From the Poor Clares to the Care of the Poor:
Space, Place, and Poverty in Sixteenth-Century Geneva[1]
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In 1535, on the feast day of Saint Bartholomew the Apostle, the Genevan nuns of the Order of St. Clare had what we might kindly call "unwelcome intruders."[2] Perhaps as many as two hundred men -- all Protestant iconoclasts -- forced their way into the nuns' convent, intent on its complete destruction. Carrying hammers, torches, and other instruments, the iconoclasts smashed statues, shattered windows, and broke through doors with "a great axe."[3] They destroyed chairs, pulpits, lecterns, books, and breviaries -- no holy object escaped their wrath. In the words of one of the sisters: "like ravenous wolves" the intruders "left no image or object of devotion untouched [and] the whole convent resonated with the violence."[4]

Just a few years earlier, before the onset of the Protestant Reformation, the Poor Clares had occupied a central place in Geneva's spiritual landscape, with their lifestyle of chastity and voluntary poverty praised and respected. But now, they found themselves the target of hatred and popular violence. Afraid for their safety, the sisters responded to the growing sentiments of antimonasticism by quitting the city. Less than one week after the penetration of their cloister, the Poor Clares -- with their cloaks and veils as their only protection -- left their convent and the city, never to return.[5]

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[2] I.e., 24 August 1535. The story of the penetration of the Convent of St. Clare is included in Genevan nun Jeanne de Jussie's chronicle of Geneva's Reformation, *Le levain du Calvinisme, ou commencement de l'heresie de Geneve, faict par Reverende Soeur Jeanne de Jussie. Suivi de notes justificatives et d'une notice sur l'ordre religieux de Sainte-Claire et sur le communauté des Clarisses à Genève par Ad.-C. Grivel*, ed. Gustave Revilliod (Geneva: Fick, 1865). Carrie F. Claus has translated Jussie's text to English as Jeanne de Jussie, *The Short Chronicle: A Poor Clare's Account of the Reformation in Geneva* (Chicago: The University of Chicago Press, 2006). All quotations from Jussie stem from Klaus's translation.
[3] Jussie, *Short Chronicle,* 139.
[4] Jussie, *Short Chronicle,* 140.
[5] The sisters travelled over forty kilometers by foot to Annecy (France), where the Duke of Savoy had promised they could be installed at the vacant Augustinian Monastery of the Holy Cross. On this journey, see Jussie, *Short Chronicle*, 164-86.

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But this is not the end of the story of the convent of the Poor Clares. Merely weeks after the nuns' departure, the city magistrates essentially "flipped" the building, turning it into a much-needed hospital for the involuntary poor, the *Hôpital Général*.[6] As in other urban areas, Geneva's population of impoverished inhabitants had dramatically increased during the late medieval and early modern periods, due to a variety of factors including disease, war, religious persecutions, and intermittent years of famine.[7] This led Geneva's magistrates to quickly seize the opportunity presented by a vacant, albeit damaged, building in the center of the city. The incredibly fast transformation from the home of the Poor Clares into a home for the care of the poor entailed a radical change in understanding and use of the building, demonstrating the strength of a new understanding, or ideology, of poverty that developed in the early modern era. This new ideology associated the state of destitution with negative connotations, and interpreted the poor

[6] The historiography of Geneva's *Hôpital Général* is surprisingly sparse. In the early 1970s Robert M. Kingdon published two essays on the hospital: "The Deacons of the Reformed Church in Calvin's Geneva," in *Mélanges d'histoire du XVIe siècle offerts à Henri Meylan* (Geneva: Droz, 1970), 81-90, and "Social Welfare in Calvin's Geneva," *American Historical Review* 76 (February 1971): 50-69. Following this, William C. Innes's *Social Concern in Calvin's Geneva* (Allison Park, PA: Pickwick Publications, 1983) paid great (but not exclusive) attention to the hospital. For the 450th anniversary of the hospital's foundation, Genevan historian and politician Bernard Lescaze edited a collection of essays on the hospital from its foundation to the present, but only two of the essays (by Bernard Lescaze and Micheline Louis-Courvoisier) focus specifically on the sixteenth century; *Sauver l'âme, nourrir le corps: de l'Hôpital Général à l'Hospice Général de Genève, 1535-1985*, ed. Bernard Lescaze (Geneva: Hospice Général, 1985). More recently, the hospital has made appearances in two exhibitions at the *Archives d'État de Genève* (AEG): "Crises et revolutions à Genève, 1526-1544" (2005) and "Côté chaire, côté rue. La Réforme à Genève, 1517-1617" (2017). The former exhibition has a published catalogue, Sandra Coram-Mekkey, Christophe Chazalon, and Gilles-Olivier Bron, eds., and Catherine Santschi, director, *Crises et Révolutions à Genève, 1526-1544* (Geneva: Fondation de l'Encyclopédie de Genève, 2006), with pages 65-9 devoted to the *Hôpital Général*. The latter exhibition was still on display at the time this paper was written but has an impressive virtual exhibition available from the homepage of the AEG: http://ge.ch/archives/ (last accessed 11 April 2018).

[7] On poverty in this time period, see Michel Mollat, *The Poor in the Middle Ages: An Essay in Social History* (New Haven, CT: Yale University Press, 1986), Carter Lindberg, *Beyond Charity: Reformation Initiatives for the Poor* (Minneapolis, MN: Fortress Press, 1993), and Robert Jütte, *Poverty and Deviance in Early Modern Europe* (Cambridge: Cambridge University Press, 1994). On poverty in Geneva, see Anne-Marie Piuz, "De la pauvreté et des pauvres," in *Vivre à Genève autour de 1600*, vol. 1, eds. Liliane Mottu-Weber, Anne-Marie Piuz, and Bernard Lescaze (Geneva: Slatkine, 2002), 229-47, and Laurence Wiedmer, "Pauvreté et assistance," in *L'economie genevoise de la Réform à la fin de l'Ancien Régime, XVIe-XVIIe siècles*, eds. Anne-Marie Piuz and Liliane Mottu-Weber (Geneva: Georg, 1990), 131-64.

themselves as lazy, impure, and even criminal. The city no longer wished to support the "profligate" lifestyle of the Poor Clares and other mendicant monastics and saw the empty convent as full of potential in proactively addressing the city's poverty problem. Here I will offer an analysis of the building's physical and spiritual transition from convent to hospital, which provides a new and nuanced picture of the use and transformation of space in the process of Reformation. Moreover, the convent/hospital offers a unique case study that exemplifies the change in the ideology of the poor that led to changes in social welfare systems throughout early modern Europe.

