologiche e storio-artistiche} (Siena: Protagon Editori, 2011): 155.
\textsuperscript{115} ASS, \textit{Ospedale di Santa Maria della Scala}, Deliberazioni, N. 30, ff. 44v-45r.
\textsuperscript{116} This is especially interesting given the fact that many problems which the hospital suffered prior to this were blamed on the lack of the rector’s physical presence at the hospital. But it appears that Ferdinando trusted the youth and energy of Chigi to ensure his diligence as rector. ASS, \textit{Ospedale di Santa Maria della Scala}, Deliberazioni, N. 30, f. 25r.
\end{flushleft}
member of the Medici family’s military order, the Order of St. Stephen, and Ferdinando commanded that he be raised to the rank of knight in Siena. Along with obtaining the office of rector, these privileges increased Chigi’s status, prestige, and power among the Sienese nobility, all of which he owed to his patron, the grand duke. The relationship between the two thus benefitted both, as Chigi gained more personal power and Ferdinando gained a rector indebted and loyal to him.

Among Chigi’s first acts as rector was the implementation and publication of Nuti’s statutes and reforms: he took office in February of 1598 and by August of the same year the statutes had been compiled and prepared for the press. In 1599 Bonetti, a Sienese publishing house, printed the statutes in a 142 page volume. While Nuti and Chigi both referred to and titled the new regulations as “ordini,” the introduction to the published version stated that the new ordinances are better titled as “riforma” since they were meant to renew or change practices that had become relaxed, lost, or strayed from the intent of the original statutes over time. The introduction also asserted that the compilation and publication took place in response to a command of Grand Duke Ferdinando, described as “the most kind Father of the city, and of the poor in particular.”

The statutes reflected the new economy of power that negotiation and collaboration between the Medici, the government, and the hospital had helped create in Siena. They can also be seen as an attempted resolution to the crises of the 1590s and the financial, organizational challenges facing Santa Mara della Scala. As mentioned above, Nuti was comprehensive in his creation of regulations for the daily life and operations of the institution: the statutes are divided

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117 Banchi, 220.
118 *Ordini, e Provisioni sopra il buon governo della Santa Casa di Santa Maria della Scala* (Siena: Bonetti, 1599), 3.
119 *Ordini*, 3.
into 45 different sections encompassing 373 individual regulations. These regulations cover every division of the hospital: the upper administration (the rector, camarlingo, vice-rector, etc.), the clergy, the infirmary staff (doctors, nurses, servants, cooks, pharmacists, etc.), the cellarers, cooks, and refectory staff, and the orphanages for boys and girls. Additionally, Nuti included a separate set of ordini for the grance and spedali di fuori. Taken as a whole, the statutes acknowledge the importance of the grance and spedali to Santa Maria della Scala, and dictate how those properties are to be managed so ties between city and countryside can be maintained.

The statutes not only set up a firm chain of command within Santa Maria della Scala with the rector at its head, but they also clearly recognized the grand duke as the patron of the hospital. The introduction to the statutes for the grance also made it clear that these new regulations affirmed and added to Ferdinando’s earlier reforms for the hospital: “. . . we have firmly established and set up the present ordinances, that they should be observed and followed until deliberations to the contrary; however, the last reform of His Most Serene Highness remains in all its parts.” The statutes thus demonstrate that on paper (if not also in reality) by the end of the sixteenth century the Medici grand dukes had successfully gained control of Santa Maria della Scala and, in collaboration with hospital administration, had created a new order of government. Administratively, Santa Maria della Scala had become a part of the Tuscan state.

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120 The original 1305 statutes were comprised of 61 capitoli, and were not divided into individual sections.
121 The grand duke is acknowledged as a driving force behind the reforms in both the opening and closing statements to the ordinances for the hospital, as well as the ordinances regarding the grance. See Ordini, 3-4, 138; ASS, Ospedale di Santa Maria della Scala, Statuti e Ordinamenti, N. 4d, 2.
Of course, beyond political and administrative issues the statutes can also indicate what the daily life of the hospital was like and what problems this new order of government intended to combat. For example, to address the concerns raised earlier in the decade regarding the state of the hospital’s women, Nuti took cues from the general atmosphere of reform found throughout Europe in the sixteenth century as well as the dictates of the Council of Trent. As Ole Peter Grell and Andrew Cunningham state, there was a strong post-Tridentine obsession with the enclosure of females, and the church “. . . came to consider chastity as ranging above all other attributes for female religiosity, something which enclosure, or isolation from the world, sought to guarantee.” According to Grell and Cunningham, there was a strong post-Tridentine obsession with the enclosure of females, and the church “. . . came to consider chastity as ranging above all other attributes for female religiosity, something which enclosure, or isolation from the world, sought to guarantee.”

Accordingly, the strict enclosure of women manifests itself in Santa Maria della Scala’s new statutes. While only 8 of the 45 sections are dedicated to the hospital’s female workers and occupants, there are an overwhelming 106 individual ordinances contained within those 8 sections, making up 30 percent of the total regulations. This stands in great contrast to the 1305 statutes, in which only 10 out of 61 total sections deal with Santa Maria della Scala’s female population.

The 1599 statutes maintained the traditional division of the women into two convents: the Convento di Sopra for girls over the age of twelve (including those who lived and served in the hospital) and the Convento di Mezzo for the girls aged three to 12 and the women assigned to care for them. There was also a Convento de’ Fanciulle for abandoned infants, with wet nurses

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124 For the 1305 statutes see: ASS, *Ospedale*, 2b; or for a modern publication of the 1305 statutes see Michele Pellegrini, *La comunità ospedaliera di Santa Maria della Scala e il suo più antico statuto* (Siena: Pacini, 2005). For the regulations on women in the 1599 statutes see *Ordini*, 104-138.
and several additional women designated to care for the children. Women were also responsible for administering Santa Maria della Scala’s female infirmary and the women’s hostel. Although each of these divisions was ultimately under male jurisdiction, their day to day activities and maintenance were performed by women. The convents were located in a separate part of the hospital and their male contact was limited to two porters assigned to guard the doors, who were supposed to be older men, well-known and “free from suspicion.” Women were not permitted to leave the convent or the hospital itself without permission, and when they went to hear mass the chapel doors were to be closed behind them. There are even rules which dictate enclosure for the wet nurses; although they had the freedom to come and go, they were instructed that when outside the hospital they could not speak with or visit anyone except their husbands and family. Thus the women of Santa Maria della Scala, in accordance with the prevailing ideas of the time, were meant to be carefully cloistered and controlled.

