

Adam J. Davis, *The Medieval Economy of Salvation: Charity, Commerce and the Rise of the Hospital* (Ithaca and London: Cornell University Press, 2019), pp. xv + 317, \$39.95, hardback, ISBN: 9781501742101.

Nicolas Rolin, chancellor to Philip the Good of Burgundy, believed that by establishing the Hôtel-Dieu in Beaune he had made a shrewd investment ‘in the interest of my salvation, so that by a happy transaction I may trade celestial merchandise against the earthly goods which I owe to divine bounty’. Suffused with the language of commerce, his foundation charter of 1443 would have made an appropriate post-script to Adam Davis’ fascinating study, which traces the origins of the symbiotic relationship between money-making, charity and piety that underpinned the rapid growth of the hospital movement in twelfth- and thirteenth-century Europe. As ‘the epicentre of European commerce and international exchange’ (p. 8), Champagne provides the ideal locus for an exploration of the ways in which two ‘revolutions’, one in attitudes to almsgiving and the other in the generation of wealth, gave rise to this new type of institution. Davis begins by examining changing attitudes to charity throughout the Christian West, as the idea that men and women who prospered through trade might buy their way to paradise by caring for the poor was soon translated into bricks and mortar. New models of sainthood, such as Elizabeth of Hungary and Louis IX, both of whom personally nursed the sick, offered further inspiration; even if comparatively few followed their example to the letter, many paid for others to act vicariously on their behalf. Not all of Christ’s poor represented a secure investment, however, and the distinction between the deserving and undeserving, so familiar to historians of latter periods, was already being articulated by churchmen. (Curiously, there is no mention of an intriguing ruling in the statutes devised in 1263 for the Hôtel-Dieu-le-Comte in Troyes which denied entry to paupers accompanied by birds or dogs, partly, no doubt, for hygienic reasons, but also as a means of excluding undesirables.)

Having established a secure theological context, Davis focuses upon the proliferation of hospitals across the ‘charitable landscape’ of Champagne. Some of these foundations were aristocratic, while others attracted support from the merchants and artisans who flocked to the region’s rapidly expanding towns. A chapter on patrons and social networks, which makes admirable use of unpublished archival material, reveals how popular hospitals were as recipients of charity from people of all classes and how central they became to the spiritual and economic life of local communities. It is a shame that, despite the emphasis placed upon the visibility of hospitals in urban centres such as Troyes and Provins, the publisher has provided only one map (of Champagne) and no plans regarding the layout, water supply and access to major thoroughfares of individual institutions.

As recipients of this outpouring of pious donations, the larger Champenoise hospitals, such as the Hôtel-Dieu-le-Comte, which generated £2000 a year in property and rents by 1300, played a major role in the urban economy. Davis’ claim that little work has previously been undertaken on this topic is questionable in an Italian and English context at least, but he presents striking new evidence of the influence that French hospitals could exert as landowners. One of the great strengths of this book is the wide range of sources upon which it draws, and its correspondingly broad approach to the role of hospitals in medieval life. A detailed examination of personnel, from the masters and senior clergy who maintained a constant round of intercessional prayers and masses for the benefit of patrons to the serfs and servants employed in essential menial tasks, underscores this sense of diversity. Brothers and sisters came from all social classes, some, as Davis points out, being almost as destitute as the paupers they tended, while others may simply have wished to purchase comfortable accommodation. It is interesting to note the early date at which reformers were beginning to complain about this issue, which became a major problem for late medieval hospitals, burdened with the cost of supporting high-status boarders.

The final chapter, on the place of the sick poor in the economy of care, ventures beyond Champagne to utilise evidence from England and northern France. It draws imaginatively upon the analysis of skeletal material to learn more about the identities and comparative health of hospital residents but shows less interest in the influence of contemporary medical beliefs about physical and spiritual well-being in an institutional context. Davis refers in passing to the regimen of health produced in 1256 by the celebrated physician Aldobrandino of Siena, who lived in Troyes, yet does not explore the ways in which

the ideas upon which it drew might have been applied to the welfare of hospital inmates, as much with regard to 'accidents of the soul' (such as confession, music and gardening) as in the matter of clean sheets and sophisticated plumbing. Evidently unaware that the wearing of precious stones for healing purposes was conventional medical practice, he describes their use as 'superstitious' (p. 263) and seems surprised that it should have been condoned at the Hôtel-Dieu-le-Comte. Such few caveats should not detract from what is by any standard a major work of scholarship, notable for its scope and originality. Davis wears his enviable learning lightly. He possesses the rare skill of writing about potentially challenging subjects in a lucid and accessible manner that will appeal beyond the narrow academic readership of most monographs. Above all, he succeeds in placing the medieval hospital at the heart of the social, economic and religious anxieties of men and women who sought, like Chancellor Rolin, to shed the spiritual millstone of wealth while still enjoying its tangible benefits.

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