A Caveat: Early Modern Hospitals

It is important first to note the difference between our modern understanding of a "hospital," and the early modern use of this term. Today we tend to think of a hospital as a medical institution in which the sick or injured receive medical or surgical care.[8] In the Middle Ages and early modern era, a "hospital" denoted not a medical institution, but rather a charitable institution focused on providing hospitality and material care to the poor.[9] Geneva's new hospital was thus focused not on providing health care to the sick, but rather charitable care to the poor.

Place

The building that first served as Geneva's only home for religious women was built in the early 1470s, with its first nuns installed in 1474. The convent belonged to the reformed Franciscan Order of the Colettine Poor Clares and maintained the three monastic vows of obedience, chastity, and poverty. As an impoverished order, the Poor Clares relied on individual alms and personal generosity to secure their livelihood. Donors were motivated to give personal charity to the poor through the

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[8] At least, this is true for American English speakers -- British English retains the understanding of a *hospital* as a charitable institution as one of the possible (though least popular) definitions.

[9] Here I follow Christophe Chazalon (in his unpublished manuscript "Les hôpitaux de Genève au tournant de la Réformation") in using the definition of "hôpital" in the *Dictionnaire du Moyen Français (1330-1500)*: "A charitable establishment (often dependent on a monastery, practicing hospitality more than care) where pilgrims, the poor, the sick, and the needy are welcomed" (translation mine; see www.atilf.fr/dmf/definition /hôpital). Our modern conception of a medicalized "hospital" stems largely from institutions developed in the eighteenth century; see Mary Lindemann, ch. 5, "Hospitals and Asylums," in her *Medicine and Society in Early Modern Europe*, 2nd ed. (New York: Cambridge University Press, 2010), 157-92.

prospect of personal salvation.[10] According to church tradition, almsgiving and charity were interpreted as a good work, i.e., a method through which to earn salvation. Moreover, the poor were interpreted as ready-made intercessors to pray on behalf of a donor's soul, further ensuring the personal salvation of the generous giver. The Poor Clares benefitted from this economy of salvation by attracting the personal charity of Genevans as well as outsiders. The convent's central physical location, in the prestigious and heavily populated Bourg-de-Four and near the city's cathedral, ensured that the convent would constantly be in the eyes and thoughts of potential benefactors. Moreover, the convent sat at the intersection of trade routes to Italy, Switzerland, and Lyon (France), the latter of which was Geneva's greatest trading partner.[11] This location ensured that potential patrons, especially prosperous merchants and pilgrims, would frequently pass by the convent.

Just as the convent was physically central in the city, it was also central in Geneva's spiritual life. Since the Middle Ages, Christians had held a concept that spaces in which sacred acts (such as transubstantiation) occurred, or in which sacred people (such as nuns or hermits) lived, were imbued with a certain presence of the divine. And this is how the Genevan community saw the convent: the women's confinement, chastity, deprivation of luxuries, and maintenance of a strict rule all imbued the physical structure of the convent with a certain holiness. This was perhaps exaggerated by the fact that the convent was the city's only religious home for women, and that most of the nuns within it were either noble or came from outside the city itself -- so, with very few exceptions, Genevans would not have known these women before they became brides of Christ.[12] Regardless of why, the convent held a special place in the spiritual life of the city. Twentieth-century

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[10] Indeed, Luther provided support for this very practice in his Ninety-five Theses, arguing it was more beneficial than purchasing indulgences: "[43] Christians should be taught that one who gives to the poor, or lends to the needy, does a better action than if he purchases indulgences; [45] Christians should be taught that he who sees a needy person, but passes him by although he gives money for indulgences, gains no benefit from the pope's pardon, but only incurs the wrath of God." "The Ninety-five Theses, 1517," in *Martin Luther: Selections from His Writings*, ed. John Dillenberger (New York: Anchor Books, 1967), 494, 495.

[11] See William G. Naphy, "From Prince-Bishopric to City-State: Nationalizing the Church and Creating a Republic in Reformation Geneva," in *Layered Landscapes: Early Modern Religious Space Across Faiths and Cultures*, eds. Eric Nelson and Jonathan Wright (New York: Routledge, 2017), 141.

[12] A few of the nuns were from Geneva itself or, like Jussie, had attended school in Geneva before joining the convent. These nuns were particularly sought out by evangelicals during the time of the Reformation as potential converts; this included Jussie.

historian Henri Naef has even argued that the Genevan Small Council --
the city's most powerful and important governing body -- held particular
esteem for the Poor Clares.[13] Indeed, the council frequently requested
special intercessory prayers from the Poor Clares,[14] and occasionally even
compensated the sisters for these services.[15] For example, on 20 October
1514, the Poor Clares were given two florins in return for prayers for the
magistrate Conrad Hugues.[16] On 21 April 1525, the council asked the
convent to celebrate a mass for the repose of the souls of dead lepers.[17]
And in the middle of the city's war with the House of Savoy, the council
singled out the convent of Saint Clare by importuning the sisters to pray
"for the tranquility of the city."[18] Perhaps in part due to the special
relationship that developed between the council and the convent, the
sisters were able to gain a particular spiritual prominence in the city
despite being a relatively recent addition to Geneva.[19]

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[13] Henri Naef, *Les Origines de la réforme à Genève*, vol. 1 (Geneva: Jullien, 1936), 145-46. E.g.,
the council often sided with the convent when neighbors, such as Claude Bouloz,
attempted to construct buildings that would violate the nuns' strict enclosure by allowing
outsiders sight lines into the convent's garden. The sisters brought a complaint against
Bouloz on 24 November 1514; no action was taken against Bouloz until January 1515,
when the offer of twelve *florins* led to the destruction of the offending building; see
Registres du Conseil de Genève (hereafter RC) 8:7, 15.

[14] Sometimes all Geneva's monastics were invoked together, such as twice in May 1502
when all of Geneva's religious were asked to pray on behalf of the city and its Prince-
Bishop; RC 6:35, 50.

[15] The payments for prayer services might indicate that the convent did not always receive
enough money from personal charity to support their sparse lifestyle.

[16] RC 7:433. Hugues had served on the council as a syndic (one of Geneva's four mayors),
with his last appearance, according to the council records, on 13 September 1514 --
presumably, the sisters were asked to pray for Hugues either upon his contracting a
serious illness or his death. For Reformation historians, Conrad Hugues is most well-
known as the father of Besançon (or Bezanson) Hugues, a famed *eidgenot* (Swiss
Confederate). See Henri Naef, "Bezanson Hugues, son ascendance et sa postérité, ses amis
fribourgeois (Notes et documents inédits)," *Bulletin de la Société d'histoire et d'archéologie de
Genève* 5 (1931-33): 335-573.

[17] Surprisingly, the request does seem to be for a single mass, rather than multiple masses:
"in Sancta Clara faciat celebrari missam pro remedio anime ipsius deffuncte leprose." RC
10.46.