The statutes also emphasize that great care be taken regarding meals and the distribution of food among the women. In fact, the ordinances announce the creation of the office of padrona, a hospital sister designated to oversee these issues. The padrona is to have four assistants to aid her in this: a camarlinga, who was to keep track of food and its distribution, a panettiera in charge of the bread and wine, and two others in charge of ringing the bell for and supervising meals. With the creation of these offices it seems that Nuti intended to address the concern that neither the women nor children were receiving an adequate diet, but the stricter rules of

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125 For the Convento di Mezzo see Ordini, 119-123; for the Convento de’ Fanciulle see Ordini, 123-126.
126 Ordini, 108.
127 Ordini, 128.
128 There was no limit on the term in office of the Padrona, but her two assistants, the camarlinga, and the panettiera are all restricted to one year terms. The assistants, however, could rise from that position to either camarlinga or panettiera, making possible two years of continuous service in these offices; see Ordini, 110-111.
enclosure necessitated the creation of new offices of responsibility among Santa Maria della Scala’s female staff. Enclosure thus, in this instance, brought more power and responsibility to some of Santa Maria della Scala’s women.

Regarding the financial woes of Santa Maria della Scala, the new ordinances focus a good deal on issues of corruption and efficiency. As with the enclosure of women, efforts to address these issues were inspired by both immediate concerns and the measures which the Council of Trent adopted concerning the corruption of charitable hospitals. The Council of Trent dictated that all hospitals should “execute the charge and duty imposed upon them, and that they actually exercise that hospitality, which is due at their hands, out of the fruits devoted to that purpose.” The Council also spoke against the behaviour of corrupt and negligent officials, and decreed that administrators of charitable institutions, whether laymen or clergy, who proved negligent in their duties could receive ecclesiastical censure and/or be deprived of their office. Nuti issued similar warnings against negligence and stressed obedience for every office in the hospital’s administration. For example, under the first section of the statutes, titled “General Ordinances, to be observed indifferently by all,” the threat of dismissal or punishment for the breach of rules is a consistent theme. Swearing, playing cards, roughhousing, making noise in the morning, entering off-limits areas, and spending the night outside the hospital are all grounds for dismissal.

Further evidence of attempts to combat corruption includes the assiduous record keeping that is prescribed. In addition to the scrittore generale, whose function was to compile and keep track of all hospital records, each individual sector of the hospital had scrittori in charge of

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129 J. Waterworth, ed. and trans., The Council of Trent: The Canons and Decrees of the Sacred and Oecumenical Council of Trent (London: Dolman, 1848), 262-263.
130 Waterworth, 263-264.
131 Ordini, 5-7.
financial records, inventories, and registers.¹³² Fraud associated with wet nurses was another particular concern; the record keeper for the Convento de’ Fanciulle was instructed to search out and record the parents of abandoned children if possible to prevent women from abandoning their child, signing on to work as a wet nurse for the hospital, and then receiving her own child as her charge, thus getting paid by the hospital to care for her own child.¹³³

In conjunction with corruption, efficiency in providing charity was also of special concern. The Council of Trent decreed that hospitals which were instituted to serve a certain group or type of people or to treat those suffering from specific types of diseases should, if there were few or no such persons near the location of the hospital, be converted to other uses. Whatever the use, the council directed that it should be “the nearest that may be to their original destination, and the most useful for that time and place.”¹³⁴ While this was not a problem for Santa Maria della Scala’s central institution, the practices of the spedali associated with the grance often came into question. Nuti addressed this issue in the ordinances for the grance by declaring that officials at the various farms should give alms and serve the poor as much as they are able, with an eye to ensuring those they serve are truly poor. Furthermore, all grance officials were instructed that they may receive children on behalf of the hospital, but that if their particular grance did not have a foundling hospital attached they needed to see that the children were sent to the central institution for care.¹³⁵

Under the new governing order set up by the 1599 statutes each hospital officer had a specific duty to perform. 36 of the 45 sections are dedicated to instructions for specific offices,

¹³² These include the “scrittore generale” who oversaw the compilation of all hospital records, records keepers for the orphanage and women’s convents, financial record keepers, and the record keepers of the grance; see Ordini, 63-76.
¹³³ Ordini, 8.
¹³⁴ Waterworth, 263.
¹³⁵ ASS, Ospedale di Santa Maria della Scala, Statuti e Ordinamenti, N. 4d, 5-6.
and there are further divisions of responsibilities and duties within each of those sections. The
detailed orders for the infirmary, for example, seemed designed to combat the chaotic
environment suggested by the doctor da Pietra by establishing strict organization. The head of
the infirmary was the *infermiere*, who controlled admissions, organized the staff, and reported
finances and consumption of all goods to the camarlingo through keeping an inventory. He or his
assistant was to be present in the infirmary at all times and ensure that the doctors (*medici*) and
their assistants (*astanti*) visited and provided care for the patients at least twice a day. The
infirmary’s chaplain was instructed to go often to hear confession and give the necessary
sacraments. The hospital’s pharmacists were to be present during the doctor’s visits so they
could take orders for medicine, and the list goes on. Similarly detailed assignment of duties and
functions can be found for all sectors of the hospital, reflecting the desire to ensure that hospital
is not only performing its charitable functions but also that it executes them efficiently.¹³⁶

The 1599 statutes thus sought not only to cement the changes that had occurred in Santa
Maria della Scala’s administration since 1559, but they were also used, at least rhetorically if not
always in actual practice, to combat the issues and problems facing the hospital. Of course the
actual implementation of all the reforms for the daily life and practice of the hospital was a slow
process. Apparently Grand Duke Ferdinando expected more rapid results from Chigi, since in
April 1601 he wrote and reprimanded the rector, the consiglieri, and the hospital board for their
inobservance of the new statutes.¹³⁷ The implementation of the *Ordini* therefore continued to
occupy Chigi as the hospital and Siena moved into the seventeenth century.

¹³⁶ The statutes regarding the infirmary constitute one of the longest sections of the
ordinances; see *Ordini*, 20-40.
¹³⁷ There is certainly more to this incident which I plan to explore further in future
archival work; see ASS, *Ospedale di Santa Maria della Scala*, Deliberazioni, N. 30, ff. 180, 210.
The rectorship of Chigi and the 1599 statutes thus represent the culmination of Santa Maria della Scala’s transition from a local, Sienese institution, to a Tuscan state institution. Rather than incorporate the hospital into existing Tuscan charitable bureaucracies, the grand dukes worked within the local context of Siena to create a new order that brought the hospital under central control. By taking advantage of competition and division among Sienese elites and turning critical events to their advantage, by 1600 the Medici dukes managed to whittle away local authority over the hospital and bring this key Sienese institution under central control.

Centre-Periphery in Another Dimension: Santa Maria della Scala as a Regional Institution

In the early sixteenth century, one of the main reasons Cosimo I de’ Medici was so anxious to bring Siena under Florentine rule was to gain access to the rich farmland and coastal resources of Siena’s countryside. To this point, we have examined how collaboration and negotiation of power between centre and periphery shaped a new, more Tuscan administration of Santa Maria della Scala. However, even though Siena and its institutions no longer possessed full autonomy, the city still remained at the centre of a bureaucratic state and Santa Maria della Scala continued to govern that state’s largest charitable network. To fully understand the geography of power within the Grand Duchy of Tuscany, it is therefore important to consider how administrative changes and reforms impacted Santa Maria della Scala not only in the city but also throughout its network.

138 Similar issues motivated Cosimo I’s efforts to gain control of Lucca and the coastline the Lucchese republic controlled. By bringing both Siena and Lucca under Florentine dominion Cosimo I thus had access not only to natural resources but also to strategic coastline; see Mary Hewlett, “A Republic in Jeopardy: Cosimo I de’ Medici and the Republic of Lucca,” in Konrad Eisenbichler, ed., The Cultural Politics of Duke Cosimo I de’ Medici (Burlington, USA: Ashgate, 2001), 9-13.
As noted in previous chapters, one of Santa Maria della Scala’s main tactics for preserving financial stability was the sale of land. The trauma of the war and the crises of the 1590s meant that the sale of land occurred frequently and by the end of the sixteenth century the hospital’s holdings had decreased.\textsuperscript{139} Donations of land and money continued to be a source of income, but were not as significant in value as in previous centuries: over the sixteenth century the frequency of gifts to hospitals in Siena decreased from 12.2 percent of all Sienese wills to 1.1 percent. At the height of charitable donations, Siena’s hospitals took in as much as 17 percent of total giving but after the sixteenth century this number never rose to more than 3 percent.\textsuperscript{140}

Furthermore, depopulation in the later sixteenth century meant that the countryside was not as productive as in prior years, as descriptions of poverty, crumbling walls and structures, and fields lying fallow dominated reports of the state of the Sienese countryside.\textsuperscript{141}

In the face of these challenges, the administrative goal for the patrimony became not one of expansion but rather one of consolidation and preservation. Despite not adding significantly to its patrimony during the last half of the sixteenth century, Santa Maria della Scala’s holdings remained large enough for the hospital to maintain its place as the power centre of a charitable network. At the turn of the sixteenth century the network consisted of the following twelve grance: Cuna, Serre di Rapolano, Montisi, Castelluccio, Spedaletto, San Quirico, Grosseto,

\textsuperscript{139} This was partly due to the strategy of selling off any property not attached to or nearby other hospital-owned property; see Oscar Di Simplicio, “Due secoli di produzione agraria in una fattoria del Senese, 1550-1751,” \textit{Quaderni Storici}, 21 (Settembre-Dicembre, 1972): 782-783.

\textsuperscript{140} In his study of Sienese wills, Cohn found that over the sixteenth century the rate of gifts to hospitals decreased from 12.2 percent of all Sienese wills to 1.1 percent; hospitals once had as much as 17 percent of total giving but after the sixteenth century never had more than 3 percent again; see Cohn, \textit{Death and Property in Siena}, 162.

\textsuperscript{141} See the report presented to Grand Duke Ferdinando discussed earlier in the chapter, ASF, \textit{Mediceo del Principato}, Governie di città e luoghi soggetti, Siena, N. 2015.
Montepescali, Prata, San Giusto, Camigliano, and the Masse. Together these twelve grance boasted a total of 195 farms, with 198 houses, 15 mills, 6 vineyards, 4 fulling mills, 14 kilns, 32 dovecotes, 7 osterie and 11 shops. Although the total economic value of these possessions is difficult to quantify, the records of cash flow across the 1590s detail a number of transactions related to the hospital properties, including the sale of grain and livestock, income from rent, and the money spent on maintaining and supplying the grance. Records seem to suggest that if administrators were careful, income could exceed expenditures, though never by large amounts. For example, compare the following three years:

<table>
<thead>
<tr>
<th>Year</th>
<th>Entrata</th>
<th>Uscita</th>
<th>Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>1592-1593</td>
<td>132,619 lire</td>
<td>130,875 lire</td>
<td>1,744 lire</td>
</tr>
<tr>
<td>1593-1594</td>
<td>73,506 lire</td>
<td>73,506 lire</td>
<td>0 lire</td>
</tr>
<tr>
<td>1594-1595</td>
<td>66,523 lire</td>
<td>64,248 lire</td>
<td>2,275 lire</td>
</tr>
</tbody>
</table>

Table 7. Entrata and Uscita, 1592-1595

Although these statistics indicate that the hospital was capable of operating within its means, they also demonstrate the precarious financial situation of charitable institutions. Because income and expenditure remained consistently close to each other, it is easy to see how any kind of crisis could shift the hospital from safe financial footing onto less stable economic ground. Furthermore, these numbers show a steady decline in the amount of income the hospital raised. The decline here is likely due to the crises of the early 1590s, including poor harvests due to bad

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142 ASS, Ospedale di Santa Maria della Scala, Deliberazioni, N. 29, f. 271v.
143 Orlandini, Piccola storia di Siena, 132-133.
144 ASS, Ospedale di Santa Maria della Scala, Entrata e Uscita, N. 912, ff. 8v, 14r, 19r, 62v, 78r, 89v.
145 Or, as Judith Brown has stated, “In preindustrial Europe the line between prosperity and poverty was thin at all times.” See Brown, “Prosperity or Hard Times in Renaissance Italy?” Renaissance Quarterly, Vol. 42, No. 4 (Winter, 1989): 772. See also sneider, “The Treasury of the Poor,” 106.
weather, high grain prices, and famine. By the end of the decade the hospital’s income had risen again, but this was not useful when expenditure still outpaced revenue as it did in 1598-1599. During this fiscal year, the Santa Maria della Scala recorded an income of 89,248 lire, but spent 98,042 lire, resulting in a deficit of 8,793 lire.¹⁴⁶

With debt either a constant threat or a reality, the finance of charitable institutions became a concern of governments across Italy and Siena, as previously shown, was no exception.¹⁴⁷ From the Balìa’s provisions of 1561 to Grand Duke Ferdinando’s reforms of 1591 and 1599, fiscal responsibility and the economic side of charity was a major focus of government participation in the administration of Santa Maria della Scala. Nowhere is this clearer than in the rules and regulations established for the grance themselves and their administrators in the 1599 statutes. The set of provisions dedicated to the grance expressed a need for order within the operation of individual farms and in their communication and exchange with Santa Maria della Scala. The purpose of the provisions was “the maintenance and growth of this holy house, for the benefit of the poor of the Lord,” or that through the maintenance and regulation of the grance, the institution of Santa Maria della Scala could preserve its ability to effectively serve as a state resource and provide charity to both city and countryside.¹⁴⁸

The statutes specific to the grance encompass 30 regulations regarding the preservation and conservation of resources. Out of these, 23 deal specifically with issues of finance and

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¹⁴⁶ ASS, Ospedale di Santa Maria della Scala, Entrata e Uscita, N. 916, f. 5r.
¹⁴⁷ Davidson, “Northern Italy in the 1590s,” 168.
¹⁴⁸ The introduction to the provisions for the grance states that “desiderosi del mantenimento, e augumento di questa santa Casa, in beneficio de’ poveri del Signore, ad accrescimento della carità, e honoure di Dio, hanno maturamente stabilito, e fermato li presenti Ordini,” ASS, Ospedale di Santa Maria della Scala, Statuti e Ordinamenti, N. 4d, 3.
Among the instructions provided for the head of each grance, called a grancieri, are injunctions to watch expenses carefully, take care that goods, plants, and produce do not spoil, and ensure that extravagant meals and feasts are never held. As is the case with the hospital in Siena, grance officials were instructed to keep a number of detailed inventories and financial records, and the overall message behind such record-keeping which comes through is the efficient use of all resources, the collection of debts, and a strong desire to avoid any waste. The grancieri and scrittore were responsible to keep daily records of goods produced, transferred and sold, and officials were instructed to work together to compile and ensure the correct entry of all transactions. A record of all expenses was then sent to Siena each month, while yearly reports included not only expenses but a record of production for the grance as a total and for each individual farm.