[18] "Pro transquilitate civitatis." On 29 January 1525; RC 9:477. On Geneva's revolution
against Savoy, and the tension of this movement with the Reformation, see esp. Robert M.
Kingdon, "Was the Protestant Reformation a Revolution? The Case of Geneva," *Studies in
Church History* 12 (1975): 203-222; and Jeannine E. Olson, "Reformation and Revolution in
Calvin's Geneva," *Halcyon: A Journal of the Humanities* (1985): 93-103.

[19] Indeed, compare the founding dates of the men's religious houses in the city: the
Benedictines in the eleventh century, and the Dominicans and Franciscans in the
thirteenth century. Only the Augustinian Hermits, located well outside the city walls,
were established later than the convent (in 1480). The location of the monasteries and
churches in Geneva, along with approximate founding dates for the former, can be found

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Although this physical and spiritual centrality served the convent well before the Reformation, it perhaps worked against the convent as Reformation sentiments -- including antimonasticism and iconoclasm -- spread. The penetration of the convent in August 1535 was only the last and most violating in a string of iconoclastic incidents in the early Genevan Reformation that affected the convent and terrified the nuns.[20] And despite their previous importance in the city, the Poor Clares were quickly forgotten by Geneva as the city magistrates turned to more pressing matters during the Reformation -- such as controlling acts of iconoclasm and addressing the problem of poverty.[21]

Poverty

Before its destruction, the Convent of the Poor Clares had functioned as a home for a select group of the "voluntary" poor: those, like nuns or traveling pilgrims, who renounced material wealth as part of a religious order or due to another religious vocation, to become more Christ-like, or otherwise out of love for God.[22] But, of course, not all of the impoverished lived in a condition of insecurity voluntarily. And during the transition from the late Middle Ages to the early modern era, the

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in an extremely helpful map in E. William Monter, *Calvin's Geneva* (New York: Wiley, 1967), 6.

[20] For early acts of iconoclasm that impacted the Poor Clares, see Jussie, *Short Chronicle, passim.* On iconoclasm in Geneva, see Carlos Eire *War Against the Idols: The Reformation of Worship from Erasmus to Calvin* (New York: Cambridge University Press, 1986), 122-51. On the larger context of iconoclasm in Switzerland, see Lee Palmer Wandel, *Voracious Idols and Violent Hands: Iconoclasm in Reformation Zurich, Strasbourg, and Basel* (New York: Cambridge University Press, 1995).

[21] Indeed, the only mention in the city's records of the sisters independent of the physical building of the convent after their departure occurs two weeks later, 16 September 1535, when Lady Leonarde Vindrette (the wife of Peter Vindret, a shoe seller) petitioned the council for some of the goods left behind by the sisters; RC 13:309. Lady Vindrette appears in Jussie's *Short Chronicle,* coming to comfort the Poor Clares immediately after the violation of their convent by the iconoclasts (see 141). Jussie identifies Vindrette as a prominent Catholic burgher and the "wife of a rich merchant." Perhaps the reason that Vindrette came to the Council two weeks after the departure of the Poor Clares was because the convent was already being repurposed into a sanctuary for the city's poor; Klaus claims as much; see her introduction to the *Short Chronicle*, 12. Protestant reformer Antoine Froment, who preceded John Calvin as an influential reformer in the city, did include the departure of the Poor Clares in his chronicle of the Reformation (completed in 1554, but publication was suppressed by the city); *Les actes et gestes merveilleux de la cité de Geneve; Nouvellement convertie à l'Evangille faictz du temps de leur Reformation et comment ils l'ont receue redigez par escript en fourme de Chroniques Annales ou Hystoyres commençant l'an MDXXXII* (Geneva: I.G. Fick, 1854), 162-66.

[22] On the voluntary poor, see Lindberg, *Beyond Charity*, 21.

number of the involuntary poor in urban centers increased at the same time that the conditions of poverty worsened. This was due to a number of micro- and macrolevel factors, such as unchecked population growth due, at least in part, to a decline in the death rate after the Black Death, but more importantly to a dramatically increased and unsustainable level of immigration into cities.[23] Other macrolevel factors included what we might today feel inclined to call "acts of God": events of drought, climate-related famine, and other natural disasters. Individual families were further affected by disruptions in labor, such as the larger economic problems of increased foreign competition, as well as the smaller (but no less disruptive) problems of reliance on seasonal work, and intermittent inability to work due to illness, emergency, accident, and (for women) the postpartum lying-in period.[24] A large number of surviving children could be devastating to a family's personal finances, with too many mouths to feed with the income of a day laborer or even an artisan's salary. Even those who engaged in labor or practiced a trade were forced to live primarily hand-to-mouth and were likely just one illness or accident away from complete destitution. Perhaps a majority of late medieval and early modern European city-dwellers' finances succumbed to these factors, leading to the swelling of the ranks of the involuntary urban poor. [25] One Reformation historian has recently stated that, according to modern Western standards, likely nine out of ten early modern Europeans lived below the poverty line.[26] In Geneva, these common factors were exacerbated by the city's frequent bouts of plague and continued warfare against Savoy, both of which -- beyond the obvious casualties -- disrupted trade and labor, causing great economic hardships and exacerbating Geneva's poverty problem.

The worsening of urban poverty led magistrates across Europe to change their approach to charity and poor relief. And although this trend had medieval roots, it manifested most distinctly in the period between the early 1520s and the mid-1540s -- exactly coinciding with the spread of the Reformation. This has led some historians to describe the sixteenth-

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[23] See Natalie Zemon Davis, "Poor Relief, Humanism, and Heresy," in her *Society and Culture in Early Modern France* (Stanford, CA: Stanford University Press, 1975), 20-1 and 22-4 for further explication of some of the following factors.

[24] Many women helped their husbands with his labor, or performed other integral in-home labor, such as brewing, that supplemented the family income. On women's labor, see esp. Merry E. Wiesner-Hanks, "Women's Economic Role," ch. 4 of her *Women and Gender in Early Modern Europe*, 3rd ed. (New York: Cambridge University Press, 2008), 101-37.

[25] Carter Lindberg claims as much; see *Beyond Charity*, 33-4.

[26] Joel F. Harrington, *The Unwanted Child: The Fate of Foundlings, Orphans, and Juvenile Criminals in Early Modern Germany* (Chicago: University of Chicago Press, 2009), 75.

century efforts to reform poor relief as a secondary reformation: the "reformation of social welfare."[27] The unique circumstances of urban reform intersected with a new understanding of poverty that developed over the *longue durée.* Whereas those medieval Europeans who were better off had perceived of the poor as Christ-like (indeed, as the Poor of Christ, *pauper Christi*) and utilized the economy of salvation for their own benefit, sentiments largely turned against this "pay-to-pray" scheme during the Reformation.[28] Reformers rejected voluntary poverty by attacking monastic orders and the practice of pilgrimage, as well as other attempts to "earn" (or, in their view, buy) salvation.[29]

In the late medieval period further distinctions had begun to be applied within the category of the "involuntary" poor: some of the impoverished were cast as "worthy," and juxtaposed with the "unworthy" poor. The distinctive category of the "worthy" poor had roots in the Bible, in which particular categories -- most notably widows, orphans, and the sick -- were seen as particularly worthy of care.[30] Able-bodied beggars were increasingly seen in opposition to the "worthy" poor as the new understanding of poverty cast all beggars as lazy and

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[27] Some authors speak of a pan-European "charitable revolution" in the twelfth and thirteenth centuries; see Sharon Farmer, "From Personal Charity to Centralized Poor Relief: The Evolution of Responses to the Poor in Paris, c. 1250-1600," in *Experiences of Charity, 1250-1650,* ed. Anne M. Scott (Farnham, England: Ashgate, 2015), 38; see also James Brodman, *Charity & Religion in Medieval Europe* (Washington, D.C.: Catholic University of America Press, 2009). On the "reformation of social welfare" (which, until the late nineteenth century, was often conflated with the Protestant Reformation by confessional historians, rather than seen as a separate phenomenon), see the essays in Ole Peter Grell and Andrew Cunningham, eds., *Health Care and Poor Relief in Protestant Europe 1500-1700* (London: Routledge, 1997) and Ole Peter Grell, Andrew Cunningham, and Jon Arrizabalaga, eds., *Health Care and Poor Relief in Counter-Reformation Europe* (London: Routledge, 1999).

[28] On the *pauper Christi*, see Lindberg, *Beyond Charity,* 21.

[29] Luther railed against pilgrimages and monasticism throughout his "The Pagan Servitude of the Church" (1520), as well as his "Appeal to the Christian Nobility of the German Nation" (also 1520); included in Dillenberger, *Martin Luther, op. cit.*, 249-361 and 403-87. Calvin likewise rejected pilgrimages, often tying them into superstitious Catholic practices that should be abolished; see his "Ordinances for the Supervision of Churches in the Country" (1547), included in J.K.S. Reid, ed., *Calvin: Theological Treatises* (Philadelphia, PA: The Westminster Press, 1954), 77-82. Calvin's views against monasticism can be found in his *Institutes of the Christian Religion,* 4.13.14.

[30] E.g.: Exodus 22:21-22: "Thou shalt neither vex a stranger, nor oppress him … Ye shall not afflict any widow or fatherless child;" Psalm 82:3-4: "Defend the poor and fatherless: do justice to the afflicted and the needy. Deliver the poor and needy […];" Zechariah 7:10: "oppress not the widow or the fatherless, the stranger, nor the poor;" James 1:27: "[…] visit the fatherless and widows in their affliction…" Verses from the King James Bible.

idle, and the poor were increasingly interpreted as morally inferior.[31] By the late Middle Ages, the new, negatively-charged understanding of the poor had firmly taken root, and this only became more entrenched during the early modern period.[32] Facets of early modern urban life contributed to the maintenance and even growth of this negative perception. First, rural dwellers who flocked to cities in search of increased opportunities and better lives often became impoverished beggars instead. These foreign beggars and vagrants (sometimes called the "wandering poor") were seen as problematic and dangerous, and even aesthetically undesirable.[33] Second, perhaps due to the increase in foreign beggars, poverty became increasingly associated with criminality, disease, and the potential for social unrest. As the early sixteenth century saw increased instances of disease, especially plague and syphilis, the so-called "Great Pox," and social unrest, such as the Peasants' Revolt in the Holy Roman Empire, the poor became an easy scapegoat for all civic disruptions.[34] As

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[31] There was also a developing concern about swindlers and false beggars, including the creation of a literature devoted to instructing readers how to identify and avoid such swindlers. See Lindberg, *Beyond Charity,* 47-51; cf. our modern category of and concern with so-called "welfare queens," first introduced by Ronald Reagan in 1976 and still relevant to contemporary political and cultural discussions; see esp. Sharon Hays, *Flat Broke with Children: Women in the Age of Welfare Reform* (New York: Oxford University Press, 2004).

[32] There was also a developing concern about swindlers and false beggars, including the creation of a literature devoted to instructing the reader on how to identify and avoid such swindlers Luther was notably concerned with this development). See Lindberg, *Beyond Charity,* 47-51. Cf. our modern category and concern with so-called "welfare queens," first introduced by Ronald Reagan in 1976 and still relevant to contemporary political and cultural discussions. See esp. Sharon Hays, *Flat Broke with Children: Women in the Age of Welfare Reform* (New York: Oxford University Press, 2004).

[33] I develop such an argument -- that, at least in sixteenth-century Geneva, the poor in general and beggars in particular were viewed as aesthetically displeasing -- in my dissertation.

[34] Lindberg points to the association of poverty with criminality, see *Beyond Charity,* 45; see also Harrington, *The Unwanted Child,* 141. Farmer notes the association of the poor with the "Great Pox," see "From Personal Charity to Centralized Poor Relief," 23. On the "Great Pox," see Jon Arrizabalaga, John Henderson, and Roger French, eds., *The Great Pox: The French Disease in Renaissance Europe* (New Haven, CT: Yale University Press, 1997). There seems to be a complete dearth of research on syphilis in Geneva. In his 1906 monograph on medicine in Geneva, Léon Gautier states that, to his surprise, "I have not found anywhere anything relating to syphilis" despite the fact that Geneva was a "city of travel and of commerce" and "had, like its neighboring countries, paid its tribute to the great epidemic of the 'mal français' [French disease] which coincided with the Italian wars from the end of the fifteenth to the beginning of the sixteenth centuries." Léon Gautier, *La médecine à Genève jusqu'à la fin du dix-huitième siècle* (Geneva: J. Jullien, 1906), 75. On the plague, see William Naphy and Andrew Spicer, *Plague: Black Death & Pestilence in Europe,* revised ed. (Stroud, Gloucestershire, UK: The History Press, 2009). On the plague in

the poor became increasingly associated with criminality, disease, and social unrest, magistrates began developing legislation that criminalized poverty by both forbidding and punishing begging as well as vagrancy.[35] Some cities, including Geneva, also saw the development or maintenance of segregated housing sectors that pushed the poor into a city's periphery, or out of the city altogether.[36] Cities also began to develop institutions to house (or, alternately, institutionalize) the poor, which has largely been interpreted by social historians as an effort to control the poor.