In addition to holding grance officials accountable through monthly and yearly reports, the statutes also placed limitations on the ability of the grancieri to act in financial matters without the rector’s authorization. As in the past, any large purchases or repairs necessary for the maintenance of the farms and hospitals required the approval of the rector. However, the new statutes prohibited grancieri from selling any product of the grance, whether in large or small quantities, without the written permission of the rector. Furthermore, grancieri could be fined (in

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149 ASS, *Ospedale di Santa Maria della Scala*, Statuti e Ordinamenti, N. 4d, capitoli 4, 6, 8-10, 13-20, 22-30
150 This is true even for visits of the rector; the statutes specifically instruct that upon his visits the grancieri should lay no more than two kinds of food plus fruit and dairy products; see ASS, *Ospedale di Santa Maria della Scala*, Statuti e Ordinamenti, N. 4d, cap. 7, 10, 18.
151 “... e il simile si faccia di tutte l’altre ricolte subito partite, come di lino, canape, olio, lane, zaffrano, e altro, e in simile nota delle semente fatte per la nostra parte distintamente, podere, per podere, notando il calo de i concigli, il grano buono cavato di essi, e altre diligentie; e il simile delle biade, e legume, e altre semente.” ASS, *Ospedale di Santa Maria della Scala*, Statuti e Ordinamenti, N. 4d, cap. 20.
152 ASS, *Ospedale di Santa Maria della Scala*, Statuti e Ordinamenti, N. 4d, cap. 9.
the form of having the yearly allowance docked) if they made extraordinary purchases, hired extra workers, or took in anyone not qualified as “poor” without the permission of the rector.\textsuperscript{153} Creating such levels of control between Santa Maria della Scala and the grance, hospital administration increased the contact between various parts of its network and also aimed to enhance the presence and authority of the central institution in the countryside.

Accompanying these goals, another focus of the statutes was to ensure and increase productivity. Although the rector and other officials made yearly visits to each grance, the new statutes required the grancieri themselves to visit all parts of the grance each year and record the types and amounts of grain and produce cultivated, livestock raised, and income derived from these ventures.\textsuperscript{154} This enabled the rector and other officials to know, for example, that in 1598 the grance as a whole produced 70,000 some of wine and 300 some of olive oil.\textsuperscript{155} Grancieri were also instructed to observe cultivation practices, making sure that all crops were properly cared for and that tenants and share-croppers only worked and accessed land to which they had the rights.\textsuperscript{156} Officials were further responsible for overseeing the branding of all the horses, oxen, and cattle belonging to the hospital.\textsuperscript{157} The point of such practices was, presumably, not only to make sure that the institution had an exact account of all its possessions, but also to ensure that those possessions were used appropriately. The prohibition of tenants and sharecroppers from working land or using pastures or woods which were not part of their

\textsuperscript{153} ASS, \textit{Ospedale di Santa Maria della Scala}, Statuti e Ordinamenti, N. 4d, cap. 15-17.
\textsuperscript{154} This included taking note of whether grain was sold, sent to Siena, or used on a grancia itself. ASS, \textit{Ospedale di Santa Maria della Scala}, Statuti e Ordinamenti, N. 4d, cap. 23.
\textsuperscript{155} ASS, \textit{Ospedale di Santa Maria della Scala}, Deliberazioni, N. 30, f. 155v.
\textsuperscript{156} ASS, \textit{Ospedale di Santa Maria della Scala}, Statuti e Ordinamenti, N. 4d, cap. 23, 24, 29.
\textsuperscript{157} ASS, \textit{Ospedale di Santa Maria della Scala}, Statuti e Ordinamenti, N. 4d, cap. 28.
contracts (unless given permission by the rector) suggests a desire to prevent anyone from profiting unjustly from hospital lands.

The increased concerns over productivity and the preservation and conservation of resources in the 1599 grance statutes emphasize that, perhaps more than ever before, the grance and their resources were central to the operation and survival of Santa Maria della Scala. They also indicate the extent to which the grance were integrated into the rural economy of the Sienese state. By the seventeenth century the hospital was responsible for approximately 3,000 people, a total which does not include the poor to whom the hospital provided alms on a daily basis.\textsuperscript{158} Considering the population of the Sienese state at the time, which was approximately 150,000 households, it becomes apparent that the hospital had a significant impact and reach.\textsuperscript{159} Santa Maria della Scala’s farms and hospitals were a source of labour and income as well as charity in Siena’s rural areas. These ties between city and countryside created by the hospital thus continued to give the institution power and enabled it to function as a power centre despite its submission to grand ducal authority.

Some relations within Santa Maria della Scala’s network were, however, affected by the larger power dynamics between Siena and the Medici administration. The area of greatest decline in the power was with the spedali di fuori. As Siena lost its status as an independent centre of power in the late sixteenth century, local officials began to resist the authority of Santa Maria della Scala over their hospitals. One of the ways they did so was to turn to ecclesiastical authorities, including bishops and papal visitors, to confirm local control of hospitals. One example of this was the Spedale del Beato Giacomo in Castel della Pieve. In December of 1600

\textsuperscript{158} ASS, Ms D 113, Diplomatico, ff. 20v-21r.
\textsuperscript{159} ASF, Mediceo del Principato, Governi di città e luoghi soggetti, Siena, N. 2015, ff. 110v-111r.
an apostolic visitor, Monsignor Dandino, came to Castel della Pieve and, upon hearing reports of
corrupt administration at the hospital, he ordered the city priors to remove Ventura Benassi, the
hospital’s rector, from office.\textsuperscript{160} Seizing the opportunity to assert independence, town officials
obeyed, and sent word to Santa Maria della Scala’s administrators that Benassi had been
dismissed under Dandino’s orders.\textsuperscript{161} Chigi protested this interference, which clearly defied the
long-standing agreement of patronage Santa Maria della Scala had with the hospital. He
promptly brought the matter to the attention of the grand duke, describing the dismissal of
Benassi as “in accordance with the edict made by the apostolic visitor, which has no basis in
reality or truth,” and accusing Dandino of “malintentione.”\textsuperscript{162} With Ferdinando’s assistance,
Chigi and the hospital chapter appointed a different rector for the hospital of Castel della Pieve in
January 1601.\textsuperscript{163} However, disputes over the right to govern the hospital continued and, in the
end, it was the last time Santa Maria della Scala selected a rector for the hospital of Beato
Giacomo.