The period of the Reformation, and especially the 1520s, was a watershed moment in the development of the new ideology of the poor. In cities like Geneva that experienced tumultuous transitions from Catholicism to Protestantism, antimonasticism suddenly replaced the former positive sentiments toward the voluntary poor, leading to attacks on religious institutions and the expulsion of the clergy.[37] Protestants' greater focus on the text of the Bible brought the biblical category of the worthy poor to the forefront of reforming magistrates' minds -- and this perhaps explains why we see increased concern for widows, orphans, and the sick at the same time as increased contempt for able-bodied beggars. Protestant magistrates in Geneva and other cities were increasingly concerned to remove all begging from within their city walls,

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Geneva, see esp. William G. Naphy, "Plague-Spreading and a Magisterially Controlled Fear," in *Fear in Early Modern Society*, eds. William G. Naphy and Penny Roberts (New York: Manchester University Press, 1997), 28-43; and idem, *Plagues, Poisons, and Potions: Plague-Spreading Conspiracies in the Western Alps c. 1530-1640* (New York: Manchester University Press, 2002). On the German Peasants' War, see James M. Stayer, *The German Peasants' War and Anabaptist Community of Goods* (Montreal and Kingston: McGill-Queen's University Press, 1991), and Thomas A. Brady, Ch. 10, "A Revolution of the Common Man," in his *German Histories in the Age of Reformations, 1400-1650* (New York: Cambridge University Press, 2009), 185-206.

[35] Prohibitions of public begging in Geneva began as early as 1492, although repeated efforts in the 1530s and 1540s make it clear that these prohibitions were never entirely effective. For Geneva's anti-mendicancy laws, see *Les sources du droit du Canton de Genève*, vol. 2, *De 1461 à 1550* (hereafter SDG), eds. Émile Rivoire and Victor van Berchem (Aarau: H.R. Sauerländer & Cie, 1930), 121, 284, 300, 365, and 385.

[36] In Geneva, this manifested in the medieval era in the *faubourgs* outside of the city walls -- which were razed in the early sixteenth century, pushing the poor into the city itself and increasing the visibility of poverty in the city. On the faubourgs, see Louis Blondel, *Les faubourgs de Genève au XVme siècle* (Geneva: Jullien, 1919). In Nuremberg, housing segregation manifested as disallowing the poor to live within the inner city; on this, see Lindberg, *Beyond Charity*, 41, 45.

[37] On antimonasticism, see especially the essays in Peter A. Dykema and Heiko A. Oberman, *Anticlericalism in Late Medieval and Early Modern Europe* (Leiden: Brill, 1993). On antimonasticism in Reformation Geneva, see Robert M. Kingdon, "Anticlericalism in the Registers of the Geneva Consistory, 1542-1564," in *idem*, 617-24.

which (in their view) would also decrease instances of crime, disease, civic unrest, and even sin.

Space and the Transformation from Convent to Hospital

Geneva's effort to care for the involuntary poor through the creation of a dedicated poor hospital was part of this long-term trend that resulted in major changes in approaches to charity and poor relief throughout early modern Europe's urban centers. This perhaps explains the swiftness with which Geneva's magistrates transformed the vacated convent into a home for the involuntary poor. Just two weeks after the major iconoclastic action that devastated the convent, and within one week of the sisters' departure, the city council was already hearing petitions to redistribute the goods of the Catholic Church to the poor.[38] Redistribution of wealth may seem radical -- and, indeed, was a practice associated with the Radical Reformation[39] -- but other Swiss cities, such as Bern and Basel, had undergone such efforts during their own early (magisterial) reformations.[40] By 29 September -- one month to the day after the sisters left -- we can assume that the transformation of the building from a space for the voluntary to the involuntary poor was largely complete, as on this day five members of the Council of Two Hundred were named *procurators* (administrators) of a new hospital, swearing an oath "to faithfully administer it without fraud."[41] For the next six weeks, the new hospital regularly appears in the records of the council, providing clues as to how the transformation occurred. We first see the new institution called "the hospital of the poor" (*hospitalis pauperum*) on 12 October, when the five *procurators* ask for -- and receive -- permission to give cloths (*pannis*) to the poor. At this stage, the council

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[38] On 7 and 11 September; RC 13:304 and 307. It seems that this redistribution effort was spearheaded by Johannes Amadeus Curtet, the lay *procureur* of late medieval Geneva's most important charitable fund, *La Boîte de Toutes Âmes* (The Box for All Souls in Purgatory). On *La Boîte*, see Kingdon, "Deacons of the Reformed Church," 82-3; Jean-Jacques Chaponnière and L. Sordet, "Des hopitaux de Genève avant la Réformation," *Mémoires et documents publiés par la Société d'histoire et d'archéologie de Genève* 3 (1844), 341-65; and Chazalon, "Les hôpitaux de Genève."

[39] See Stayer, *The German Peasants' War*; and Werner O. Packull, *Hutterite Beginnings: Communitarian Experiments During the Reformation* (Baltimore, MD: The Johns Hopkins University Press, 1995).

[40] See Eire, *War Against the Idols,* 113 and n., 118; Lee Palmer Wandel, *Always Among Us: Images of the Poor in Zwingli's Zurich* (New York: Cambridge University Press, 1990); and Wandel, *Voracious Idols and Violent Hands.*

[41] These men were Conradus Victy, Claude Bernard, Aymo Vullielmi, Franciscus Comitis, and the aforementioned Curtet. RC 13:317.

determined that the hospital should receive goods and properties from the city's Catholic churches, including the cathedral, ensuring the redistribution of church goods to benefit the involuntary poor.[42]

On 12 November, the council proposed Claude Solomon (and his wife) to serve in the new hospital in the position of *hospitalier,* or main hospital administrator.[43] As *hospitalier,* Solomon would live in the hospital along with his family and oversee the hospital's daily functioning -- e.g., ensuring that the hospital's patients (or, more properly, boarders) had adequate clothing, shoes, and sustenance. This proposition completed the appointment of personnel for the new institution. Two days later, the General Council officially (i.e., legally) established the *Hôpital Général* (General Hospital).[44] Like the eventual May 1536 proclamation that established the Protestant Reformation in the city, the establishment of the hospital was a simple tying up of legal loose ends: clearly the former convent was already operating as a hospital for the poor by the time of the November proclamation. Indeed, historians tend to elevate this date and ignore the reality that within several weeks the vacated convent was already functioning as a hospital and providing much needed relief to the city's involuntary poor.[45]

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[42] RC 13:324. On 11 September, the Council records consider the distribution of goods "pro pauperibus hosptalium," for the poor of the hospitals (RC 13:307). Thus in the four weeks between mid-September and mid-October, we see a transformation from speaking of the poor living in the city's multiple hospitals, to a single, centralized hospital that served all of the city's poor.

[43] This is the first time we see the appellation of "general hospital." RC 13:348.

[44] RC 13:351-52; SDG, 302-4. This motion also officially closed a number of the city's small medieval hospitals, consolidating them into one central institution. Despite this official closure, a number of these institutions continued to function, some for several decades -- and we can see evidence in this of archival records of the *Hôpital Général*. See Chazalon, "Les hôpitaux de Genève au tournant de la Réformation."

[45] The delay between the departure of the Poor Clares and the official establishment of the General Hospital likely reflects the typical meeting schedule of Geneva's councils, rather than a delay in actual use or creation of the hospital, as some scholars seem to believe. Although the city's Small Council met at least three, and often four, times per week to discuss the city's business, and the Council of Two Hundred met at least once a month to vote on legislation, the General Council usually met only twice per year. One of these meetings regularly occurred in January, to elect the city's four syndics, and the second regular meeting occurred each November, with the primary business of electing the judge of the civil court and establishing the price of wine (see Monter, *Calvin's Geneva,* 145). Indeed, when the General Council met on 14 November 1535 and established the hospital, it first set the price of wine, then established the hospital, and finally turned to its regular November elections; RC 13:351-52. So the creation of the hospital was not special enough to require its own special meeting; but rather occurred as part of the city's regular business in 1535. It is perhaps notable that the meeting of the General Council that officially established the Protestant Reformation in the city (on 21 May 1536) was outside

The transformation of the building from convent to hospital required, first and foremost, a radical retooling of the existing physical space to accommodate the needs of the hospital's new residents. In the early years of the *Hôpital Général*, this involved no changes or improvements in size or layout, although eventually auxiliary buildings were added and the hospital itself underwent major reconstruction.[46] The original building consisted of three levels: a basement (built into a hillside), a ground floor, and a second story, separated into two wings and connected by a gallery. Each wing had its own garden.[47] We can

of the regular meeting schedule of the General Council, and moreover that two regular meetings of the General Council had passed between the tumultuous summer of 1535 and the city's final, and somewhat anticlimactic, proclamation of Protestantism in the city; RC 13:576-77. At this special May 1536 meeting the General Council also discussed school, particularly establishing free schooling in the city for the poor, as well as an issue with the city's *pâtissiers* (pastry chefs) concerning setting standard prices between the *pâtissiers*, bakers, and tavern owners, a matter which was frequently discussed in the spring of 1536: on 31 March (RC 13:512), 7 May (RC 13:561), 19 May (RC 13:576), this meeting on 21 May, and finally on 22 May (RC 13:577).

[46] E.g., the *Hôpital Général* acquired the nearby *Hôpital Bolomier* already in November 1535, but others, such as the hospital called *la Madeleine* continued to exist separately from the *Hôpital Général* until at least 1540. In the early eighteenth century (1706-12), the hospital was nearly entirely razed and rebuilt, preserving only the former chapel and some structural walls. This included the construction of the so-called *Discipline* (also known as the Prison of Saint-Antoine). Plans for this construction can be viewed in the AEG: Ee3 (Hôpital, souterrains par Guillebaud, 1835); Ee6 (Plan de l'Hôpital, rez s/le Bourg-de-Four par Guillebaud, 1835); Ee7 (Hôpital, Murs du 2e étage par Guillebaud, 1835); Ee8 (Hôpital, Coupes longitudinales par Guillebaud, 1835); and Ee19.1 (Plan du bâtiment principal de l'Hôpital au Bourg-de-Four par Guillebaud, 1835). The hospital remained in its original location until 1856, when the city completed the construction of a new Cantonal Hospital, replacing the old *Hôpital Général*. At this stage, some new construction occurred in the existing structure, and the *Palais de Justice* (courthouse) was installed in the building in 1860 -- and remains the current occupant of the former convent/hospital today. The *Palais de Justice* offers a brief history of its building on its website at ge.ch/justice/sites/default/files/justice/common/brochures/histoire/ Historique_batiments_palais_justice.pdf (last accessed 9 June 2017). See also Anastazja Winiger-Labuda, "L'ancien Hôpital général (actuellement Palais de justice), place du Bourg-de-Four 1," in *Les Monuments d'art et d'histoire du canton de Genève*, vol. IV, *Genève, espaces et édifices publics,* directed by Isabelle Brunier (Bern: Gesellschaft für Schweizerische Kunstgeschichte, 2016), 193-209, which includes color photographs of the remains of the convent/hospital; and Livio Fornara and Barbara Roth-Lochner, "Un bâtiment neuf pour des ambitions nouvelles. La construction de l'Hôpital Général de Genève de 1707 à 1712," in *Sauver l'âme, op. cit.,* 179-98. On the *Discipline*, see Anne-Marie Barras-Dorsaz, "Un mode de repression genevois aux XVIIe et XVIIIe siècles: La maison de Discipline," in *Sauver l'âme, op. cit.,* 77-112.

[47] We can establish the convent's architecture through several avenues. First, on the fact that all Colettine convents were set up in the same fashion; second, by extrapolating from the Order of St. Clare what architectural features would be necessary; third, by looking to contemporary engravings and later maps, such as those held in the AEG; and finally, by

conceive of the architecture of the convent as consisting of three distinct sectors intended for three distinct audiences: (1) a public sector, (2) the men's sector, which took up the right wing, [48] and (3) the private and enclosed cloister, the left wing, accessible only to the nuns.[49]

At the time of the Reformation, the convent was home to twenty-four nuns. Their cloister included a chapter room, infirmary, kitchen, refectory, workrooms, and individual rooms (*cells*) as well as a shared dormitory. The two floors of the cloister formed a square surrounding an open courtyard with a private well. The nuns had a large, private garden, accessible only through the cloister, and shielded from view by large walls as well as the city wall to the rear.[50] The building also further housed the four men attached to the convent -- two father confessors and two lay brothers, who slept in the upper story of the right wing. In total, then, the convent was home to twenty-eight inhabitants, all reformed Franciscans living in voluntary poverty and according to a monastic rule.[51]

Although there are no extent records of the very first residents of the hospital, we can look to the existing sources, held at the *Archives d'État de Genève* (Genevan State Archives), to examine the early transformation of the building. Claude Magnin, who became *hospitalier* in August 1538, conducted a patient "inventory" in September of that year, just three years after the hospital's establishment.[52] According to Magnin's records, the hospital was at that time home to seventy-one

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examining Jeanne de Jussie's chronicle (see above, note 2). Archaeologist Edmond Ganter further suggests "exploring the cellars" of the Palais de Justice (about which, see note 46, above); *Les Clarisses de Genève 1473-1535-1793* (Geneva: Éditions de la Société Catholique d'Histoire, 1949), 173. See also Winiger-Labuda, "L'ancien Hôpital général."