A second way that subject hospitals sought independence from Santa Maria della Scala
was to appeal directly to the grand duke himself. As discussed in the previous chapter, the first
hospital removed from Santa Maria della Scala’s patronage in this fashion was the hospital of
San Gimignano. Upon the death of the previous rector, local leaders objected to the replacement
appointed by Santa Maria della Scala and asked Cosimo I to intervene. Cosimo I, looking for

\textsuperscript{160} The accusations of poor management and misuse of resources, if true, could hardly
have been Benassi’s fault since he was new appointment and had only taken office in the
summer of 1600; ASS, \textit{Ospedale di Santa Maria della Scala}, Deliberazioni, N. 30, f. 159r.
\textsuperscript{161} ASS, \textit{Ospedale di Santa Maria della Scala}, Deliberazioni, N. 30, f. 171v.
\textsuperscript{162} “… in esecuzione dell’editto fatto dal visitatore apostolico, ove non è alcun’
fondamento ne reale, ne vero,” ASS, \textit{Ospedale di Santa Maria della Scala}, Deliberazioni, N. 30,
f. 172v.
\textsuperscript{163} Benassi, meanwhile, was reassigned in April 1601 as the head of the grancia di
Montisi; ASS, \textit{Ospedale di Santa Maria della Scala}, Deliberazioni, N. 30, f. 185r.
ways to bring Siena under his dominion at the time, was more than happy to oblige and appoint a
rector of his own choice. This led to a series of exchanges between Cosimo I and Santa Maria
della Scala’s rector Venturi, who was unable to regain control of San Gimignano’s hospital in the
end. Other spedali di fuori did not attempt to gain full independence, but still turned to the
grand duke to gain advantage over Santa Maria della Scala’s control. For example, in 1585
reports reached Siena that Marcantonio Doviti, head of the hospital of San Miniato al Tedesco,
had managed to accrue 600 scudi worth of debt in a short space of time. Saracini and the hospital
board thus decided to remove Doviti from office in April 1585, and sent a notice of their decision
to the grand duke. However, the bishop of Pistoia, a friend who had helped the rector get
appointed, intervened. The result was that Grand Duke Francesco I overruled Santa Maria della
Scala’s wishes. Rather than deposing the rector merely provided him with a list of ways to
improve his leadership. As Siena and Santa Maria della Scala lost independence and became peripheries within
the Tuscan state, and as the new, more centrally controlled administration of the hospital took
shape, the intervention of the grand duke in such affairs became more common. The insertion of
Medici authority into the power dynamics of Santa Maria della Scala and its network added a
new complexity to their various relationships. Recognizing an opportunity, local officials in
towns where Santa Maria della Scala had patronage of hospitals took advantage of the shift in
power dynamics to gain power of their own. Actions such as those described above continued

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164 ASF, Mediceo del Principato, Governi di città e luoghi soggetti, Siena, N. 1850, ff. 107r, 120r-121r.
165 A full account of these events is found in: ASS, Ospedale di Santa Maria della Scala, Deliberazioni, N. 29, ff. 107r, 114r, 117r, 129r-133r.
into the seventeenth century, and by the end of Chigi’s tenure as rector in 1639 only five of the original fourteen spedali di fuori still remained connected to Santa Maria della Scala.166

Despite the loss of some external power, during Chigi’s tenure the hospital undertook a program of new construction and refurbishment, both in the city and throughout the grance. Both for practical purposes and for decorative reasons, the new construction was meant to reaffirm the hospital’s power and charitable duties.167 Furthermore, the hospital continued to maintain its importance in Siena’s civic devotions and rituals. Evidence of this can be seen in the late sixteenth-century painting of a procession in the Piazza del Duomo by Antonio Marcucci. Currently displayed in Santa Maria della Scala, Marcucci’s work shows a religious procession proceeding down the centre of the piazza, with participants from both the cathedral and the hospital, while officials observe from the stone benches in front of Santa Maria della Scala. In the right-hand foreground, a hospital official can be seen handing out alms to a half-naked child.168

What emerges from this brief look at the power dynamics of Santa Maria della Scala’s network under Medici rule is that the hospital’s submission to central control did not constitute a complete loss of local power. There were declines in some areas, most especially in terms of the spedali di fuori; however, connections with the grance and, by extension, the Sienese countryside remained strong and were a central focus of hospital administration. Santa Maria della Scala’s place as both an institution subject to the Tuscan state and as the power centre of a charitable

166 These five were the hospitals at: Todi, Acquapendente, San Miniato, Pian Castagnaio, and Proceno; see Banchi, I Rettori, 227. For those hospitals that gained independence, further research is required to better understand why and how they gained independence and the impact of this on Santa Maria della Scala.

167 This included new stone carvings and a series of sculptures and decorations for the interior of the hospital; see Ruspoli, “Spunti d’archivio sulla decorazione dell’Ospedale,” 155-170.

168 Norman, Siena and the Virgin, 88; Toti, Santa Maria della Scala, 35.
network provides evidence that under Medici rule multiple geographies of power co-existed. The negotiated absolutism of the Medici dukes meant that a give and take existed between centre and periphery, allowing for Santa Maria della Scala to become a Tuscan institution administratively while remaining a key Sienese institution.

**Conclusion: The Grand Duchy, Santa Maria della Scala, and Siena, 1557-1600**

In examining the Medici annexation of Siena from the perspective of Santa Maria della Scala several valuable issues emerge, which help us gain a better understanding of the economy of power within the Grand Duchy of Tuscany. In comparison with other parts of the Tuscan state, Siena managed to maintain a fairly high degree of autonomy, mostly because it remained a bureaucratic entity, administratively distinct from the rest of Tuscany. With its separate bureaucracy, the Sienese government retained the right to approve any action passed by the Tuscan government before it applied in Siena, and the right to authorize any sale or use of Sienese resources by the Tuscan government. The communal government lost to central authority a good deal of power over the appointment of local officials, but because the grand dukes typically drew from Sienese nobility, rather than sending officials from Florence or other centres in the Tuscan state, the government continued to be populated with local men. Additionally, Siena’s communal government encouraged the city’s devotions to Mary, rituals such as the Palio, and other acts of civic religion to help maintain Sienese identity. Thus, despite becoming a periphery within the larger Grand Duchy of Tuscany, Siena managed to preserve some sense of local authority and a strong civic identity.