[48] At first blush it may seem curious that a women's religious house had dedicated men's quarters; however, convents typically did have religious men attached to them -- this was necessary for nuns to participate in the sacraments of confession and communion.

[49] On the meaning of the architecture of the convent, see esp. Carrie F. Klaus, "Architecture and Sexual Identity: Jeanne de Jussie's Narrative of the Reformation of Geneva," *Feminist Studies* 29, no. 2 (Summer 2003): 279-97. On the meaning of convent architecture more generally, see Roberta Gilchrist, *Gender and Archaeology: Contesting the Past* (London: Routledge, 1999).

[50] Large walls were built in December 1477 in the rear garden to ensure the nuns' privacy and strict confinement; RC 3:54; see also Ganter, *Les clarisses,* 36.

[51] See note 47, above; and especially Ganter, *Les clarisses*.

[52] AEG Arch. hosp. Fe1, 92r-94v. Magnin was the fourth *hospitalier*; Claude Solomon had served for just two months before his untimely death in late January of 1536. Solomon was succeeded by Lois Bernard, who served from 22 February 1536 until 14 June 1537, when Jean Leurat became *hospitalier*. After succeeding Leurat, Magnin became the longest serving *hospitalier* in the hospital's first (and rather tumultuous) decade by continuing for nearly two years. See Kingdon, "Deacons of the Reformed Church," 90.

pensionnaires (boarders) -- mostly children, but also a number of elderly, sick, disabled, and widowed men and women. This number does not take into account others who would have also lived within the hospital, including Magnin and his family, as well as other live-in servants and employees.[53] Within the first few years of the hospital, then, the number of inhabitants supported within the building more than doubled, and nearly tripled. By the 1550s, when Geneva was experiencing colossal foreign immigration which more than doubled the city's population due to the tumults of the French Wars of Religion, the hospital regularly housed between one hundred and one hundred fifty residents.[54]

The hospital was able to accommodate this increased population through a new utilization of the building's existing spaces. Unlike a convent, a hospital was not imbued with a sense of the divine -- rather, the *Hôpital Général* operated out of a sense of necessity. This is perhaps what led the hospital to ignore or relax the rigid separation between genders that had existed within the convent's space. Indeed, men and women were now housed together within the former cloister, with women living in the individual rooms on the Salève (right) side, and men in the individual rooms and dormitory (*grand dotoir*) on the lake (left) side.[55] There was, then, a soft sense of separation between the sexes in the hospital, but this still entailed a radically different use and meaning of the space of the former convent.[56]

In the early years of the hospital, it is likely that most of the hospital's women were each afforded their own, private room: the women's side of the former cloister featured eight or nine individual

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[53] The September 1538 inventory does include two servants, Anthoyne Rey d'Evordes, who seemingly was previously a hospital patient and returned to live in the hospital as a servant: "retourne en hospital pour server comme par avant"; and Don Johan Grenier, who is explicitly stated as living at the hospital as a servant and not by command of the city; AEG Arch. hosp. Fe1, 94r. Other potential live-in servants could have included a gardener, a *charreton* (lit. "carter," better translated as a porter), and a shepherd who cared for the hospital's livestock, including half of a dozen cows; see Léon Gautier, *L'Hôpital-Général de Genève: de 1535 à 1545* (Geneva: A. Kündig, 1914), 25.

[54] On Geneva's population increase in the 1550s, see esp. E. William Monter, "Historical Demography and Religious History in Sixteenth-Century Geneva," *Journal of Interdisciplinary History* 9, no. 3 (Winter 1979): 399-427. On Geneva's experience with the French Wars of Religion, see Robert M. Kingdon, *Geneva and the Coming of the Wars of Religion in France, 1555-1563*, repr. (Geneva: Droz, 2007; first published 1956).

[55] See Gautier, *L'Hôpital Général*, 32; and Micheline Louis-Courvoisier, "L'Hôpital Général et ses assistés (1535-1555) L'Hôpital ses responsables et ses pensionnaires," in *Sauver l'âme, op. cit.*, 22.

[56] Compare this to the strict gender separation maintained in Nuremberg's Findel, including separate gender-based entry doors, which cared for that city's child wards after the Reformation. See Harrington, *The Unwanted Child*, 238, 240, 245, and 254.

rooms, each outfitted with one or two simple pine beds. According to Magnin's inventory, there were ten widows or old women living at the hospital in September 1538.[57] Private rooms and individual beds were quite the luxury, as it was entirely common in the early modern era for two or even three people to share a bed, and this was also a typical practice within hospitals.[58] At this stage, the six men -- elderly or otherwise infirm -- who shared the *grand dotoir* were likely afforded individual beds, as well.[59] Elderly inhabitants brought their own personal effects to the hospital, allowing them to personalize their rooms, or otherwise make themselves more comfortable. This was a beneficial arrangement for the elderly, as well as for the hospital, which inherited the goods of its *pensionnaires,* and could choose to either keep or sell such items.

The hospital's children -- primarily orphans, but also abandoned and illegitimate children -- who made up almost three-quarters of the hospital's residents -- were not afforded the same luxury of an individual room or even bed.[60] Children rather slept on *paillasses,* straw mattresses, on the floor, which were likely shared. In September 1538, there were fifty-five total children living in the hospital.[61] Although it is difficult to

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[57] AEG Arch. hosp. Fe1, 92-94v. The widow Lalye (92r); Loysse, wife of Claude Laborieur (92r); Junon Trouvaye, who served as the hospital's cook (92r); Grosse Pernon (93v); Philliberta, who was ill (93v); Pernete, the widow of Johan Chevalier (94r), Robelle, the widow of Sire Pierre Tissot (94v); and Pernon Ursella (94v). Here I additionally include La Grosse Claude, who is noted as simpleminded ("e[s]t toute simple"; 92r).

[58] Indeed, Sharon Farmer provides the case of Paris's Hôtel-Dieu, in which as many as fifteen people shared a single bed; "From Personal Charity to Centralised Poor Relief," 26.

[59] AEG Arch. hosp. Fe1, 92-94v. This included Gros Pierre, who was lame (92r); Claude Joussey, infirm, who worked as the *fournier* (baker or minder of the oven) when he was well (92r); Loys Marma, who was blind (93r); Pierre Sarralion, who was inflicted by a condition that might be gout (94r); and Anthoyne Rey d'Evordes and Don Johan Grenier (94r), both described above in note 53.

[60] In 1538, children made up 77.5% of the hospital's inhabitants. AEG Arch. hosp. Fe1, 92-94v.