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170 Parsons, “Egregi facti antiqui senensium,” 11-44.
Like the communal government, the Ospedale di Santa Maria della Scala was not incorporated into Florentine charitable bureaucracies such as the Bigallo or Nove Conservatori, and in this way remained a distinct entity within the Tuscan state. Furthermore, the hospital continued to play an important role in Siena’s civic devotion to Mary, and served as the city’s central source of charity and poor relief. Santa Maria della Scala also maintained its presence in the countryside (although less extensive than before), and continued traditional ties between Siena and its surrounding rural areas.

While remaining a Sienese institution in these ways, Santa Maria della Scala also became an arm of the Tuscan state. Chief among the reasons for this was the continuation of traditional factionalism among Sienese elite. Political divides and competition had always caused problems in Siena, and post-1559 factional divides continued to promote rifts among the nobility which the Medici grand dukes were able to exploit to their advantage. This was in sharp contrast to other towns like Cortona, Bologna, Torrino, and Treviso where the unified actions of local elites allowed them to exercise power through local hospitals and confraternities. While some noble families, particularly those who were part of the communal government, sought to consolidate power through control of local institutions, other families aimed to gain power through the court culture and patronage networks of the Medici. By claiming the right to appoint Santa Maria della Scala’s rectors the Medici created a divide between the hospital and the Balìa, as rectors sought to maintain the power of their office instead of surrendering that power to local government. Working with the rectors through a process of administrative reforms, the grand dukes created a new administration that allowed the hospital to retain its power within the Sienese state while at

\[171\] See comparisons made earlier in the chapter, pp. 2-12.
the same time bringing it firmly under central control. Santa Maria della Scala thus became a Tuscan institution, while still retaining local power in its own right.

The power shifts between Siena, the Medici Dukes, and Santa Maria della Scala over the last half of the sixteenth century provide evidence that in the development and centralization of the Tuscan state the economy or geography of power was consistently negotiated. The Medici successfully established an economy of power that favoured central control, while still allowing a degree of local autonomy. Also, Cosimo and his successors used the power to grant offices as a tool to exploit divisions between local elite to their advantage. Where other studies have shown that local ruling elites used charitable institutions to maintain autonomy in the wake of domination by an external power, the experience of Siena and Santa Maria della Scala demonstrates how competition among the elite played a detrimental role in their ability to retain independence. Perhaps most importantly, the case of Santa Maria della Scala in the late sixteenth century demonstrates the ability of hospitals to function simultaneously as local power centres and arms of the territorial state and validates the importance of studying charitable institutions in terms of politics and power.
Conclusion

In a 2005 summary of the state of research on Renaissance Siena, art historian A. Lawrence Jenkins suggested that although a great deal has been accomplished over the past few decades to improve our understanding of Siena’s history, there is much work yet to be done.¹ One of the challenges, he explained, is that scholars tend to focus on particular moments or events in Sienese history and treat them, as Ann Katherine Issacs asserted, “in a celebratory or ideological light.”² The trouble with this, Jenkins indicated, is that much of what we know of Siena’s history is made up of political and economic facts, “whose interpretation is not yet nuanced by the wider context in which they occurred.”³ Jenkins’s implied message is that scholars should devote more attention to how the political troubles that plagued Siena in the fifteenth and sixteenth centuries were understood as they occurred, as well as the motivations of the people and institutions that shaped Siena’s history.

As a study of Siena from the perspective of the Ospedale di Santa Maria della Scala demonstrates, one way to explore and articulate the kind of nuance Jenkins refers to is to look beyond traditional studies of politics and look instead at sources of power and the forces that shaped how that power was distributed. For Siena’s geography of power this includes the Ospedale di Santa Maria della Scala. More than just a bestower of charity, the hospital of Santa Maria della Scala was a key civic institution woven into the political, social, and religious life of the city and, as such, was a source of power in Siena. Moreover, the vast network established and

² Ann Katherine Issacs, as quoted in Jenkins, “Renaissance Siena,” 12.
³ Jenkins, “Renaissance Siena,” 11.
maintained by the hospital built relationships throughout the entire Sienese state and even beyond, allowing Santa Maria della Scala to provide a perspective on the distribution of power both inside and outside the city walls. Other historians have identified the link between a city and its contado as a defining characteristic of the Sienese state, so an understanding the role that Santa Maria della Scala played in creating those relationships deepens our understanding of the nature of those ties.4

Santa Maria della Scala functioned as a source of social, religious, and political power within the city and state because of the relationship between the hospital and the communal government. City officials took an early and vested interest in the hospital and public charity, at least a century ahead of the trend identified for rest of Italy and Europe.5 From its foundation as a pilgrim’s hostel by Siena’s cathedral canons in the eleventh century, Santa Maria della Scala grew to become a multi-faceted charitable institution that was an essential part of Siena’s civic life and identity. The physical location of the hospital enhanced its civic prominence, and its collection of relics and patronage and production of art cemented Santa Maria della Scala as a site of Siena’s civic religion. Papal privileges freed the hospital from the cathedral canons in the late twelfth century, when by bold assertions of authority the communal government gained control of the institution. The city government not only offered the hospital protections and tax

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4 The work of Caferro has been instrumental in demonstrating the importance of studying both city and countryside together to best understand the history of Siena, though the work of other scholars also highlights the importance of agriculture and the control of rural communities; see Caferro, “City and Countryside in Siena in the Second Half of the Fourteenth Century”; Duccio Balestracci, The Renaissance in the Fields: Family Memoirs of a Fifteenth-Century Tuscan Peasant (Penn State University Press, 1999); Roxann Prazniak, “Siena on the Silk Roads: Ambrogio Lorenzetti and the Mongol Global Century, 1250-1350,” Journal of World History 21, no. 2 (June 1, 2010): 177–217.

5 By the early fourteenth century and the rule of the Nine, Siena’s communal government participated significantly in the administration of Santa Maria della Scala; it wasn’t until the mid-fifteenth century that other Italian communes began attempting to regulate charitable institutions. For a good overview, see Cavallo, Charity and Power, 15-33.
exemptions, but city councils also selected and appointed Santa Maria della Scala’s rector. The city government also participated directly in the hospital’s administration through the election of the savi, who sat on the hospital’s governing council, represented the communal government in hospital affairs, and served as a liaison between the two institutions. Thus defined and shaped by the civic, religious, and political atmosphere of the city, Santa Maria della Scala was more than just a provider of charity: it was a Sienese state agency.

A large part of Santa Maria della Scala’s success as a regional institution lay in the economic power the hospital derived from the farms, mills, and vineyards of the patrimony. Because of its extensive network Santa Maria della Scala served as an employer, provider, and consumer in Siena’s economy. The various agreements and types of interaction between the hospital and its properties suggest the importance of considering city and countryside not as monolithic entities but as “a mosaic of fiscal communities” whose dynamics of power and exchange differed according to circumstance. The two case studies included in chapter three highlight these different circumstances. The case of the Grancia di Prata shows how completely Santa Maria della Scala could control and influence the rural economy, while the case of the Ospedale di Santa Caterina di Todi shows how political instability and competition for power in Siena challenged the ties between the central institution and subject hospitals. The case of Todi demonstrates that subject hospitals were a source of power for Santa Maria della Scala and the local communities they served, and that the negotiations undertaken between Santa Maria della Scala, Siena’s government, and the Medici impacted relationships between the central institution

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6 This is an idea proposed by Cohn in his study of the Florentine state which applies nicely to Siena as well; see Cohn, Creating the Florentine State, 7-8.
and smaller hospitals. The crucial role that matters of economy and finance played in these negotiations cannot be ignored, because they contribute to a better understanding of the hospital’s position and power as a state agency.

Understanding Santa Maria della Scala’s network, civic roles, and position as a Sienese state agency lays the groundwork for grasping how this institution can deepen our knowledge of sixteenth century Sienese history. The most discussed event in Siena’s history after the late Middle Ages is the fall of the Republic in 1555. By examining this event from the perspective of the relationships between Santa Maria della Scala and its network, as well as the interactions between the hospital and the city government, a clearer picture develops of the tensions caused by war and the city’s response to the crisis. Warfare hampered the hospital’s ability to provide the relief the city needed, since fighting cut off connections with many of its farms. After the city came under siege in the fall of 1554, the communal government, influenced by Siena’s French allies and military leaders, seized control of the hospital and its resources for the use of the army and the defence of the city. Unfortunately, these actions left little for the survival of the hospital family itself and plunged the hospital into debt and near ruin.

The exchanges which occurred between Santa Maria della Scala’s rector, the communal government, and the foreign powers in Siena illustrate the perils of war for charitable institutions and the impact that outside forces had on power dynamics within the city. Santa Maria della Scala’s position as a state agency brought many advantages to the hospital, including a great deal of power and prestige, but it also meant that the hospital served as more than just a charitable

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7 As the Balia tried to retain control of Santa Maria della Scala in the wake of annexation to Florence, local communities in the Sienese state took advantage of the atmosphere of change and attempted to claim control of their hospitals. These attempts prompted a series of negotiations in which some local communities successfully claimed independence and some did not. See Ch. 5, pp. 258-261.
institution. It was also a civic resource, and as such, the hospital was subject to the needs of the city government, including the damage those needs could cause during times of crisis. The experience of Santa Maria della Scala during the War of Siena thus emphasizes the importance of understanding hospitals from points of view beyond that of charitable activity.

This point is further emphasized when the late sixteenth century is taken into account. The city government continued to rely on Santa Maria della Scala as a resource after the loss of Siena came under Cosimo de’ Medici’s governance in 1557. This time, however, the hospital was used not only as a source of provisions, but as a potential source of power. The city government, full of ruling elite who had lost much of their previous political agency, viewed control of the hospital as a way to maintain autonomy. The new rulers of Siena also saw Santa Maria della Scala as a source of power that could help them consolidate their hold over Siena and bring the entire state firmly under Tuscan control. Although the Sienese government attempted to exercise authority and autonomy through the regulation of Santa Maria della Scala, because Siena’s nobility were not united the Medici grand dukes were able to exploit these divisions to increase their power in Siena. At the same time that Santa Maria della Scala became administratively a Tuscan state agency, through the maintenance of its network and its continued role as Siena’s main charitable institution, the hospital remained central to Siena’s civic and religious life. Santa Maria della Scala was able to function simultaneously as a local power centre and as an arm of the territorial state.

When applied to a broader context, the narrative and analysis of Santa Maria della Scala and its charitable network contribute to a better understanding of Sienese history, the history of the Grand Duchy of Tuscany, and the role that charity played in state building across early modern Italy. In terms of Siena, a closer look at Santa Maria della Scala’s administrative history
confirms just how deeply the factional politics of Siena’s nobility shaped the relationship between the hospital and the city government. By examining times of crisis such as war from the perspective of a charitable institution we can move beyond traditional political narratives and observe the actual ramifications of the city government’s response to crisis. The hospital also allows us to see the ways that Sienese elite attempted to maintain authority within the city despite their loss of independent political power. Siena’s government leaders sought power through the regulation of civic institutions like Santa Maria della Scala, but were forced to compete with the Medici grand dukes for this power.

What emerged from that competition was a process of negotiation in which Cosimo I, Francesco I, and Ferdinando I de’ Medici allowed the city government to retain a degree of power while retaining ultimate control in their own hands. The Medici grand dukes’ interactions with Santa Maria della Scala and the Sienese government confirm the findings of other scholars regarding Medici use of charity as a state-building tool. In particular, Cosimo I’s initial reform of the Sienese state reflects his ability to adapt to local situations and his knowledge of when and how to exploit local tensions to his advantage. Using his power to appoint political and administrative officers, Cosimo I successfully created patronage ties with key noble families, including those appointed to govern Santa Maria della Scala. With this strategy, Cosimo built new ruling elite in Siena loyal to the Medici. Cosimo I’s successors, Francesco and then Ferdinando, built on this strategy and, through a process of give and take with both hospital and city administrators, brought Santa Maria della Scala under central power while still allowing for some local control. This process culminated in the production of a new set of statutes for the hospital, and a new order of governance in which the Medici appointed the hospital rector, but
the city government still appointed representatives to sit on Santa Maria della Scala’s administrative board and participate in governing the institution.

Although the dynamics between the Medici government and Siena after 1557 have previously been examined from the perspective of the city government, by looking at the hospital of Santa Maria della Scala we are able to see how the power dynamics within Tuscany between the Florentine Stato Vecchio and the Sienese Stato Nuovo played out for institutions beyond the communal government. Despite the separation that was maintained between the Stato Nuovo and the State Vecchio within the Grand Duchy, the Medici used their strategy of negotiated absolutism to bring these two states and their various institutions under one political power centre. The Sienese government still participated in the regulation of the hospital, but the control which the Medici exercised over Santa Maria della Scala meant that it was no longer solely a Sienese institution but a Tuscan one. Thus, we see an example of how the distribution of power worked in composite states like the Grand Duchy; local government had autonomy, but it was an autonomy limited by the power of the grand dukes. This is precisely the reason that Guarini’s concept of geographies of power is an effective framework: it allows for the possibility and consideration of varying degrees of power within territorial states.

In addition to improving our understanding of sixteenth-century Sienese history, the study of Santa Maria della Scala and its relations with the city government and the Grand Duchy of Tuscany also contributes to current discussions about the role of charity in state building in Italy more generally. The size and importance of Siena as a power centre in its own right before 1557 makes it a useful case for comparison with other Italian cities such as Treviso, Turin, and Bologna. The experience of Siena presents an interesting balance between what Cavallo and

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Terpstra have found in Turin and Bologna, respectively.\(^9\) Whereas in Turin (and other northern locations like Treviso) the local elite successfully employed confraternities and hospitals as a means to exercise authority and retain autonomy within their city, in Bologna disagreement and competition among the ruling families caused problems for the practice and administration of charity within the city. Although the Bolognese presented a united front to Rome, the reality of internal dissensions meant that their autonomy was not as great as it could have been.\(^{10}\) Like the local government of Turin, Siena’s city councils managed to maintain a degree of power within Santa Maria della Scala’s administration. However, unlike the ruling class of Bologna, Siena’s nobility allowed competition for power in the new Tuscan hierarchy to provide openings which the Medici were able to exploit to their advantage.