[61] The fifty-five children included eighteen girls, twenty-eight boys, and a further nine children whose gender cannot be determined (due in part to the practice of utilizing the same name, such as Claude, for both genders). This number does not include a further two children, one boy and one girl, whom Magnin records in his September inventory as deceased. The boy orphan Anthoyne was apparently "killed by a wolf" (93r), and it is likely that this death occurred while Anthoyne was living at the hospital. For the orphan Clayre, it is not clear if she was living at the hospital at the time of her death, as she is recorded as having died *devant,* in front of, the hospital (93v). This perhaps indicates that Clayre was abandoned at the hospital's door when she died, and so had not yet become a hospital resident. It appears that the hospital commonly paid for burials of the poor. Indeed, elsewhere in the register, Magnin records payments for seven burials during the month of September 1538, four of which are children. It is likely that Anthoyne's burial

determine where children were actually housed within the hospital, historians assume that children lived in the right wing of the hospital (the former men's quarters) under the direct supervision of another live-in hospital administrator, the *magister*.[62] The magister was one of the city's ministers hired by the *hospitalier* and *procurators* to teach the children, both boys and girls, to read and write, as well as the tenets of the city's developing Protestant faith. The magister clearly lived in the former men's wing, with some historians even speculating that the magister slept in the bed of the convent's former father confessor.[63] However, the practice of hiring and housing a magister/minister likely only began around 1550, with the first mention of a hired minister, Mathias Granjan as "magister of the poor of the Hospital" only noted in January 1557.[64]

Before an official magister was hired as a regular live-in hospital employee, it is unlikely that children were not supervised, or that they lived in the hospital's right wing unsupervised. Moreover, it seems unlikely that children would sleep together without regard to at least some separation by gender, as occurred with the adult hospital inhabitants. Thus, I suspect that at least during the first fifteen years of the hospital, children lived in the cloister along with adults, separated by gender. This would likely involve the hospital's girls living under the supervision of the hospital's adult women and/or the *hospitalier's* wife, and the hospital's boys living in the *grand dotoir* along with the men and under the direct supervision of the *hospitalier*.

As records from the early years of the hospital are sparse, it is impossible to determine with complete certainty how all of the spaces of the former convent were utilized. However, it is clear that the hospital supported a much larger population than the convent, and moreover that the spaces of the building were used and interpreted drastically different in its new use as a hospital.[65] The cloister, which was formerly strictly

occurred either on 6 or 9 September, and Clayre's on 16 September. See AEG Arch. hosp. Fe1, 4v, 5r, 6r, 6v, and 7r.

[62] E.g., Micheline Louis-Courvoisier notes "we are not certain as to the location reserved for children, but we think that they had rooms close to that of the magister who lived in the wing on the Salève side [i.e., the former men's quarters]," "L'Hôpital Général et ses assistés," 22.

[63] See Gautier, *L'Hôpital-Général*, 34. This perhaps indicates the importance of the magister's position, but more likely simply demonstrates how the hospital recycled or reused the items left behind by the Poor Clares

[64] AEG Arch. hosp. Aa2, 171v. On this position, see Gabriella Cahier-Buccelli, "La charge de ministre de l'hôpital au tournant du siècle XVIe-XVIIe," in *Sauver l'âme, op. cit.*, 45-8.

[65] One use that remained the same between the convent and the hospital was the building's chapel. This is a curious maintenance of the hospital, given that the physical location of the building provided easy access to two of Geneva's three Protestant churches

closed to the presence of men and even to outsiders who were women, became a space in which gender division was (at least comparatively) lax. The convent's function as a primarily private space, overseen by the church, was radically transformed into the new public function overseen by the government of caring for the poor. And whereas the Poor Clares had hoped to entice donations for their own benefit by welcoming the public into the public gallery and chapel, the entire building became a hybrid public/private space: as a building operated by the city for the welfare of its residents, the hospital was public; but the building was closed to the larger public, and so in many ways functioned as a private space in the same way the convent had.

Conclusion

Geneva's poor hospital offers a case study in how the changing ideology of poverty intersected with the process of Reformation. Faced with the sudden social changes and challenges of its early Protestant movement, Geneva's magistrates sought to capitalize on the sudden departure of the sisters of St. Clare as it sought to find a solution to the growing problem of poverty. The transformation of the centralized building from the private, sacred space of the convent to a quasi-public, secular space occurred with astonishing speed, over the course of just a few weeks. This demonstrates not only the magistrates' political acumen in taking over former church holdings for civic benefit, but also the strength of the new ideology of the poor. Rather than simply redistribute the wealth of the church to the impoverished, as occurred in other Swiss cities, the men who sought to control the convulsing city preferred to create an institution in which to simultaneously care for and institutionalize the city's poorest and most needy residents.

Geneva was not alone in the creation of a centralized hospital for the poor in the early sixteenth century, and indeed was part of the reformation of social welfare that affected urban centers throughout Europe. The position of the *Hôpital Général* on Geneva's trade routes to Switzerland, France, and Italy ensured that Geneva's particular solution to its poverty problem would spread beyond the city. Over the course of the next several decades, as Geneva adopted its prominent position as a Protestant center and the *Hôpital Général* simultaneously refined its activities and position within the city, its solution of a centralized poor

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(the former cathedral, St.-Pierre, and La Madeleine, both located within a five-minute walk). I examine this retention in ongoing research.

hospital was spread further.[66] Indeed, the central position of the hospital within the city became entrenched in Protestantism as John Calvin -- Geneva's reformer who entered the city after the establishment of the *Hôpital Général* -- included the hospital's efforts to aid the poor in his writings and ministry.[67] The new ideology of the poor as exemplified in the creation and functioning of Geneva's hospital, then, was not only part of the early Reformation process, but became an integral part of the international Calvinism radiating from Geneva.

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[66] On the growing importance of Geneva's brand of Reformed Protestantism, see the essays in Andrew Pettegree, Alastair Duke, and Gillian Lewis, eds., *Calvinism in Europe, 1540-1620* (New York: Cambridge University Press, 1994).

[67] E.g., Calvin included the hospital in his 1541 Ecclesiastical Ordinances and in revised editions of his *Institutes of the Christian Religion*. For an (imperfect) English translation of the Ecclesiastical Ordinances, see Philip Edgcumbe Hughes, ed. and trans., *The Register of the Company of Pastors of Geneva in the Time of Calvin* (Grand Rapids, MI: Eerdmans, 1966), 35-49. On the inclusion of the hospital in the *Institutes*, see Robert M. Kingdon, "Calvin's Ideas About the Diaconate: Social or Theological in Origin?" in *Piety, Politics, and Ethics: Reformation Studies in Honor of George Wolfgang Forell*, ed. Carter Lindberg (Kirksville, MO: Sixteenth Century Journal Publishers, 1984), 167-80.

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