What Siena and Santa Maria della Scala suggest then, is that charitable institutions were able to function as both local and territorial centres of power; it did not necessarily have to be one or the other. The need to articulate this layered view is the reason why it is more productive to think about early modern states in terms of geographies or an economy of power rather than employing a basic centre-periphery model. What the study of hospitals like Santa Maria della Scala implies is that even within one institution power was exercised at various levels and in a number of ways. Furthermore, although a centre of power certainly existed, the distribution of that power, at least in the case of Tuscany, was under constant negotiation. It was the actions and responses of both the centre and the peripheries that shaped the bureaucracies and administrative bodies which historians treat as characteristic of the early modern state.

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When taken in the long view, Santa Maria della Scala’s history provides a narrative of the transition from the late medieval commune to the early modern state, or to becoming a subject city within a larger state. The administrative history of the hospital, its charitable and economic activities, and its wide-reaching network exemplify the characteristics of civil religion, civic values, and consolidation of spiritual, economic and charitable resources that defined the late medieval ‘corpus christianorum.’

Likewise, the administrative alterations and reform of Santa Maria della Scala under the government of the Medici highlight the focus of early modern states on economic activity, efficiency in government, and the development of bureaucracies.

By tracing the history of Santa Maria della Scala we can thus observe how both types of government functioned, as well as the transition from one to the other.

In terms of transitions, Santa Maria della Scala can also contribute to the ongoing debate regarding changing modes of charity in the early modern period. It is generally accepted that during the fifteenth and sixteenth centuries modes of charity began to be centralized and transferred from the hands of the church to the hands of the state.

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12 D’Andrea offers a good overview of the scholarship on the transition between late medieval and early modern government in relation to the issues of civic religion, confraternities, and charity; see D’Andrea, Civic Christianity in Renaissance Italy, 3-12.

medieval to early modern charity, influenced by the centralizing of growing territorial states and religious reform of the sixteenth century, works well for certain places in Italy and throughout Europe, but Siena and Santa Maria della Scala show that changes in charity during the sixteenth century could be motivated less by a need for centralization and more as a response to political crises, war, famine. Because Siena had a centralized hospital and charitable network in Santa Maria della Scala from the early fourteenth century, there was no need to consolidate efforts by the sixteenth. Of course, this is not to say that the trends of religious reform and centralization did not have any impact on Siena and Santa Maria della Scala; Grand Duke Ferdinando’s sponsorship of new statutes for the hospital toward the end of the century certainly reflect the influence of the Council of Trent, especially regarding concerns about women and the efficiency of charitable institutions.

Of course, there is still much work to be done to develop a fuller picture of the events and processes highlighted in the present study. For example, it would be particularly useful to conduct additional case studies of the farms and hospitals in Santa Maria della Scala’s network to better observe the degree to which the treatment of different farms and hospitals varied. The spedali di fuori deserve a more detailed study as microcosms of the larger institution, especially since the negotiations between Santa Maria della Scala and local officials seem to mirror the kinds of interaction that took place between the hospital and the Medici government. It would be useful to have a more precise understanding of the spedali individually, including the reasons why each joined the network and how local communities felt about their connection to Santa

Maria della Scala as well as a better sense of the actual power that Santa Maria della Scala’s administrators had over subject hospitals and the degree to which they participated in the daily life and activities in each location.\textsuperscript{14}

Another area which deserves further attention is the relationship and interaction of the other charitable institutions in Siena with Santa Maria della Scala and the communal government. As noted in the second chapter, Santa Maria della Scala was the largest and most powerful charitable institution in the Sienese state, but it was not the only one. The hospital of Monna Agnese was a fairly prominent refuge for abandoned girls, while the Misericordia of Siena also served the poor of the city. Lucia Brunetti’s work on the Mona Agnese hospital provides some idea of the close relationship between this hospital and Santa Maria della Scala, and government documents certainly show connections between these institutions.\textsuperscript{15} However, more research is needed to understand the extent of these connections and how the experience of these institutions relates to that of Santa Maria della Scala.

While the present study offers comparison to other cities and states in Italy, the question of how Santa Maria della Scala fits into the wider European stage remains to be explored. In fact, very little work has been done on comparisons of hospitals and charitable institutions in Italy with those of other early modern states such as Spain, France and England. A number of scholars have studied issues of charity in these states, but beyond several volumes of collected essays there is

\textsuperscript{14} Lucia Sandri’s work on the hospital of San Gimignano is one of the only works focused on one of the spedali di fuori; see Sandri, \textit{L’Ospedale di S. Maria Della Scala di S. Gimignano nel Quattrocento}.

\textsuperscript{15} Siena’s city statutes of the late thirteenth century suggest that these three institutions were the main charitable institutions in the city, as they were the three that the city government chose to support; see Brunetti, \textit{Agnese e il suo ospedale}, 41-44.
no work which synthesizes their findings in a comparative manner.¹⁶ Such a study would shed light on the debates over early modern and medieval modes of charity, and help us better understand how the power dynamics between local and state charity functioned in different political environments.

A final question that remains to be explored is what happened to Siena and Santa Maria della Scala beyond the scope of the present study. As discussed previously, the period after 1600 is typically viewed as a time of decline for Siena, and there is certainly evidence that Siena never regained the prosperity or population of its fourteenth century peak. Additionally, the loss of independent political power is also viewed as an indicator of decline. However, there is also the possibility that this decline was not quite as disastrous as scholars decades ago believed it to be. Rather than thinking about the post-war period in terms of a decline, we might instead more productively consider Siena after the Medici takeover in terms of transition and adjustment. Recent scholars have more firmly emphasized the political autonomy that Siena managed to maintain and have cited the vibrant civic identity and culture that survived as evidence of Sienese vitality. That the Sienese found a place in the new Tuscan hierarchy and allowed themselves to live under Medici patronage can be interpreted as submission to an outside power, but it also reveals their ability to adapt to the social order that allowed them to retain power and continue to govern their city and state. The experience of Santa Maria della Scala and its administrators in the late sixteenth century certainly shows that this was the case, and further research into the history of the hospital during the seventeenth century would help us understand how this trend progressed and changed.

¹⁶ See Arrizabalaga, Grell, and Cunningham, *Healthcare and Poor Relief in Counter-Reformation Europe*; Henderson, Horden, and Purcell, *The Impact of Hospitals*.
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